

Harm Reduction Protections for Medical Practitioners, First Responders

SB 511 by Sen. John Michael Montgomery and Rep. Carol Bush

SB 511 will reduce unsafe dirty needles in our communities, protect first responders and connect more Oklahomans to addiction recovery services amid an addiction crisis caused by the pandemic. This bill allows medical practitioners, law enforcement, tribes and registered social service entities to administer harm reduction syringe service exchange programs with careful oversight by the State Department of Health. No state funds can conduct these programs.

Protecting Public Health and Safety

- **COVID-19 has rapidly increased drug addiction and deaths.** Deaths from synthetic opioid overdose, alone, have increased by at least 50 percent in Oklahoma since the pandemic began.ⁱ
- Harm reduction programs **reduce drug use** by connecting individuals to treatment who otherwise wouldn't get it. Participants enter treatment **5X more often.**ⁱⁱ
- Needles are already here – that's why we need this. Needles are re-used, shared, and left out in the open or unsafely put in the trash. Syringe exchange programs have resulted in an **86 percent reduction in needles on sidewalks and in parks.**ⁱⁱⁱ
- These programs **reduce the spread of infectious diseases** like HIV and Hepatitis C.^{iv} Oklahoma's rate of HIV and Hepatitis C has increased in recent years due to opioid and subsequent heroin use.^v

Protecting Law Enforcement and First Responders

- 1 in 3 officers will experience a needle stick injury over the course of his or her career.^{vi} Approximately 25 percent will experience more than one needle stick injury.
- Syringe programs have been shown to **reduce law enforcement needle stick injuries** by as much as 66 percent by keeping streets cleaner.^{vii}
- In other states, the rate of **violent crime has decreased** due to the implementation of programs like these.^{viii}

Right for Oklahoma

- Numerous **conservative states** have realized these benefits and allowed such programs, including West Virginia, Indiana, Ohio, Kentucky, North Carolina, North Dakota, Louisiana, Tennessee, Virginia and Nebraska.^{ix} While Governor of Indiana, Mike Pence authorized such a program in 2015.^x
- These programs **save money.** The Institute of Medicine estimates that each syringe program may produce up to \$50,000 in savings per each prevented spread of HIV.^{xi}

SB 511 Coalition



Oklahoma
Psychiatric
Physicians
Association



Tulsa County
Sheriff
Vic Regalado

Lawton Police
Chief James
Smith



Oklahoma Conference
of Churches



References

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ⁱⁱⁱ Center for Disease Control and Prevention. "What are Syringe Service Programs?" www.cdc.gov/ssp/docs/SSP-Infographic_print.pdf

^{iv} Center for Disease Control and Prevention. "HIV and Viral Hepatitis." www.cdc.gov/hiv/pdf/library/factsheets/hiv-viral-hepatitis.pdf

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