

Testimony 03/02/2023

H.222 Prevention and Treatment of Opioid-related Overdoses.

For the record I'm Samba Diallo Executive Director of the AIDS Project of Southern Vermont, serving Windham and Bennington Counties. Thank you for allowing me to be here today.

I fully support the harm reduction approaches of this bill trying to reduce the number of overdoses and to keep people alive. I will talk more about sections 2 and 3 of the bill since Theresa Vezina and Laura Byrne have spoken about other parts of H.222 already.

Section 2. Opiate antagonists like naloxone have been proven to increase the survival rate of people experiencing an overdose. Compact, discrete and easy to use opiate antagonists provide an effective way to respond in an overdose situation. Though a lot of work has been done, access has been and continues to be an issue in the rural areas of Vermont, our overdose outreach grant that we had this past year helped us to have boots on the ground for Naloxone distribution and education in Windham and Bennington Counties. Both access to antagonists and medication for opioid use have traditionally been difficult. Expanding prescription for medical providers, expanding guidelines for other organizations such as syringe exchange programs, hospitals, medical and community providers, would be a life saving measure in the area allowing low-barrier access to treatment. Having Naloxone boxes in businesses, restaurants, schools and public areas would also be helpful, we have fire extinguishers and AEDs in most places, naloxone boxes would play the same role in saving more lives.

Section 3. We support access to drug PARAPHERNALIA such as sterile syringes, and all other harm reduction supplies provided by syringe service program without the fear of facing any legal issues for the participants we serve. Additionally, as we think about implementing drug checking programs, participants or staff bringing in small samples of substances intended to be tested by a syringe service organization should all be protected. We are currently able to do it because we're participating in a pilot program with Brandeis University testing the drug supply that travels through the I-91 corridor. With our FTIR machine we are able to confirm that Xylazine is now in Vermont, one of the first samples from Bennington County had a large amount of XYLAZINE or tranq in it. XYLAZINE or tranq is a veterinary tranquilizer, what is scarier is that Narcan doesn't work against it, it is causing more overdose and causing wounds that we've never seen before which means more trips to the emergency room for our participants. Through Brandeis University the AIDS Project has MOUs with Windham and Bennington Counties District Attorneys protecting our staff, and giving us the permission to have samples intended for testing. I would recommend a state wide approach instead of having each SSP do the work in the counties they serve to secure an MOU. It would be great to see something like the Good Samaritan law not only to give syringe service program permission to do drug checking, but also to protect our participants who are bringing in small amounts of samples to be tested.

Thank you for your time and for the work you're doing for all Vermonters.