

2/2/2022

Good morning, Chair Lively, Vice-Chairs Cate and Kropf, and members of the House Committee on Economic Recovery and Prosperity.

My name is Brittiny Raine, and I am the co-founder and Co-Executive Director of a small non-profit called Community Outreach through Radical Empowerment (CORE). CORE is a small nonprofit that was one of the receipts of measure 110 funding. We have also provided at the end of this letter an experience we had recently in our community that is relevant to potential reallocation of these dollars away from organizations.

- I am here this morning to testify in opposition to the adoption of the -3 amendments to HB 4016.
- I am not opposed to the substance of the amendment; I am fully opposed to its funding source because it would reduce access to critical harm reduction and addiction recovery services.
- The -3 amendment of HB 4016 would cut Measure 110 services by \$29 million per biennium. (In just six months, that same amount of money has helped over 16,000 people across Oregon access critical harm reduction and addiction recovery services.)
- Last year, the legislature invested \$31 million in M110 services to expand access
 to vital addiction treatment, peer supported recovery, harm reduction, and
 housing services. In just six months, 16,000 Oregonians were helped by these
 lifesaving services. This is incredibly important work that provides hope during
 a national spike in overdose deaths.

In the 6 months that we have been receiving funding CORE has

- o Hired our first 4 staff
- 33 young people enrolled in case management
- 9 young people supported into permanent housing with client assistance dollars
- o 28 young people have increased their income
- Distributed 31,064 doses of Naloxone/Narcan



- Grown our street outreach, Harm Reduction Distribution (HRD), Client Assistance, and Street Feed Programs which had over 1646 contacts with young people in the last 6 months.
- And countless other success....
- With overdose deaths on the rise across the country, and new data from SAMHSA showing Oregon ranks second in the nation for substance use disorder and 50th in addiction and recovery services, the need to continue to fully fund Measure 110 services could not be more urgent.
- Next month, \$270 million more is slated to be invested in increased access to lifesaving services including housing, peer support, harm reduction, overdose prevention and low-barrier recovery treatment services in every Oregon County.
- The Oversight & Accountability Council received applications from service providers for \$390 million to support the creation of Behavioral Health Resource Networks (BHRNs), which will provide access to low-barrier addiction recovery services in every Oregon County. This is about \$110 million more than the OAC had available to issue to grantees. We simply cannot afford to cut these funds.
- This is the absolute wrong time to make cuts. Oregon voters approved M110 by a 17 point margin. M110 is just getting started, and our behavioral health system is already strained by COVID-19. Please uphold the will of the voters and provide needed support to our struggling behavioral health system by rejecting any attempt to cut Measure 110 funding.

Personal Experience. To see the full statement please email us info@coreeugene.org

A Eugene Police Department officer interfered in the reversal of an opioid overdose in the downtown Eugene area, risking the life of an individual and while doing so prevented a local social worker from following overdose intervention protocol.

On Jan. 19, Brittiny Raine, social worker and executive director at Community Outreach through Radical Empowerment, was flagged down in the street by a person needing emergency assistance in responding to an active overdose in Washington Jefferson Park.



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Raine responded to the emergency by administering the overdose reversal drug, Narcan/Naloxone, while another person helped by performing rescue breathing/CPR. Their efforts were met with hostility from an EPD's Officer who further refused to cooperate in the safety protocol already underway. This officer's refusal was based on the assumption that the person in crisis was already dead.

This ignorance to safety protocol is a pattern from EPD and a public safety issue that can not be overlooked with the frequency of fatal opioid overdoses which is considered a nationwide epidemic.

The EPD Officer obstructed intervention efforts that could have resulted in the death of a Eugene citizen in crisis with qualified help standing nearby. The EPD Officer escalated the situation, demonstrating more concern for who was doing drugs than helping save a life.

The officer demanded Raine "shut [her] mouth" and get away from the person needing help. The EPD Officer physically would not allow Raine to monitor the individual in crisis. Only after identifying herself as a social worker did the officer change his demeanor toward Raine.

Raine has worked as a social worker for 13+ years and is educated in social and human services with a focus on chemical dependency. She is Narcan/Naloxone trained, has been a trainer for many years and has successfully reversed multiple opioid overdoses.

Beyond the officer's failure to observe overdose intervention protocols, his profiling of Raine might suggest that the Eugene Police Department places more importance on indiscriminately policing homelessness and drug use than aiding in the intervention of our community's inordinate number of overdose-related deaths.

Raine has reached out to City Manager Sarah Medary, EPD Chief Skinner, Assistant City Manager Kristi Hammit, Mayor Lucy Vinis and Eugene City Council. She also requested a police and CAD report, dash-cam footage, body-cam footage and the 911 call on Jan. 21.

On Jan. 25 and 28, the Eugene Police Public Records Office explained that there is no incident report, no body-cam footage, no dash-cam footage and that Officer Fischer was responding to an EMT and Fire call to ensure the "safety" of the situation.

Because the EPD Officer only escalated the situation and further endangered the life of the individual, Raine is seeking an overdose response plan from the City of Eugene, the provision of accurate, comprehensive overdose intervention training to all emergency service personnel and for the EPD Officer and EPD to be held accountable for their actions relating to this incident.

Raine and C.O.R.E. are asking for this on the behalf of the larger community in the effort to prevent fatal overdoses in the community.