

Submitter: michael workman

On Behalf Of:

Committee: Senate Committee On Early Childhood and  
Behavioral Health

Measure, Appointment or Topic: SB1573

I am opposing Oregon Senate Bill 1573 (SB 1573), a bill that would ban syringe service programs (SSPs) from operating mobile or temporary sites within 2,000 feet of schools or licensed child care facilities - even though SSPs deliberately choose locations based on where people are already using, so services can actually reach the people who need them. The bill goes further by creating a private right of action, meaning any person can sue an SSP for alleged violations and it stacks the deck with a rebuttable presumption that any discarded syringes or "drug paraphernalia" found within the 2,000-foot zone must have come from an SSP - forcing the program to prove otherwise in court, even without direct evidence. This approach would drain already underfunded programs with legal risk and litigation costs, and it would hit rural communities especially hard. Rural communities often have limited access to syringe services and "just move somewhere else" often means "don't operate at all." At a time when Oregon's public health agencies are emphasizing the urgent need for stronger prevention and screening, noting that Oregon is among the worst in the nation for hepatitis C death rates, we should be expanding proven, community-based services, not legislating them into fewer places with even more barriers.