



March 7, 2023

The Honorable William C. Smith, Jr.
Chairman, Senate Judicial Proceedings Committee
2 East Miller Senate Office Building
Annapolis, MD 21401

Senate Bill 532 Criminal Law - Overdosing in Public - Prohibition - UNFAVORABLE

Dear Chair Smith and Senate Judicial Proceedings Committee members,

Baltimore Harm Reduction Coalition (BHRC) is an advocacy organization that mobilizes community members for the health, dignity, and safety of people targeted by the war on drugs and anti-sex worker policies. As a certified Overdose Response Program, Naloxone distributor, and syringe service program, we have provided essential health care services across the state for years. To protect the program participants served by us and dozens of other harm reduction programs across the state, BHRC strongly opposes Senate Bill 532 (Criminal Law - Overdosing in Public - Prohibition).

Our state is facing an increasingly deadly overdose epidemic. During 2021, drug and alcohol related intoxication deaths in Maryland reached a staggering 2,824 fatalities.¹ Maryland legislators have taken laudable steps to reduce the devastation of the overdose crisis, such as expanding access to the life-saving medication naloxone, increasing behavioral health treatment, and establishing syringe services programs throughout the state. While these essential policies have increased opportunities for wellness, our state must continue to look for new ways to reduce overdose risk and move people into spaces of safety and stabilization. We hope that is the intent of this bill. However, we disagree that criminalizing people for overdosing in public will achieve that.

The theory that people who use drugs need to be arrested in order to begin treatment is incredibly misguided and results in disproportionately negative outcomes for Black people and poor people. To those who are unfamiliar with them, drug courts sound like an improvement, but in reality they rely on, and give rationalization for, mass arrests of people who use drugs. The people who are most likely to be arrested for overdosing in public are poor people facing housing insecurity who do not have an alternative place to use. Drug court requires participants to attend regular court hearings, maintain a daily curfew, participate in mandatory treatment and undergo frequent drug testing. This poses massive barriers for poor people without stable housing and access to transportation, increasing the likelihood they will "fail" and be incarcerated. Even though it is widely understood that relapse is a common part of recovery, the drug court model equates relapse with criminal recidivism.

¹Opioid Operational Command Center (2022). Maryland Overdose Dashboard.

Evidence has shown that when there is less fear of punishment or arrest by police, individuals feel safer accessing treatment.² In a recent literature review of involuntary treatment, five of the nine studies analyzed found no significant reduction in drug use or criminal recidivism among people who were mandated to attend treatment, while two found it actually worsened those measures.³ In an assessment of opioid-related fatalities, the Commonwealth of Massachusetts discovered that people who received voluntary treatment had much better outcomes than those who received mandated treatment. **People who received mandated drug treatment were more than twice as likely to die of an opioid-related overdose than those with a history of voluntary treatment and no history of mandated treatment.**⁴

SB532 will push the most vulnerable people who use drugs in our state further into the margins. It will encourage people to hide their drug use as much as possible, and perpetuate cycles of poverty and incarceration for those who don't have access to safe spaces to use drugs. This bill will undermine Maryland's efforts to encourage people to call for help at the scene of an overdose via the Good Samaritan law. More of our loved ones and community members will die if we pass this legislation. **For these reasons, we urge the Senate Judicial Proceedings Committee to give SB532 an unfavorable report.**

For more information about Baltimore Harm Reduction Coalition or our position, please contact our Director of Mobilization, Rajani Gudlavalleti at rajani@baltimoreharmreduction.org

² Laura VeARRIER, "The Value of Harm Reduction for Injection Drug Use: A Clinical and Public Health Ethics Analysis," *Disease-a-Month* 65, no. 5 (May 2019), pp. 119–41, available at <https://doi.org/10.1016/j.disamonth.2018.12.002>.

³ Werb D, Kamarulzaman A, Meacham MC, et al. The effectiveness of compulsory drug treatment: A systematic review. *Int J Drug Policy*. 2016;28:1-9. doi:10.1016/j.drugpo.2015.12.005

⁴ Massachusetts Department of Public Health. *Assessment of Massachusetts Opioid-Related Deaths: Preliminary Findings*. 2016. <https://d279m997dpfwgl.cloudfront.net/wp/2016/08/DPH-Legislative-Report-Ch.-55-Status-Report.pdf>