

Good afternoon Senator Ingwerson, Representative Meyer & honorable members of the Health and Human Services committee,

My name is Molly Whyte, I live in Lewiston Maine & I work for The Church of Safe Injection (CoSI). We work with people who use drugs in Central Maine and provide services and resources that promote public health best practices and reduce the transmission of infectious diseases like Hepatitis and HIV. I am here today urging you to vote ought to pass LD 1001.

I have been a part of the recovery and harm reduction community for many years. Last year, on three separate occasions, I heard about situations involving friends, colleagues and participants of our program, where their substance use disorder and path to recovery was judged and stigmatized. Each person shared that they were told by Child Protection Services case managers that as parents in long term recovery- ranging from seven months to seven years- their choice to take medication for opioid use disorder, also known as MOUD, was not a suitable form of treatment.

CPS told each person they wanted "more", implying quite directly that their treatment choice and recovery process was not enough. Whether it was seven months or two years, CPS said the same thing - they didn't feel safe or comfortable with that time frame.

Service providers, community leaders, state officials and harm reduction and recovery advocates across the state have learned a lot in the last ten years about substance use. SUD and abuse. SUD and rates of incarceration. Generational trauma. Stigma in healthcare settings. Traumatic brain injuries. Overdose Recognition and Response, Valuing the experiences and voices of people with lived experience. Learning that community saves lives. Punitive punishment doesn't improve outcomes. Expanding naloxone does not encourage reckless drug use. People with SUD have high ACE scores which means they have deeply ingrained trauma responses, self doubt, negative self esteem. So can you imagine how it would feel, as a pregnant person in recovery, who has taken steps to change their relationship with substances, to be told by your healthcare provider that even though they are successfully engaged in their program, they have no history of child abuse or neglect on their record, that CPS will show up at the hospital to ask a bunch of very personal questions about you, your past drug use and your ability to parent.

It is not necessary and certainly does not improve health outcomes for the parent to automatically involve Child Protective Services simply because someone is on medication for their opioid dependency. MAT is evidence-based and proven effective at reducing fatal overdose, expanding access to healthcare, and promoting healthy recovery pathways that are sustainable and safe.

You have the ability today to take a stand with folks in recovery, folks healing and moving forward with their lives so that their past choices do not have to be detrimental to their future. You have the ability to allow Maine to join other states by taking a stand and ensuring folks moving forward do not always have to be dragged back into a system we know causes harm. We can do this better. Please, vote ought not to pass and let's continue building a safe and supportive community for our friends and families in recovery .