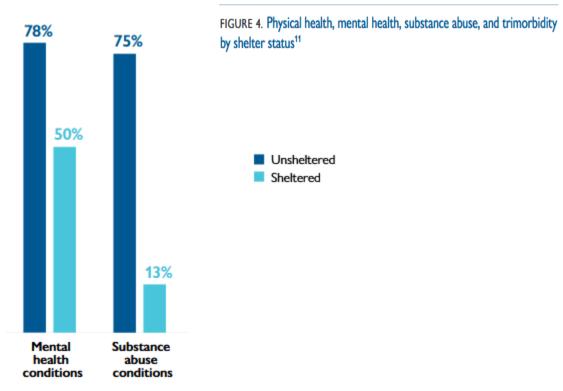
Testimony in Opposition to HB0488

Criminal Law - Use or Possession of a Controlled Dangerous Substance - De Minimis Quantity Christine L. Miller, Ph.D. Neuroscientist, author and citizen of Maryland Cmiller@millerbio.com

- Substance abuse is associated with a high risk for major mental illness: Niemi-Pynttari et al., 2013 <u>https://www.psychiatrist.com/jcp/article/Pages/2013/v74n01/v74n0115.aspx</u> Starzer et al., 2017 <u>https://ajp.psychiatryonline.org/doi/abs/10.1176/appi.ajp.2017.17020223?rfr_dat=cr_pub%3Dpubmed&url_ver =Z39.88-2003&rfr_id=ori%3Arid%3Acrossref.org&journalCode=ajp</u>
- > Mental illness is associated with a much greater risk for homelessness (see next page)
- Seattle should be considered a test case for what happens when there is decriminalization of all drug use (see pages 3-6 for overviews of homelessness reports from Seattle and Washington State).
- > We don't want Baltimore to become another Seattle
- Without a threat of criminal charges, there is little incentive for addicts to change, i.e. to remove themselves from their environment on the streets in order to try recovery programs (as seen in Seattle)
- Drug court programs can be constructed in a non-punitive way. Montgomery County has an excellent program which should become the model for the entire state, and perhaps even improved upon: to ensure transportation to drug education/treatment/community service, as well as requiring that employers give time off for these efforts, much as what is done for National Guard duty. The State could pay the lost wages for first time offenders who complete the program. It would be money well spent.
- The amount listed for de minimus exceed the adult LD50 for many of the drugs (see last page); if the sponsor had any concern for public health, the de minimus amounts should have been lowered to the LD50 of a toddler, as too often young children are exposed to these drugs in the home

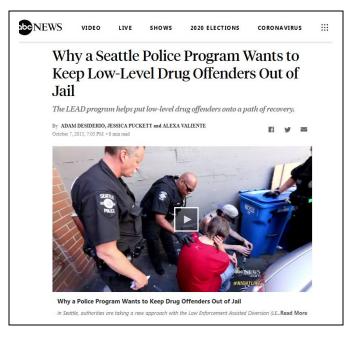
Proportion of homeless individuals who have mental Illness from a study in California, very many with a substance abuse disorder (recreational drugs often responsible for chronic psychotic disorders like schizophrenia, Niemi-Pynttari et al., 2013; Starzer et al., 2017):

https://www.capolicylab.org/wp-content/uploads/2019/10/Health-Conditions-Among-Unsheltered-Adults-in-the-U.S.pdf



And 68% of the mentally-ill homeless are reported to have a schizophrenia spectrum disorder: <u>https://pubmed.ncbi.nlm.nih.gov/23703373/</u>

The Example of Seattle, October, 2015 a decriminalization pilot program



https://abcnews.go.com/Health/seattle-police-programlow-level-drug-offenders-iail/storv?id=34317585

"Users who join LEAD get a counselor like Najja Morris. Morris works with the police to make sure users are supported in recovery and to help users feel part of society again by finding them housing and medical care......"

Morris told "Nightline." "We work for them and show up for them, and eventually they decide they're going to work and show up for themselves."

Decriminalization of Drugs in Seattle (the defacto policy became official)

Public Safety

No charges for personal drug possession: Seattle's bold gamble to bring 'peace' after the war on drugs



June 11, 2019

June, 2019

Seattle police officer Felix Reyes, left, and Washington Department of Corrections Officer Zachary Vaders speak to a man suspected of drug paraph possession last month. (Daniel Berman for The Washington Post)

By Justin Jouvenal June 11, 2019 at 7:02 p.m. EDT

SEATTLE — Police officers sprang from a black patrol van on a recent day, surrounding two men smoking crack on a gritty downtown block. The officers asked for ID and confiscated a homemade pipe fashioned from glass and surgical hose..

https://www.washingtonpost.com/local/public-safety/no-charges-for-personal-drug-possession-seattles-boldgamble-to-bring-peace-after-the-war-on-drugs/2019/06/11/69a7bb46-7285-11e9-9f06-5fc2ee80027a story.html

Impact on the City

Is Seattle Dying? Homelessness, Addiction, and Death in the Emerald City

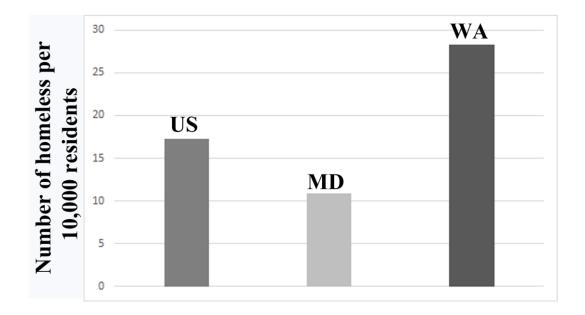
https://www.northpointwashington.com/blog/is-seattle-dying-from-addiction/

Aug, 2019

What's Happening in Seattle?

To give you some insight into why we feel it is so important to publish this article, here are some fast facts that might put the situation into perspective:

- Addiction, homelessness, and relaxed law enforcement policies have created the perfect storm. The city has been overrun with crime, unfavorable living conditions, homeless encampments, and public drug use.
- Homelessness is at an all-time high. There are currently at least 12,000 people without adequate shelter in Seattle. People are sleeping in the streets in front of prominent local businesses and retail locations. Tent cities are everywhere.
- Addiction is overrunning the city. There was a record number of overdose deaths in 2018. As a result, Seattle now has a commonly known nickname "Junkie Town."
- Crime is being committed in record numbers. Property crime is now two-and-a-half times higher than Los Angeles and four times higher than New York City. The city continues to experience regular burglaries, car jackings, business break-ins and other property losses due to theft.



The Degree of Homelessness in Washington State as compared to Maryland and the US

https://www.usich.gov/homelessness-statistics

(2019 data)

Suit suggests drug abuse, not pricey housing at root of Seattle's homeless problem

https://komonews.com/news/project-seattle/suit-suggests-drug-abuse-not-pricey-housing-at-root-of-seattles-homeless-problem



Sept. 2019

Opinion

Seattle, no national model, enables addiction and ignores public safety

Sep. 10, 2019 at 2:59 pm | Updated Sep. 10, 2019 at 5:07 pm



Sept. 2019

Volunteers use grabbers to pick up needles and dispose of them in sharps containers in Seattle's Montiake neighborhood. (Beutina Hansen / The Seattle Times, File)

https://www.seattletimes.com/opinion/seattle-no-national-model-enables-addiction-andignores-public-safety/

Continued.....

Seattle considers excusing misdemeanors, including assault, for homeless, drug addicts

December, 2020

Homicides and violent crime rates are up in the city

As record-setting homicides continue, the <u>Seattle Police Department</u> is facing a critical shortage both in officers and <u>funding</u>.

Another 33 officers left the force over the past two months, according to <u>reporting</u> <u>from KTTH Radio host Jason Rantz</u>.

In a Friday interview on <u>"America's Newsroom,"</u> Rantz told host Trace Gallagher that it's important to focus on the "greater context" of "what's happening in Seattle."

"We have this culture of lawlessness. We have a prolific offender problem where pretty much the same 100 or so individuals keep breaking the <u>law</u>, not seeing any punishment, and then doing the same thing over and over and over again," he explained. "And so, all vou're doing is making it easier for those people to continue that behavior. <u>https://www.foxnews.com/politics/seattle-considers-excusing-misdemeanors-including-assault-for-homeless-drug-addicts</u>



Prev: Email threats against Sawant from city account... (01/21/21) Next: CHS on Converge: Inauguration Day protests,... (01/21/21)

Amid record spike in overdoses and with money to spend, Seattle and county still working on plan for 'supervised consumption'

Posted on Thursday, January 21, 2021 - 7:03 am by Jake Goldstein-Street

Supervised drug consumption sites have been a bone of contention in the city for years, but could Seattle see progress this year?

The Seattle City Council included in its 2021 budget \$1.12 million specifically for health services for drug users after approving funding earmarked for facilities meant to give space to use opioids or other drugs with medical supervision multiple times in recent years, but that was never spent.



https://www.capitolhillseattle.com/2021/01/amid-record-spike-in-overdosesand-with-money-to-spend-seattle-and-county-still-working-on-plan-forsupervised-consumption/ January, 2021

Amounts as allowed by HB0488 as compared to the LD50

Drug	Amount allowed in HB488	LD50 (mg) reported for a 154 lb* person- equivalent	Reference organism
Heroin	1000 mg	1575 mg*	Mouse, i.v. exposure
Cocaine	2000 mg	1470 mg**	Dog, i.v. exposure
LSD	40 "user units" ^a which could be as high as 6mg (150 ug each)	4.2 mg *** thought to be much less toxic for humans; highly variable, but death can occur from behavior	Elephant, s.c. exposure
Methadone	40 "user units"; can be as high as 40 mg per unit ^e = 1600 mg	1300 mg per person (18.75 mg/kg)	Rats ^d
MDMA, ecstasy	1000 mg	1820 mg**	Guinea pig, i.p. exposure
Amphetamine	1000 mg	500 mg****	Human****
Oxycodone	40 tablets; can be as high as 80mg ^b = 3200 mg total	2400 mg according to Purdue Pharma, mice ^c ; complicated by crushing which can cause fatalities with much lower doses	Mice ^c

(LD50 = dose that kills 50% of humans of average weight)

for user units of LSD^a: <u>https://www.news24.com/health24/Lifestyle/Street-drugs/Psychoactives/LSD-basics-20120721</u>

https://www.rxlist.com/oxycontin-drug.htmb

https://www.purduepharma.com/wp-content/uploads/2015/07/OxyContin-Tablets-23-Apr-15.pdf^c

d Chevillard L, Mégarbane B, Risède P, Baud FJ. Characteristics and comparative severity of respiratory response to toxic doses of fentanyl, methadone, morphine, and buprenorphine in rats. Toxicol Lett. 2009 Dec 15;191(2-3):327-40. doi: 10.1016/j.toxlet.2009.09.017. Epub 2009 Oct 9. PMID: 19819313.

e https://reference.medscape.com/drug/methadose-dolophine-methadone-343317

*MSDS sheet, Cayman Chemical Company; LD50 reported per kg, converted to pounds; note that a thin, 110 lb teenage girl would be much more likely to die from a total dose of 1000 mg heroin than a 180 lb teenage boy for example.

**Gable RS. Comparison of acute lethal toxicity of commonly abused psychoactive substances. Addiction. 2004; 9(6):686-96.

***Hoffman A. LSD: My problem child. Oxford University Press and The Beckley Foundation. Translated 2013.

**** "The toxic dose of amphetamine varies widely. ... Severe reactions have occurred with 30 mg, yet doses of 400 to 500 mg are not uniformly fatal. Larger doses can be tolerated after chronic use of the drug."[Hardman, J.G., L.E. Limbird, P.B. Molinoff, R.W. Ruddon, A.G. Goodman (eds.). Goodman and Gilman's The Pharmacological Basis of Therapeutics. 9th ed. New York, NY: McGraw-Hill, 1996., p. 220]