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Organization: ***India Street Harm Reduction Center, Amistad***

Testimony in Favor of LD 1159: An Act to Establish a Pilot Project Regarding  
Harm Reduction Health Centers

Good Afternoon Chair Baldacci and Chair Meyer and members of the Health and Human Services Committee,

My name is Kristin Doneski and I live in Portland, Maine. I am here today in favor of LD 1159.

I am writing in favor of LD 1159 as the Director of Harm Reduction Services for India Street Harm Reduction Center, a program of Amistad in Portland, Maine. We are a community based drop-in center for people who use drugs and their loved ones that offers and is building in expanding our holistic drug user healthcare program and center, the first of its kind in the city. Our Harm Reduction Center drop-in and outreach programs are the crafting of healthcare and advocacy services specific to people who use and inject drugs along with cultivating a community drop-in space for people at every spectrum and phase of drug use as experts in their own lives; it is a community space where there is access to sterile supplies and individual safer use kits with educational inserts daily to reduce the transmission of HIV/HCV, injection wounds and increased health risks within their community, disposal of used supplies to minimize risk of bloodborne, bacterial, soft tissue and preventable chronic injection health complications when forced to reuse supplies and lack of access to sterile water, customized woundcare supplies for current drug supply, access to Naloxone and safety planning training plus supply education, basic needs including sustenance, hot meals and running water/showers to address injection wounds and general immunity/hygiene needs for health dignity, access to linkage to care for MOUD, behavioral health, Mainecare referrals and continuum of healthcare. Our Harm Reduction Center also provides community art, agreements, shared program goals and is peer led and based on community needs through forums, surveys and consistent community plus larger Harm Reduction statewide collaboration feedback.

Our Harm Reduction Center is beginning to hold monthly wound care clinics on site, as wells as HIV/HCV testing on site with trusted community provider partnerships, there is the facilitation of community safer drug education, harm reduction, overdose prevention & safety planning, Art and Grief circle groups together led by peers/ PWUD, people are able to self-identify their wellness and health as their own expertise and access peer support needs both directly and by witnessing their reflected peers and community members as staff at India Street HRC.

It is also important to note here that 82% of the people who use drugs that India Street HRC serve and our in community with in Portland are currently unhoused with expectancy of an increased growth due to Portland's most recent change in city shelter location and services accessibility.

With that said we also work alongside people who use drugs and their families from more Southern and Northern rural places that drive to Portland for our Center services specifically as they do not have access to this onsite care locally, this I believe needs to change and is part of the importance of this bill for people who use drugs in stigma free healthcare deserts as well as our unhoused community who express regularly they have no 'spaces' to find safety consistency and address their unique needs in their counties.

India Street HRC and other SSP drop-in's here in Maine are not a new model of care for community centers for PWUD's and their loved ones and is a research based SSP model that is the standard of care in most states across our country and globally for decades now. It is an evidence based model that shows the positive impact of the health and safety of people who use drugs, their loved ones and the safety of the larger community to break down stigma, shame and reduce preventable deaths through cultivating community and trust at centers that simply does not exist for people who use drugs in our healthcare settings. Harm Reduction centers help to disassemble the barriers and gaps in the continuum of care with true Harm Reduction practices providing love, acceptance and respect, safety starts with people who use drugs finding identity and autonomy through trusting centers of care filled with people living and similar lived experience expressing care and validation.

Another important acknowledgement is research that shows that people who use drugs save more lives within their communities than police, ems and first responders combined this is a fact and often is overlooked time and time again, still our community members as first first responders safety are overlooked when in need of safety planning for themselves and loved ones. SSP's and Harm Reduction Centers have been providing safer places for people who use drugs to come to since the early 1990's, our spaces are also physical spaces where people can present if they are concerned about themselves or to bring a friend or a loved one because they trust the staff and community as experts in Overdose Response and safety assessments, this happens often and is a great honor and speaks to the power of Harm Reduction Centers as alternatives to ER or preventable death.

The missing piece and next necessary step in prevention is brought into action through LD 1159, again this element of the bill mirrors well established best practice of care Overdose Prevention Sites that have existed in our close neighbor, Canada and all over the world including established sites in the U.S. with the sole mission to save lives and provide opportunity for people to pause and assess their safety, use and address any health changes they identify are important to them, address the risks of public overdoses for the impact on the whole community, lessen ER visits costs and offer compassionate relevant healthcare for people who use drugs.

This is offered through providing safe contained sterile places for drug preparation, thorough time for dosage, education and reflection, medical health check in, drug checking and ever-changing supply education and supervised consumption of previously obtained substances. It is important to remember that our current SSP drop-in centers in Maine offer many of the same highlighted services as India Street HRC above excluding this as one of the most vital safety measures we can offer to prevent the continued loss of loved ones here in Maine to overdose death.

I am more than happy to share links to evidence based research on the impact of lives and community care that Harm Reduction Health Centers would provide for all of us below for review if you have interest and below just one of many weekly examples that highlight the impact of HRHC's: I will share one brief example of the power and health benefits of Harm Reduction Health Centers here, this is one of our community members recent overdose experience and I have their consent to share.

*An unhoused young new injection fentanyl user expressed having experienced an overdose the evening prior outside on a public sidewalk trail. This was after quickly rushing to prepare his substances in the twilight, almost dark on a park bench as he did not want to call attention to himself while other community members were walking by, he waited until noone was around. He shared he knew that something seemed strange about his preparation and was also desperately sick from withdrawal, feeling extremely weak and shaky also impacted his abilities to use safely and he knew he was at risk using alone. He was unable to find all of the supplies he needed in his backpack as he was trying to use quickly and shared not be seen. He was also unsure of all the health steps as he was new at injection and was worried about being 'caught' so he may have skipped safety steps. He shared that he remembered safely disposing of his syringe in his sharps box and then when he got up to leave, began to struggle to breath and then terrified went into respiratory breath. It was shared following his rescue by a bystander/friend luckily passing by at the time, that he found the Narcan that the young person left on the side of his backpack in view and hoped for safety planning and administered it to him with rescue breathing to save his life.*

*I spoke to him hours following where we met at the bus stop as he was riding the bus all night to 'stay warm and try to rest to recover from the trauma his body experienced through this medical emergency and I encouraged him to visit the Center the following day and refreshed safety health tips education and tolerance following an overdose as he shared he was trying to taper down his use to eventually cease his use, this can increase his risks immediately especially with unpredictable supply of street purchased Fentanyl. So very fortunately this example ended with this young community member's life saved, unfortunately he is now nine times more likely to overdose as research shows and is increasingly more vulnerable in his health.*

*We also discussed an injection wound that had surfaced due to his 'rushing' and using non sterile supplies and accessing the center to link him to potential antibiotics and maintenance/clean his wound and supplies as he shared fear around accessing a healthcare setting first as to 'how he was treated the last time he went'.*

*Again, this is the impact of one overdose daily happening in our communities and state that could have not happened at all if Harm Reduction Health Centers in full service existed. **We talk about mostly about preventing overdose deaths but the truth is we want to be preventing ALL overdoses and complicated drug overdoses happening in our community.** Here is where I will share the obvious impact in this young person's life if he was able to access a Harm Reduction Health Center where he could be welcomed into community and respected, speak with mentors and staff around drug education, he had a sterile healthcare space and supplies, access to understand safety routes of administration of substances; sniffing vs. injection, running water to wash hands, dignity in ease of knowing he would be supervised by people trained to prevent and respond to overdose and wanted to keep him safe onsite. Follow up benefits in relationship building for safety and increased access/communication, linkage to other healthcare services and consistent sterile supplies, education and peer led groups/support to name just a few. A pause to be seen, heard and cared for as a human in need of healthcare, community and safety first, which is already happening at many of our centers who need this bill to expand the ability to save lives and improve the quality of those lives of people who use drugs and our communities.*

In closing, I am here today in support of saving lives and providing dignified, relevant and necessary healthcare for people who use drugs and their loved ones here in Maine. I sincerely hope that you will join me both in your heart and mind to truly understand the positive change this will provide in our shared communities by voting in favor of LD 1159. I am available to answer questions and share resources, thank you so much for your consideration, guidance and support in this collaborative initiative to keep people safe with action.

In deep gratitude,

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