

Chair Reynolds, Vice Chair Anderson, and Members of the Committee,

My name is Robert Dannenhoffer, MD. I am a pediatrician and chief health strategist for Douglas Public Health Network. I respectfully but strongly oppose SB 1573.

Syringe Service Programs (SSPs) are a vital, evidence-based component of the continuum of care for people who use substances. Our program in Douglas County has a long record of providing many services to those in Douglas County, including naloxone distribution and syringe services.

SSP's reduce the risk for contracting HIV and Hepatitis C by decreasing the sharing and reuse of needles. SSPs are proven to reduce the transmission of infectious diseases such as HIV and Hepatitis C, and they are a key public health strategy for preventing costly injection-related infections and complications.

SSP's are exchange programs. Used equipment is exchanged one for one for clean equipment. In these programs, syringes and needles are preserved by users, as they can be exchanged for clean equipment. Just as our bottle bill has tremendously reduced cans and bottles along roadsides, syringe service programs can actually reduce the likelihood of improperly discarded equipment.

SSP's are a gateway to treatment. At each exchange, users are offered treatment and there are many anecdotal incidences of successful treatment starting at the program. These programs are also a critical part of Oregon's overdose prevention infrastructure. SSPs are among the largest distributors of naloxone, reaching community members at the highest risk of overdose death and often serving as a first point of contact for life-saving education and support.

This bill will affect all communities, as a 2000-foot buffer leaves very little available space for mobile clinics to operate. For rural communities, this issue is especially urgent. Many of our small communities are geographically small and a 2000-foot buffer makes service to those communities almost impossible. For example, Glendale is a small and underserved town in Southern Douglas County with an elementary school in the middle of town. A 2000-foot buffer includes almost the entire town, making service to this community nearly impossible.

Lastly, syringe use is common for medical diseases including diabetes, migraine, metabolic diseases and weight loss. To make the legal assumption that any needle or syringe found is from a syringe service provider is unworkable and could lead to the malicious planting of syringes so as to collect the \$5000 "bounty."

Our community cares deeply about drug use and we have come up a workable solution that allows these services to continue, while addressing concerns in the community.

I urge you to oppose the solution proposed in SB 1573 and allow communities to find solutions that will work for them.