## TESTIMONY IN SUPPORT OF HB 720 Criminal Law – Drug Paraphernalia for Administration – Decriminalization

TO: Hon. Luke Clippinger, Chair, and members of the House Judiciary Committee FROM: Ju Nyeong Park, PhD MHS, Assistant Scientist at Johns Hopkins School of Public Health

DATE: February 18, 2020

Dear Chairman Clippinger and Committee members,

My name is Ju Park and I am an epidemiologist and a faculty member at Johns Hopkins University. The views that I express are mine and not those of Johns Hopkins University. My research and teaching focuses on the opioid epidemic; I have provided technical advice to the Maryland Department of Health and the Maryland Opioid Operational Command Center established by Governor Larry Hogan. I have lived in Baltimore City for 9 years.

Health agencies and law enforcement are currently working at cross-purposes in Maryland regarding opioid use disorder. On one hand, we understand that the prevention and treatment of overdose and infectious diseases among people experiencing addiction is a key priority, but paradoxically, we continue to punish those suffering from addiction by arresting them for their addiction, including for exhibiting evidence of drug use.

House Bill 720 is a commonsense bill designed to protect those living with addiction by striking language on drug paraphernalia criminalization. Drug paraphernalia includes syringes and cookers - the same tools given out by health departments and community-based organizations to help prevent the spread of infectious diseases such as HIV and Hepatitis C. Rest assured that this bill does not include items used to manufacture or distribute drugs.

Research shows that criminalizing drug paraphernalia possession poses a major barrier to prevention efforts. Being stopped or arrested for paraphernalia is a common occurrence: annually affecting a quarter of people surveyed in our studies. People who are stopped by police, experience police violence, or fear being arrested are far less likely to access harm reduction services that provide lifesaving sterile syringes and naloxone. People who have their syringes confiscated by police are more likely to share syringes, which is a HIV and Hepatitis C hazard. Placing such legal barriers to service access can cause major infectious disease outbreaks, which end up costing taxpayers far more to manage. Those who are released from prison have been observed to be at 12 times higher risk of overdose death. This is in part due to losing their tolerance to opioids during incarceration and barriers to medication-assisted treatment in the community. We also know that communities of color and homeless individuals are far more likely to be targeted by these laws, and regularly searched, and arrested using paraphernalia laws.

Drug addiction is a treatable medical condition and jail is not treatment. We do not arrest people diagnosed with hypertension, depression or lung cancer to coerce them into treatment. We should stop arresting people for having a drug addiction. It is expensive and ineffective. Instead of encouraging cycles of arrest and recidivism, we should be helping individuals towards pathways of recovery. I urge you to give this commonsense measure a favorable vote. Thank you for your consideration.

Sincerely,

Ju Nyeong Park, PhD MHS

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- <sup>v</sup> Park, J. N., Footer, K. H., Decker, M. R., Tomko, C., Allen, S. T., Galai, N., & Sherman, S. G. (2019). Interpersonal and structural factors associated with receptive syringe-sharing among a prospective cohort of female sex workers who inject drugs. *Addiction*, *114*(7), 1204-1213.
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