

Q&A from Seminar #1 – Harm Reduction

Is there an age limit for those utilizing Syringe Service Provider (SSP) services?

Any person age 18 or older can utilize SSP services.

How many needles can be exchanged at once?

Prior to the declaration of a public health emergency due to the global pandemic, there was a 1-1 limit on exchanging needles. Executive Order 27 signed by Governor Mills in March has removed this limit during the period of the public health emergency (currently extended to Oct. 1), so a person can exchange one needle for as many needles as they need. This expanded approach is recommended by the World Health Organization, the federal CDC and is followed throughout the world as a best practice in improving the health of the intravenous drug-user population. The CDC is currently reviewing whether to remove this limit permanently.

What are the laws and repercussions (criminal or other) surrounding syringe possession?

The Maine Criminal Code provides that illegal possession of hypodermic apparatuses is a Class D crime which is punishable by up to 364 days incarceration and a \$2,000 fine. But it is an affirmative defense to prosecution under this section that the person possessing the hypodermic apparatuses is enrolled in a hypodermic apparatus exchange program that is certified by the Department of Health and Human Services, Maine Center for Disease Control and Prevention and is transporting the hypodermic apparatuses to the program. Provisions in L.D. 1492 considered by the 129th Legislature would decriminalize possession of hypodermic needles. While an amended version of the bill including this provision has an Ought to Pass report from the Criminal Justice Committee, the bill was still pending floor action when the legislature adjourned in March.

Is there a plan for harm reduction and SSP in Aroostook County?

Yes there is a SSP planned for Caribou, and the local recovery centers in both Caribou and Houlton are proponents of harm reduction methodology. The current SSPs are in 8 counties with more expected in 3 additional counties. For a list of locations, check here: <https://www.maine.gov/dhhs/mecdc/infectious-disease/hiv-std/services/syringe-service-programs.shtml>.

Is there a cost to utilizing SSPs? Are all or some of these costs covered by insurance?

No, there are no costs for those accessing SSP services. It is provided free of charge to those who enroll.

Are there any laws that protect drug users or their friends in the event of an overdose?

In 2019, Governor Mills signed LD 329 An Act To Exempt from Criminal Liability Persons Reporting a Drug-related Medical Emergency. This so-called Good Samaritan Law prevents a person who, in good faith, seeks medical assistance for a person experiencing a drug-related overdose or who is themselves experiencing a drug-related overdose and is in need of medical assistance from being arrested or prosecuted for a violation of laws prohibiting the possession of scheduled drugs, acquiring drugs by deception, the possession of hypodermic apparatuses and the use of drug paraphernalia or a violation of probation, if the grounds for arrest or prosecution are obtained as a result of the person's seeking medical assistance or experiencing a drug-related overdose.

What is meant by the decriminalization of substance use?

Broad decriminalization is the effort to change the laws around drug and paraphernalia to change criminal sanctions into civil penalties (i.e. a fine) or remove them all together. This model has been done in countries in Switzerland and Portugal, and was common practice in the United States until the early 20th century.

What can I do to help?

Volunteer at your local SSP, recovery center, or non-profit community center. Educate yourself on SUD, anti-stigmatizing language, and the principles of harm reduction. Share your concern about those living with SUD and the services they require with your elected officials.

Will the powerpoint be available after the seminar?

The powerpoint slides are available under the resources tab of the Seminar Series website.

I was struck by the percentage of your patients (about 60%) were on medication for OUD. Is this the case nationally as well?

Dr. Thakrar: In our harm reduction study, 66% of participants were on medications for opioid use disorder (i.e. buprenorphine, methadone) prior to their hospitalizations. Generally speaking, however, opioid use disorder is undertreated in the United States (in 2016, SAMHSA estimated only ~18% of people with OUD were on medication for opioid use disorder).

What does the term reuptake refer to in user-speak?

This term has several different meanings. Dr. Thakrar's study team defined naloxone 'uptake' as use of naloxone used on the study participant, or the participant using naloxone on someone else. It can refer to what was traditionally called relapse. Re-use or reuptake is considered a less stigmatizing term. It may have additional meanings as well.

Why is licking needles common practice?

Sometimes people may lick needles to recover residual drug after the evacuation of air bubbles. This practice poses a risk of exposure to oral bacteria.