



Why We Ride: HIV/AIDS has become a forgotten pandemic, a global disease that remains an urgent problem. The very successes that have dropped it on our priorities list, have altered the nature of urgency. In the United States, over 1.2 million persons ages 13 years and older are living with HIV infection, *with an estimated 161,200 (13%) or 1 in 8 are unaware of their infection*. Of the 39,000+ new HIV cases each year, 26% occur in the 13-24 age group. Still 15,500 people in the USA with HIV die every year. Since the beginning of the epidemic, more than 70 million people have been infected with the HIV virus and about 35 million people have died of HIV. Globally, 36.7 million [34.0–39.8 million] people were living with HIV at the end of 2015. The number of new HIV diagnoses fell 19% from 2005 to 2014. Because HIV testing has remained stable or increased in recent years, this decrease in diagnoses suggests a true decline in new infections. The decrease is most likely due to targeted HIV prevention efforts. However, progress has been uneven, and diagnoses have increased among a few groups. (Referenced CDC.GOV)

The medications that allow survival cost money. The research to develop new treatments costs money. People with HIV often need information, housing and support services. Everybody.... needs education about prevention, especially the 13-29 age group. **For people with HIV within our eight county regions, the Southern Tier Aids Program helps to provide support when family and friends can't and insurance doesn't.** All of this support costs money. AIDS is a pandemic, which many would prefer to forget, yet still urgently needs funds for the daily struggles.

STAP remains committed to providing comprehensive HIV/AIDS services in the Southern Tier of New York. Founded in 1984 as a local response to the HIV epidemic, STAP provides effective and innovative HIV and Hepatitis C prevention education, Opiate Overdose Prevention and outreach services to individuals and communities along with comprehensive and caring services to people living with HIV/AIDS. Serving eight counties from five office locations, all of our services are free and confidential.

The AIDS Ride For Life is our major agency fundraiser. The money we raise within this event helps close some gaps between our funding streams and funding needs of STAP's programs and services. We encourage you to check us out at www.stapinc.org and www.aidsrideforlife.org

The Swift Rise of Heroin Use has increased the demand for our Opioid Overdose Prevention Program, our youth center is serving a record number of youths & along with caring for clients who have HIV/AIDS, we now provide services for anyone who is Medicaid eligible and dealing with a chronic illness. **In 2017, over 1900 Naloxone/Narcan kits were distributed by STAP staff with Over 465 reversals and lives saved been saved with these kits.**

Agency Changes At the federal and state level there are major changes being made in the way healthcare is delivered, specifically to those insured by Medicaid. These changes have created both new challenges and opportunities for STAP. They have led to significant growth of our non-HIV services, which in turn has led us to create a legal Doing Business As (DBA) entity called Southern Tier Care Coordination or STCC. This DBA allows us to share the quality services that STAP has always delivered to People Living with HIV/AIDS to those living with other chronic illnesses. We remain staunchly committed to assuring that health systems are responsive to the needs of the Lesbian, Gay, Bisexual and Transgender community, including youth, communities of color, injection drug users, substance users, formerly incarcerated people and people with chronic illness living in poverty. **So while we are serving a larger cross section of our community we are remaining true to our core vision of improving the public health.** Thanks for your continued support!

Substance Use Nationally, death rates from prescription opioid pain reliever (OPR) overdoses quadrupled during 1999-2015, (more than 183,000). According to the Center of Disease Control, from 2014 to 2015, heroin overdose death rates increased by 20.6%, with nearly 13,000 people dying in 2015. Opiate overdose deaths in 2016 are estimated to be over 64,000. **STAP offers people who use substances, their families and concerned community members training and the medication Naloxone (Narcan) to prevent overdose deaths due to opiate or heroin use. We work every day to protect our syringe exchange participants from the potential harm of drug use in the hope that they may all survive long enough to quit. When someone does decide to quit, the staff of the ECHO program is there to facilitate the process of entering treatment at a program that will address the specific needs of that person.** If you or a loved one would like to be trained and receive an overdose prevention kit please contact Lillian Fan at STAP's Ithaca Office at 607-272-4098 or Emily England at our Johnson City office at 607-237-0497 Ext 202

STAP's Syringe Exchange Program (SEP) has experienced tremendous growth during the past few years.

The SEP is an essential part of the prevention services offered by the Southern Tier AIDS Program. In addition to free, anonymous syringe exchange, the SEP provides:

- Opioid overdose prevention program
- Safer injection supplies
- Safe needle disposal
- Safer sex supplies
- Referrals for substance use reduction
- Confidential HIV & Hepatitis C testing

STAP's Echo Project Since 2002 the Southern Tier AIDS Program has operated a NYS Department of Health certified syringe exchange program in Ithaca. In 2008, we opened a second SEP site in Johnson City. While there are many components to these programs, one of the most important is the staff that help people to access substance use treatment when they are ready to stop using drugs. The truth is that there are not enough treatment beds for every person who wants to "get clean" and just like in the rest of our healthcare system the realities of insurance often trump individual needs. The staff of STAP's ECHO Project work with active substance users every day to help them find and enroll in the treatment of their choice. That is why our motto at the syringe exchange programs is "keep them alive long enough to quit". Our goal for every SEP participant is that they achieve sobriety and be able to live a drug free life.

Veterans & Substance Use

More than 2 of 10 Veterans with PTSD also have Substance Use Disorder. Veterans can't leave the horrors of war on the battlefield and substance use has been a part of war for centuries. The problem of addiction among returning veterans is a very real one. War is a horrifying, traumatizing and deeply stressful experience for everyone involved, and many veterans turn to drugs as a method of coping. Those with multiple deployments and combat exposure are at greatest risk of developing substance use problems. They are more apt to engage in new-onset heavy and binge drinking, and to suffer other drug-related problems, and to have greater prescribed use of behavioral health medications.

The Human Cost of Stigma

Harm Reduction Interventions such as syringe exchange create mixed feelings for some people and they struggle to understand how syringe exchange works and why it is a good intervention for both people who use drugs and society at large. Initially designed as a disease prevention strategy, syringe exchange has been wildly successful. New HIV infections due to shared injection equipment have been reduced by 96% in New York State over the last 25 years, largely due to syringe exchange. Syringe exchanges also offer a place to bring active substance users into medical care, substance use treatment, disease testing or assistance with basic needs like food, clothing and shelter. Those of us who work in syringe exchanges have an additional agenda. We care deeply about those we work with and understand that in accepting them as they are and treating them with dignity and humanity we can reduce the stigma they suffer as drug users and create a space for them to heal. We know that shaming them until they “hit bottom” will for many only result in death. As an AIDS service organization we have a long history of dealing with stigma and we understand all too well the damage it inflicts on people’s mental and physical health. We understand that the stigmatized begin to believe that they have no value and stop caring for themselves. What appears from the outside to be reckless is often the behavior of a person who sees no point or value in continuing to live in shame. We see it as central to our mission to offer hope to those who feel stigmatized that their lives are valuable and can improve. A HIV diagnosis is not a death sentence and neither is struggling with addiction.

Recent HIV Outbreak (2015) Many have heard about the recent events in Indiana related to an “outbreak” of HIV. This occurred among a group of people who inject drugs (PWID) who were sharing injection equipment causing over 190 new HIV infections. The sharing of injection supplies is unfortunately a very common occurrence in the United States. Currently, 18 states still require a prescription to access syringes. Although syringe exchange is not necessarily a popular initiative, data shows it to be the single most effective public health intervention in the United States to help stop the spread of HIV and Hepatitis C.

Restrictive laws around syringe access do little to prevent drug use, but do create an environment where drug use is pushed even further underground, due to stigma and fear of law enforcement. Indiana’s governor temporarily authorized local syringe exchange, in hopes that this will help to combat the further spread of this outbreak. Fortunately, in New York syringe exchange is not only legal, but also supported with funds from the Department of Health. This has resulted in a dramatic change in the demographics of HIV infection over the course of the last twenty years. Whereas over 50% of PWID tested positive for HIV, prior to the implementation of legal syringe exchange programs in New York State, that figure is now around 3%. The Southern Tier AIDS Program is thankful to be able to offer these services throughout the Southern Tier. We currently operate a fixed site syringe exchange in both Broome and Tompkins Counties, as well as peer delivered syringe exchange in many other communities. These services provide life-saving access to sterile supplies, as well as Opioid Overdose Prevention Program (OOPP) training to prevent fatal overdose deaths in our communities. A needle that costs pennies can literally save millions.