

TESTIMONY IN SUPPORT OF SB 990:

Public Health - Overdose and Infectious Disease Prevention Services Program

To: Hon. Delores Kelley, Chair, and members of the Senate Finance Committee

From: John Torsch, Baltimore County, Legislative District 8

Date: March 9, 2020

Good day members of the Senate Finance Committee,

For the last 9 years, the Daniel Carl Torsch Foundation has been active in the harm reduction, addiction treatment and recovery advocacy community in Maryland. We were thrust into this world when my younger brother Daniel (Danny), died in our home of a heroin overdose in late 2010. During that time, we have helped introduce several pieces of legislation which have been signed into law, included the 2013 Overdose Response Program which lead to the standing orders for Naloxone that we have today. As of this week, I have lost over 3 dozen friends and family to drug overdoses, drug related health complications and violence related to the illegality of certain drugs. As a peer recovery coach and person in long term recovery from drug addiction, my life is literally “all addiction all the time”. My passion is street outreach, meeting people where they are in their moments of extreme desperation with the only intention of asking simply “how can I help you?”

During the last few years, I have researched the model of Overdose Prevention Sites heavily. This has included visiting 6 of these sites in 4 different countries. There is no question that these sites do and will continue to save lives, increase access to treatment and reduce the rate of infectious disease. These sites are havens of compassion that serve the most vulnerable and stigmatized population in our society; those who are struggling with addiction and mental illness. Last year, I was able to tour Australia's first "safe injection room" that is located in Sydney. The clinic has been in operation for over 15 years. During this time they have never had a fatal overdose and have made over 13,000 referrals to treatment.

The tour was conducted by Miranda St Hill, Service Operations Manager for the Sydney Medically Supervised Injecting Centre (MSIC). I was also able to meet Dr Graham, who is the acting medical director. Beyond impressed is the only way for me to describe my visit. To be in the presence of such dedicated medical professionals who show such an incredible amount of compassion and patience for the population struggling with addiction was very inspiring.

The facility generally has 7-10 staff on site at any given time. The room where people inject is constantly supervised by at least 2 people. After filling out some basic paperwork that does not require official details like name and ss#, people are lead to the main room which has enough space for about 12 people to inject or use their DOC. At this time, the drugs primarily used are heroin, prescription opiates, methamphetamine and Fentanyl in the form of patches which people use to extract the drug from and then inject. Luckily, the synthetic Fentanyl analogs that are coming from China and Mexico which are fueling the US overdose crisis have not made it down there, yet.

The room is sterile and has the feel of a top notch medical facility. The main goal of this site is to first, prevent overdose deaths. About once a week Naloxone/Narcan is needed to be used. The rest of the time, patients are given oxygen and assisted breathing while their pulse oxygen levels are measured. The nurses are very careful never to give someone Naloxone unless it is absolutely needed. Even then, the smallest doses are given because the goal is to restore respiratory function and not make the person sick or put them into precipitated withdraw.

People are given clean syringes and various clean “tools” to prepare and inject their drugs. The heroin in Australia is from SE Asia and it dissolves without any heat so many people use plastic spoons. They have special devices used to absorb and draw the drug up into the syringe which filters out bacteria and prevents the spread of diseases like endocarditis. HIV and Hep C testing are provided onsite. The nurses offer basic medical care like wound cleaning and dressing an abscess. For more serious issues, they have a close relationship with a hospital not far away. There is a mental health nurse on staff daily and a psychiatrist is there all day once a week which the people have access to. The medical director is there twice a week to address serious medical conditions.

This site is unique in the fact that they allow people to come to the room in pairs. Because of the high cost of drugs in Australia, many people will often split their drugs so they need to use together. After a person has injected or smoked their drugs, they enter the 2nd room which is where peer support and the magic happens. This is where medical professionals who have lived experience with addiction start to build a relationship with these people. They talk about their day, their struggle and their treatment options. They also are able to do things like paint and draw which keep them engaged. Once a year, the clinic puts on an art exhibit where people's paintings are framed and sold. The artist keeps 100% of the proceeds.

The majority of the people who use the site are homeless and either sleep in nearby parks or a local mission. The majority are unemployed. It's extremely rare that someone drives so DUIs are not a problem. But sometimes there are people who have a scooter and they are asked to stay until they are fit to ride. The police are needed 3-4 times a year to handle out of control patients. Far less than any ER that I know of... There is a full time security guard who has been there for 8 years and knows all the clients by name. He is a compassionate man who has specialized training and a positive relationship with the people who utilize the site.

The center has about 170 people come thru on an average day. They are operated by UNITING, a non-denominational NGO with over 10k employees. They are funded through a grant from the state of NSW. The money comes from assets seized from convicted criminals. Not just drug crimes, if you profited off any crime in Australia and convicted, your assets are seized and put into a fund. This fund is what allows the clinic to be fully staffed and operate. No tax money is used. They are open 7 days a week, 12 hours a day except the weekend when they close a little earlier for staff safety reasons.

The center has a good relationship with the police in the area. I hear mixed messages from how they go about enforcing their laws. The police I spoke with said they have a mutual understanding and do not target people waiting in line to enter the center even when they know these people have a small amount of illegal drugs on them. People I spoke with who use the center said that like always, some of the law enforcement are cool and some are horrible and violent. Occasionally, people are arrested out back when they still have a small amount of drugs on them. This is an ongoing problem and the only solution is decriminalization because the police say they are "just doing their job". The police confirmed that there has been a documented decrease in crime since the center has been open.

Even though the goal of these sites are to save lives and encourage treatment, finding a bed is not always easy. At least once a day, a referral is made for treatment by the referral specialist who does the equivalent of an ASAM assessment. But there are not nearly enough beds. The wait can be days or even a week or more. By that time, the desire to seek help is often gone. The beauty of operating one of these sites in Maryland, especially in the Baltimore area, is the fact that we have a tremendous amount of treatment options that are available immediately when someone is ready to take that first step.

Speaking with local business, the opinion on the center is mostly positive. On one hand, everyone agreed that from a humanitarian standpoint, the center is right thing to do. They all agreed that in the time the center has been there, the streets are free of syringes and there are much few ambulance calls for overdoses. I left the center with such a positive vibe. Places like this are so desperately needed in Baltimore, Baltimore County, AA County and across the country. The data could not be more clear. These sites save lives, lower overdose rates, prevent the spread of infectious diseases and most importantly, increase access to treatment.

After leaving the center I stopped by a local mission to see what type of services they provide to the poor and homeless. While I was there, I noticed a man about my age who I saw in the clinic. He was anxious to speak with me. We sat in the chapel and had one of the realist conversations about addiction and life on the street that I've ever had. He had been addicted for 16 years and has been homeless the whole time. He was able to articulate just how important the safe site was for him. The staff had saved his life over a dozen times. He knew that he would have been in some alley and died alone if he had not chosen to use at the site. He is part of a street outreach team that encourages others struggling with addiction to utilize the site. When I asked this man what his favorite thing about the site is and why it is so important to him, this is what he said:

"The safe site is the only place in Australia where I'm treated like a human being".

In all the conversations I've had, in all my world travels, this was one of the most touching moments of my life. He had tears in his eyes when he said this which I shared with him. The connection I felt with this man, the love and the pain we both shared is something that I'll never forget. After a long hug, I did what I could to encourage treatment and even offered to pull some strings to get him a bed quickly when he was ready which he was not.

Hopefully this testimony answers some questions for those who are hesitant or down right oppose these sites coming to the US. Fentanyl has totally changed the game, those of us working in this field realize that we are facing nothing less than chemical warfare. More people are using in public places because they know the chance that they will overdose is high. This means that somewhere inside these people, is the will to live because they are hoping that they will be found and revived if they were to overdose. How often do you see a bill proposed that does not ask for funding, and simply asks for permission to save lives? That's all we are asking for with this bill, permission to save lives and treat the unwanted of our society with the compassion that they deserve. How often do you see a bill with ZERO opposition? Would you rather see someone use and overdose in your local Starbucks bathroom, or use at a site where the person can be saved and treatment can be encouraged?

I realize that the concept of these sites is controversial with your constituents. However, when basically every expert in the state on this subject agrees and supports these sites, it is your duty as elected officials to follow the science and data, not the opinions of those who are not educated on this subject. I give you my word that we will stand beside anyone who votes YES on SB 990. Mothers and fathers who have lost their children, treatment providers, addiction experts and people in recovery from drug addiction; we will defend your decision with every breath and on every social media post.

It's time we look to more progressive countries to see what is working because clearly the US strategy is an utter failure. Love and compassion is the only hope we have at getting ahead of this crisis. Meeting people struggling where they are, reducing harm, increasing access to treatment while providing peer support. The DCT Foundation is one of the organizations ready to step up and potentially fund one of these Overdose Prevention Sites in an area of Baltimore County (21222) which is where it would be most needed outside of Baltimore City. Please take off our handcuffs and say YES to letting us, the boots on the ground, do what is necessary to save and improve countless lives. I respectfully ask for a favorable vote on SB 990.

Thank you,

John Torsch
Co-founder/Director of Special Programs
The Daniel Carl Torsch Foundation
dctfoundationinc.org
dctfoundationinc@gmail.com
410-847-4247