

My name is Van Asher and I am the Harm Reduction Services & Syringe Access Program Manager at St. Ann's Corner of Harm Reduction. We are an agency that is entering our 30th year of working in the Bronx to reduce and eliminate opiate overdose, HIV, Hepatitis C, Injection related harm and the associated stigma that is associated with the working class of people that use drugs. We are a solutions-based organization that first addressed the HIV epidemic by making sterile injection equipment available to PWID (people who inject drugs) at a time when the incidence of HIV infection was at 65%. As a result of making sterile equipment accessible and through educational efforts that number has dropped to under 3% today. The NYCDOHMH believes that the incidence of new injection-related HIV infections in NYC will be in the zero percentile by 2020; let that sink for a minute. Many people think Syringe Service Programs just give out syringes, to clear up that fact, SSP's have been the number one referral source into abstinence-based treatment for decades in NYC. But how long will someone remain abstinent if they cannot integrate into the community? SACHR's solution is to keep people engaged in their wellness through acupuncture, case management, showers, meals and a full spectrum of services that anchor their wellness within the community.

We at St. Ann's were the first program in the United States to offer Fentanyl Urine Test Strips to our programs participants teaching them how to use them as a tool to prevent accidental fatal overdose at a time when illicitly manufactured fentanyl is responsible for 58% of the accidental overdoses last year. We have written and produced the educational material that the NYCDOHMH, the Correctional Service Canada and that BTNX (the makers of the test strips) use on their websites.

We provide access to low threshold buprenorphine for our program participants where people can be screened, prescribed for and receive treatment on the same day.

Annually we train about 1000 Bronx residents in overdose prevention, recognition and response and we provide Naloxone kits to them so they now can Save Lives by preventing accidental overdose in their communities, their parks, and their homes.

While these are all great approaches, we are still losing too many people due to the street drug supply being poisoned due to a lack of quality control due to the illicit nature of street drugs and outdated drug laws due to punitive prohibition.

We need to look beyond punitive prohibition for solutions. One public health initiative recommended by our Department of Health and approved by Mayor deBlasio are evidence-based Opioid Overdose Prevention Centers. Opioid Overdose Prevention Centers are not a new concept. OPCs have been operating in Europe for decades-- without a single fatality in them. I've volunteered in at the one in Copenhagen. On May 22nd, 2009 at John Jay College of Criminal Justice, Joyce Rivera, SACHR's founder and CEO, along with Bart Majoor SACHR's Deputy Director were two of the lead presenters at a Conference on Safe Injection Facilities or OPCs. The problem of unintended opioid overdose not new. We talk about the overdose epidemic as if this just happened when there has been one in the Bronx for decades. Unintentional opioid overdose has been the number two killer of Latinos and African Americans in NYC for the last 15 years. A next step for the realization of an Opioid Overdose Prevention Center rests with Governor Cuomo. And Governor Cuomo needs to hear from not just from us, but from the members of this committee.

People often get upset at the idea of Overdose Prevention Centers for various personal reasons and "Not in My Backyard" is often their common cry! Well, unsafe consumption has become a local and national

epidemic. Doing the same thing and being surprised with the same outcome is the quintessential definition of crazy. It's also bad policy.

But understand, Safe Consumption already exists in your backyard and on almost every corner. They're called bars; restaurants; bistros; clubs. They're where people gather to use a common substance in a regulated, controlled, safer environment. Zoning laws, breathalyzer tests, age requirements and drug regulation are some of the ways our society has made drug consumption of alcohol safer. We can make the consumption of illicit drugs safer too.

Overdose Prevention Centers will also address the litter issue. In a bar, a bottle of beer is consumed and the bottle, in this case, is the litter that will be discarded at the bar. Open consumption is also penalized by a ticket. In an OPC a used syringe would be discarded safely in the center. Thinking that people will start to use a drug merely because it is there, is unfounded fear-mongering. People don't drink alcohol because of liquor stores. Nor do they read the hotel room bible because it is in the hotel room. OPCs are evidenced-based because evaluation data exist from over 100 OPC sites worldwide. Like research on SEPs, a common evaluation finding is that people engaged in OPCs, are likelier to seek treatment for their opioid dependence. Additionally, there is the misnomer that people will wander in and begin using. There is an intake process at these centers. Similar to a bar you'd need to show identification, be of a certain age and meet certain requirements for entry.

The problem of unintended opioid overdose has been created not just by the misuse of opioids, nor the advent of designer fentanyl-heroin/cocaine—but because we have been successful at shaming, demonizing, and selectively criminalizing drug use. Our approach drives an underground economy that is unsafe for everyone; whether you're a first time user or an experienced user, hidden and isolated drug use means that no one can find you when you most need it. That coupled with outdated drug laws have allowed the Bronx ground zero for fatal overdose.

Nationwide if the South Bronx were its own state in 2017 (most recent data) we would have been ranked # 2 per capita for fatal overdose. We keep hearing that we can't arrest our way out of this but then a special task force was created to investigate every overdose as a crime scene which I am afraid will only push our numbers in the wrong direction.

So please let the Governor know that every 6 hours a New Yorker dies of an accidental preventable overdose, last year at this time it was one every 7 hours. Please ask him to support Overdose Prevention Centers before it becomes one every 5 hours.