Needle Exchanges

"Dead Addicts Don't Recover"



Community under siege:

The AIDS epidemic in Harlem

By PETER A. COOPER
Part One

Long before Rosanne Perez knew about AIDS, she realized something was terribly wrong. Her friends, many of them junkies, were falling sick and dying. And nobody seemed to know the reason why.

"All my friends are dead now," she says matter-of-factly. "Me and my brother are the only ones left."

Perez was 18 when she began shooting heroin. Secretly, so her family would not know, she ... sweats, fever, uncontrollable diarrhea. Last August, at the age of 26, she was diagnosed with Acquired Immune Deficiency Syndrome.

"I felt, God, why me?" says Perez, her frail voice rising in anger. "I've been clean for five years. I knew I had to pay a penalty, but why such a harsh penalty?"

Since the outbreak of the AIDS epidemic in 1981, the most visible victims of the deadly disease have been gay white men. But while the government and the media have focused most of their attention on this group, the epidemic has raged virtually unchecked among Black and Hispanic drug addicts in Harlem and other inner city neighborhoods. It is in these neighborhoods, medical experts believe--neighborhoods already ravaged by poverty and a myriad of other social problems--where the grim future of the AIDS epidemic lies.

"It's already terrible, and it's going to get a lot worse," says Dr. William Mandell, co-chief of infectious diseases at Harlem Hospital Center, where nearly one of three beds is occupied by ... including lack of government support, apathy and denial by community leaders and a health care system struggling to cope with the mounting caseload of AIDS patients.

There are some who ascribe a more malevolent ... absence of a ... response to th... discrimination ag... tims of the disea... two epidemics t... says Ruth Rodri... of the Hispanic A... Harlem-based su... "AIDS and other infection: racism and homophobia."

The devastating impact of the epidemic on the city's minority communities is now clear. AIDS is already the leading cause of death among Black and Hispanic men in New City between the ages of 25 and 44. The rate of infection in this group is more than two and a half times higher than among white men.

Even more sobering is the growing numbers of minority women and children who are contracting AIDS. Black women are becoming infected at a rate 12.5 times higher than white women, and Hispanic ... question of if you get infected," says Cynthia Edwards, an outreach worker for the state Department of Health. "It's when. They're playing Russian roulette."

Not only are minorities more ... 820 days for Hispanics.

Medical experts attribute the difference in life expectancy to several factors. Many Black and Hispanic patients do not have private health insurance and must depend on overburdened public hospitals for treatment. Without access to quality health care, minorities tend to be in poorer health even before they contract AIDS. Moreover, whites tend to be diagnosed earlier in the course of the disease and therefore benefit from life- extending therapies.

AIDS has begun to take its toll on Rosanne Perez. A small woman with a handsome, ... five times since her diagnosis, mostly for transfusions to treat chronic anemia. Most of the visits have not been pleasant. "I've been in so many hospitals, sometime I just want to give up," she says. "They treat you ... one-room apartment on West 142nd Street. Outside her graffiti-covered building, dazed-

(Continued on Page 36)

"The epidemic has raged virtually unchecked among the Black and Hispanic drug addicts in Harlem and other inner-city neighborhoods. It is in these neighborhoods, medical experts believe—neighborhoods already ravaged by poverty and a myriad of other social problems—where the grim future of the AIDS epidemic lies."

"For IV drug users, it's not a question of if you get infected, it's when. They're playing Russian roulette."

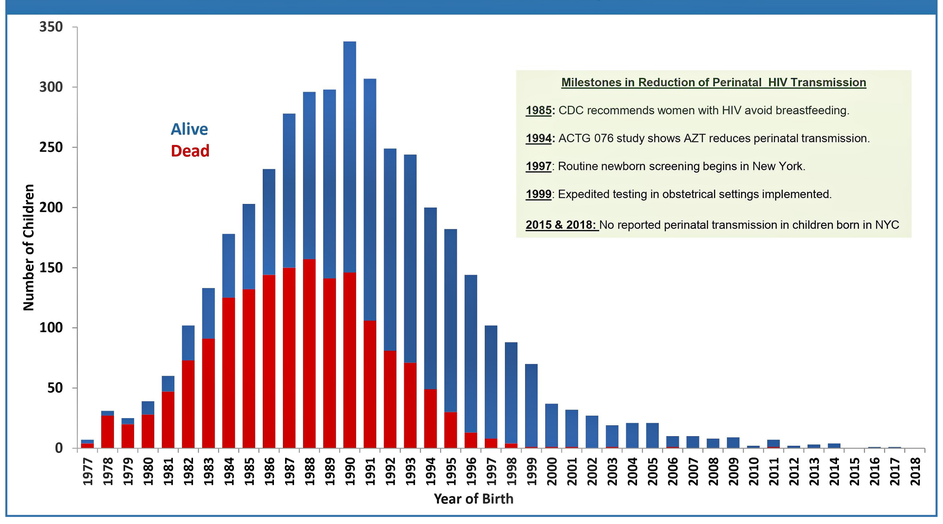
Intravenous (IV) drug users increasingly began to die of AIDS by the mid-1980s. The primary cause: shared needles. Since possessing drug paraphernalia (syringes and needles) was illegal without a prescription in most areas, many IV drug users would rent or share "works."

"We're both HIV positive. So we're using our own works. You see, everybody who's HIV positive feels like we can share each others' works cause we're all gonna die together."

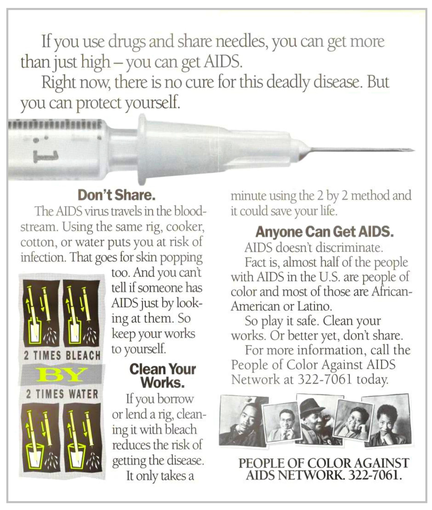
Cathy, an IV drug user. Quoted in Friedman, Samuel R. Social Networks, Drug Injectors' Lives, and HIV/AIDS. Kluwer Academic, 1999.

This new population of people with AIDS was especially visible in New York City where the disease became less "gay" and more entrenched in the community of persons who inject drugs (PWID), their partners, and their children—infected women could pass HIV to their infants in vitro and via breast milk. Almost 4,000 babies were diagnosed with HIV in New York City between 1979 and 2018.

CURRENT VITAL STATUS AMONG PERINATALLY HIV-INFECTED CHILDREN[1] DIAGNOSED IN NYC, 1977-2018



NYC Health, 2019



If you use drugs and share needles, you can get more than just high – you can get AIDS.

Right now, there is no cure for this deadly disease. But you can protect yourself.

Don't Share.

The AIDS virus travels in the bloodstream. Using the same rig, cooker, cotton, or water puts you at risk of infection. That goes for skin popping too. And you can't tell if someone has AIDS just by looking at them. So keep your works to yourself.

2 TIMES BLEACH BY 2 TIMES WATER

Clean Your Works.

If you borrow or lend a rig, cleaning it with bleach reduces the risk of getting the disease. It only takes a minute using the 2 by 2 method and it could save your life.

Anyone Can Get AIDS.

AIDS doesn't discriminate. Fact is, almost half of the people with AIDS in the U.S. are people of color and most of those are African-American or Latino.

So play it safe. Clean your works. Or better yet, don't share.

For more information, call the People of Color Against AIDS Network at 322-7061 today.

PEOPLE OF COLOR AGAINST AIDS NETWORK. 322-7061.

Local governments and organizations were hampered in their efforts to combat the rising rates of infection by the "Just Say No" [to drugs] mentality of the federal government, the criminalization of drug paraphernalia, and the prohibition of using federal dollars for needle exchange programs (NEP). An early effort focused on using bleach to sterilize needles.

Needle exchange programs, though a proven harm reduction method, were controversial (and illegal in most locales). One Harlem preacher's belief was not unusual, "To distribute needles is to cooperate with evil. It is a step to legitimizing heroin use." Therefore, early NEP were informal, extralegal grassroots efforts. Dave Purchase, a community activist in Tacoma started the first NEP in 1988 that later came under the purview of the city's health department. ACT UP Seattle, opened up its first NEP the following year and it too soon became part of city health services.



"Dave Purchase handing out syringes on his own in Tacoma, Wash., in the late 1980s." New York Times obituary, 27 Jan. 2013.

"New York City's IV drug users who have AIDS or are HIV positive are not living with AIDS. For them, HIV is a death sentence. Their day-to-day struggles for basic necessities preclude any possibility of mobilization or political action or community building to demand access to drug and medical treatment. Needle exchanges can be a departure point for a user's process of empowerment and can even serve therapeutic purposes for active and former users involved in needle distribution."

Rod Sorge, founder of the ACT UP New York Needle Exchange Program

Though needle exchange programs are not a substitute for drug treatment programs, they are, according to Joyce Hughes of the New York State Department of Health AIDS Institute, speaking at a 1994 Congressional hearing, "a means to engage drug users in HIV prevention, harm reduction, health care, drug treatment, and other services which they otherwise might never have a chance to access. Needle exchange provides us with the means to talk with active drug users about changing their behavior."

"How does this work?" a toothless addict asked him...

"You give me an old one, I give you a sterile one, and it keeps your butt alive," Mr. Purchase responded.

"Dave Purchase Dies at 73; Led Early Needle Exchange." New York Times, 27 Jan. 2013.