



The Senate of Maryland
ANNAPOLIS, MARYLAND 21401

TESTIMONY OF SHELLY HETTLEMAN

SB 279 – Public Health – Overdose and Infectious Disease Prevention Services Program

I, like many of you, know far too many people who have lost loved ones to an overdose. We use the word “crisis,” to describe what is happening in our communities today. While overdose deaths were already increasing nationwide in the months preceding the COVID -19 pandemic, the [CDC recently reported](#) the highest number of overdose deaths ever recorded in a 12-month period. In Maryland, drug-and alcohol related deaths have increased 12.1% across the state from January to September compared to the same months last year. ¹At least 1,829 fatalities were linked to opioids, a 14.5% jump from the same time a year earlier, according to data released by the state’s Opioid Operations Command Center and the Department of Health. Fentanyl, a synthetic opioid 50 to 100 times more potent than heroin, factored into 93.1% of opioid-related deaths. ²

Last year, our budget directed more than \$700 million to this crisis. This year, those who battle substance abuse are also faced with social isolation, disruptions of support, impeded access to care, and economic distress. Experts fear the continued climb in overdose deaths as this crisis rages on.

What we have done and what we are doing is not enough. We need to use ALL available tools – and ones that are evidence-based and have been known to work -- employing a multi-faceted, multi-pronged approach that will save lives.

This committee and the Maryland General Assembly are doing important work -- we are broadening access to treatment, reining in the provision of prescription opioids, launching educational programs in our schools, expanding naloxone access as well as

¹ Oxenden, M. (2020, September 22). *Drug and alcohol related deaths across Maryland Jump more than 9% due to the Coronavirus officials say.* The Baltimore Sun. <https://www.baltimoresun.com/health/bs-hs-opioid-report-first-half-of-year-20200922-2khvu37zhngf7dsiqivulv6ctu-story.html>

² Miller, H. (2021, January 13). *Overdose deaths jump in Maryland, likely due to coronavirus pandemic, health officials say.* The Baltimore Sun. <https://www.baltimoresun.com/health/bs-hs-overdose-rate-maryland-coronavirus-pandemic-20210113-rl13kzzv3jd6he2bf44wah5cbm-story.html>

medication assisted treatment. But we could be doing more and that's what this bill would enable us to do.

This bill is not a mandate. It's not a directive. It enables local communities to decide what is best for them. Under this bill, if a community organization – a hospital, a local health department, a federal qualified health care center, or a substance use treatment center, for example – wanted to offer an overdose prevention site (OPS), they would work with their local health department, apply for approval to the Department of Health, and get permission to operate: two urban, two suburban, and two rural sites.

Substance users would be permitted to come to the sites with their own pre-obtained substances and use, under the supervision of health care professionals. A variety of services would be offered at these sites – wound care, substance use disorder education, reproductive care, HIV testing, etc.

There are 12 countries that host over 150 overdose prevention sites around the world. In the 17-year history of one of these sites (Insite in Vancouver), there have been **zero** overdose deaths and crime in a 5-mile radius around the OPS has been **reduced** at a substantially higher rate than in other parts of the city. They have overseen 3.6 million injections without a death and overdoses in the surrounding neighborhoods have also declined. Similar programs worldwide have experienced similar results.

What saves lives should be driving our policy decisions. What is evidence-based and has been proven to be effective in decreasing substance abuse should be driving our policy decisions.

What we *were* doing wasn't enough. What we must consider, in light of the devastating and added impacts of the pandemic is a new, but data driven approach. I ask that you keep your mind open and that you listen carefully to the professionals, the experts in the field of substance use and harm reduction. Overdose prevention sites are not a panacea, but they are another very important tool that will help us address this crisis that continues to take so many lives. Respectfully, I ask for your support of SB279. Thank you.