

Network for Public Health Law: FAVORABLE on SB 327

Senate Judicial Proceedings Committee

February 5, 2023

The Network for Public Health Law supports SB 327. As a non-profit, non-partisan national public health law organization, we have expertise in the policy interventions proven to reduce the harms of drug use. Criminalization of drug paraphernalia is one of the primary legal barriers to an evidence-based, public health approach to drug policy. Maryland is currently a nationwide outlier on this issue. Passage of SB 327 would place it among the growing number of leader states that no longer impose criminal penalties on individuals who possess syringes and other safer drug use supplies.

Access to safer drug use supplies saves lives. It prevents disease transmission and corresponds with more positive treatment outcomes, reduced overdose rates, and healthier communities. When drug use equipment is criminalized, people in need are discouraged from coming forward to participate in treatment and community resources. Repeal of these criminal barriers helps provide that life-saving access.¹

Marylanders across political affiliations believe that drug use should be treated primarily as a public health issue.² Yet **Maryland is an outlier for its especially harsh criminal approach** to syringe possession and distribution. We recently published a peer-reviewed paper in which we researched the legality of paraphernalia-related criminalization, which revealed that on some metrics Maryland's paraphernalia laws were among the harshest in the country.³

By granting legal access to safer drug use supplies, Maryland would follow the successful approach of a states like Minnesota, Maine, and Massachusetts.⁴ It would join the 21 states that already allow possession of syringes for personal use and the 19 that allow their free distribution; the 15 states that already allow possession of smoking equipment for personal use and the 14 that allow its free distribution; and the 10 states that already permit all of the above (AK, ME, MA, MI, MN, NY, OR, VT, WA, and WV).⁵

Despite the claims that opponents may make, **the evidence shows that increased access to safe supplies does NOT increase drug use.**⁶ People with legal access to safer equipment are less likely to overdose or contract bloodborne diseases like HIV and more likely to enter treatment.⁷ Repealing the criminal prohibition on such supplies is not about taking a softer approach on crime, it's about taking a stronger public health approach on overdose and disease transmission, which is what the evidence supports and the public prefers.

For these reasons, **the Network for Public Health Law urges the committee to issue a favorable report on SB 327.**



The Network for Public Health Law provides legal information and technical assistance on issues related to public health. The Network addresses the legal and policy barriers that impede the establishment and expansion of evidence-based harm reduction measures such as naloxone distribution, syringe access programs, and access to evidence-based substance use disorder treatment. For more information, please contact harmreduction@networkforphl.org.

¹ See generally Corey Davis et al., *Legal Barriers to Safer Smoking Supplies Cause Harm and Should Be Removed*, 103 *Milbank Quarterly* 381 (2025); Corey Davis & Derek Carr, *Repealing State Drug-Paraphernalia Laws*, 387 *New England J. Med.* 1344 (2022); Corey Davis et al., *Paraphernalia Laws, Criminalizing Possession and Distribution of Items Used to Consume Illicit Drugs, and Injection-Related Harm*, 109 *Am. J. Pub. Health* 1564 (2019).

² See Legal Action Ctr., *New Polling Shows Public Support for Health-First Approach to Substance Use* (2024), <https://www.lac.org/assets/files/natl-polling-factsheet-messaging-and-tables.pdf>; Bully Pulpit Interactive, *Overwhelming Majority Say War on Drugs Has Failed, Support New Approach* (June 9, 2021), https://assets.aclu.org/live/uploads/document/BPI-ACLU_WoD_Public_Release_Memo_060221_Updated060821_FINAL.pdf.

³ Corey Davis et al., *A Comprehensive Review of State Laws that Govern the Distribution and Possession of Drug Use Equipment in the United States*, 149 *Int'l J. Drug Pol'y* 105152 (Mar. 2026), <https://www.sciencedirect.com/science/article/pii/S0955395926000046>.

⁴ Corey Davis, Network for Pub. Health L.: Insights, *Repeal of Paraphernalia Laws: Minnesota Leads the Way* (Dec. 13, 2023), <https://www.networkforphl.org/news-insights/repeal-of-paraphernalia-laws-minnesota-leads-the-way>; see also Anne Siegler & Ari Edelman McHenry, *Evidence-Based Approaches to Drug Policy: A Roadmap for Minnesota*, at 94 (Feb. 2025), <https://www.lrl.mn.gov/docs/2025/mandated/250612.pdf> (finding, in mandatory report to state legislature, that post-decriminalization in Minnesota “[k]ey informants noticed the impact of the policy change in their communities as participants at harm reduction organizations were more likely to safely dispose of used drug use equipment”).

⁵ *Supra* note 3, at 3, 6 (these counts include consideration of D.C.).

⁶ Katherine M. Mackey et al., Dep’t of Veterans Affairs, Health Servs. & Res. Dev’t Serv., *Effectiveness of Syringe Services Programs: A Systemic Review*, at vi, 10–14, 22 (Dec. 2023), https://www.ncbi.nlm.nih.gov/books/NBK598962/pdf/Bookshelf_NBK598962.pdf (finding, in comprehensive literature review of four decades of research, that increased access to syringes via syringe services programs “does not appear to increase injection frequency . . . , result in an increase in unsafe syringe disposal practices, or directly increase neighborhood crime rates”).

⁷ *Id.* at v, 9, 14–17, 21–22 (finding in same comprehensive literature review that increased access to syringes “prevent[s] HIV transmission” and “HCV transmission,” “reduced injection risk behavior,” and “increased treatment linkage and/or use of treatment services”).