# **2024-02-13 HB 706 (Support).pdf**Uploaded by: Adam Spangler Position: FAV



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February 13, 2024

TO: The Honorable Luke Clippinger

Chair, Judiciary Committee

FROM: Adam Spangler

Legislative Aide, Legislative Affairs, Office of the Attorney General

RE: HB706 Drug Paraphernalia for Administration - Decriminalization- Support

The Office of Attorney General urges a favorable report on House Bill 706, Delegate Cardin's bill to remove Controlled Dangerous Substance ("CDS") paraphernalia used for administration or consumption of CDS (as opposed to paraphernalia for manufacture or distribution) from the criminal prohibitions related to CDS paraphernalia. House Bill 706 also lower the penalties related to CDS paraphernalia used for manufacture/distribution.

As the opioid pandemic has illustrated, drug use and abuse are public health hazards that should be addressed wholistically. Criminalizing drug users, as opposed to treating them, can be costly and counterproductive.

House Bill 706 is a commonsense measure to decriminalize the mere possession of drug paraphernalia. We urge a favorable report on HB 706.

cc: Committee Members

# HB0706\_MHAMD\_FAV.pdf Uploaded by: Dan Martin Position: FAV



Heaver Plaza 1301 York Road, #505 Lutherville, MD 21093 phone 443.901.1550 fax 443.901.0038 www.mhamd.org

#### House Bill 706 Drug Paraphernalia for Administration – Decriminalization

**Judiciary Committee** February 13, 2024 **Position: SUPPORT** 

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of House Bill 706.

HB 706 will redefine "controlled" paraphernalia to support public health and reduce drug war tactics that target drug users. This bill will repeal existing portions of the law that criminalize possession of paraphernalia for personal use and reduce or eliminate the penalty for possession of paraphernalia for delivery or sale.

The public health and safety threat from drug-related intoxication continues to grow. Americans are now more likely to die from opioid overdoses than car crashes. 1 Maryland has made progress in recent years to address this epidemic, but we are still in the midst of a crisis that is devastating families across the state. Over 2,500 Marylanders lost their lives to an overdose from October 2022-September 2023.<sup>2</sup>

Harm reduction strategies like paraphernalia decriminalization can help. In fact, they are a key pillar in the U.S. Department of Health and Human Services' Overdose Prevention Strategy. These strategies aim to treat substance use disorders as a public health issue and reduce negative consequences associated with drug use.

Providing drug users with sterile supplies saves lives. A major evaluation was done by the New York Academy of Medicine after the state allowed for the non-prescription sale of syringes in pharmacies,<sup>3</sup> and evaluators found no increases in improperly discarded syringes, accidental needle sticks among law enforcement or sanitation workers, criminal activity, or drug use.4

By addressing drug use as a public health issue rather than a criminal justice matter, HB 706 will save lives. For this reason, MHAMD supports this bill and urges a favorable report.

<sup>&</sup>lt;sup>1</sup> https://www.nsc.org/in-the-newsroom/for-the-first-time-were-more-likely-to-die-from-accidental-opioid-overdosethan-motor-vehicle-crash

<sup>&</sup>lt;sup>2</sup> https://www.arcgis.com/apps/dashboards/799cc6c21cf94e89a174fa06532febd9

<sup>&</sup>lt;sup>3</sup> https://grantome.com/grant/NIH/R01-DA014219-01S1

<sup>&</sup>lt;sup>4</sup> https://www.health.ny.gov/diseases/aids/consumers/prevention/needles\_syringes/esap/overview.htm

## HB 706\_Paraphernalia Decrim\_BHSB\_FAVORABLE.pdf Uploaded by: Dan Rabbitt



February 9, 2024

#### House Judiciary Committee TESTIMONY IN SUPPORT

HB 706 - Drug Paraphernalia for Administration- Decriminalization

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving over 100,000 people with mental illness and substance use disorders (collectively referred to as "behavioral health") annually.

**Behavioral Health System Baltimore supports HB 706 - Drug Paraphernalia for Administration- Decriminalization.** Decriminalizing the possession and use of drug paraphernalia would promote trust between harm reduction programs and people who use drugs while having a negligible impact on public safety. BHSB urges the General Assembly to support his legislation and focus on saving lives rather than punitive approaches to substance use.

The number of overdose deaths in Maryland has skyrocketed in the last ten years. About 2,500 people die of fatal overdose in the state every year, including 1,000 who die in Baltimore City. Preventing this unconscionable loss of life must be the state's top priority. The continued increase in overdose deaths highlight how important it is to continue to promote harm reduction practices and to treat substance use disorders as a public health issue.

BHSB supports HB 706 because we recognize the criminalization of substance use and paraphernalia often prevents people from seeking treatment and supportive services. Also, current drug paraphernalia laws create a disproportionate impact on people of color further exacerbating inequities in treatment access. Evidence has shown that when there is less fear of punishment or arrest by police, individuals feel safer accessing treatment.<sup>2</sup> HB 706 will reduce the collateral damage caused by incarceration by helping to ensure that people are accessing syringe service programs or carry lifesaving supplies that prevent overdose deaths and the spread of infectious diseases.

Decriminalizing paraphernalia will help prioritize health and safety over punishment and begin to reduce the harm caused by the war on drugs particularly in black and brown communities. **BHSB urges the House Judiciary Committee to support HB 706.** 

For more information, please contact BHSB Policy Director Dan Rabbitt at 443-401-6142

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<sup>&</sup>lt;sup>1</sup> Maryland's Overdose Data Dashboard, available at: <a href="https://stopoverdose.maryland.gov/dashboard/">https://stopoverdose.maryland.gov/dashboard/</a>

<sup>&</sup>lt;sup>2</sup> 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.

## **2024.02.09 HB 706 CCJR FAV .pdf** Uploaded by: E. Flannery Gallagher



#### **TESTIMONY IN SUPPORT OF HOUSE BILL 706**

**TO**: Members of the House Judiciary Committee

FROM: Center for Criminal Justice Reform, University of Baltimore School of Law

DATE: February 9, 2024

The University of Baltimore School of Law's Center for Criminal Justice Reform is dedicated to supporting community driven efforts to improve public safety and address the harm and inequities caused by the criminal legal system. The Center supports House Bill 706.

House Bill 706 decriminalizes the possession and distribution of paraphernalia closely associated with the personal consumption of controlled substances. While it also reduces penalties for the possession and distribution of paraphernalia used to manufacture, distribute, or dispense controlled substances, it does not further legalize or decriminalize any controlled substance. This is the kind of common sense criminal justice policy that removes barriers to treatment, housing, and employment, and facilitates harm reduction measures and evidence-based responses to drug abuse and addiction.

Substance use disorder is among our state's most pressing public health challenges. The criminalization of paraphernalia associated with the personal use of controlled substances perpetuates poverty, exacerbates the medical complications of substance abuse, and discourages people from seeking treatment or supportive services. Furthermore, criminalizing paraphernalia does not prevent or reduce drug use, abuse, or addiction. Meaningfully addressing the twin addiction and overdose epidemics requires that we commit to evidence-based, proactive measures while eliminating out-of-date, counterproductive criminal legal measures.

In addition to other changes, House Bill 706 removes "hypodermic syringe, needle, or any other object or combination of objects adapted to administer a controlled dangerous substance by hypodermic injection" from the definition of "controlled paraphernalia." An overwhelming body of research demonstrates that the criminalization of drug use has a negative effect on HIV prevention and treatment. Decriminalizing the possession of syringes and needles is in line with current public health interventions in Maryland. Baltimore City supports a number of syringe services programs (SSPs), which distribute clean needles and collect used syringes to

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<sup>&</sup>lt;sup>1</sup> Making Drug Use a Crime Makes HIV Prevention, Treatment More Difficult. Johns Hopkins Bloomberg School of Public Health. (2017, May 15). <a href="https://publichealth.jhu.edu/2017/making-drug-use-a-crime-makes-hiv-prevention-treatment-more-difficult">https://publichealth.jhu.edu/2017/making-drug-use-a-crime-makes-hiv-prevention-treatment-more-difficult</a>.

reduce transmission of HIV and other infectious diseases associated with intravenous drug use.<sup>2</sup> Without the passage of House Bill 706, individuals who avail themselves of SSP's life-saving services are at risk of arrest, prosecution, and incarceration.

For these reasons, we urge a favorable report on House Bill 706.

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<sup>&</sup>lt;sup>2</sup> Community Risk Reduction Services. Baltimore City Health Department. (2023, November 27). https://health.baltimorecity.gov/hiv-std-services/community-risk-reduction.

# HB0706\_Testimony.pdf Uploaded by: Gregory Frailey Position: FAV

Feb 9, 2024

The Honorable Senator Luke Clippinger Chair, Judicial Proceedings Committee Room 101 House Office Building Annapolis, Maryland 21401

**RE: SUPPORT of House Bill 0706** 

#### Drug Paraphernalia for Administration - Decriminalization - FAVORABLE

Dear Chair Delegate Luke Clippinger and Judiciary Committee Members,

On behalf of the Good Trouble Church, I am writing to express our unwavering support for HB0706. This legislation will revise existing criminal law by removing items that could be used to consume drugs from their classification as drug paraphernalia. Many of us, including myself, have lived and or living experience with drug use.

For many years, the punitive policies enacted in the name of the racist war on drugs have forced people who use drugs to face incarceration, suffer social and emotional isolation, and engage in risky behaviors that put their health and that of others at risk. We believe that our community and every community in Maryland deserve more. We believe people who use drugs deserve dignity, respect, equitable health care, and justice. HB0706 is a step towards healing instead of harm.

Every scientific and medical organization to study the issue has shown that legal access to sterile supplies reduces the spread of HIV, hepatitis, and other blood-borne diseases. For these health benefits to materialize in Maryland, people who use drugs need to feel as though they can access supplies without law enforcement repercussions.

Allowing people to use drugs more safely with the proper tools is positive for everyone in the communitynot only in slowing/stopping the spread of infectious disease, but also in lifting the stigma that isolates people who use drugs.

In 2021, this bill successfully passed through the general assembly where it was then vetoed by then Governor, Larry Hogan. We hope that under the new administration, this legislation may have an opportunity to once again be codified into law. We urge you to give HB0706 a favorable vote.

Thank You, Greg Frailey Harm Reduction Lead Good Trouble Church 1900 St. Paul Street Baltimore, MD 21218 gregfrailey@gmail.com 717-798-1764

## MVLS Testimony SB 706 Paraphernalia DeCrim In Favo Uploaded by: Heather Heiman



### JUSTICE FOR ALL

# MARYLAND HOUSE JUDICIARY COMMITTEE TESTIMONY OF MARYLAND VOLUNTEER LAWYERS SERVICE IN SUPPORT OF HB 706 CRIMINAL LAW – DRUG PARAPHERNALIA FOR ADMINISTRATION – DECRIMINALIZATION FEBRUARY 13, 2024

Susan Francis
EXECUTIVE DIRECTOR

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My name is Heather Heiman, and I am the Project Manager for the Human Trafficking Prevention Project at Maryland Volunteer Lawyers Service (MVLS). MVLS is the oldest and largest pro bono civil legal service provider to low-income Marylanders. Since MVLS' founding in 1981, our statewide panel of over 980 volunteers has provided free legal services to over 100,000 Marylanders in a wide range of civil legal matters. In FY23, MVLS volunteers and staff lawyers provided legal services to 7,927 people across the State.

In FY17, MVLS started the Human Trafficking Prevention Project, a co-grant project through the Governor's Office of Crime, Control, and Prevention with the University of Baltimore School of Law Human Trafficking Prevention Project Legal Clinic. The Human Trafficking Prevention Project (HTPP) at MVLS is a pro bono project that provides post-conviction relief such as expungement, shielding, and vacatur, as well as assistance with consumer, housing, and family law matters to those who meet the legal definition of a victim of human trafficking, and others who are at high risk for exploitation. Since its inception, the HTPP at MVLS has served over 250 clients who were survivors of human trafficking or at high risk for exploitation, many of whom sought legal help with criminal record relief for drug-related charges and convictions, including possession of paraphernalia. For reasons explained below, MVLS respectfully requests that the Committee returns a favorable report on HB 706.

For many individuals the HTPP serves, substance use is a common predictor of and reaction to their experiences of being trafficked. Many trafficking survivors report self-medicating to cope with what has happened to them while being trafficked. Moreover, traffickers frequently use drugs to recruit and control their victims. Being able to receive and retain safe and sterile supplies without fear of arrest for their possession will improve the health outcomes of trafficking survivors and create further opportunities for their engagement with support services.

The broad understanding that drug supplies are illegal in Maryland, and fear of arrest and convictions for paraphernalia possession, creates additional barriers to trafficking survivors seeking help from law enforcement. After an arrest or conviction for paraphernalia possession, trafficking survivors must then contend with the collateral consequences of involvement with the criminal justice system and proactively seek criminal record relief, a process often acutely re-traumatizing for the survivor.

Through our expungement work, which is a vital part of the HTPP, MVLS has assisted several clients who faced the following scenario:

Law enforcement officers arrest a trafficking victim on suspicion of drug possession, often due to having a mostly empty Ziploc bag, a used pipe, or even remnants of cigar paper discovered in a drawer or glove compartment. Despite the lack of evidence of actual drug possession, the prosecution moves forward with just a paraphernalia charge and drops the possession charge. The person then accepts a plea deal, pleading guilty to the paraphernalia charge; despite the State not meeting their burden of proof that the individual possessed drugs, this person now has a drug-related criminal record that will follow them for ten years or more.

These collateral consequences only trap people in a cycle of abuse and poverty since a criminal record makes it harder to obtain housing or employment.

Moreover, HB 706 helps further the State's efforts to align current law with the Marijuana Legalization Amendment, which allows for the use, distribution, regulation, and taxation of marijuana. Under the current drug paraphernalia criminal statute, law enforcement officers can arrest persons for having paraphernalia used for a drug that (effective July 2023) will be legal.

House Bill 706 would reduce this current harm by clarifying the law and lessening the risk of criminalization and negative health outcomes for trafficking survivors. For these reasons, MVLS supports House Bill 706. We respectfully urge a favorable report.

### HB 706 - SUPP - JUD - FEB 8 - Decriminalize Drug P

Uploaded by: Henry Bogdan



February 13, 2024

## Statement on House Bill 706 Drug Paraphernalia for Administration – Decriminalization House Judiciary Committee

#### **Position: Favorable**

Maryland Nonprofits is a statewide association of more than 1800 nonprofit organizations and institutions. We urge you to report favorably House Bill 706 that will reduce fear and stigma around accessing sterile supplies that equip people to use drugs more safely, reducing risk of overdose and transmission of infectious diseases. These bills are essentially the same as Senate Bill 420 of 2021 which passed both houses but was vetoed by former Governor Hogan.

Maryland continues to lose thousands of community members a year to fatal overdose. Criminalizing people who use drugs is not helping. We must pursue alternatives to the war on drugs.

This bill decriminalizes the possession and use of drug paraphernalia to inject, ingest, inhale, or otherwise introduce in the human body a controlled dangerous substance (CDS). It also repeals the prohibition on possessing or distributing controlled paraphernalia under circumstances, which reasonably indicate an intention to use the controlled paraphernalia for purposes of illegally administering a CDS.

We must recognize the criminalization of substance use and paraphernalia often prevents people from seeking treatment and supportive services. Also, current drug paraphernalia laws create a disproportionate impact on people of color and further exacerbate inequities in treatment access. Evidence has shown that when there is less fear of punishment or arrest by police, individuals feel safer accessing treatment.

House Bill 706 will also reduce the collateral damage caused by incarceration, and by helping to ensure that people are accessing syringe service programs or carry and use lifesaving supplies that prevent overdose deaths and the spread of infectious diseases.

Decriminalizing paraphernalia will help prioritize health and safety over punishment and begin to reduce the harm caused by the war on drugs particularly in black and brown communities.

We urge you to give HOUSE BILL 706 a favorable report.



## HB 706 - JUD - MDH -LOS (1) (1).pdf Uploaded by: Jason Caplan



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

February 13, 2024

The Honorable Luke Clippinger Chair, House Judiciary Committee Room 101, House Office Building Annapolis, MD 21401-1991

RE: House Bill 706 - Drug Paraphernalia for Administration - Decriminalization

Dear Chair Clippinger and Committee members:

The Maryland Department of Health (Department) respectfully submits this letter of support for House Bill (HB) 706, which aims to decriminalize drug paraphernalia.

The Department believes HB 706 is necessary to destignatize substance use disorder and demonstrate that it is a public health issue, rather than a criminal justice one. Criminalizing the possession of drug paraphernalia reinforces the idea that people who use drugs deserve to be punished, rather than being offered treatment for their substance use. Further, there is no evidence that the threat of arrest or incarceration reduces drug use.

The United States has criminalized drug possession and use for many years, but this approach has not resulted in fewer drug-related deaths or healthier communities. A study found that individuals being released from incarceration were 12.7 times more likely than the general population to die in the two weeks following their release, with drug overdose being the leading cause of death. At a time of such high overdose mortality in our country and in our state, it has never been more important to reduce touchpoints with incarceration for people with substance use disorder. While there have been some improvements in the disparate rate of Black adults represented in drug arrests, Black adults are still disproportionately affected by drug arrests. According to a 2022, Black adults accounted for 12% of the US population, but 27% of drug arrests. These laws also disproportionately impact people of color, especially in Black communities.

Currently, Maryland prohibits the possession of drug paraphernalia and convictions carry a fine up to \$500 for a first-time offense or two years in prison and/or a fine up to \$2,000 for each repeat offense. HB 706 will remove the financial and and carceral penalties for the possession of drug paraphernalia with the intent to consume a controlled dangerous substance. This will help reduce the stigma surrounding substance abuse, and will improve the effectiveness of the Department's harm reduction efforts.

In order to facilitate the operation of harm reduction programs that distribute paraphernalia, the Department oversees the syringe services programs (SSPs). SSPs help improve individual and community health by reducing the spread of blood-borne pathogens such as the Hepatitis-C Virus and HIV.<sup>1</sup> Additionally, SSPs help prevent overdose by training participants in how to use naloxone, the overdose

<sup>&</sup>lt;sup>1</sup> https://www.cdc.gov/hiv/effective-interventions/prevent/syringe-services-programs/index.html

reversal medication, and by connecting participants to other resources and forms of treatment, such as medications for opioid use disorder (MOUD).<sup>2</sup> HB 706, by decriminalizing the possession of drug paraphernalia, will encourage more individuals to access the SSP, and thereby increase the positive public health impacts of the program.

Maryland protects SSP employees or participants from arrest and prosecution for possession of paraphernalia obtained through activities connected to the program SSP. However, Maryland requires those in possession of drug paraphernalia to prove their connection to a verified harm reduction program. As a result, program participants who misplace or lose their identification cards or who encounter law enforcement officers that do not respect their validity can face arrest. In some cases, participants are able to prove that they are connected to an SSP in court and charges are dropped, but the experience can be disruptive, costly, and traumatic. By removing criminal penalties for drug possession, HB 706 will reduce the likelihood of negative interactions with law enforcement for individuals with substance use disorder.

For these reasons, the Department submits this letter in support of HB 706.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at <a href="mailto:sarah.case-herron@maryland.gov">sarah.case-herron@maryland.gov</a>.

Sincerely,

Laura Herrera Scott, M.D., M.P.H.

Secretary

Emily Keller\*

Special Secretary of Overdose Response

<sup>&</sup>lt;sup>1</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4834273/

<sup>&</sup>lt;sup>2</sup>https://www.pewtrusts.org/en/research-and-analysis/issue-briefs/2022/02/drug-arrests-stayed-high-even-as-imprisonment-fell-from-2009-to-2019

<sup>&</sup>lt;sup>2</sup> Ibid

# **HB0706 Testimony.pdf**Uploaded by: Jess Nesbitt Position: FAV

### HB 0706 - Drug Paraphernalia for Administration - Decriminalization

Judiciary Committee February 9<sup>th</sup>, 2024

#### **Position: Favorable**

Dear Chair Clippinger and members of the Judiciary Committee,

I am writing to express my strong support for HB0706, the decriminalization of drug paraphernalia for administration. As a constituent, social worker, and researcher, I urge you to vote in favor of this bill, as you did in 2022.

I work at SPARC, a program focusing on supporting individuals who use drugs and engage in sex work. SPARC stands firmly behind HB0706 and respectfully requests a favorable vote. By decriminalizing individuals with substance use disorders and those who use drugs, this bill advocates for a public health approach rooted in evidence to address the overdose crisis.

It is clear that current strategies to reduce overdose deaths have not been effective, necessitating a bold shift in approach. HB0706 holds the potential to decrease disease transmission and related healthcare expenditures, facilitate access to life-saving services, and mitigate the risk of overdose fatalities. Research demonstrates that providing sterile syringes significantly reduces the transmission of diseases such as HIV, Hepatitis B, and Hepatitis C. Given Baltimore's objective to end HIV transmission by 2030, it is imperative to enact policies aligned with this community goal.

The financial investment in sterile syringes pales in comparison to the substantial costs associated with AIDS treatment over a lifetime, which exceeds \$600,000. However, people can't benefit from programs offering sterile syringes, sharps containers, Narcan, drug testing strips, healthcare, and social services when they face the threat of criminalization and arrest. Punitive measures, fear tactics, and the current patchwork legal framework dissuade individuals from seeking the support, healthcare, and information that every Marylander deserves.

Studies indicate that individuals who access syringe programs are more likely to discontinue injection drug use and seek treatment. Moreover, programs like SPARC play a pivotal role in engaging historically marginalized, oppressed, and underserved populations in care. The existing laws pertaining to paraphernalia are akin to criminalizing insulin syringes and being confused as to why people don't take their life saving medication.

Current legislation disproportionately impacts marginalized individuals, exacerbating challenges and heightening the risk of overdose. A conviction for paraphernalia possession can jeopardize an individual's prospects of securing stable housing, accessing food stamps, or entering the shelter system, further perpetuating vulnerabilities and increasing the likelihood of overdose. The \$500 cost of paraphernalia possession could go towards someone's security deposit at their home, and stable housing drastically reduces overdose death risk.

HB 0706 exemplifies Maryland's commitment to health, equity, and innovation, positioning the state as a trailblazer in combatting the overdose crisis. As social workers, healthcare providers, and individuals who have endured the harsh realities of existing policies, we urge you to vote favorably for HB0706.

Thank you,

Jess "Red" Nesbitt, LMSW, CBIS SPARC Women's Center

# HTPP HB 706 Testimony- FAV.pdf Uploaded by: Jessica Emerson Position: FAV



### **Testimony of the Human Trafficking Prevention Project**

**BILL NO:** House Bill 706

TITLE: Drug Paraphernalia for Administration – Decriminalization

COMMITTEE: Judicial Proceedings
HEARING DATE: February 13, 2024
POSITION: FAVORABLE

House Bill 706 would revise the existing drug paraphernalia law to remove certain items that could be used to consume drugs from its list of prohibited items, effectively decriminalizing possession of those items. It would also protect so-called "secondary distributers" of these items from arrest. The Human Trafficking Prevention Project supports this bill because it will reduce the risk of infectious disease, arrest, *and* re-exploitation for trafficking survivors who use drugs, many of whom do so to cope with the trauma of their trafficking experience. In addition, protecting secondary distributers from arrest will increase the amount of support available to the most marginalized and isolated people who use drugs, which will decrease these users' risk of a host of harms, including human trafficking.

Legislation passed by the Maryland General Assembly in 2016 has allowed for the expansion of syringe services programs (SSPs) statewide in order to distribute harm reduction supplies to prevent transmission of infectious diseases such as HIV and Hepatitis C. The research supporting the numerous health benefits of SSPs is clear and extensive. Every scientific and medical organization to study the issue has shown that legal access to sterile supplies reduces the spread of HIV, hepatitis, and other blood-borne diseases. Studies have also shown that access to supplies *does not* increase improperly discarded needles, rates of drug use, or other criminalized activity. In fact, people who use SSPs are more likely to reduce injections, stop injecting altogether, begin drug treatment, and to remain in drug treatment once they start it.

For these health benefits to materialize however, people need to trust that they can access supplies without law enforcement interference. When supplies are broadly considered illegal, even some registered SSP participants experience harassment and citation from law enforcement who do not understand the confusing patchwork of paraphernalia exceptions. HB 706 would also protect individuals who don't have access to an SSP from arrest, such as Marylanders who live in rural areas and must obtain clean syringes from a pharmacy. It would also protect individuals known as secondary distributers who deliver syringes on behalf of an SSP to users who are harder to reach because of physical or mental disabilities and other forms of marginalization. Under current law, the use, possession, delivery, or sale of paraphernalia to inject, ingest, inhale, or otherwise introduce a controlled dangerous substance into the human body is a criminal offense in Maryland and a first-time violation is subject to a misdemeanor and \$500 maximum fine. Subsequent violations are subject to a misdemeanor, up to two years of imprisonment, and/or a maximum fine of \$2,000. Any arrest, regardless of its outcome, carries with it significant collateral consequences.

Harm reduction methods such as the decriminalization of paraphernalia are especially important to survivors of human trafficking, given that drug use is both a common predictor of, and a reaction to, this horrific crime. Many trafficking survivors report self-medicating to cope with past trauma and were trafficked as a direct result of their addiction, while those who have survived a trafficking experience often begin using substances in an attempt to cope with what has happened or is currently happening to them. Decreasing the risk of

<sup>&</sup>lt;sup>1</sup> New York Academy of Medicine. New York State Expanded Syringe Access Demonstration Program Evaluation. January 15, 2003

<sup>&</sup>lt;sup>2</sup> National Institutes of Health Consensus Panel, Interventions to Prevent HIV Risk Behaviors (Kensington, MD: National Institutes of Health Consensus Program Information Center, February 1997).

<sup>&</sup>lt;sup>3</sup> P. Lurie, A.L. Reingold, B. Bowser (eds). The Public Health Impact of Needle Exchange Programs in the United States and Abroad: Summary, Conclusions and Recommendations (1993)

<sup>&</sup>lt;sup>4</sup> There are several exceptions to paraphernalia criminalization under current law. The Maryland General Assembly repealed the criminal prohibition of cannabis-related paraphernalia in 2015, granted exemption for possession of some drug paraphernalia for participants of syringe service programs in 2016, and repealed the criminal prohibition of items to test or analyze drugs, like fentanyl test strips, in 2018.

<sup>&</sup>lt;sup>5</sup> Murphy, S., Kelley, M. S., & Lune, H. (2004). The health benefits of secondary syringe exchange. Journal of Drug Issues, 34(2), 245-268.

incarceration while at the same time increasing safe usage and support lessens the likelihood of re-exploitation for trafficking survivors who use drugs because they are less likely to have to rely on a potential trafficker for this essential assistance, or to live their lives in the shadows where exploitation thrives as they merely try to figure out how to use more safely.

Harm reduction measures like House Bill 706 are important for all people who use drugs, including survivors of trafficking. Equipping people to use drugs more safely works not only to stem the spread of infectious disease, but also to lift the stigma that so often isolates drug users, making them vulnerable to a whole host of other harms, including human trafficking. For these reasons, the Human Trafficking Prevention Project supports House Bill 706 and respectfully urges a favorable report.

The Human Trafficking Prevention Project is dedicated to ending the criminalization of sex workers and survivors of human trafficking through access to civil legal services and support for policies that dismantle harmful systems and increase access to basic human rights and legal relief.

For more information, please contact:
Jessica Emerson, LMSW, Esq.
Director, Human Trafficking Prevention Project
(E): jemerson@ubalt.edu

## **Testimony - Drug Paraphernalia Decriminalization**Uploaded by: Jessie Dunleavy

### House Bill 706 Criminal Law - Drug Paraphernalia for Administration - Decriminalization - FAVORABLE

February 9, 2024

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

Dear Chair Clippinger and members of the House Judiciary Committee,

I am a retired educator and a lifelong resident of Maryland. I am in favor of decriminalizing the possession of drug paraphernalia because doing so would save lives and reduce the spread of infectious disease while minimizing the burden on our criminal justice system.

I see no reason to continue to delay this important and sensible step toward fixing a broken system. We know that criminalizing possession of paraphernalia—as with all drug-related arrests—disproportionately targets marginalized communities, creating barriers to health care and curtailing life-affirming opportunities.

It is hard to understand the reluctance to prioritize health and safety over criminalization particularly in light of the fact that punitive measures have failed to reduce the prevalence of drugs or the number of addictions and, instead, have given us mass incarceration, loss of productivity, homelessness, disease, and untreated addictions.

We will not overcome the tragic loss of life until we embrace harm reduction strategies. Literally every major health organization in the world urges low barrier access to all initiatives that prioritize safe drug use—with clean syringes as a primary example. Yet Maryland, year after year, despite its comparatively high overdose and HIV rates, continues to support roadblocks to these life-saving programs.

In January 2024, I attended a two-day workshop put on by the National Academies of Sciences, Engineering, and Medicine on harm reduction services and related research. Sponsored by the Federal Government Office of National Drug Control Policy, the event featured a wide array of experts—research scientists, public health providers, medical professionals, and leaders of organizations such as the National Institute of Drug Abuse (NIDA), SAMHSA, and the CDC. The running theme: Harm reduction and treatment exist on a public health continuum with availability of services impeded by drug policies steeped in stigma rather than research and a collaborative approach to patient-centered care.

Here in Maryland, we have shifted on some measures and not others. Naloxone, for example, has gained acceptance and has proven to save the lives of people who use drugs. But a person who seeks his own safety by using a clean needle (a sign that he cares about his own health) is subject to arrest and jail time.

It frightens me to hear that some legislators "don't like harm reduction" because it makes no sense. According to Health and Human Services (hhs.gov), "Harm reduction is critical to keeping people who use drugs alive and as healthy as possible." Those who can't subscribe to this simple principle should rethink their commitment to serving the people.

Harm reduction is about respect, public health, and human rights. How many more people are we willing to lose until such time that we understand punitive measures for people who need help are inhumane and just plain wrong?

Respectfully submitted,

Jessie Dunleavy 49 Murray Avenue Annapolis, MD 21401 jessie@jessiedunleavy.com www.jessiedunleavy.com

## **Del. Jon S. Cardin Testimony HB 706 13Feb2024final** Uploaded by: Jon S. Cardin

JON S. CARDIN
Legislative District 11
Baltimore County

**Judiciary Committee** 

Chair
Civil Law and Procedure
Subcommittee



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### THE MARYLAND HOUSE OF DELEGATES Annapolis, Maryland 21401

### House Bill 706

### **Drug Paraphernalia for Administration – Decriminalization**

### **Support**

Ever since the passage of the Justice Reinvestment Act, this legislation has been proposed to correct an oversight.

Per the 2023 testimony of the Office of the Attorney General, "urging favorable report" of the bill to 'remove Controlled Dangerous Substances ("CDS") paraphernalia used for administration or consumption of CDS from the criminal prohibitions related to CDS paraphernalia. Additionally, HB 706 also reduces the penalties related to CDS paraphernalia used for manufacture/distribution.

Of the countless lessons learned from both the opioid pandemic and the fentanyl crisis, we are well aware that drug use and abuse are not limited to the user, it puts all of us at risk. For example, 1/3 of metropolitan police officers are stuck with a needle while searching people because they do not want to get caught with a syringe. HB 706 eliminates the risk to our officers, as well as our children from getting stuck by needles discarded on playgrounds.

As a matter of public policy, criminalizing drug users, as opposed to treating them, is counterproductive and costly.

# **Dr Ju Park Written Testimony HB706.pdf**Uploaded by: Ju Nyeong Park Position: FAV

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,

Dr. Ju Nyeong Park, PhD MHS

ju park@brown.edu

#### References

- 1. Park JN, Rouhani S, Beletsky L, Vincent L, Saloner B, Sherman SG. Situating the Continuum of Overdose Risk in the Social Determinants of Health: A New Conceptual Framework. Milbank Q. 2020 Sep;98(3):700-746. doi: 10.1111/1468-0009.12470. Epub 2020 Aug 18. PMID: 32808709; PMCID: PMC7482387.
- 2. Beletsky, L., Heller, D., Jenness, S. M., Neaigus, A., Gelpi-Acosta, C., & Hagan, H. (2014). Syringe access, syringe sharing, and police encounters among people who inject drugs in New York City: a community-level perspective. *International Journal of Drug Policy*, 25(1), 105-111.
- 3. Beletsky, L., Grau, L. E., White, E., Bowman, S., & Heimer, R. (2011). The roles of law, client race and program visibility in shaping police interference with the operation of US syringe exchange programs. *Addiction*, 106(2), 357-365.
- 4. Park, J. N., Linton, S. L., Sherman, S. G., & German, D. (2019). Police violence among people who inject drugs in Baltimore, Maryland. *International Journal of Drug Policy*, 64, 54-61.
- 5. Beletsky, L., Cochrane, J., Sawyer, A. L., Serio-Chapman, C., Smelyanskaya, M., Han, J., ... & Sherman, S. G. (2015). Police encounters among needle exchange clients in Baltimore: drug law enforcement as a structural determinant of health. *American Journal of Public Health*, 105(9), 1872-1879.
- 6. Flath, N., Tobin, K., King, K., Lee, A., & Latkin, C. (2017). Enduring consequences from the war on drugs: how policing practices impact HIV risk among people who inject drugs in Baltimore City. *Substance Use & Misuse*, 52(8), 1003-1010.
- 7. Binswanger, I. A., Stern, M. F., Deyo, R. A., Heagerty, P. J., Cheadle, A., Elmore, J. G., & Koepsell, T. D. (2007). Release from prison—a high risk of death for former inmates. *New England Journal of Medicine*, *356*(2), 157-165.
- 8. https://www.cdc.gov/hiv/programresources/guidance/costeffectiveness/index.html
- 9. Henry, B. "Drug pricing & challenges to hepatitis C treatment access." *Journal of health & biomedical law* 14 (2018): 265.
- 10. <a href="https://ldi.upenn.edu/our-work/research-updates/expanding-access-to-naloxone-a-review-of-distribution-strategies/">https://ldi.upenn.edu/our-work/research-updates/expanding-access-to-naloxone-a-review-of-distribution-strategies/</a>

## Written Testimony HB706\_LizBement.pdf Uploaded by: Liz Bement

Written Testimony by Liz Bement
HB 706 - Drug Paraphernalia for Administration - Decriminalization
Before the House Judiciary Committee--February 13, 2024
FAVORABLE

Chairman Clippinger and the Members of the House Judiciary Committee,

I am in favor of decriminalizing the possession of drug paraphernalia.

I believe the current practice of restricting resources from this vulnerable population and isolating and criminalizing them has failed. Drug addiction is a medical condition and incarcerating individuals is not treatment.

We need a new more humane approach—one with interventions that focus on health and safety. Even though overdose fatalities have quadrupled in the last decade, we have inexplicably failed to develop comprehensive drug policy reform—It is just common sense that Maryland begins to treat addiction as a public health issue.

There is also an increase in intravenous drug use, and syringe programs are crucial in reducing harm. Syringe access programs are well-researched and there is scientific consensus that they save lives and stop the spread of infectious disease, and they are inexpensive and do not encourage drug use. Although Maryland passed legislation authorizing statewide syringe programs, access to these programs is difficult in many jurisdictions, so people in many areas are rightfully fearful of criminal charges, and arrests and incarceration should not trump health care and wellness for people who are suffering from substance use disorder. Bill HB 706 will also assist with proven public health practices such as needle exchange programs that reduce the spread of HIV and Hepatitis B.

To tackle the public health crises before us, we have to find ways to shed the stigma and prioritize proven health-based solutions, to improve the chances of recovery from addiction. It's beyond time for our state to take the step to decriminalize paraphernalia.

Sincerely,
Liz Bement
Baltimore, MD

# PARA Decrim.pdf Uploaded by: Meredith Kerr Position: FAV

February 8, 2024
The Honorable Luke Clippinger
Chairman, House Judiciary Committee
Taylor House Office Building, Room 101
6 Bladen St., Annapolis, MD 21401

RE: SUPPORT of House Bill 706 (Criminal Law - Drug Paraphernalia for Administration - Decriminalization) - FAVORABLE

Dear Chair Clippinger and House Judiciary Committee Members,

I am writing as a concerned constituent and nursing student from the Johns Hopkins School of Nursing to advocate for the "Drug Paraphernalia for Administration- Decriminalization" 706 House bill sponsored by Carter, currently in the Hearing process. As you know this bill focuses on repealing the prohibition on an individual who participates in either using or possessing drug paraphernalia with the intent to introduce the body to a controlled dangerous substance, penalties for offenses that may involve controlled paraphernalia and drug paraphernalia, manufacturing, distributing or dispensing.

I am currently a student nurse that is working on my clinical hours at SPARC. At SPARC, one of the main focuses is harm reduction and with that it is a program that offers different safety kits including different size syringes for safer drug use. This legislation will benefit the population that SPARC is serving by allowing individuals who inject drugs or carry paraphernalia to feel safer in doing so without potential threats of being criminalized. Harm reduction helps individuals use drugs in a safer way to avoid possible infections or overdose.

With this legislation it will work to decriminalize paraphernalia which ultimately works to help improve the health of individuals who use drugs, reduce blood borne disease, and reduce the fatality rate of overdose<sup>1</sup>. Harm reduction helps individuals use drugs in a safer way to avoid possible infections or overdose. A study that focused on effects of long-term street level police intervention on Syringe service programs, showed that SSP's participants decreased drastically. Concerns about arrest and search may have led individuals to stray away from seeking and carrying sterile syringes ultimately leading to less hygienic injections<sup>2</sup>. A multivariate analysis study showed that 35% of people who injected drugs were concerned about possible arrest while carrying paraphernalia<sup>3</sup>. Individuals with these concerns were shown to have a 1.5 higher chance of sharing syringes than people who injected but did not hold the same concerns<sup>4</sup>. Pharmacy sales of needles helped with improving access to needles without causing harm to the surrounding communities. SSPs allow individuals to inject drugs safely and safely discard used syringes to acquire new ones. New users of SSPs are five times more likely to enter drug treatment and three times more likely to stop compared to those not in the program.<sup>5</sup>

Decriminalizing drug paraphernalia for administration will be a crucial step towards prioritizing public health and harm reduction. By shifting this public health approach we can work to provide more harm

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<sup>&</sup>lt;sup>1</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6775926/

<sup>&</sup>lt;sup>2</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1449157/

<sup>&</sup>lt;sup>3</sup> https://journals.sagepub.com/doi/abs/10.1177/002204269902900101

<sup>4</sup> https://www.sciencedirect.com/science/article/abs/pii/S0955395998000760

<sup>&</sup>lt;sup>5</sup> https://rb.gy/62eqig

reduction services to reduce the harm associated with drug use and promote individual and community safety.

I am asking you to encourage and support this bill. If this bill is not passed, it will work to increase the probability that individuals who inject drugs will share injection equipment in conditions that might be deemed unsanitary due to the lack of injection supplies. The current law also puts individuals at risk for incarceration who do not use drugs that are involved in harm reduction practices such as giving out or obtaining needles. Decriminalization does not mean that we are encouraging or condoning drug use, but it emphasizes the reality of how drug use has become a public health issue. We must move towards prioritizing prevention, treatment, and harm reduction.

#### a. Benefits

- i. Improve health outcomes of people who use drugs
- ii. Reduce spread of bloodborne disease
- iii. Encourage harm reduction methods
- iv. Help mitigate negative consequences of mass incarceration which disproportionately impacts people of color.
- v. Encourage PWUDs to be safe by accessing new sanitary syringes

Thank you for your time and attention to this important issue. We believe that this bill will simplify Maryland's paraphernalia laws and emphasize that possession of harm reduction supplies to prevent infectious disease is not a crime. We ask that the House Judiciary Committee give HB706 a favorable report.

Sincerely,

Rose Tran

JHUSON MSN Candidate

# Hilliard MD HB 706 Paraphernalia Decrim 2024.pdf Uploaded by: Michael Hilliard



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Det. Sgt. Neil Woods, Ret. Derbyshire, England, LEAP UK Date: February 13, 2024

Re: HB 706 Paraphernalia Decrim

Position: SUPPORT

To: The Maryland State House Judiciary Committee

Distinguished Members of the Committee,

Thank you for hearing this bill. I am testifying today as a resident of Towson and a retired Major with the Baltimore City Police Department. I support HB 706 because decriminalizing paraphernalia possession will reduce disease and overdose deaths and help rebuild police-community trust.

Heroin use was a crisis in Baltimore when I began as a patrol officer in 1975. 47 years later, with fentanyl mixed in the drug supply, overdoses are higher than ever before.

Fortunately, we are finally learning that arresting people for drug use does not stop overdoses, disease transmission, or drug-related crime. In fact, it is counterproductive, because it makes people hide from the authorities, share syringes, and fail to report crimes. We are moving in the right direction by establishing syringe access programs, because they reduce HIV and Hepatitis C transmission without increasing drug use or crime.

It's time for our state to take the next step and decriminalize paraphernalia possession. There is no public safety rationale to keep arresting people on this charge. In all my years of policing, I have never seen a serious threat to public safety be resolved by a paraphernalia arrest. I have, however, seen this charge used to unnecessarily arrest hundreds of people who use drugs.

Decriminalizing syringe possession would also help patrol officers, who are at risk of accidental needle-stick. Every time police make an arrest, we search the person before detaining them. As we pat them down, we ask the suspect if there's anything in their pockets or bags that could hurt us. Suspects will often lie if they're in

#### LawEnforcementActionPartnership.org

possession of a syringe, hoping to avoid a paraphernalia charge. Researchers have found that one in three police officers are stuck with a needle while on the job. Imagine the stress that police and their families experience while waiting to receive their test results after a needle-stick injury. This legislation would enable suspects to warn officers that there is a needle in their pocket without fear of a further criminal charge.

This legislation would also reduce the chance that the needle in their pocket carries an infectious virus. When people know they can be arrested for syringe possession, they are more likely to share syringes to minimize their chance of arrest.

This bill would also reduce syringe littering. When we punish people for syringe possession, they do not risk carrying a used syringe with them to dispose of it safely. Instead they leave it wherever they use it -- in a park, in an alley, or in a public restroom. We shouldn't have to worry about our children playing barefoot in the park or our custodians being stuck by needles at work. This legislation would enable people to carry their syringe until they have a safe means of disposal.

Finally, this bill would help reestablish police-community trust. When we arrest someone for drug paraphernalia, the community sees us wasting taxpayer resources and punishing someone who needs treatment. People who use drugs see these arrests and become afraid to report a crime or call 911 when a friend overdoses. We need the cooperation of the whole community, including those who are currently hiding from the police, in order to protect public safety.

In short, supporting this legislation is common sense. We have a clear opportunity to reduce disease transmission and syringe littering, protect officers, and improve community trust. Anyone who supports public safety and public health should support this legislation.

Thank you for the opportunity to speak to you today.

Major Mike Hilliard (Ret.)
Baltimore Police Department
Speaker, Law Enforcement Action Partnership

# NCADD-MD - 2024 HB 706 FAV - Paraphernalia Decrimi Uploaded by: Nancy Rosen-Cohen



#### House Judiciary Committee February 13, 2024

# House Bill 706 Drug Paraphernalia for Administration – Decriminalization Support

NCADD-Maryland supports House Bill 706. The General Assembly saw fit to pass this bill in 2021. Then-Governor Hogan used flawed reasoning to veto that measure. Harm reduction strategies do not encourage drug use. There are decades of research and experience right here in Maryland that prove that thinking is simply wrong.

This bill decriminalizes items that can be used to inject, ingest, inhale, or otherwise consume a controlled dangerous substance. As Maryland continues to consider and implement programs and strategies that reduce the harms caused by substance use, the decriminalization of paraphernalia will continue to help ensure that people are accessing services such as syringe services programs and avoid arrest and incarceration.

The benefits of decriminalization include:

- Improved treatment outcomes when someone with a substance use disorder is ready to enter treatment;
- Greater incentive to seek treatment as people who are using substances are less afraid of law enforcement interaction;
- A reduction in the racial disparities in the criminal justice system, as Maryland is among the worst states in its proportion of people of color who are incarcerated;
- A reduction in the collateral damage caused by incarceration; and
- Improvement in the impact of limited public health resources.

In decriminalizing paraphernalia, we will reduce the need for people to re-use certain items that may contribute to the transmission of infectious diseases. This will have a positive public health impact on the spread of HIV and Hepatitis C, and save money in the reduction of needed health services.

We know the collateral damage caused by the war on drugs continues to harm people in Maryland, and disproportionately people of color. As this committee has heard repeatedly over the years, people with criminal records are too often denied employment, housing, food stamps, and scholarships, without any due consideration of the details involved in the records.

We urge this Committee give a favorable report to House Bill 706.

# **HB706-JUD-FAV.pdf**Uploaded by: Nina Themelis Position: FAV



Office of Government Relations 88 State Circle Annapolis, Maryland 21401

**HB0706** 

February 13, 2023

**TO:** Members of the Judiciary Committee

**FROM:** Nina Themelis, Director of Mayor's Office of Government Relations

**RE:** House Bill 706 – Drug Paraphernalia for Administration - Decriminalization

POSITION: FAVORABLE

Chair Clippinger, Vice Chair Bartlett, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) <u>supports</u> House Bill (HB) 706.

HB 706 repeals the prohibition against persons possessing or distributing certain items used to administer drugs, including hypodermic syringes or needles. In Baltimore City, the Baltimore City Health Department (BCHD) and seven community-based organizations provide "syringe service programs" (SSPs). These SSPs distribute and collect millions of syringes each year to help ensure people who use drugs use clean syringes (rather than re-use old ones), thereby reducing transmission of HIV and other bloodborne infections. SSPs also provide substance use disorder counselling, linkage to treatment, case management, HIV and STI testing, reproductive health services, overdose education, education about how to safely dispose of syringes, and more. BCHD's SSP has served over 2,000 patients since 2018.

While current statutes governing SSPs in Maryland protect clients from being found guilty of violating Section 5-619 of the Criminal Law Article, clients of Baltimore City SSPs routinely share that they worry about potential harassment from law enforcement if stopped while possessing syringes. Repealing the prohibition of drug paraphernalia possession will help alleviate concerns from SSP clients and bring state law into accordance with current public health best practices. i,ii

Drug paraphernalia laws were implemented with the intent to reduce or stop illicit drug use. Such laws can actually increase harm by preventing people who use drugs from accessing services and using sterile syringes.<sup>i,ii</sup> These laws can also lead to increased syringe litter and unsafe conditions within the community when individuals who use drugs are afraid to return used syringes to an SSP program or dispose of them in a safe disposal container. Repealing the prohibition of controlled drug paraphernalia will allow SSPs and other evidence-based harm reduction interventions to work more effectively and, most importantly, allow individuals with substance use disorder to reduce harm to themselves and the communities they interact with and live within.

For these reasons, the BCA respectfully requests a **favorable** report on HB 706.

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<sup>&</sup>lt;sup>1</sup> Stancliff, S., Agins, B., Rich, J. D., & Burris, S. (2003). Syringe access for the prevention of blood borne infections among injection drug users. BMC public health, 3, 37. https://doi.org/10.1186/1471-2458-3-37

<sup>&</sup>lt;sup>ii</sup> Davis, C. S., Carr, D. H., & Samuels, E. A. (2019). Paraphernalia Laws, Criminalizing Possession and Distribution of Items Used to Consume Illicit Drugs, and Injection-Related Harm. American journal of public health, 109(11), 1564–1567. https://doi.org/10.2105/AJPH.2019.305268

## Harm Reduction Safer Use Supplies\_BHRC.pdf Uploaded by: Owen O'Keefe

### HARM REDUCTION SAFER USE SUPPLIES

## safer injecting

#### item

#### best practice

## without access to this item



Water is required to dissolve drugs prior to injection. Prepackaged sterile water is best to use, and water boiled in a kettle is also a safe method.

Using possibly contaminated water from a sink tap, toilet bowl, or puddle can lead to abscess wounds, bacterial infections, and Hepatitis C.



Drugs are mixed with water in a cooker. A single-use clean cooker made from stainless steel or aluminum is best.

Sharing cookers can transfer bacteria and infectious diseases such as Hepatitis C which can live on surfaces for weeks.



A single-use piece of cotton is used to filter out any solids left in the drug solution.

Used filters can harbor bacteria, viruses and mold, and re-using can cause bloodstream infections often referred to as 'cotton fever.'



A single-use alcohol swab to clean any bacteria from the injection site.

Injecting without cleaning the site can push bacteria or fungi into the bloodstream, leading to life-threatening blood, heart, and joint infections.



A new sterile syringe should be used for every injection to avoid transfer of infectious diseases and dulling of the needle tip. Sharing syringes can transfer infectious diseases including HIV and Hepatitis C, and reusing a dull needle can cause damage to veins and muscles.

### HARM REDUCTION SAFER USE SUPPLIES

### safer smoking

item

#### best practice

## without access to this item



A Pyrex pipe with rubber mouthpiece does not conduct heat like some other materials, so burns are less frequent.

Using plastic, copper, or soda cans that emit toxic fumes when heated, or thin glass like light bulbs that break easily, leads to cuts and burns.



Porous brass metal makes for a safer screen for smoking drugs. They are non-toxic and do not break down when heated. Using steel wool (Brillo), which can break apart when heated, can burn the lips, mouth, and throat, and damage the lungs.

## safer sniffing

item

### best practice

## without access to this item



Use of a new clean straw each time to avoid transfer of bacteria and virus through blood vessels in the nose.

Re-using or sharing straws or using rolled-up dollar bills which can transmit bacteria and infectious diseases such as Hepatitis C.



@BmoreHRC

It's important to use clean equipment with EVERY use, which could be multiple times per day!

Baltimore Harm Reduction.org

## HB706\_ FAV\_BHRC(1).pdf Uploaded by: Owen O'Keefe



February 13, 2024

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

### RE: SUPPORT of House Bill 706 (Criminal Law - Drug Paraphernalia for Administration - Decriminalization) - FAVORABLE

Dear Chair Clippinger and House Judiciary Committee members,

Baltimore Harm Reduction Coalition writes to express our support for House Bill 706 (Criminal Law - Drug Paraphernalia for Administration - Decriminalization). HB706 will revise existing criminal law to remove items that could be used to consume drugs from what is considered drug paraphernalia, effectively decriminalizing possession of those items.

There are a few exceptions to paraphernalia criminalization under current law. The Maryland General Assembly repealed the criminal prohibition of cannabis-related paraphernalia in 2015,¹ granted exemption for possession of some drug paraphernalia for participants of syringe service programs in 2016,² and repealed the criminal prohibition of items to test or analyze drugs, like fentanyl test strips, in 2018.³ Despite the positive intent of these exceptions, the full decriminalization of paraphernalia used to consume drugs is needed to reduce opioid overdose deaths and other harms.⁴

Legislation passed by the Maryland General Assembly in 2016 allowed for the expansion of syringe services programs (SSPs) statewide in order to distribute harm reduction supplies to prevent transmission of infectious diseases such as HIV and Hepatitis C. The research supporting the numerous health benefits of SSPs is clear and extensive. **Every scientific and medical organization to study the issue has shown that legal access to sterile supplies reduces the spread of HIV, hepatitis, and other blood-borne diseases.** Studies have also shown that access to supplies does not increase improperly discarded needles,<sup>5</sup> rates of drug use,<sup>6</sup> or other criminalized activity.<sup>7</sup> Additionally, people who use SSPs are more likely to reduce injections, to stop injecting altogether, to begin drug treatment, and to remain in drug treatment once started.

For these health benefits to materialize in Maryland, people need to trust that they can access supplies without law enforcement interference. When supplies are broadly considered illegal, even some registered SSP participants experience harassment and citation from law enforcement who do not understand the confusing patchwork of paraphernalia exceptions. The citation is usually dismissed as *nolle pros* once a participant goes to court with the proper

<sup>&</sup>lt;sup>1</sup> Criminal Law – Use and Possession of Marijuana and Drug Paraphernalia (2015). SB0517 (CH0004)

<sup>&</sup>lt;sup>2</sup> Public Health – Opioid-Associated Disease Prevention and Outreach Program (2016). SB0097 (CH0348)

<sup>&</sup>lt;sup>3</sup> Criminal Law – Prohibitions, Prosecutions, and Corrections (2018). SB1137 (CH0145)

<sup>&</sup>lt;sup>4</sup> Paraphernalia Laws, Criminalizing Possession and Distribution of Items Used to Consume Illicit Drugs, and Injection-Related Harm. (Davis et al., 2019) American Journal of Public Health

<sup>&</sup>lt;sup>5</sup> New York Academy of Medicine. New York State Expanded Syringe Access Demonstration Program Evaluation. January 15, 2003

<sup>&</sup>lt;sup>6</sup> National Institutes of Health Consensus Panel, Interventions to Prevent HIV Risk Behaviors (Kensington, MD: National Institutes of Health Consensus Program Information Center, February 1997).

<sup>&</sup>lt;sup>7</sup> P. Lurie, A.L. Reingold, B. Bowser (eds). The Public Health Impact of Needle Exchange Programs in the United States and Abroad: Summary, Conclusions and Recommendations (1993)

documentation. However, the harassment experienced and the resources required to attend court is disruptive and unjust, and should not be underestimated.

The fear of a negative law enforcement interaction also contributes to the improper disposal of used syringes. **To ensure safe disposal of paraphernalia once used**, **people need to be able to trust that they can hold onto their supplies until they reach a proper disposal site without law enforcement interference**. People may throw their used paraphernalia away quickly because they fear the police could use these items as evidence of drug use and arrest them. Paraphernalia charges are often used as a catch-all tool that enables an officer to make an arrest even when no other evidence of a crime may be present.

Documented program participants are exempt from prosecution for possessing hypodermic needles and other items to prevent the spread of infectious disease. However, this protection does not extend to those who don't have access to a program, or to those who deliver syringes on behalf of a syringe service program to those hard to reach participants. This includes people who are too afraid of public exposure to access the services on their own or individuals with physical and mental disability. This delivery tactic is known as secondary or satellite distributors. These participants are able to provide supplies to more people than actually visit the program. This service is primarily conducted between people who already have a relationship with one another, such as friends and family members. Rarely do secondary distributors ever report supplying strangers with paraphernalia. The most common motivation for secondary distributors is to protect their community from the spread of diseases and to help their family and friends.

This also includes those Marylanders who live in rural areas and must obtain supplies from other sources, such as pharmacies. The Code of Maryland Regulations (COMAR) states that **syringes may be sold without a prescription with an indication of need**, <sup>12</sup> and the Maryland Board of Pharmacy voted unanimously in 2007, and renewed support again in 2017, to approve that prevention of disease is an acceptable indication of need. Therefore, in all circumstances that a pharmacist believes that the provision of syringes will reduce the spread of disease, they are acting in accordance with COMAR and the Maryland Board of Pharmacy. However, **the individual obtaining syringes from a pharmacy or other source is not protected by law**. As a result, they are at risk of being saddled with a citation and criminal record which can affect future access to employment, education, housing, and social services.

Equipping people to use drugs more safely is positive for everyone in the community-- not only in stemming the spread of infectious disease, but also in lifting the stigma that isolates people who use drugs. When our laws are unclear, law enforcement may use their discretion in a way that further marginalizes people who are most at risk of infectious disease and overdose. We believe that this bill will simplify Maryland's paraphernalia laws and clarify that possession of harm reduction supplies to prevent infectious disease is not a crime. We ask that the Judiciary Committee give HB706 a favorable report.

For additional information or questions regarding this legislation, please contact BHRC's Policy Manager, Owen O'Keefe, at owen@baltimoreharmreduction.org

<sup>&</sup>lt;sup>8</sup> Murphy, S., Kelley, M. S., & Lune, H. (2004). The health benefits of secondary syringe exchange. Journal of Drug Issues, 34(2), 245-268.

<sup>&</sup>lt;sup>9</sup> Valente, T. W., Foreman, R. K., Junge, B., & Vlahov, D. (1998). Satellite exchange in the Baltimore Needle Exchange Program. Public health reports (Washington, D.C.: 1974), 113 Suppl 1(Suppl 1), 90–96.

<sup>&</sup>lt;sup>10</sup> Snead J, Downing M, Lorvick J, et al. Secondary syringe exchange among injection drug users. J Urban Health. 2003;80(2):330-348. doi:10.1093/jurban/jtg035

<sup>11</sup> ibid.

<sup>&</sup>lt;sup>12</sup> Maryland Board of Pharmacy News. Fall 2017.

# HB0706\_FAV\_MedChi\_Drug Paraphernalia for Administr Uploaded by: Pam Kasemeyer

## MedChi

The Maryland State Medical Society 1211 Cathedral Street Baltimore, MD 21201-5516 410.539.0872 Fax: 410.547.0915 1.800.492.1056 www.medchi.org

TO: The Honorable Luke Clippinger, Chair

Members, House Judiciary Committee

The Honorable Jon S. Cardin

FROM: Pamela Metz Kasemeyer

J. Steven Wise Danna L. Kauffman Andrew G. Vetter Christine K. Krone 410-244-7000

DATE: February 13, 2024

RE: SUPPORT - House Bill 706 - Criminal Law - Drug Paraphernalia for

Administration – Decriminalization

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **supports** House Bill 706.

House Bill 706 would decriminalize possession of items that can be used to inject, ingest, inhale, or otherwise consume a controlled dangerous substance. Reducing the harm caused by substance use has been a priority of the General Assembly. The decriminalization of paraphernalia proposed by this legislation will continue to help ensure that people are accessing services, such as syringe service programs, and will avoid unnecessary arrest and incarceration. Decriminalization will provide greater incentive to seek treatment as people who are using substances will be less afraid of law enforcement interaction. In decriminalizing paraphernalia, the State will also reduce the need for people to re-use certain items that may contribute to the transmission of infectious diseases. This will have a positive public health impact on the spread of HIV and Hepatitis C. Further, the collateral damage of unnecessary incarceration continues to harm people in Maryland, and disproportionately people of color. Passage of House Bill 706 will demonstrate a commitment to reframing substance use as a public health issue, not a criminal issue. A favorable report is requested.

## **5b - HB 706 - JUD - MACHO - LOS.pdf** Uploaded by: State of Maryland (MD)



#### 2024 SESSION POSITION PAPER

BILL: HB 706 – Drug Paraphernalia for Administration – Decriminalization

**COMMITTEE:** House Judiciary Committee

**POSITION:** Letter of Support

BILL ANALYSIS: HB 706 decriminalizes the possession of drug paraphernalia used to inject, ingest,

inhale, or otherwise introduce controlled substances into the human body, thereby increasing access to supplies needed for safe substance use, reducing the spread of

bloodborne infections, and reducing drug-related arrests and incarcerations.

**POSITION RATIONALE:** 

**LE:** The Maryland Association of County Health Officers (MACHO) supports HB 706. HB 706 decriminalizes the possession of certain items that can be used by an individual to consume a controlled substance. The proposed decriminalization would increase access to supplies needed for safer substance use and encourage the use of clean syringes, thereby curbing the spread and limiting the financial impact of bloodborne pathogens. HB 706 will also prevent drug paraphernalia related arrests and incarceration.

Injection drug use and needle sharing are major modifiable risk factors for contracting blood-borne pathogens such as HIV and Hepatitis C. Approximately 120,000 cases of HIV are directly attributable to intravenous (IV) drug use and needle sharing. Hepatitis C is the most common bloodborne infection in the U.S. and a leading cause of liver cirrhosis and liver cancer. Hepatitis C prevalence among IV drug users is over 33%. Both conditions place a substantial financial burden on the healthcare system, with the average lifetime cost of HIV treatment and Hepatitis C treatment costing \$370,000 and \$84,000, respectively. Using clean needles and reducing needle sharing substantially decreases the risk of acquiring and transmitting HIV, Hepatitis C and other bloodborne pathogens. HB 706 reduces barriers to utilizing needle exchange services, which increases access to clean needles and decreases needle sharing.

The decriminalization proposed in HB 706 would also reduce unnecessary arrests and incarcerations associated with possession of drug paraphernalia, which disproportionately affect communities of color. Reducing fear of interaction with law enforcement also has potential to increase access and utilization of treatment services.

For these reasons, the Maryland Association of County Health Officers submits this letter of support for HB 706. For more information, please contact Ruth Maiorana, MACHO Executive Director at <a href="maioral@jhu.edu">maioral@jhu.edu</a> or 410-937-1433. This communication reflects the position of MACHO.

<sup>&</sup>lt;sup>1</sup> CDC: Office of the Associate Director for Policy and Strategy. (2016, August 5). Access to clean syringes. Centers for Disease Control and Prevention. Retrieved February 5, 2022, from <a href="https://www.cdc.gov/policy/hst/hi5/cleansyringes/index.html">https://www.cdc.gov/policy/hst/hi5/cleansyringes/index.html</a>

<sup>&</sup>lt;sup>2</sup> Office of Infectious Disease and HIV/AIDS Policy (OIDP). (2021, July 9). Viral hepatitis in the United States: Data and Trends. HHS.gov. Retrieved February 5, 2022, from https://www.hhs.gov/hepatitis/learn-about-viral-hepatitis/data-and-trends/index.html

#### Health Care for the Homeless - 2024 HB 706 FAV - P

Uploaded by: Vicky Stewart







### House Judiciary Committee February 13, 2023

Health Care for the Homeless supports HB 706. This bill will save lives, reduce barriers to housing and employment, and prevent the spread of infectious diseases. As a healthcare facility serving over 10,000 of Maryland's most vulnerable individuals each year, we see firsthand the effects of criminalizing substance use, particularly on Black and Latino/x communities. In Maryland, possession of drug paraphernalia can result in a fine up to \$500 and a misdemeanor – leading to a criminal record that can be used to deny someone housing and employment.<sup>1</sup>

The criminalization of substance use and paraphernalia perpetuates homelessness and prevents individuals from seeking supportive services. When there is less fear of punishment or arrest by police, individuals feel safer accessing treatment.<sup>2</sup> By decriminalizing paraphernalia and implementing harm reduction principles, individuals are more inclined to carry and use life-saving supplies—such as sterile needles and safer smoking kits—that prevent overdose deaths and the spread of infectious diseases.<sup>3</sup> The continued toll of opioid overdose deaths and related harms both warrants and necessitates decriminalization of paraphernalia. In addition to saving lives, this has enormous implications for lowering healthcare costs related to treating infectious diseases, like HIV.<sup>4</sup>

This bill demonstrates Maryland's commitment to reframing substance use as a public health issue, not a criminal one. As a health provider that sees how crucial and life-saving harm reduction and decriminalization are for the clients we serve, Health Care for the Homeless urges the committee to issue a favorable report on HB 706.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We deliver medical care, mental health services, state-certified addiction treatment, dental care, social services, housing support services, and housing for over 12,000 Marylanders annually at sites in Baltimore City and Baltimore County.

Our Vision: Everyone is healthy and has a safe home in a just and respectful community.

Our Mission: We work to end homelessness through racially equitable health care, housing and advocacy in partnership with those of us who have experienced it.

For more information, visit <a href="https://www.hchmd.org">www.hchmd.org</a>.

<sup>&</sup>lt;sup>1</sup> MD Code Ann., Crim. Law, § 5-619 (2013).

<sup>&</sup>lt;sup>2</sup> 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 <a href="https://doi.org/10.1016/j.disamonth.2018.12.002">https://doi.org/10.1016/j.disamonth.2018.12.002</a>.

<sup>3</sup> Id.

<sup>&</sup>lt;sup>4</sup> David Wilson, et al., "The cost-effectiveness of harm reduction," *International Journal of Drug Policy* 26, supp. 1 (February 2015), pp. S5-S11, available at https://doi.org/10.1016/j.drugpo.2014.11.007.



## HB706\_Spradleytestimony2024.pdf Uploaded by: Elizabeth Spradley

#### **TESTIMONY IN SUPPORT OF HB706:**

Drug Paraphernalia for Administration - Decriminalization

TO: Delegate Jon Cardin, Chair, Vice Chair, and Committee members

FROM: Elizabeth Spradley, RN BSN

2738 Guilford Avenue

Baltimore, MD 21218-40th District

Good afternoon Delegate Cardin, Chair, and Committee members,

My name is Elizabeth, I am a nurse working and living in Baltimore City for the past 13 years. I am currently working for MDH's Center for Harm Reduction Services (CHRS) as well as University of Maryland's community psychiatry team. At MDH CHRS, I am addressing the huge gap in services for people who use drugs and have drug-related wounds including the large increase in wounds from xylazine in the drug supply. Decriminalizing drug paraphernalia would remove some barriers to care for this population.

However, in every setting I have provided care, I have worked with people who use drugs. In every setting I have provided care, stigma and misunderstanding around drug use and ways to reduce the harm of drug use is deeply embedded, and that stigma continues to be life-threatening and life-taking. That is why I am writing to you all to support HB 706 to decriminalize drug paraphernalia. Decriminalizing these tools is critical. The passing of this bill will give law enforcement and the general public the clear guidance needed around drug paraphernalia. We need clear guidance for the people using drug paraphernalia and for the spaces servicing people using the drug paraphernalia.

And speaking to what I know best, healthcare needs clear guidance that these tools are not a reason to deny someone healthcare services or force them into drug treatment or take away their children or make assumptions that people who use drugs don't care about their health.

As a nurse, I want people to know about drug paraphernalia and the benefits of each piece. I want people to be in awe of how such small items can a huge difference in public health issues like mitigating the spread of infectious diseases. I want people to know how these tools are a bridge to other necessary services like mental health, primary care, and speciality care. I want people to use these tools with pride knowing they are choosing a safer path to drug use.

To continue to criminalize drug paraphernalia inhibits me from being able to provide quality care to every Marylander. I encourage you all to please support HB706 to decriminalize drug paraphernalia in Maryland.

Thank you for your time, Elizabeth Spradley RN BSN

# MCPA-MSA\_HB 706 Decriminalize Paraphernalia\_Oppose Uploaded by: Natasha Mehu

Position: UNF



### Maryland Chiefs of Police Association Maryland Sheriffs' Association



#### **MEMORANDUM**

TO: The Honorable Luke Clippinger, Chair and

Members of the Judiciary Committee

FROM: Darren Popkin, Executive Director, MCPA-MSA Joint Legislative Committee

Andrea Mansfield, Representative, MCPA-MSA Joint Legislative Committee Natasha Mehu, Representative, MCPA-MSA Joint Legislative Committee

DATE: February 13, 2024

**RE: HB 706 Drug Paraphernalia for Administration – Decriminalization** 

POSITION: OPPOSE

The Maryland Chiefs of Police Association (MCPA) and the Maryland Sheriffs' Association (MSA) **OPPOSE HB 706**. This bill would decriminalize the use or possession of drug paraphernalia for all other drugs, other than marijuana. These drugs would include dangerous street-level (user amount) doses of heroin, fentanyl, cocaine, methamphetamine, LSD, and others.

MCPA and MSA are very concerned this bill creates potential for an escalation in the continually rising opioid overdose rates by decriminalizing the devices to ingest the substance, which is often a trigger of usage and directly leads to the approximately 80K overdose deaths reported annually in the United States.

In addition, if paraphernalia is decriminalized, there would be little to no opportunity to enter treatment through a criminal justice diversion program. These programs include the opportunity, for those who qualify, to avoid criminal prosecution by entering treatment programs, that work in conjunction with the court system, to help users break the cycle of addiction. The danger to public safety that is posed by dangerous street-level drugs, as well as the tools to ingest these drugs, requires a comprehensive Criminal Justice approach, that does not include decriminalization.

For these reasons, MCPA and MSA OPPOSE HB 706 and urge an UNFAVORABLE Report.