

MDDCSAM is the Maryland state chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

HB 556 Criminal Law - Drug Paraphernalia for Administration - Decriminalization House Judiciary Committee Hearing: February 11, 2025

SUPPORT

My name is Malik Burnett and I am a physician in addiction medicine at the University of Maryland Medical Center. I would like to thank you for the opportunity to provide written testimony today on behalf of the Maryland DC chapter of the American Society of Addiction Medicine (MDDCSAM) whose members are physicians and other health providers who treat people with substance use disorders.

MDDCSAM is supportive of HB556 as passage of this bill has the effect of increasing the adoption and fidelity of syringe service programs in counties across the state, providing clarity for law enforcement officers on how to handle individuals who possess drug paraphernalia for personal use, and lowering the stigma associated with drug use in the community.

Since 2016, the state of Maryland has allowed for the expansion of syringe service programs (SSPs) and to date there are currently 27 active programs in the state. These programs provide access to clean needles, cookers, sterilization equipment, water and other supplies which are currently classified as drug paraphernalia. Individuals who participate in these programs have reduced incidence of infectious disease and skin and soft tissue infections and have an opportunity to be linked to treatment and start the process of recovery. Unfortunately, these same individuals are **currently subject to arrest and criminal prosecution for being in possession of the equipment obtained from these legal and lifesaving programs** unless/until they can prove the equipment was obtained from an SSP. This bill will increase participation in these morbidity and mortality reducing programs.

Furthermore, as the former medical director of the Center for Harm Reduction Services for the Maryland Department of Health, I have evaluate worked directly with the teams running SSPs across 20 counties in Maryland it is clear that **the current criminalization of drug paraphernalia creates legal ambiguity in the strategies that SSPs can use to disseminate clean supplies**. Some SSPs endeavor to go out into the community to make contact with people who use drugs who are otherwise difficult to reach in order to both establish a relationship and reduce the harms associated with drug use. Under the current statue, these **"mobile SSP" strategies create a burden of proof requirement for volunteers and employees at SSPs**, who would have the to show their affiliation with a program in the event of an interaction with law enforcement during these community outreach efforts.

(next)

(... continued)

These **legal ambiguities have stifled innovation and slowed adoption of the harm reduction services around the state, particularly in jurisdictions which already have limited care options for substance use disorders.** Passage of this bill would eliminate this burden and allow community based organizations to establish care with difficult to reach populations.

Finally, as a practical matter, Maryland law currently allows for the "sale of needles and syringes or other paraphernalia" by pharmacies without a prescription to patients "showing proper identification and indication of need." (1) **Given the legal ability for individuals to purchase paraphernalia from pharmacies, it is appropriate and proper that the criminal code conform to allow individuals to possess these same items.** Passage of this bill would create clarity for law enforcement officers and has the potential to **increase the adoption of successful strategies like Law Enforcement Assisted Diversion** within the criminal justice community.

Overall, the Maryland General Assembly has taken a proactive role in passing legislation which lowers the stigma associated with drug use within the state. This legislation has already been passed by the General Assembly in previous legislative sessions and MDDCSAM again supports its passage.

Sincerely,

G. Malik Burnett MD, MBA, MPH Board Member, Maryland DC Society of Addiction Medicine

1 Md. Code Regs. 10.13.08.01

The Maryland-DC Society of Addiction Medicine

https://md-dcsam.org

info@md-dcsam.org