House Bill 556 - Criminal Law - Drug Paraphernalia for Administration - Decriminalization Position: Favorable

February 7, 2025

The Honorable Luke Clippinger Chairman, House Judiciary Committee 100-101 Taylor House Office Building Annapolis, Maryland 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 also eliminating the confusion created by competing policies as well as minimizing the undue burden on our criminal justice system.

Preliminary numbers of overdose fatalities for the most recent 12-month period reflect a decrease. While total overdose deaths remain at crisis levels, there is newfound hope for identifying, and expanding, strategies that work. Here in Maryland, we have shifted toward a health-centered approach on some measures and not others. Increased access to naloxone is a health-centered example, one that is credited with the lower death toll.

We will not overcome the tragic loss of life until we embrace the full array of proven strategies. Every major health organization in the world urges low-barrier access to all initiatives that prioritize safe use, yet we continue to undercut public health policies with persistent roadblocks to life-saving programs.

A person who seeks his own safety by using a clean needle (a sign that he cares about his health) is subject to arrest and jail time for possession of the syringe. Given Maryland's high HIV rates, we should do everything possible to discourage unsafe practices such as sharing or re-using syringes, yet this is common practice among those who fear arrest.

Policy decisions should promote health and safety over criminalization particularly in light of the reality that punitive measures have not reduced the prevalence of drugs or the number of addictions and, instead, have given us mass incarceration, loss of productivity, homelessness, disease, untreated addictions, and unconscionable disparities among marginalized communities—all at great expense.

I recently attended a two-day workshop put on by the National Academies of Sciences, Engineering, and Medicine on harm reduction services and related research. 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) and SAMHSA. The running theme: Harm reduction and treatment exist on a public health continuum, but the availability of services is impeded by drug policies—steeped in stigma rather than research—that do not reflect a collaborative approach to patient-centered care.

We must fight to ward off competing laws that undermine needed reform, that criminalize people who need health care, and that continue to amplify racial disparities. Reducing the harms of drug use is about respect, public health, and human rights. For these reasons, this Bill was passed in 2021.

I urge passage of this common sense Bill again this year.

Respectfully submitted,

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