



TESTIMONY

Joint New York Senate Task Force
On Opioids, Addiction, and Overdose

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Good morning members of the Task Force, Senate staff, everyone who traveled here from across the state to share your experiences, expertise, and wisdom, and especially the people here who have been directly impacted by this crisis. I don't want to waste any time talking about the scope of this crisis, but do however want to say clearly that our response as a State and nation has not come anywhere close to matching that scope. I also want to urge you to re-think how we are even framing and talking about what is happening, because it is crucial for how we address it moving forward.

We are not in an "opioid crisis," and certainly not in an "opioid epidemic." We are in a crisis of what the CDC has called "deaths of despair." Life expectancy is dropping in the United States, and drug-related deaths are certainly contributing in a significant way. However, we must be clear that drug-related deaths and overdoses are not the disease, but a symptom of the larger condition. We very much are in an income inequality crisis, an affordable housing crisis, and a healthcare crisis. Social and economic decline are directly linked with overdose rates, and this is no coincidence. We are also facing the problems resulting from an approach to drug policy rooted in criminalization and war; we know that most people who die of a drug overdose are using with other people, but all too often people are afraid to call for help for fear of being arrested and jailed. And we know communities of color are being hard hit by overdose deaths in places like the Bronx, as are low income and rural communities like Broome County. People across our state – especially people of color and low income people -- are being hit especially hard by decades of a failed drug war.

Also important to note is that drug-related harm and deaths are rising for all substances, not just opioids. And yet, our response is still extensively focused on just that one class of drugs. Fentanyl, benzodiazepines, tranquilizers, and other substances have found their way into the drug supply making this a critical time for anyone who uses drugs. At the same time, people with chronic pain are being forcefully tapered or cut off of medications they need, ultimately turning them to the much more dangerous illicit market. Some even commit suicide. The things that we know universally to be needed if we are to really "end" this and future crises are more related to the social safety net than to specific drug policies. We know that investment in housing, healthcare, evidence-based substance abuse and mental health treatment do yield the kinds of results we want.

As for what we can do practically right now, we know what all signs point to. I've been blessed to have worked with people who use drugs for my entire career, helping them navigate systems designed to fail them under criminalization and prohibition. Like everyone, I have lost people close to me to overdose and drug-related deaths and as a result am painfully aware of what those amazing human beings actually needed to stay alive and get better. As a public health professional, I also know too well what all the research and data tell us. **We must ultimately decriminalize use and possession of all substances.** We must also divest from law enforcement, coercive systems of care, and incarceration, and move those resources to the structural safety nets and basic needs everyone needs to thrive – in particular housing and healthcare. This is the solution staring us in the face, but the question is whether we have the political and cultural will to do so. I challenge this Task Force to take the leadership necessary to make that happen.

I said I wanted to urge you to rethink and reframe the problem here. So in addition to what I have outlined above, I want to note a handful of other actions you can take this next legislative session to save lives and improve health:

- Decriminalize possession of syringes (S875) and all harm reduction supplies,

- Provide greater investments in harm reduction programs by significantly increasing funding to the New York State Department of Health's Office of Drug User Health,
- Establish a separate line of funding for naloxone so State agencies don't have to use their already strained budgets for this life-saving tool,
- Authorize and fund overdose prevention centers/safer consumption services (Rivera S498) -something the Governor has promised to do, but not followed through on,
- Establish and fund robust low-threshold medication treatment programs in all settings including corrections (S4808, S2161B),
- Pass parole reform like Senator Benjamin's Less Is More NY (S1343B),
- Decriminalize sex work (Salazar S6419) and pass the bill repealing the walking while trans ban (Hoylman S2253),
- Eliminate the use of solitary confinement by passing the HALT solitary bill (Sepulveda S1623), and
- Fully implement the historic bail reform – and fight efforts to roll it back

Last, please listen to people who use drugs and their loved ones for direction on what needs to be done, not law enforcement. Despite widespread beliefs that increased criminal penalties lead to decreases in drug use and drug-related crime, there is no evidence showing that. Punishing people just doesn't work and only increases harm. We have a reputation as New Yorkers of banding together in hard times to pull ourselves and each other out of harm's way. I challenge all of us to do so right now. This is life and death.

Thank you for your time and attention, I am happy to discuss this matter further should you wish to do so.

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