



*MDDCSAM is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.*

February 12, 2021

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

HB 271 Public Safety – Law Enforcement Diversion Programs  
**FAVORABLE**

Chairman Clippinger and members of the Judiciary Committee,

My name is Malik Burnett and I am an addiction medicine physician at the University of Maryland Medical Center and completed my residency training in preventive medicine at Johns Hopkins School of Medicine, and I am writing to you today on behalf of the MD-DC American Society of Addiction Medicine (MDDCASAM) in favor of the passage of HB 271 which would facilitate the establishment of Law Enforcement Assisted Diversion (LEAD) programs statewide.

**Given the nationwide calls for racial justice, reallocating resources, and reforming use of force tactics within police departments; programs like LEAD are an excellent first step towards achieving the aforementioned goals as these programs reorient law enforcement officers away from force and towards service.** By supporting the developing of LEAD programs, law enforcement officers will receive more training and be better equipped to deal with the wide range of mental, behavioral, and substance related issues which they encounter on a daily basis.

In addition to being directly responsive to the public calls for police reform, the establishment of LEAD programs are directly correlated with improved societal outcomes. After the establishment of LEAD in Seattle in 2011, the University of Washington conducted a multi-year analysis which revealed that **participants in the LEAD program had 58% lower odds of arrest, 38% lower odds of felony prosecution, and 60% reduction in recidivism compared to a control group.**<sup>1</sup> These results applied at scale have the ripple effects of lowering overall criminal justice system costs, decreasing the collateral consequence burdens of a criminal conviction on members of the community, and improving police community relations.

Currently, nine cities and jurisdictions across the state have already taken steps to plan or initiate LEAD programs. By passing HB 271, the General Assembly can create mechanisms to support these

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<sup>1</sup> Collins, S. E., Lonczak, H. S., & Clifasefi, S. L. (2017). Seattle's Law Enforcement Assisted Diversion (LEAD): program effects on recidivism outcomes. *Evaluation and program planning*, 64, 49-56.

jurisdictions in their efforts as well as encourage the remaining cities and jurisdictions to implement LEAD programs within their communities. **Furthermore, the Department of Health's Center for Harm Reduction Services is currently collaborating with the Governor's Office of Crime Prevention, Youth and Victim Services to provide technical support to jurisdictions which are interested in implementing these programs, this legislation serves to strengthen that collaboration.**

**Overall, the establishment of LEAD programs serves as a means of *de facto* decriminalization of drug laws**, wherein jurisdictions can establish systems to change the way law enforcement officers practice the law in lieu of changing the drug possession laws themselves. In both instances the community stands to benefit as people are able to get help instead of punishment. This is a fundamental goal of MDDCASAM; thus, we encourage a favorable report of this legislation out of committee.

Sincerely,

G. Malik Burnett, MD MBA MPH

Board Member, Maryland DC American Society of Addiction Medicine