

March 21, 2025

Testimony of Kerri Barton *in favor of* LD 1078: An Act to Support Maine's Public Health Objectives by Increasing Access to Hypodermic Apparatus Exchange Programs

Thank you to the distinguished members of the Health and Human Services Committee for the opportunity to submit testimony on this proposed bill.

I am a public health professional with 14 years of experience in infectious disease prevention, epidemiology, and harm reduction. I was a Maine resident from 2017-2024 and served as the Program Coordinator for the Portland Needle Exchange at Portland Public Health from 2021-2024. To the best of my knowledge today, Portland Needle Exchange is the only brick and mortar syringe service program (SSP) in Cumberland County, and we often had clients who would travel from Bridgton, Brunswick, Gorham, and other towns throughout the region to access our services. Cumberland County comprises 25 towns and is 835 square miles. An individual living in Bridgton would have to travel an hour in order to access the program, and only if they had access to transportation. For those living in rural areas, we would often hear that they frequently had to re-use or share syringes due to lack of access to new supplies, increasing their risk of HIV, hepatitis C, and/or serious hospitalizations due to endocarditis.

The opioid overdose crisis impacts rural, suburban, and urban populations across the county and across Maine. According to data on the Maine Drug Data Hub, there were 91 fatal overdoses in 2024 in Cumberland County, with 21 occurring in the city of Portland (as reported by the Portland Police Department). That means that 70 residents in Cumberland County in towns outside of Portland died from an opioid overdose. This is an urgent call to expand harm reduction and overdose prevention services throughout the county. LD 1078 would allow for this to happen, bringing life saving resources to areas of Maine that need it the most.

I am now a resident and Harm Reductionist practicing in Rhode Island, where there are little to no restrictions on SSP services across the state. Harm Reduction supplies, including syringes and sharps containers, are available with minimal restrictions, in some areas 24 hours a day, 7 days a week. Mobile outreach and home deliveries are available to everyone throughout the state. In my time here in RI so far, I have seen significantly less syringes on the ground when compared to my time living and working in Maine. The challenges that the two states face are similar- in 2024, there were 490 suspected and confirmed fatal overdoses in Maine, compared to 308 fatal overdoses in Rhode Island. The difference is that Harm Reduction programs in RI are evidence- based, and encouraged to expand and grow based on the changing needs of the clients they serve.

If LD 1078 were to pass, it would allow established SSP programs throughout Maine to expand their services, furthering their reach and expanding connection to people at risk of overdose and HIV infection. With mobile outreach, trained harm reductionists and peers connect with individuals who may be housed or unhoused, distributing naloxone, sterile supplies for safer use

of substances, sharps containers, and wound care supplies. We also provide HIV/hepatitis C testing, immunizations, referrals to substance use treatment and recovery programs, and basic needs. It is an opportunity for individuals to have regular access to safe disposal of used syringes both at the time of service connection and also between visits through the use of personal sharps containers that will be more widely distributed. This ongoing, consistent outreach is how trusted relationships are built, with each individual encounter providing another opportunity for individuals to maintain their own safety and get connected to treatment and recovery programs.

Now is a vital time to respond to the needs of Mainers, in the face of an ongoing overdose crisis and with an expanding HIV outbreak in Penobscot County, with 22 cases at the time of this writing. With the geographic expansion of services outlined in LD 1078, people who use drugs in Maine would have increased connection to vital healthcare services, peer support, and prevention of serious health outcomes.

I thank you for your time and would be happy to provide any additional information.

Sincerely,

Kerri Barton, MPH

Kerri Barton
Providence, RI
LD 1078

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