

**Rep. Rachel Talbot Ross**  
Co-Chair

**Amb. Maulian Dana,**  
**Penobscot Nation**  
Co-Chair



**Permanent  
Commission**  
**RACIAL, INDIGENOUS  
& TRIBAL POPULATIONS**

**Testimony of the  
Permanent Commission on the Status of Racial, Indigenous, and Tribal  
Populations**

*In Support of LD 1862*  
**“An Act To Strengthen Maine's Good Samaritan Laws Concerning  
Drug-related Medical Assistance”**

Wednesday, February 9, 2022

Dear Senator Deschambault, Representative Warren, and Honorable Members of the Joint Standing Committee on Criminal Justice and Public Safety:

My name is Whitney A. Parrish, and I am the acting executive director of the Permanent Commission on the Status of Racial, Indigenous, and Tribal Populations (“Permanent Commission”). I am honored to offer this letter in support of LD 1862, “An Act To Strengthen Maine's Good Samaritan Laws Concerning Drug-related Medical Assistance.” We extend deep gratitude to Senator Chloe Maxmin for introducing this bill.

The Permanent Commission is an independent entity with a mission to examine the racial disparities across Maine, and to work toward improving the status and outcomes for currently and historically disadvantaged racial, Indigenous, and tribal populations. Further, the Permanent Commission is empowered by state law to advise and consult all three branches of government.

No one should be forced to weigh their own future and fate against taking lifesaving action when encountering an overdose. While Maine has weathered the COVID-19 public health emergency by taking truly meaningful steps to mitigate harm, we have not weathered the ongoing and worsening overdose death public health emergency nearly as well. We see no difference between the importance of harm mitigation, or reduction, for COVID-19 and overdose death. We believe LD 1862 adds another critical tool to the toolbox of addressing a crisis that disproportionately impacts racial, Indigenous, and tribal communities across Maine for a variety of reasons.

The racial disparities in Maine’s COVID-19 infection rates are well documented,<sup>1</sup> though the numbers are not as clear regarding overdose death and addiction rates because it is challenging in Maine to find demographic data by race, or related disaggregated data. Here is what we know, though.

Lack of quality health care, mental health services, and culturally and otherwise appropriate treatment disproportionately impacts racial, Indigenous, and tribal communities in Maine. Lack of self-determined and community-led public health infrastructure weighs heavily on these

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<sup>1</sup> Miller, Kevin. “Maine has nation’s worst COVID-19 racial disparity.” Portland Press Herald, June 2020, <https://www.pressherald.com/2020/06/21/maine-has-nations-worst-covid-19-racial-disparity/>

communities. Lack of safe, affordable housing where an individual can take care of themselves if they choose the very personal journey of recovery weighs heavily as well. These are all things that can and do compound problematic drug use and overdose rates.

It is a well-known, well-studied reality in the substance use treatment, harm reduction, and prevention worlds that Black and white individuals use and sell drugs at similar rates.<sup>2</sup> And yet, we see fewer Black individuals able to access care and more Black individuals likely to have contact with the criminal legal system than their white counterparts. The recent surge in overdose in the U.S. has hit Black men the hardest, with the rate tripling<sup>3</sup> between 2015 and 2020. Overdose has also skyrocketed for Black women and people belonging to other racial and ethnic populations, while use rates remain the same as their white counterparts.

Overdose death is a tragedy that affects all of us. It is a tragedy no matter what, and it is preventable. We must use every tool necessary to combat not only overdose death, but stigma and reliance on counterintuitive punishment, too. We cannot punish our way out of the overdose death crisis, and it is time for something new. Anything less amounts to discarding our family members, friends, and neighbors who may be struggling and further stigmatizing and harming individuals who need support to better their lives, not trauma and harm as the result of calling 911 to save a precious life.

Thank you for your time and consideration of this bill. We respectfully urge you to support LD 1862. I am happy to answer any questions or provide additional information if desired; my contact information is [whitney.parrish@maine.gov](mailto:whitney.parrish@maine.gov).

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<sup>2</sup> "Rates of Drug Use and Sales, by Race: Rates Drug Related of Criminal Justice Measures." The Hamilton Project, 2015, [www.hamiltonproject.com/charts/rates\\_of\\_drug\\_use\\_and\\_sales\\_by\\_race\\_rates\\_of\\_drug\\_related\\_criminal\\_justice](http://www.hamiltonproject.com/charts/rates_of_drug_use_and_sales_by_race_rates_of_drug_related_criminal_justice). Original sources: BLS n.d.c; Carson 2015; Census Bureau n.d. FBI 2015.

<sup>3</sup> "Black men hit hardest by drug overdose deaths in recent years." Pew Research Center, January 2022, <https://www.pewresearch.org/fact-tank/2022/01/19/recent-surge-in-u-s-drug-overdose-deaths-has-hit-black-men-the-hardest/>