

I'm Scott Nolen, Director of the Addiction and Health Equity Program at Open Society Institute-Baltimore (OSI-Baltimore), submitting testimony in support of House Bill 396 on behalf of Open Society Policy Center.

We are part of a global foundation, Open Society Foundations, that has partnered with and supported overdose prevention sites (OPS) around the world. We have observed the operation of such sites and collected data demonstrating that they successfully prevent overdoses and have a wide range of additional benefits, with resounding data on the positive impact for public health.

Over the last five years, OSI-Baltimore worked with other funders and local organizations to support research, education, and advocacy toward the goal of establishing overdose prevention sites in Maryland. We feel confident that, if the General Assembly passes legislation allowing a pilot to establish six overdose prevention sites in Maryland, the funding community is prepared to support the process of establishing such sites.

A meta-analysis of 75 studies from across the globe found that overdose prevention sites were associated with safer injection conditions, reduced overdoses, zero fatalities, increased access to health services, and less outdoor drug use, while having no negative impact on either crime or drug use.

Overdose prevention sites do not create more crime and they do not provide a gateway to drug use; rather, they provide a gateway to drug treatment and other health services for people who are already using drugs, and particularly for those who have been most marginalized and disconnected from care. For most clients in Sydney's overdose prevention site, for example, the OPS was the first routine health service they had ever accessed. The center's opening resulted in an 80% reduction in ambulance calls to the surrounding neighborhood.

These sites don't draw new drug users into the surrounding community. Programs like Insite (in Vancouver) have found that they only draw people in from about a five-block radius, so they don't inundate the surrounding neighborhood with new drug use or dealing—rather, they serve the existing residents of the neighborhood who are already using drugs in more public and less safe ways.

In the Netherlands, 83% of program clients now use drugs less often in public spaces. In Sydney, publicly disposed of needles decreased by 50% in the first six months of operation, making things safer not just for the program participants, but also for the general community. And so in Sydney, 78% of residents and business owners support the continued operation of their program, having seen firsthand the positive effects on the neighborhood. They recognize that these are their neighbors, and they want to support their health but giving them safer options. Around the world, we've seen that when these services open, the public sees the immediate benefits of them and responds with overwhelming support. Passing this bill will not cost anyone here their seat.

Having seen the data and the impact that these services will have on those who have been most harmed by our drug policy and criminal justice system, we stand ready to support the funding of overdose prevention services in Maryland. All that we need is authorization to do so.