

SB0427 Public Health – Overdose and Infectious Disease Prevention Services Program

From: Celeste Fuentes

Position: Favorable

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My name is Celeste Fuentes, and I am writing in support of Senate Bill 427 to allow community-based organizations to establish overdose prevention services (OPS) programs. Starting OPS in Maryland will reduce overdose deaths, which continue to occur at alarming levels, and provide much-needed services to the Marylanders at risk. In other words, this Bill will save lives.

I support OPS in Maryland based on my professional and personal experience in the harm reduction movement. I worked at the Drug Policy Alliance, helping to further drug policy advocacy and harm reduction efforts and, before that, at OnPoint NYC, where I assisted the Senior Director of Programs to help run the Drop-In Centers and the nation's first two legally sanctioned OPS centers, located in Washington Heights and East Harlem. I saw first-hand how this policy can keep people and communities safer. I have since relocated to Baltimore, where I aim to contribute to Maryland's harm reduction movement. By joining states like Minnesota and Rhode Island in authorizing OPS programs, Maryland can become a nationwide leader on this cutting-edge approach to the overdose crisis.

OPS programs are an evidence-based approach to reducing the harms of the opioid epidemic. Overdose death is prevalent across the country and has only been exacerbated by the COVID-19 pandemic. OPS programs provide a safe space for people who use drugs and are most likely to die, overseen by trained staff. These programs are designed around polymodal use and incorporate comprehensive harm reduction strategies to ensure safer use, including drug-checking services for fentanyl and xylazine and access to sterile equipment, and prioritize the use of oxygen intervention over naloxone. These programs are also co-located with other supportive services, catering to the participants' basic needs with resources like bathrooms and showers, laundry, medical services, STI/HIV testing, and case managers. In the end, not only do OPS programs prevent overdose deaths and other harms from drug use, they also help divert hazardous waste from communities and public spaces, which neighbors are often the most concerned about.

In the years since OPS programs have existed, in New York and across the world, no one has ever died of an overdose in these facilities. Considering the widespread rates of death resulting from these same activities in the street—including the streets of Maryland—this is an extraordinary achievement.

Maryland should embrace the life-saving promise of this Bill. In 2022, we lost 2,587 Marylanders to fatal overdoses. OPS is firmly established as the best possible policy solution to prevent those senseless deaths moving forward. I urge the Committee to make Maryland a leader in the harm reduction movement, joining states like New York, Minnesota, and Rhode Island, rather than lagging behind the scientific and policy consensus.

By supporting SB 427, you can help Maryland be among the states making history and saving lives. I urge the Committee to issue a Favorable report on SB0427.