

Adam Rice  
South Portland, Church Of Safe Injection  
LD 1159

Dear Committee Members,

My name is Adam Rice, I am 33 years old, and am currently a resident of South Portland. I identify as a person in long term recovery from substance use disorder; and am a person living with chronic, treatment-resistant mental illness. I am currently housed but have lived experience of being homeless and utilizing the social services available at that time. To this day I still have many friends living on the streets and struggling with addiction. I am writing this testimony today to urge that you all support the bill LD 1159: An Act to Establish a Pilot Project Regarding Harm Reduction Health Centers.

Over the course of the last 10 years I have experienced 68 people I was close with dying from either suicide, overdose, or murder. It is my belief that had these people been able to access a harm reduction center, many would still be alive today. Not only do these centers help by providing sterile supplies and narcan at no cost; but they also educate people who use drugs how to use safely, and how to prevent and/or respond to an overdose. In my opinion, there should be supervised injection facilities in addition to more harm reduction centers; that way people dont need to use alone, and they can be rescued in case of emergency. Last year in Maine, 716 people died from overdoses. All of those deaths could have been prevented and its worth noting that there has never been an overdose death in a harm reduction center. It is my understanding that Rhode Island passed similar legislation a few years ago and has seen a positive impact since it was implemented.

Currently I work for a non-profit organization called The Church of Safe Injection. We operate a CDC certified SSP (syringe service program) in Lewiston. Part of my job is to also work 4 days a week in Portland at Amistad's SSP. Though both of these organizations are NOT supervised injection sites, they are still harm reduction health centers. In both locations clients can access syringe exchange services free of judgment or stigma while remaining anonymous due to confidentiality policies. Clients are also able to recieve education, get connected to services, receive peer support, and be plugged into a sense of community. In addition to those listed services, folks can also access help with wound care which minimizes the likelihood of community members experiencing more serious health issues.

Between both organizations we are doing outreach services in Cumberland County, Oxford County, and Androscoggin County. We are continuing to make positive connections with housed folks as well as people living outside or in the shelter. These outreach efforts go beyond mobile SSP programming. Often we will help these individuals with food, hot beverages, wound care assistance, sleeping bags, clothing, and more. We use these days to encourage individuals living outside to come to our harm reduction drop in center where we can help refer them to services if they are interested. We also work with our clients that live outside to help with trash removal, and the collection of used syringes at various sites which we later dispose of via a hazardous waste company. At all locations served by both organizations we try to do the absolute most we can for the folks we encounter. We show them all love and treat them with dignity.

In the same way Recovery Community Centers help sober folks in recovery and provide needed services; Harm Reduction Centers help people who use drugs have a safe place to be, where they can receive the help they need. Both types of community centers are vital to public health in Maine; and both save lives. As outlined above, harm reduction centers are so much more than just syringe service programming. We truly need more HRC's throughout the state. This will save lives, prevent death, create more pathways to recovery, and facilitate more positive change for our community members. The lives of people who use drugs matter, and HRC's are crucial to reduce stigma and judgement so these community members feel safe and comfortable enough to ask for help. With or without supervised injection services, HRC's do so much good for a population that has been historically shamed or ignored. It's time we

rethink how we respond to substance use disorder and how we treat those afflicted by it.

In closing, I would ask that this committee approve this piece of legislation. Too many people are dying, and that phenomenon is increasing rapidly each year due to the abundance of fentanyl and xylazine in the drug supply. It is nearly impossible for people who use drugs to stay safe without the existence of HRC's. None of these individuals can get sober or improve their lives if they are dead; and HRC's help prevent those deaths while also creating bridges to recovery. These are mothers, daughters, fathers, sons, and siblings. Every person who uses drugs that dies leaves behind a family stricken with grief. We as a state should be doing everything we can to stop these waves of death. We should be doing everything we can to save as many lives as we can without barriers, conditions, or stigma. HRC's are that solution, and they will lead to much more positive changes while improving public health greatly. I appreciate you all taking the time to read my thoughts, and thank you for considering moving forward with this bill.

Best Wishes,

Adam Rice

Church of Safe Injection

Lead Peer Navigator For Southern Maine