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PROMOTING AWARENESS OF RESOURCES AVAILABLE AT SYRINGE EXCHANGES IN WINDSOR COUNTY, VT

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FAMILY MEDICINE ROTATION, SEPTEMBER 2017
SPRINGFIELD HEALTH CENTER
PRECEPTOR: DR. BARBARA DALTON
THE PROBLEM

Heroin abuse is a problem in Vermont.

- Vermont has one of the highest percentages of illegal drug use in the country.¹
- In 2014-2015, an annual average of about 4,000 individuals in Vermont aged 12 or older used heroin in the past year, a number comprising 0.77% of all individuals in this age group. By comparison, 0.33% of individuals in this age group in the United States as a whole used heroin in the past year.²

Heroin-related overdose deaths are increasing in frequency.

- Between 2002 and 2013, the rate of heroin-related overdose deaths in the United States nearly quadrupled, and more than 8,200 people died in 2013.³
- In Vermont, drug-related fatalities involving heroin have significantly increased in the past five years. In 2012, 0.1 per 10,000 Vermonters died of heroin-related causes, and in 2016, 0.8 out of 10,000 Vermonters did.⁴

Use of injection drugs increases risk of infection with HIV and hepatitis C

- In 2015, 6% (2,392) of the 39,513 diagnoses of HIV in the United States were attributed to intravenous drug use.¹
- If current rates continue, 1 in 23 women who inject drugs and 1 in 36 men who inject drugs will be diagnosed with HIV in their lifetime.¹
- Approximately 30,500 new cases of hepatitis C occurred in 2014 in the United States, an increase from an estimated 16,500 new cases in 2011. Most new hepatitis C cases are among people who inject drugs.⁵
PUBLIC HEALTH COST IN WINDSOR COUNTY

Heroin Abuse in Windsor County

- In 2006, 74 people in Windsor County were treated for abuse of heroin or other opiates. In 2015, 420 people were treated for this condition.6

Syringe Exchange

- Currently, two syringe exchange sites operate in Windsor County, located in White River Junction (opened in 2010) and Springfield (opened in March 2017). These programs distribute clean syringes to prevent the spread of HIV and hepatitis C, sharps containers to promote safe disposal of dirty needles, and naloxone to prevent deaths from opioid overdose. They also provide information and counseling regarding local resources for treatment and recovery from substance abuse.
  - 426 clients were served at the syringe exchange in White River Junction between 2010-2016.*
  - Between 2013 and 2016, 589 doses of naloxone were distributed to 217 individuals at the White River Junction syringe exchange, resulting in reports of 58 overdose reversals.*
  - 100,000+ needles were exchanged at the White River Junction and Springfield syringe exchanges during the 2017 fiscal year (July 1, 2016 to June 30, 2017).*

* Data collected at syringe exchange sites in White River Junction, VT, and Springfield, VT, and reported to me by Laura Byrne, Executive Director of HIV/HCV Resource Center.
Lindsay Mack, Community Health Worker of Springfield Medical Care Systems

- The syringe exchange in Springfield distributes clean syringes, sharps containers, and cookers, provides HIV and hepatitis C testing, and educates about naloxone.
- Syringe exchange programs provide an opportunity to engage people with heroin addiction towards recovery.
- One of the challenges facing syringe exchange program is blowback from community members who feel the program sends the wrong message that injection drug use is safe.
- People who ask about the program generally want to know if it is free, and if it's confidential.

Laura Byrne, Executive Director of HIV/HCV Resource Center

- Knowledge of the syringe exchange is primarily spread through word of mouth.
- There is a need to balance spreading information about the syringe exchange to those actively injecting heroin and keeping low profile in the community.
- It is important for individuals who are actively injecting drugs, as well as their friends and family, to know that naloxone is available at syringe exchange sites.
- It is also important to spread awareness about testing days for HIV and hepatitis C so that at-risk drug users can know their status and receive treatment.
**INTERVENTION**

- **Goal:** To spread awareness of resources available at the syringe exchange sites in Springfield and White River Junction.
- **Plan:** To create a handout that can be distributed at syringe exchange sites.
  - Information contained in this handout:
    - Where the syringe exchange is located, when its hours are, and what services are provided
    - Availability of naloxone at syringe exchange sites
    - Date and time for upcoming HIV/hepatitis C testing day
    - Local resources for addiction treatment and recovery
    - How to minimize risk of overdose when using heroin
RESULTS

The pamphlet will be distributed at the syringe exchange sites in White River Junction, VT, and Springfield, VT.

Feedback from Laura Byrne, Executive Director of HIV/HCV Resource Center:

“Thanks for designing the educational pamphlet. We will use it to get the word out about our syringe exchange program, HIV/HCV testing day, and overdose prevention. It is great to have all this information in one document.”

If you or someone you care about is injecting drugs, resources are available to help keep you or your loved one safe.

- Syringe exchange
- Naloxone (heroin overdose antidote)
- Testing for HIV and hepatitis C
- Referrals to medical and social services
- Information regarding drug treatment programs and recovery resources

HERION MAY BE STRONGER THAN YOU THINK.

To stay safe:
- Don’t use alone. Have someone with you who can give you naloxone and call 911 to save your life.
- Don’t mix with other drugs or alcohol.
- Call the poison center you use one time. Testing can be done with favors, and it’s free for Vermont’s overdose-fighters.

If you are using, you can call to get help. Call 911 for local treatment.

Vermont 911 is a free and confidential service available 24/7 serving Vermonters statewide with information and resources to help connect callers with hundreds of community resources.

Syringe exchange programs

We provide clean syringes, reducing the risk of acquiring and transmitting HIV and hepatitis C in individuals who are actively injecting drugs. We also offer naloxone (for the heroin overdose antidote), sharps containers, and clean cookers, as well as referrals to medical and social services and drug treatment programs.

Free, confidential HIV and hepatitis C testing is available before and after exchange hours by calling the Vermont Overdose Fatality Review Team. They review exchange hours if there are no people waiting.

These programs are located within well-established primary care medical clinics. They are safe, free, and confidential.

Springfield Health Center
100 River Street, Springfield, VT
All the reception are on the second floor, ask for Laura or Kim.
Wednesday 10:00 AM - 12:00 PM (Please arrive by 11:45)
Good Neighbor Health Clinic
50 North Main Street, White River Junction, VT
Ask for Laura or Kim.
Thursday 10:00 AM - 12:00 PM (Please arrive by 11:45)
Thursday 3:00 PM - 5:00 PM (Please arrive by 4:45)
Questions? Contact Laura at 802-446-0867 or at lauren@nhch.org.

Opioid overdose antidote is available

If you or someone you know is using opioids or heroin, Noccor/Nalaxone, the opioid overdose antidote, is available to you at all the syringe exchange sites in Springfield and White River Junction (see reverse side for locations and dates).

Naloxone is provided as a single-dose nasal spray. It is provided at no cost after a brief training.

Testing Day

HIV and Hepatitis C

We are holding a testing day for people who are at high risk of acquiring HIV or hepatitis C. It is free and it’s fast.

If you are injecting drugs, testing is done with a finger-stick blood test, and results are available in approximately 20 minutes. If the test is positive for HIV or hepatitis C, you will be referred for follow-up testing and medical treatment.

Wednesday, October 25th
10:00 AM - 12:00 PM
Springfield Health Center
100 River Street, Springfield, VT
At the reception desk on the second floor, ask for Laura or Kim.
No registration is required.

Resources for Addiction Treatment and Recovery


- Addiction Prevention Education (888) 978-8219
- New England Recovery (802) 325-2424
- Health Care and Rehabilitation Services of Northeast Vermont (802) 253-3551

Online Resources
healthvermont.gov/opioid-prep.aspx
Narcotics Anonymous (NA) - Vermont www.vegan.org (802) 773-5575

Tobacco Use Recovery Center of Springfield
5 Longfellow Street
Springfield, VT 05156 (802) 606-7999

Upton Valley Tobacco Project Social Work Foundation
Second Floor, Department of Health
SecondFloorFoundation.org
(802) 292-0744

American Naltrexone
www.naltrexone.org

For more information, please contact Laura at 802-446-0867 or at lauren@nhch.org.
EVALUATING EFFECTIVENESS AND LIMITATIONS

Potential methods of tracking effectiveness of the pamphlet

- Ask the people who work at the syringe exchange how many pamphlets they hand out and whether their clients are interested in receiving them.
- Survey clients of the syringe exchange about how they became aware of syringe exchange sites to determine if the pamphlet led to more people using the program.
- Survey people who attend the upcoming HIV/hepatitis C testing day to assess how they became aware of the testing day to determine if the pamphlet increased the number of people attending.
- Continue to track the number of people who request naloxone, and determine if there is an increase after distribution of the pamphlet.

Limitations of the pamphlet

- The pamphlet will not be distributed outside of syringe exchange sites because the syringe exchange program needs to keep a low profile in order to maintain confidentiality of its clients. This will limit the pamphlet’s reach and prevent injection drug users who do not currently use the syringe exchange from being aware of resources available there.
- The pamphlet relies on the ability to read and is only available in English, which limits its utility among people who cannot read well or who do not speak English.
RECOMMENDATIONS FOR FUTURE PROJECTS

- **Continue to increase awareness of resources available at syringe exchange programs.**
  - Determine what resources exist at other syringe exchange sites and create educational material to spread awareness of these resources among injection drug users in those communities.
  - Consider how to distribute information about syringe exchange programs at other locations while still maintaining the discreet nature of these programs. Possible avenues to explore include handouts for physicians to give to their patients and pamphlets made available at emergency departments or community centers.

- **Address negative community opinion of syringe exchange programs.**
  - Create a survey to assess determine causes of stigma and concerns about syringe exchanges.
  - Gather data on the positive impact of syringe exchange sites. Data could be gathered via literature review or via surveys given to local recovery centers, and could include information regarding decline in spread of HIV and hepatitis C, prevention of heroin overdose deaths, decrease in needle litter, and/or increase in the number of people seeking treatment for heroin addiction.
  - Create educational material about syringe exchange programs targeted at the general community, using data gathered about the positive impact of these programs to address specific concerns identified in a community survey.
REFERENCES


