

January 19, 2021

The Honorable Luke Clippinger
Chairman, House Judiciary Committee
Room 101, House Office Building
Annapolis, MD 21401

House Bill 372 (Criminal Law – Drug Paraphernalia for Administration - Decriminalization) -
FAVORABLE

Dear Chair Clippinger and House Judiciary Committee members,

Thank you for the opportunity to provide written testimony during the 2021 Maryland Legislative Session. My name is Lauren Ojeda, and I am a public health professional, Baltimore City resident, and case manager at a local federally-qualified health center. I am testifying in support of House Bill 372 (Criminal Law – Drug Paraphernalia for Administration - Decriminalization), a bill that would modify—and vastly improve—existing criminal law to support our community’s health and safety by decriminalizing possession of drug paraphernalia.

During the 2015, 2016, and 2018 Maryland General Assembly sessions, legislation was passed to repeal the criminal prohibition of cannabis-related paraphernalia,ⁱ the possession of certain drug paraphernalia for individuals in syringe service programs,ⁱⁱ and items to test substances, (e.g., fentanyl test strips),ⁱⁱⁱ respectively. Despite this previous legislation, there is much to be done to further efforts to decrease both the prevalence deaths due to overdose and preventable disease transmission. While the 2016 legislation to expand syringe service programs was an essential first step, many individuals who use drugs lack access to existing programs and the creation of new programs has been time-intensive. Additionally, current paraphernalia laws do not provide explicit protection for other critical life-saving supplies such as safer-smoking kits, which substantially decrease the risk of overdose and transmitting HIV and Hepatitis B and C via blood transmission.^{iv} Among non-injecting people who use drugs, there is still a high risk of contracting Hepatitis, respiratory infections such as tuberculosis, and potentially COVID-19, of more recent concern.^v The lack of access to sterile, new supplies has been identified as the primary factor individuals share paraphernalia, use damaged paraphernalia, and resort to using make-shift paraphernalia, (e.g., creating a pipe out of discarded cans), the last of which increases the risk of harmful chemical exposure from materials found in the improvised item.^{vi} Furthermore, economic analyses have demonstrated that averting infection of the aforementioned illnesses provides significant savings in lifetime medical costs. Research has indicated lifetime savings of \$618,000 for individuals with AIDS^{vii} and Hepatitis C.^{viii}

While genuine concerns that passing HB 372 may have unintended negative outcomes may exist, these hypothetical consequences have been meticulously and unambiguously disproven by evidence-based research. Federal research has repeatedly found that access to sterile supplies does not increase drug use; ^{ix} instead, individuals who seek sterile supplies from programs such as syringe service programs have a reduced risk of contracting disease and are

more likely to decrease injection drug use, stop injection drug use, seek and begin treatment for substance use disorder, and maintain participation in treatment. ^x In my own work as a case manager, I have seen the material consequences for clients who lacked access to sterile supplies and now bear the weight of managing HIV and Hepatitis C along with other co-occurring illnesses incurred from years of homelessness. This confluence of experiences can easily lend itself to isolation and the worsening of treatable conditions. When health and financial burdens of disease management are coupled with pervasive stigma associated drug use, individuals are relegated to the margins of a socially-constructed reality built upon—and perniciously maintained by—inequity. In criminalizing the possession of these supplies, we obstruct access to the informed and autonomous pursuit of recovery and stability. Given the essential role that support from peers with lived experience of substance use play in an individual’s treatment,^{xi, xii} our actions have far wider ramifications in either suppressing or supporting entire communities. If we do not actively encourage the health of our neighbors and communities, we contribute to their plight.

The individual, community, and financial benefits of extending these protections to additional paraphernalia provide compelling evidence to pass HB 372. This bill will amend Maryland’s existing paraphernalia laws to be in accordance with years of evidence-based health research and provide much needed clarity and support to all affected by this matter. I thank the Judiciary Committee for their commitment to affording all members of our community dignity and safety, and I earnestly ask that you give HB 372 a favorable report.

With appreciation,

Lauren Ojeda, MPH
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ⁱ Criminal Law – Use and Possession of Marijuana and Drug Paraphernalia (2015). SB0517 (CH0004)

ⁱⁱ Public Health – Opioid-Associated Disease Prevention and Outreach Program (2016). SB0097 (CH0348)

ⁱⁱⁱ Criminal Law – Prohibitions, Prosecutions, and Corrections (2018). SB1137 (CH0145)

^{iv} Stöver, H.J., Schäffer, D. SMOKE IT! Promoting a change of opiate consumption pattern - from injecting to inhaling. *Harm Reduction J* 11, 18 (2014). <https://doi.org/10.1186/1477-7517-11-18>

^v *ISSUE BRIEF: SMOKING SUPPLIES FOR HARM REDUCTION*. CdpH.ca.gov. (2020). Retrieved 14 January 2021, from https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IssueBrief_SmokingSupplies_Web_ADA.pdf.

^{vi} *ISSUE BRIEF: SMOKING SUPPLIES FOR HARM REDUCTION*. CdpH.ca.gov. (2020). Retrieved 14 January 2021, from https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/IssueBrief_SmokingSupplies_Web_ADA.pdf.

^{vii} Schackman, Bruce R., et al. The Lifetime Cost of Current Human Immunodeficiency Virus Care in the United States. *Medical Care*. 44 (11):990-997 (2006).

^{viii} Winnipeg Regional Health Authority, Population and Public Health Program. Safer Crack Use Kit Distribution in the Winnipeg Health Region. October 2012. Find at: <http://sagecollecon.ca/en/system/files/scukdistribuoonthewinnipeghealthregion-revisedoct2012.pdf>

^{ix} National Commission on AIDS, *The Twin Epidemics of Substance Abuse and HIV* (Washington DC: National Commission on AIDS, 1991); General Accounting Office, *Needle Exchange Programs: Research Suggests Promise as an AIDS Prevention Strategy* (Washington DC: US Government Printing Office, 1993); Lurie, P. & Reingold, A.L., et al., *The Public Health Impact of Needle Exchange Programs in the United States and Abroad* (San Francisco, CA: University of California, 1993); Satcher, David, MD, (Note to Jo Ivey Bouffard), *The Clinton Administration’s Internal Reviews of Research on Needle Exchange Programs* (Atlanta, GA: Centers for Disease Control, December 10, 1993); National Research Council and Institute of Medicine, Normand, J., Vlahov, D. & Moses, L. (eds.), *Preventing HIV Transmission: The Role of Sterile Needles and Bleach* (Washington DC: National Academy Press, 1995); Office of Technology Assessment of the U.S. Congress, *The Effectiveness of AIDS Prevention Efforts* (Springfield, VA: National Technology Information Service, 1995); National Institutes of Health Consensus Panel, *Interventions to Prevent HIV Risk Behaviors* (Kensington, MD: National Institutes of Health Consensus Program Information Center, February 1997).

^x Hagan, H et al. (2000). Reduced injection frequency and increased entry and retention in drug treatment associated with needle-exchange participation in Seattle drug injectors. *Journal of Substance Abuse Treatment*.

^{xi} Pettersen, H., Landheim, A., Skeie, I., Biong, S., Brodahl, M., Benson, V., & Davidson, L. (2019). Helpful Ingredients in the Treatment of Long-Term Substance Use Disorders: A Collaborative Narrative Study. *Substance abuse : research and treatment*, 13, 1178221819844996. <https://doi.org/10.1177/1178221819844996>

^{xii} Pettersen, Henning et al. “How Social Relationships Influence Substance Use Disorder Recovery: A Collaborative Narrative Study.” *Substance abuse : research and treatment* vol. 13 1178221819833379. 9 Mar. 2019, doi:10.1177/1178221819833379