



WHCP & NYHRE

United for Change



Terrell Jones' Testimony on Behalf of New York Harm Reduction Educators



Today, I am here to speak from my experience as an Outreach and Advocacy Manager at New York Harm Reduction Educators who currently provides services throughout the South Bronx every morning and who goes home every day to my apartment in Hunts Point. Living and working in the Bronx, I know all too well what we need in our community.

The reality of this situation is that there will always be drugs in our community and there will always be people who use them. Just like history has shown us, the drugs themselves may change but they will always be here. People are using alone and in public spaces because they have nowhere to go and no one to go with them to keep them safe. There is fear and a lack of trust in the community. People are suffering because they need medical care and the insurance to cover it. They face stigma when they try to access health care. They become homeless and their housing options do not support people who are actively using drugs. They look for a job and hear they won't hire people with a record or with recent drug use history. They look for and undergo treatment and come out of rehab or detox to the same issues they went into treatment with. They don't reach out to families and friends for fear of losing the love and the support they have – or their family itself – when children are taken away because they disclosed their use.

What is the solution for a system that isn't only broken, but also breaks people and their communities? People who use drugs are human beings who deserve a right to housing, to public space, to services and support, to treatment, to meaningful work, to love and to get family support. We will have to work together to stop this crisis. We must give people their rights back and recognize their humanity. The people I see working the hardest to give people who use drugs their rights back and to center them in community are my colleagues in harm reduction.

When I talk about harm reduction services and safer consumption spaces, I hear “not in my backyard,” but we harm reductionists are out here trying to clean up our backyard, working

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to prevent public use, arrests and incarceration; providing education, resources, and referrals; cleaning up syringe litter and offering people safer disposal options; and teaching people how to prevent and how to intervene in overdoses. Harm reduction organizations – and I mean New York States 23 syringe service programs need support, too; we cannot do this on our own. This Senate Task Force and the community must step up. We need to fund our syringe service programs to provide Drop In Centers in highly impacted areas and to hire more frontline staff to reach community members in need where they are. We need to protect people from police harassment, by decriminalizing syringes and paraphernalia and preventing police from targeting people receiving services in methadone programs, syringe services programs, syringe kiosks, and even just standing in “high impact zones” where they live. People deserve to access comprehensive treatment and recovery services and SSPs offer just that. Yes, we do give out syringes and collect them, but we do so much more than that- holistic services, mental health, medical services (including HIV and HCV treatment and prevention), benefits navigation, overdose prevention and education, safer drug use and safer sex education.

People need a safe place to use and easy access to rehab, detox, medical, holistic, and mental health services; we must all work together to serve our community. A demonstration for how we can work together to stop this epidemic is the Bronx Opioid Collective where we see syringe service programs, OASAS treatment programs, local businesses, faith-based organizations and elected officials going out into the community together to offer supports and resources that people who use drugs deserve.

Thank you for the opportunity to speak.



Joint Policy Opioids, Addiction and Overdose Prevention Platform for New York Harm Reduction Educators & Washington Heights Corner Project



We see the change from a Republican-led Heroin Task Force to a Democratic-led Task Force on Opioids, Addiction and Overdose Prevention and we hear you, our communities have been torn apart by criminalization and stigma. Heavy-handed policing won't heal or conceal the physical and emotional pain that drives people to use, and mandating people into treatment rarely helps rebuild up or recreate the stability people need to stand on their two feet.

Changing the tide of this epidemic means centering people who use drugs as community members and reinstating their rights:

- To live in subsidized or supportive housing
 - Remove regulations from housing that kick people out of their housing when they need stability most or when they are actively using
 - Increase access to long-term housing support
 - Intentionally house people who use drugs (Housing First)
- To access safer spaces
 - Provide 24-hour Drop In Center and Overdose Prevention Services in highly impacted areas
 - Link people to Drop In Centers and other services instead of pursuing loitering and quality of life charges
 - Protect people who access services at MMTPs, SSPs, syringe disposal kiosks (etc) from being targeted by police for quality of life charges
 - Pilot safer consumption spaces as a research study or declare a public health emergency and open them statewide
 - Immediately implement mobile and fixed site overdose prevention facilities to hard hit areas across NYS
- To access harm reduction services
 - Decriminalize syringe and paraphernalia possession.
 - Expand funding for all NYS' 23 existing syringe service programs (SSPs) to operate mobile, office or satellite locations and to deliver peer-delivered syringe exchange
- To access health services
 - Prevent laws, policies and procedures (drug-induced homicide laws, overdose-related investigations) from creating a barrier to accessing emergency medical services
 - Increase SSPs capacity to provide medical, mental health, addiction treatment (buprenorphine and methadone) and holistic services through expanded Drug User Health Hub funding
 - Remove insurance restrictions that prevent people who use drugs from getting necessary medical treatment (e.g. hepatitis C treatment restrictions)
- To access their treatment of choice
 - Increase low threshold access to treatment (MAT) through SSPs and other community providers
 - Reform treatment to increase access to long-term supports
 - Expand treatment into jails and prisons
 - Build out the infrastructure to access cannabis as treatment and adherence support



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- Pilot lower threshold methadone programs operated by SSP's and consider removing restrictions
- To professional development and access to meaningful work
 - Reduce or eliminate work restrictions that bar people with drug-related felonies from meaningful work
 - Support job training programs integration into harm reduction and treatment programs
- To have families and to rebuild family relations
 - Stop mitigating women's access to treatment by taking children away from mothers with recent drug use history or active drug use
 - Increase supports available to rebuild families post- drug-related incarceration or during drug treatment