

Delegate Luke Clippinger
Chair, House Judiciary Committee
Room 101, House Office Building
Annapolis, Maryland 21401

February 9, 2024

**Letter of Support for HB 706:
Drug Paraphernalia Decriminalization**

Dear Chairman Clippinger, Chairwoman Bartlett and Committee members,

I am writing in support of House Bill 706 to end the criminalization of syringes, pipes and other drug use equipment known as drug paraphernalia. As a substance use epidemiologist and Assistant Professor of Medicine at Brown University, former faculty member at Johns Hopkins Bloomberg School of Public Health, and a Maryland resident of 12 years, I have had the privilege of speaking with legislators, service providers, researchers and patients working to reduce drug addiction, overdose, HIV and hepatitis C burden in the United States. It is clear that the criminalization of drug paraphernalia is harmful to communities, exacerbates racial disparities in incarceration rates, and poses a tangible barrier to protecting the public's health that this committee could address this year.

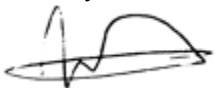
Health agencies and the criminal justice system are currently working at cross-purposes in Maryland in dealing with the fentanyl crisis. On one hand, we understand that the prevention of overdose and treatment of drug addiction requires a public health response, but paradoxically, we continue to punish and stigmatize the same people suffering from addiction by arresting them for exhibiting evidence of drug use. Though it may seem like arrest is the only way to deter people from using drugs, it does far more harm than good. For example, those who are released from prison have been observed to be at 12 times higher risk of overdose death. This bill is a step in the right direction.

Public litter is a major public concern particularly in commercial and residential areas throughout Maryland. Ironically, research shows that people who use fentanyl, heroin and other drugs will often rush their drug use and throw out their used paraphernalia due to the fear of policing and arrest. This is rational behavior for someone who lives in this legal climate, where being caught with a used syringe counts as misdemeanor possession and can include a fine or jail time.

When examining data on arrests and incarceration, it is no surprise that continuing to arrest Marylanders for drug paraphernalia only fuels pre-existing racial disparities, which has enormous ramifications for their pathway to recovery after they are released. By continuing to arrest patients struggling with drug addiction, we are only adding fuel to the fire. Research from our group as well as others have shown that arresting people for carrying drug paraphernalia poses a major barrier to prevention efforts. Being stopped or arrested for drug paraphernalia is a common occurrence affecting 25-50% of people surveyed in our studies. Instead, we should be supporting treatment and naloxone programs, and our syringe exchange programs, which have been hugely successful in reducing HIV and HCV rates.

Although "harm reduction" approaches to drug use may seem counterintuitive, they have been proven to save lives and taxpayer dollars. For example, sterile syringe distribution prevents the spread of costly infectious diseases such as HIV (\$379,668 per patient lifetime) and Hepatitis C (\$84,000 per patient per infection). Naloxone is highly cost effective as shown by multiple studies over the past decade. This bill would support the work of the Maryland Department of Health's flagship syringe services program and help build trustful relationships in the community that will lead to more sustainable paths of recovery and drug treatment in the long-term. I hope that you will consider providing a favorable vote for HB 706. Thank you.

Sincerely,



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References

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