

12-4-2023

TO: Senator Kate Lieber, Senator Tim Knopp, Representative Jason Kropf, Senator Floyd Prozanski, Representative Christine Goodwin, Representative Rob Nosse, Representative Kevin Mannix, Representative Andrea Valderrama

RE: Public Comment regarding Joint Interim Committee on Addiction and Community Safety Response

Dear Oregon State Legislators,

I support repealing Measure 110 as it was passed. I am in support of re-criminalizing drugs in Oregon as well as implementing additional resources to fight drug use and create incentives to recovery. I want to be clear – I do want people to enter recovery and have resources available to support recovery. The problem that persists is that those using drugs do not want to stop using and they want the community to continue to provide services without stopping their drug use. This ongoing drug use creates substantial safety concerns in our communities.

I am a licensed mental health therapist that currently practices in Central Oregon and provides mental health services to Central Oregon and other rural areas of Oregon. I have experience with in-patient and out-patient substance abuse programs in Central Oregon.

I provide Mental Health services primarily to Oregon Health Plan members that experienced trauma, sexual assault, childhood abuse and addiction as well as Veterans that have been diagnosed with PTSD or experienced Military sexual assault. I also offer integrative wellness retreats to Veterans and trauma survivors through a grant provided by the Oregon Health Authority.

We need to impose negative consequences to solve our substance abuse problem. By having consequences, we create incentives to enter treatment and complete recovery. We need to STOP enabling drug use by letting drug users and drug dealers off the hook with an assessment and no commitment to actual treatment or recovery. We need to face the fact that these people are making bad choices and in order to get support and resources, they must get actively engaged in treatment. I realize that recovery takes time – let's also get insurance on board with that reality.

Harm reduction has not worked and has only made the situation worse. Thinking that Narcan is a solution is also not working and has actually created more enabling. Narcan is a band aid and not a solution. Fentanyl has also gotten more potent and it now takes up to 8 doses of Narcan to overcome an overdose.

Harm reduction sounds great – low barrier shelters sounds like a viable option. But the reality is those things just continue to enable drug users to continue to abuse drugs and cause harm to our communities. There has to be tough love – that is an integral part of recovery and necessary for a healthy and safe community.

\*\*We also need to recognize the impacts of enabling substance abuse. The things related to drug use that many don't know or may not realize or are intentionally ignoring – the proverbial "ignorance is bliss". These are things and situations that the news media and others neglect to acknowledge, report or quantify.

Substance abusers abuse children as well as their partners. Physically, sexually, verbally and emotionally. These children NEVER fully recover from that abuse and it creates lifelong trauma and PTSD. The partners never fully recover from that trauma and abuse. I am a mental health therapist that specializes in trauma. I have seen the effects that substance abuse has on families, most specifically children and women. Those people abusing drugs need to take responsibility and be accountable. The harm to children and the adverse childhood experiences that they are subjected to, harm, abuse and decrease children's ability to thrive and cause them to not be safe.

For instance, I have a 14 year old client that was raped by her father when he was under the influence of substances. I have an 11 year old client that was abused sexually from age 3 to 7 by drug users. Her mother traded her for drugs and cash to buy drugs until the mother died of a drug overdose. Had her mother lived, this child would have continued to be sexually exploited. Her mother knowingly gave her to random men to rape this young child in exchange for drugs. This happens more frequently than you know.

We don't talk about these things because they are so awful. That doesn't mean they don't happen. I am not talking about a rare case, it happens frequently. A person that is addicted will do anything to get that next high. Children are vulnerable and defenseless in an addicted family and living situation. Children are not safe in the care or presence of drug addicted people with the immediate family being the most likely to abuse their children.

I have a full caseload of clients that these types of things happened to them as children. Children raised or cared for by substance abusers and these children endured horrible things that were done to them as a result of the substance abuse by a parent or family member. These clients will never fully overcome or recover from these traumas and abuse. As a result, we as a society will be providing support and paying for extensive physical and mental health treatments for the rest of their lives. This abuse can be prevented by having consequences and requiring treatment for those using substances. Not many substance abusers want to enter treatment and are not willing enter treatment until they are forced to face that reality. The easy way out is to continue to use drugs or substances rather than deal with their issues.

Much of this abuse of substances is generational. Each generation learns from the previous generation. By legalizing drugs, we are teaching our children that using drugs is OK. We need to break the cycle. We need to insist on healthy ways of coping with chronic pain and mental health issues that lead to the substance abuse. I have a number of clients that have successfully completed a treatment and recovery program. They entered these treatment programs as a diversion option to criminal charges. Otherwise, they would not have entered treatment.

I understand that we also have a large increase in the births of fentanyl babies born to addicted mothers in the last 70 days. I have been told by a county commissioner that we have had 7 babies that were born here locally at St Charles hospital. What do you think happens to those babies when they leave the hospital ? How are these addicted mothers going to function as parents ? These parents should be charged with child endangerment and immediately ordered into treatment. We need to stop enabling these drug users to abuse their children.

Drugs do NOT fix chronic pain. Drugs are a band aid or mask to the underlying problem or issue. These issues need to be dealt with in a healthy way and in a way that does not harm others. This takes a commitment from each individual dealing with drug use. They need to be accountable. We as a society have an expectation that a pill or drug will fix it all. That isn't working. Resolving the issues behind drug use requires an commitment and effort from these individuals that are abusing substances. They can't do it by themselves. They are not seeking out treatment voluntarily as was the promise with the passage of Measure 110.

Re-criminalizing drugs has to be the next step because de-criminalizing drugs was a huge disaster with all sorts of negative consequences to our communities including huge expenses, increased crime rate, extensive safety issues and a substantial increase in homelessness. The money spent on providing warming shelters and other support for the homeless could be spent in a treatment program. They would be sheltered and fed on their way to recovery.

In addition, we need to be sure medical insurance policies pay for not only the substance use treatment but the other alternative treatments for chronic pain that are not currently covered. Like acupuncture or chiropractic. Generally insurance companies either don't cover treatment or limit number of treatments per year to 10 or 20 visits. Chronic pain clinics need to be a covered insurance benefit including some of the functional medicine clinics and other alternative treatments including physical therapy, massage and appropriate testing to determine cause of the issues not just treat symptoms.

We need to stop enabling those using substances. We need to stop providing shelter, food and accommodating the needs of those NOT willing to enter treatment. These are personal choices and there are negative consequences to those decisions. People need to be accountable to their behavior and choices that they make.

Filling out an assessment is not getting us there. They need to enter treatment PERIOD. No excuses and no more free ride until they enter treatment. Drug use is harming the entire community and teaching our children that drug use is OK after all, is legal so it must be OK. This is not the message we need to convey to the next generation.

The camping of these drug users on public land is also causing a huge safety issue to the community. Here in Central Oregon the open fires associated with the homeless population camping are a SEVERE fire threat to the entire community. We have a high fire risk in general and with the recent drought it has increased. The crime rate and homeless rate has also increased exponentially with the legalization of drugs. Illegal campers are assaulting people and recently shooting at people. There is a substantial amount of police and sheriff calls to these homeless camps where people are abusing drugs. Meth labs blowing up, assaults, drug dealing, a person attacked and killed by a dog, fires, criminal activity. Several months ago it was reported that in a 10 month period, 1500 calls were made to Hunnell Road where there was a homeless camp that spanned about 5 blocks. 1500 calls equate to 5 police calls a day to this small section of illegal campers. These police calls were made to report criminal activities in an area of known drug users. This is not acceptable and is clearly not safe. Law enforcement has their hands tied since drug use is currently legal.

Another example, here in Central Oregon we will not be getting the road maintenance needed during the winter months because ODOT used all the budget on moving homeless camps. So, we are left without safe roads. That is absolutely NOT a reasonable option for us. So, the legislature will have to find funds somewhere else for us to have safe roads and safe roads to transport our food and fuel over the mountain. This is a necessity for us not an optional thing. So, because these funds were spent on those drug users breaking the law with illegal camping, the rest of us are not just penalized but our safety is compromised and we are cut off from getting our necessities transported safely over the mountain. A substantial amount of money is being spent to clean up these "illegal camping" areas. I understand that Deschutes County has paid over 200,000 to clean up just ONE area of illegal campers.

The County also provides trash service, potable water and portable toilets to these campers at taxpayer expense. This money comes from an already stretched budget. They also had a situation that one of the campers physically assaulted a county contractor providing these services to the campers. This is UNSAFE and well beyond reasonable and cannot continue.

We need to seriously re-examine our priorities in Oregon. What happened to "harm reduction" for the law abiding, tax paying and non-drug users in our communities ??

You can fix this and make all drug use a felony as it should be. Keep the treatment portion in place but make mandatory incentives to enter treatment a part of this measure. Bring back the drug courts and offer the 3 off ramps and following the LEAD model suggested by the coalition to fix ballot measure 110. Stop the harm to our communities and to our children by supporting these suggestions. Make our communities safer by enacting measures that work. Fix Measure 110 to return our communities to what they were before measure 110.

Thanks for your consideration.

*Tammy Harty*

Tammy Harty, Licensed Professional Counselor

Additional feedback after listening to the testimony today:

I agree that we need to provide methadone or Buprenorphine for people in active treatment programs. I don't support the use of these drugs being administered instead of their drug of choice when they are not in an active treatment program. They need to be in active recovery or treatment to have access to these drugs.

Underlying conditions that drive drug use need to be addressed. How you get in the door is not as important as getting them there. There has to be a legal consequence to drug use. As reported in the testimony today, 2.5% people think they need treatment. 2.5% is not enough people to voluntarily enter treatment which is the reality and brings us to the current situation. Not very many people will voluntarily enter treatment. Something else needs to happen to get them in treatment and get them to stop using fatal drugs. This truly is a life-or-death situation.

LEAD Model – collaborating to get coordination of care and potentially setting aside a criminal charge if they successfully complete recovery. Recovery is non linear and takes many partners and consistently. Need to take seriously the issues in our community. People can refer a potential offender that is known to engage in drug activity – business refer, public defender, members of the public refer as a crime prevention strategy . Participation and evaluation stops the legal process. But the legal process is the incentive and that is a strong incentive to not only engage but to complete recovery. This model focuses on early interception and accountability while protecting the community.

Narcan – there is a push to distribute Narcan as harm reduction but there are no statistics about how effective these interventions are. What happened with those that were dosed ? Did they enter treatment or did we dose them again and again. How effective were the funds for that intervention? Did it reduce drug use or are we just spending money without a positive reduction of drug use? I want to know those facts.

Peer programs – I support increasing those programs. The stats shared were that 13% of those contacted by a peer support person were able to get them engaged in treatment. This is an important piece of reducing drug use. I have been involved with Veteran peer support mentors in a substance use program here locally and I see first hand how important they are in this recovery process.

Funding for in-patient treatment programs. The testimony presented that there is 50% more capacity for in-patient treatment programs. Are these programs not staffed fully because there are not clients waiting or is there really an unmet need for beds in those programs? What are the issues around staffing ?? An important question to get answered before funds are allocated to those positions or programs.

Pursue solutions based on science and have results that show success in reducing drug use and reducing harm to the community. Patti Adair, Deschutes County Commissioner has suggested that we have space in an existing facility in Central Oregon – specifically in Jefferson county – Deer Ridge – that could be utilized for treatment programs and options. Let's find a way to utilize that facility.