

March 10, 2020

Senator Delores G. Kelley
Chair, Finance Committee
3 East Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401

RE: SUPPORT of Senate Bill 0990 [Public Health – Overdose and Infectious Disease Prevention Services Program)

Dear Chairperson Kelley:

I am a public health researcher at the Johns Hopkins Bloomberg School of Public Health. This written testimony reflects my views as a resident of the state of Maryland and not the views of the Johns Hopkins Bloomberg School of Public Health or Johns Hopkins University. My role as a public health researcher is to apply rigorous scientific methods to improve our understanding of how policies affect the health and well-being of people with substance use disorder.

Overdose prevention sites are places where individuals at risk of overdose can use drugs that they have obtained elsewhere and receive assistance if they experience an overdose. These programs often provide other services as well, like access to sterile syringes to prevent infection and opportunities to gain access to substance use treatment and relevant health care and social services. Over 100 overdose prevention sites have been established successfully in countries around the world. Evaluations of these sites in international contexts have found that they produce health benefits for the people who use them, including, critically, reduced risk of fatal overdose,¹⁻⁴ without increasing drug-related crime in the surrounding neighborhood.⁵ Not a single person has died at an overdose prevention site because that is what these sites do – prevent fatal overdoses.

We have faced a stunningly rapid rise in the drug overdose mortality rate in Maryland over the last several years as fentanyl, a powerful synthetic opioid, has infiltrated the drug supply.⁶ Overdose prevention sites provide an opportunity to reach marginalized populations that are disconnected from traditional services. Beyond the health benefits for people using these sites, there is a practical element to consider as well: cost-effectiveness analyses indicate that overdose prevention sites can save jurisdictions money by averting the costs of treating hepatitis C, HIV, and other infections, emergency services responding to overdose, and hospitalization for drug-related health issues.⁷

I urge you to support HB 0464 to establish overdose and infectious disease prevention services programs in the state of Maryland.

Thank you for your consideration.

Sincerely,

Alene Kennedy-Hendricks, PhD
Resident of Maryland Legislative District 18

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2. Potier C, Laprévote V, Dubois-Arber F, Cottencin O, Rolland B. Supervised injection services: What has been demonstrated? A systematic literature review. *Drug Alcohol Depend.* 2014;145:48-68.
3. Pardo B, Caulkins J, Kilmer B. Assessing the Evidence on Supervised Drug Consumption Sites. *Assess Evid Supervised Drug Consum Sites.* 2019.
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5. Wood E, Tyndall MW, Lai C, Montaner JSG, Kerr T. Impact of a medically supervised safer injecting facility on drug dealing and other drug-related crime. *Subst Abus Treat Prev Policy.* 2006;1(13).
6. Opioid Operational Command Center. 2019 Third Quarter Report. <https://beforeitstoolate.maryland.gov/wp-content/uploads/sites/34/2019/12/OOCC-Q3-Report-APPROVED-FINAL.pdf>.
7. Irwin A, Jozaghi E, Weir BW, Allen ST, Lindsay A, Sherman SG. Mitigating the heroin crisis in Baltimore, MD, USA: A cost-benefit analysis of a hypothetical supervised injection facility. *Harm Reduct J.* 2017;14(1):1-14.