

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

February 11 2025

The Honorable Luke Clippinger Chair, Judiciary Committee 100 Taylor House Office Building 101 Taylor House Office Building Annapolis, Maryland 21401

RE: HB 556 - Drug Paraphernalia for Administration - Decriminalization - Letter of Support

Dear Chair Clippinger:

The Maryland Department of Health (MDH) is submitting this letter of support for House Bill (HB) 556 - Drug Paraphernalia for Administration. HB556 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.

Substance use disorders (SUDs) are chronic relapsing brain disorders best treated with access to specialized SUD treatment. Criminalizing the use of illicit substances, either through the possession of drugs themselves or drug paraphernalia, leads to the consequence of individuals with SUD ending up in jails and prisons with limited access to treatment for their underlying SUD.

Decriminalizing drug paraphernalia is an important legislative step to encourage harm reduction programs to operate safely and without risk of legal prosecution. The Maryland Department of Health Behavioral Health Administration (BHA) supports Syringe Service Providers (SSPs) and Overdose Response Programs (ORPs) throughout the state of Maryland. The primary purpose of these programs is to provide harm reduction services to residents of Maryland with SUDs.

SSPs purchase and distribute safe drug supplies for use by individuals with SUDs and are protected from legal prosecution in Maryland¹. Allowing individuals with SUD to possess, purchase, use, carry, and share sterile supplies is important to make it safe for individuals to access services from SSPs without being targeted by Law Enforcement by laws that criminalize drug paraphernalia.

Decriminalizing drug paraphernalia, therefore, removes barriers to accessing safe practices that reduce the transmission of bloodborne illnesses such as HIV and Hepatitis C. It also allows individuals to engage with SSPs that can serve as an entry point to SUD treatment services when the individual is ready to reduce or stop using.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs, at sarah.case-herron@maryland.gov.

Sincerely,

Laura Herrera Scott, MD, MPH

Secretary

https://stopoverdose.maryland.gov/wp-content/uploads/sites/34/2024/05/SSP-Resources-for-LE.pdf