



March 25, 2024

Re: H. 72: Overdose Prevention Centers

The [National Health Care for the Homeless Council](#) represents [300 community health centers](#), [130 medical respite programs](#), advocacy networks, medical care providers, and housing support service providers. Last year, the HCH Community provided primary care, behavioral health, and support services for approximately 1 million unhoused individuals across the country. **As health care providers, we understand the widespread devastation caused by the overdose crisis and urge the Vermont Senate to pass H.72 to support the creation of overdose prevention centers.** It is critical that we empower the state with evidence-based, clinically supported tools in order to save lives.

According to the Vermont Department of Health, the rate of fatal opioid overdoses across the state has nearly doubled in the past five years.¹ The overdose crisis in Vermont is acute and leaves no county unaffected, with 266 Vermonters dying of a fatal overdose in 2022 alone.² It is imperative to take decisive action to reduce the preventable harms overdose-related deaths cause to Vermonters and their communities.

As an organization united around providing low-barrier, comprehensive services to individuals experiencing homelessness, we emphatically support overdose prevention centers. Overdose prevention centers can be critical sites of service provision, often offering sterile supplies, overdose reversal intervention, HIV and hepatitis testing, and drug checking, services that have become especially crucial given the high rates of cross-contamination within the drug supply.

All evidence points towards the essential role overdose prevention centers play in reducing overdose-related deaths. Overdose prevention centers have been demonstrated to reduce public drug use, save millions of dollars in health care expenditures that would otherwise be paid for by local governments, decrease behaviors related to infectious disease transmission, and reduce drug-related emergency room and hospitalization rates, all while saving hundreds of lives annually.³ The integration of minor medical care and wellness services can vastly improve the health and stabilization for some individuals who lack access to healthcare and may experience worse outcomes resulting from the lack of early intervention.

¹*Substance Use Dashboard*. Vermont Department of Health. (n.d.). <https://www.healthvermont.gov/alcohol-drugs/plans-reports/substance-use-dashboard>

²*The Data is Clear: The Current Approach to Drugs is Not Working to Keep Vermonters Safe, Harms Individuals and Families, and Wastes Resources*. DECRIMINALIZE VERMONT. (n.d.). <https://decrimvermont.org/facts>

³*Facts About Overdose Prevention Centers*. Drug Policy Alliance. (2023, June 12). https://drugpolicy.org/wp-content/uploads/2023/06/DPA-OPCs_FactSheet.pdf



In 2021, the first legal overdose prevention centers in the United States opened in New York City. In only their first year, 636 overdoses were reversed, ten times the city's original estimates.⁴ Recent studies on community impact have demonstrated the overdose prevention centers in New York City did not increase crime in the surrounding areas.⁵ Rather, overdose prevention centers reduced the number of incidents that may have resulted in a emergency medical response while decreasing public drug use. Rhode Island recently became the first state to authorize an overdose prevention center, expected to open this year. The Massachusetts Department of Health has also recommended that the Commonwealth implement overdose prevention centers.⁶ We urge Vermont to join our neighboring states as national leaders in the fight against the overdose crisis.

We are encouraged by the actions of the Vermont House, which voted in favor of overdose prevention centers in January. Overdose-related deaths are preventable, and should be considered a vital part of the continuum of care for people who use drugs and are unsheltered. We urge the Senate to follow in passing H.72 to support the development of overdose prevention centers in Vermont.

If you wish to discuss the issue of overdose among people experiencing homelessness, the need for overdose prevention centers, or health care for this population broadly, please contact me at bdipietro@nhhc.org.

Sincerely,

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Senior Director of Policy

⁴ *Baseline Report*. OnPoint NYC. (2023). https://onpointnyc.org/wp-content/uploads/2023/12/ONPOINTNYC_OP CREPORT_small-web1.pdf

⁵ Chalfin, A., del Pozo, B., & Mitre-Becerril, D. (2023, November 13). *Overdose prevention centers, crime, and disorder in New York City*. JAMA Network Open. https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2811766?utm_source=For_The_Media&utm_medium=referral&utm_campaign=ftm_links&utm_term=111323

⁶ *Overdose Prevention Center Feasibility Report* Mass.gov. (2023, December). <https://www.mass.gov/lists/overdose-prevention-reports>