



Dear Chair Reynolds, Co-Chair Anderson and committee members,

My name is Lorren Sandt, Executive Director of the Caring Ambassadors Program. The Caring Ambassadors Program is a national nonprofit advocacy organization based in Oregon City, Oregon. Caring Ambassadors has empowered patients to be advocates for their health since 1997. We provide education, support, and advocacy for people living with chronic diseases, focusing on lung cancer and hepatitis C. We oppose SB 1573 and ask you to side with the evidence-based syringe service programs that save lives throughout Oregon.

Oregon has one of the highest mortality rates from hepatitis C in the country. SSPs are an evidence-based practice shown to prevent the spread of HIV/HCV/OD and to increase access to treatment services. Any reduction in service access will harm our public health efforts. There may be more cases of skin and soft tissue infections, and higher rates of HIV and hepatitis C. (Population-based trends in hospitalizations due to injection drug use-related serious bacterial infections, Oregon, 2008 to 2018, 2020, pp. 2950-2957). With limited access to clean syringes, people may reuse or share them, increasing health risks.

Research published in 2021 shows that people who use opioids in rural areas may have a higher risk of overdose because they have less access to naloxone. Syringe service programs are important sites for distributing this life-saving medicine. If access to these programs goes down, fewer people may enter substance use treatment. Syringe service programs help connect people to withdrawal management and treatment, and mobile or outreach programs make it easier by reducing barriers like distance, transportation, and stigma.

Research shows that mobile syringe programs are especially good at collecting used syringes because they reach people and places that fixed sites cannot. With this legislation, there could be more syringe litter. (Implementation and first-year operating costs of an academic medical center-based syringe services program, 2021) In Oregon, rural and frontier areas rely on these programs to collect many used syringes and help reduce public syringe litter. (Harm Reduction and SSP Planning and Resource Manual, 2024)

The bill would let private individuals, not just government agencies, enforce the law by filing a civil lawsuit. Anyone, even if they are not directly affected, could sue a syringe service program they believe is operating a mobile or temporary site within 2,000 feet of a school or a licensed childcare facility. Allowing civil lawsuits will cripple already underfunded programs, with no evidence that the syringe litter originated from any program.

The OHA Hepatitis Elimination Plan relies on SSPs to achieve HCV elimination. Please vote no on 1537.

Sincerely,

A handwritten signature in black ink that reads "Lorren Sandt".

Lorren Sandt, Executive Director