

# **Overdose and Infectious Disease Prevention Services Program**

**Written Testimony for 2021, submitted by Jessie Dunleavy**

My investment in this legislation, and my insight into the suffering and neglected needs of those with a substance use disorder, is the result of the path I walked with my son, who died of a mixed drug overdose in 2017. I loved and admired my son, and I know his death was preventable. I want to spare others his fate, and mine.

Overdose prevention services are based on a deep commitment to public health and human rights. The priority is to keep people safe, eliminate needless suffering, and promote social justice. Champions of overdose prevention services understand that people with a substance use disorder did not forfeit their right to health care or to be treated with dignity.

Data from around the world tells us that overdose prevention sites reduce overdose deaths and the spread of infectious disease, while minimizing the compounded misery of arrests and incarceration. Furthermore, they have proven to be a bridge to treatment and have no history of encouraging drug use. In fact, part of the genius of these services is that, in giving people what they need, they come to you for it, which then provides the opportunity to offer additional services, to work in tandem with community based organizations.

The US has the highest number of overdose deaths per capita in the world, without a close second. While 2020 will be the most deadly year on record for overdose fatalities, 2019 saw significantly more deaths than 2018, which was before the pandemic. Yet misguided and outdated policies continue, highlighting the gap between research and legislation. It's surprising to me—given the severity of this crisis—that so many who could affect change are reluctant to do so.

You may ask yourself WHY you would support this bill. But, I have to ask WHY you would not.

I do understand initial skepticism, but I have come to know that what seems on the surface to be counterintuitive actually makes sense. In my years of speaking with a wide range of individuals and groups, I have yet to encounter anyone who doesn't understand the benefits of these services once given the facts.

Our job then is to educate, to combat the stigma that thwarts needed progress. Because we live in a society that treats the afflicted as criminals, this is an uphill battle. On one hand, we say we know medical intervention is crucial, but on the other, we force the most vulnerable into back alleys, exacerbating their mental and physical health risks.

The long term practice of disempowering those most at risk, of removing resources from them, and isolating them has failed. We are all social people; we all need a network of support and respect.

Research also tells us that the vast majority of people recover from a substance use disorder, many on their own—which has always been the case. But today, given the unregulated drug supply and its increased potency, people are dying before they get the chance to recover.

As far as community resistance is concerned, the answer, again, lies in education. If we are comfortable with jails and prisons (where dehumanization is all too frequent), but uncomfortable with evidence-based health care that has proven, beyond question, to reduce deaths while bolstering the likelihood of recovery, we have to examine why.

I will go back to my son for just a moment. He had disabilities, he struggled in school and was socially awkward. I am sure he found drugs eased his pain. But he was always sweet, and his being dehumanized and degraded only exacerbated his self-doubt. Even so, over time, he was getting better. He loved his job, and had a long stretch of drug-free living. When he relapsed in 2017, he was frightened. But his, and my, earnest attempts to get help failed. Street drugs, on the other hand, were easy to get. And without the benefit of a safe haven or any medical oversight, he died, and he died alone. An overdose prevention site would have saved his life, allowing his continued trajectory toward wellness, allowing him a life. I know too that its premise would have been reassuring, giving him much needed hope.

At this juncture, for me, I am buoyed by simply understanding the humanistic principles of overdose prevention services and I am grateful for its tireless advocates. The choice for all of us is between compassion and indifference, and between turning the corner on the still-rising number of overdose deaths or not. It's really that simple.