

KEITH LOTRIDGE DEPUTY PUBLIC DEFENDER

MARYLAND OFFICE OF THE PUBLIC DEFENDER POSITION ON PROPOSED LEGISLATION

BILL: SB 546 POSITION: Support Date: March 8, 2023

The Maryland Office of the Public Defender respectfully requests that the Committee issue a favorable report on SB 546.

My name is Timothy Bradford and I am an Assistant Public Defender in Caroline County, Maryland.

I support this bill because I believe this bill will save lives. We must shift the focus from criminalizing drug use to encouraging life saving measures when an overdose occurs. We must stop charging and prosecuting Victims of addiction.

Drug overdose deaths continue to be a crisis in Maryland. According to the Maryland Overdose Data Dashboard, overdose deaths from Fentanyl and Heroin went down by 602 death between October 2021 to October 2022 but still over 2100 people died from overdoses in Maryland.¹

Good Samaritan laws are written to encourage bystanders to assist in emergency situations without fear. This is important because in emergency situations, such as drug overdoses, seconds count and making the choice to aid someone in calling for help in a life-threatening situation can be the difference between whether someone lives or dies.

Maryland's current Good Samaritan law currently covers any kind of overdose but does not provide the clarity needed to protect the victim of the overdose or medical emergency from with the same immunity from arrest, charge, and prosecution as the person calling for help. Many times, because of the lack of clarity, law enforcement officers do not uniformly apply the law, causing confusion within the process.

For example, a public defender in Frederick reported that a police officer used the Good Samaritan law to avoid arrest in an underage drinking case, but not for other Maryland Public Defender clients in Frederick. However, in Anne Arundel County, a public defender reported that multiple cases of children in schools that overdosed on an illegal substance were charged and prosecuted. Children are often scared to ask for help, but in these emergency situations, they need to know that they are protected if they take the life saving measure of calling 911 for help. With this law and further education, officers can more uniformly apply the Good Samaritan law.

¹ Maryland Overdose Data Dashboard/Opioid Operational Command Center, https://experience.arcgis.com/experience/c546d22ec4a946cbb700a282f53c6eb7/.



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Moreover, this distinction is important because if our public health objective is to reduce the number of those harmed by drug use in both children and adults, we should focus on funding access and resources to drug treatment programs, rather than focusing on criminalizing those that need help.² Gov. Larry Hogan said in a statement, "The COVID-19 pandemic has created additional challenges for people suffering from substance use disorder . . . People are hurting and we must continue to increase access to care"³ In times of great distress, where the entire country is battling an opioid epidemic during a pandemic, we must also not add to the issue of mass incarceration, especially when Marylanders are engaging in life saving measures. Lastly, penalizing Marylanders for saving a person's life by calling for help in a drug overdose situation is inherently counterproductive to safeguarding public health. People will not call emergency services if they believe that they will be prosecuted for their involvement in the emergency situation. However, by creating an environment where Marylanders know they will not be arrested, detained, or prosecuted for another offense – which was the intent of the original bill – Marylanders will be much more likely to make the call that would save someone else's or their own life.

For these reasons, the Maryland Office of the Public Defender urges a favorable report on SB 546.

² Chloe Cokburn, Criminalizing dug Users is Killing People, ACLU (February 12, 2014),

https://www.aclu.org/blog/smart-justice/sentencing-reform/criminalizing-drug-users-killing people. 4 Miller, supra note 2

³ Miller, supra note 2.