



Testimony of Whitney Parrish  
LD 475– Ought To Pass  
Joint Standing Committee on Health and Human Services  
March 24, 2021

Good morning Senator Claxton, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services:

My name is Whitney Parrish, and I am the Advocacy and Communications Director of Health Equity Alliance (HEAL), and a resident of Hallowell. Health Equity Alliance is a nonpartisan nonprofit public health and harm reduction organization that envisions and works toward a world where health justice is realized for all Mainers, including and especially our most vulnerable.

I am writing today in strong support of LD 475, *Resolve, To Create the Frequent Users System Engagement Collaborative*.

Health Equity Alliance, among other things, is a harm reduction and substance use resource provider in Bangor, Belfast, Calais, Ellsworth, Machias, Rockland, and Deer Isle (the final with support from Opiate-Free Island Partnership). These services range from certified syringe services programs at every location (sterile syringe and naloxone distribution) to targeted case management for qualifying individuals to community food pantries. In all locations, we meet unhoused members of our communities.

In Bangor, we have one dedicated staff person for intentional outreach to our unhoused clients and community members. One is not enough given the deep need we see daily. Our services have adapted—and continue to adapt—as we see this crisis compound and escalate during the COVID-19 pandemic.

But we need more. **We need permanent, supportive, and nonjudgmental housing options.** We need a way to pull systems together to work together efficiently and effectively to make this happen. We believe the Frequent Users System Engagement (FUSE) Collaborative will do just that.

As you have heard from Rep. Morales and others, many of our community members experiencing chronic houselessness have extremely complex, often untreated mental and physical health needs and challenges, have frequent contact with law enforcement and other systems, and may use drugs for many reasons, including to cope with these circumstances. To be clear, we are not conflating houselessness with drug use. However, we interact with many chronically unhoused people who do use, and we want to acknowledge that. We also want to acknowledge the fact that **housing is one of the proven, evidence-based ways to encourage safer use and recovery** if that is someone's path. We talk a lot about treatment in these rooms, and in those conversations, we often leave out housing. Housing should lead those conversations. Imagine engaging treatment of any kind while lacking stable housing. It sets people up to fail from the very start.



HEAL's vision for a Maine where health justice is realized for our most marginalized residents is rooted in autonomy and self-determination, and we believe these things are possible for all people given the right tools and support. That is why we support the Frequent Users System Collaborative and its mission to break down siloes and encourage the collaborative coordination that is required to support our most vulnerable residents.

We strongly support the friendly amendments offered for a provider of behavioral health services (Alliance for Addiction and Mental Health Services) and unhoused individuals (Senator Claxton) to serve on the Collaborative. In addition to these individuals, we believe it is critical to have a member of the Collaborative who **works with unhoused individuals, especially those who use drugs, in a non-clinical capacity**. This could be satisfied by an individual who does direct outreach in our communities at a service providing organization, or an individual with deep knowledge of resource navigation and support without a clinical component. This perspective and expertise are invaluable to getting a comprehensive view of need directly from the community—in conjunction with someone who is or has experienced houselessness themselves.

**We strongly urge the committee to support LD 475.** Thank you for your time and attention to this dire issue.