

Submitter: Blue Valentine
On Behalf Of:
Committee: Senate Committee On Early Childhood and Behavioral Health
Measure, Appointment or Topic: SB1573

I am writing in opposition to SB1573. Syringe Service Programs (SSPs) are a needed service in Oregon. The part of the bill that I have the biggest issue with is the rebuttable presumption that discarded paraphernalia is from an SSP. While SSPs distribute these items, they also have disposal programs that provide free disposal. There are retailers, including pharmacies, that sell syringes or other paraphernalia- and they do not offer free disposal. In many Oregon counties, free biowaste disposal is limited to syringe service participants. In a handful of Oregon counties, free biowaste disposal is available for anyone who injects any drug for any reason- insulin, HRT, GLP-1 medications, IVF medications, etc. This means that many people who inject drugs prescribed by a medical provider do not have access to free disposal of those syringes.

If syringe litter and paraphernalia in communities is the issue, I would like to see funding for an increase in access to proper disposal, such as drop boxes, and even SSPs engaging in community cleanups. Data shows that communities with SSPs have less syringe litter than communities without SSPs. SB 1573 is written in a way that could force some programs to stop providing services altogether, and if that happens, these communities are likely to see even more syringe litter than they do now.

I would also like to address the concerns of many people who are supportive of SB 1573, who believe that SSPs increase and enable or encourage drug use. SSPs act as a bridge to connect participants to an array of other health and social services. A Seattle-based study found that people who had used an SSP were about three times more likely to substantially reduce their drug injections or stop injecting altogether than those who didn't, over one year of follow-up. Data also shows that new users of SSPs are 5 times more likely to enter drug treatment and almost 3 times more likely to stop using drugs than persons who do not use SSPs.

References

<https://pubmed.ncbi.nlm.nih.gov/22209091/>
<https://www.rstreet.org/research/how-harm-reduction-prevents-syringe-litter/>
<https://pmc.ncbi.nlm.nih.gov/articles/PMC7407057/>