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Windsor
LD 219

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Distinguished members of the Joint Standing Committee on Health and Social Services, my name is Emily Jayne. I am a resident of Kennebec County. I am writing in opposition of LD 219: An Act to Limit Hypodermic Apparatus programs to a One-for-One Exchange.

I would first like to address the exponential need to destigmatize our beliefs surrounding substance use disorder (SUD). There is an unfortunate tendency of separating our humanity and empathy from those who have struggles we cannot comprehend. There are a plethora of circumstances that would contribute to a person's struggle with substances.

Genetics account for 40-60% of those with vulnerabilities to substance use disorder. There is undeniable evidence proving that mental health conditions are directly linked to substance use disorder. 50% of individuals with mental health conditions will also experience SUD. Environmental factors are responsible as well. This looks like exposure to substances by a family member, trauma such as physical, mental, sexual, and physical abuse.

Another monumental factor that tends to be ignored, is the incompetence of health care providers lacking clear communication regarding the risks of the addictive substances they are prescribing to their patients. When you are genetically predisposed to addiction and you are prescribed necessary post-surgery medication, the inevitability of substance use disorder skyrockets.

Please recognize that humans don't seek out hardship and addiction. Addiction is a chronic condition and a lifelong disease. We are all suffering from something. Empathy is our cure to healing.

Syringe services programs (SSPs) showcase the empathy we should all seek to emulate. SSPs are effective community-based programs that provide a wide range of services. Research has proven that individuals with substance use disorder, who participate in Syringe service programs, are 5 times more likely to get treatment for their disorder, and 3 times as likely to stop using, in comparison to those who do not utilize SSPs.

Syringe services provide preventative measures in regards to the spread of infectious diseases. There is a direct link between the 50% reduction of HIV and HCV, with the implementation of SSPs. For those of you who's biggest concern is our economy, SSPs help you too. Hospitalization in the U.S. due to substance use related infection alone costs over \$700 million dollars annually. Providing individuals with clean syringes directly stunts the spread of infectious diseases.

The premise of this bill is based on the concern of "needle waste" The issue of littering and needle waste has been an ongoing issue that occurred long before Janet Mills executive order to suspend the one-for-one rule. SSPs give individuals a safe space to dispose of used syringes. This service directly reduces littering and the risk of infectious diseases. Studies have shown a 50% decrease of improperly disposed needles after SSPs are established.

The kind of bill we should be proposing, is one that provides more access to care. The implementation of sharps containers in easily accessible public spaces. Access to free mental health services, housing, healthcare, access to education, access to food, and the list goes on. There seems to be a running theme in this country as of late, pushing the idea that cutting services will help us somehow. Cutting life changing services will only harm society as a whole.

We seem to have plenty of leniency when it comes to tax cuts for the rich. We have infinite amounts of money for war, but we don't take care of the American people. People who have substance abuse disorder are not at a distance. They are your children, your grandchildren, your family, your parents, your neighbors, your co-workers, and the list goes on.

Please open your horizons to the positive impact of Syringe Service Programs. I

ask that you vote in opposition to LD 219. Thank you for your time.