

Testimony in Favor of LD1159:

An Act to Establish a Pilot Project Regarding Harm Reduction Health Centers

April 10, 2023

Dear Representatives Laurie Osher, Mana Abdi, Pinny Beebe, David Boyer, Lydia Crafts, Deqa Dhalac, Raegan LaRochelle, Walter Riseman, Amy Roeder and Daniel Sayer, honorable members of the Department of Health and Human Services,

My name is Amelia Grant. I am a person in recovery who has lived in Portland for the past four years.

I'm writing this to show my support in favor of LD 1159: An Act to Establish a Pilot Project Regarding Harm Reduction Health Centers.

I came to Portland for the recovery opportunities that are absent in most of the rest of the state. It's not easy finding, getting into and affording recovery programs in Maine, yet we have a tremendous substance use history here and overdose numbers that are growing daily.

My experience with substance use began with trauma, led to prescription medications and took me down a road I assure you all I did not choose.

I took from my experience the deep desire to show up for others who had yet to learn the things I had learned that helped me out of my traumatic past and self-destructive pathway.

I wouldn't be here if my life hadn't first been saved largely by other people in recovery.

I found and made connections in the recovery community that led to me becoming a state certified Recovery Coach and Intentional Peer Support Specialist.

These trainings allow me to show up for others who are where I was in healthy, meaningful ways.

Harm Reduction Centers WORK. The evidence exists and the only reason I can think of to not pass this legislation and do something significant for the families who desperately need it is what I believe to be, effectively, Social Darwinism.

I was at the Governor's Opioid Summit last winter when they discussed how first responders bringing harm reduction was 100 percent effective - when it was offered.

The problem was that many of the professionals didn't want to do the harm reduction training to be able to assist in this manner.

They believed it to be "enabling."

Enabling is the only argument I can see for not supporting LD 1159.

The facts show that they are successful.

Resource mathematics surrounding the health costs of substance use-related disease and infection prove that the lack of clean needles, etc., creates disease scenarios that are far more costly to the economy than non-IV drug use related illnesses. For example, IV drug-related endocarditis surgeries are far more costly than non-drug related surgeries with a substantially diminished prognosis.

Clean needles and wound care, accessible at Harm reduction Centers, is a safeguard against these infections.

Speaking of infections, infectious, IV drug use related disease rates are also narrowed, reducing rates of diseases such as HIV, Hepatitis B and C, in the rest of our communities.

There is no arguing the financial benefit of having these harm reduction centers.

Yet I hear the enabling argument all day long, which I relate to the 1980's "War on Drugs" that posited that substance use is a moral issue.

Science has come a long way.

We now know that Trauma and social injustices are the gateways to drug use.

That both trauma and drug use are genetic and epigenetic; we can inherit these conditions, the emotional, socio-economic factors, and even the coping mechanisms.

We know that trauma changes our brain chemistry... And that the brain and the human spirit can return to health once given the care they needs.

Social Darwinism is a slippery slope that I would caution us all against.

The insertion of fentanyl into pressed pills, marijuana, even cocaine powder, has ended recreational drug use.

There are people who's early recovery steps are switching from their substance of choice to something they have less of an affinity for.

The undisclosed presence of fentanyl in non-opioids or added to known opioids increases the risk of overdose and addiction.

We need resources like harm reduction centers to stop this phenomenon.

The slippery slope is if we "just let them die," where do we stop?

If we refuse to take action now, what about the ten year old who dies taking something not knowing what it was?

Getting help out there is the first stages to safeguarding our children and communities from these experiences. It's not just the "hardcore" users these days that we're losing.

So if we run with the moral judgments and survival of the fittest attitudes, where do we stop?

We've been doing this for 40 year and it has only gotten worse.

In closing, these Harm Reduction Centers are the first step in curbing this epidemic.

Doing nothing, as we've done for 40 years, has failed miserably.

Something else I've learned in recovery?

Recovery is an action word.

I urge you to take action and find in favor of LD 1159.

Thank you,

Amelia Grant

Amelia Grant
Portland
LD 1159

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