



**Testimony of Ingrid Gillespie, President of the Connecticut Prevention Network and
Executive Director of Communities 4 Action
Concerning Governor's Bill No. 6856**

AN ACT CONCERNING SUBSTANCE ABUSE AND OPIOID OVERDOSE PREVENTION

Senator Gerratana, Representative Ritter and members of the Public Health Committee, my name is Ingrid Gillespie, President of the Connecticut Prevention Network. The **Connecticut Prevention Network (CPN)** is an association of the state's 13 community partnership **Regional Action Councils (RACs)** that work to provide every community in the state with education, training, and advocacy for substance abuse prevention and related community concerns such as behavioral health, violence, gambling, drunk driving, prescription drugs and illicit opioid abuse and suicide.

The Connecticut Prevention Network strongly supports the Governor's Bill 6856 as it exemplifies a multi-strategy approach that supports both prevention and harm reduction strategies. Many of these strategies were outlined in a 2013 Trust for America's Health report titled Prescription Drug Abuse: Strategies To Stop the Epidemic. In this report, Connecticut met 8 out of the 10 recommended strategies but was missing:

- Mandatory use of the Prescription Monitoring Program. Presently only 2500 out of 26,000 Connecticut prescribers are using the Connecticut PMP which presently requires signing up but does not require use.
- Required or recommended prescriber education

The Governor's bill addresses these gaps.

However, key recommendations also from the report that are not in the Governor's bill include:

- Educating the public about the risks of prescription drug use; an ongoing strategy involving CPN, Governor's Prevention Partnerships and Youth Service Bureaus.
- Increase understanding about safe storage of medication and proper disposal of unused medications. The Connecticut Prevention Network spearheaded the Medication Drop box initiative in collaboration with the Department of Consumer Protection (DCP) which is now in 57 communities and has collected 16,000 pounds of unwanted medication. CPN members also support communities who organize take back programs.

These strategies are also very important to reducing demand (i.e. Education) and to reducing access to unwanted and unused medications. Note that it is also important that the tactical approach to implementing changes include measures to ensure active engagement of all

stakeholders. This is something that CPN and other members of the SAMHSA Prescription Drug Abuse Policy for Connecticut also recognize as important.

A 2013-2015 strategic map from the Association of State and Territorial Health Officials (ASTHO) also includes the strategies outlined in the Governor's bill and others such as SBIRT (Screening, Brief Intervention and if needed referral to Treatment); a strategy supported by DMHAS SBIRT initiative and by CPN through training at the local and regional levels.

Connecticut Prevention Network also supports harm reduction strategies outlined in this bill through active participation on the Connecticut Opioid Overdose Prevention Task Force. The bill supports increased access to nalaxone which is so important to reducing overdose deaths and helping people get one step closer to treatment. CPN members also support harm reduction strategies through organizing regional trainings, identifying pharmacies who carry the opioid antagonist, finding local prescribers for nalaxone and disseminating information to recognize and respond to opioid overdoses. We also integrate the efforts of the statewide task force into regional opioid task forces formed through CPN members.

In summary, CPN supports the Governor's Bill no. 6856 and hope that we can play an active role its implementation.

Thank you,

Ingrid Gillespie
President, Connecticut Prevention Network
Executive Director, Communities 4 Action