



Baltimore Harm Reduction Coalition

2023 Legislative Agenda

AUTHORIZE THE ESTABLISHMENT OF OVERDOSE PREVENTION SITES

Public Health - Overdose and Infectious Disease Prevention Services Program ([SB618](#), [HB953](#))

Overdose Prevention Sites (OPS) are legally sanctioned indoor spaces where people can consume their own drugs with immediate access to life-saving interventions, medical care, emotional support, and non-judgemental therapeutic relationships. Maryland has lost more than 15,000 people to overdose over the past 8 years since this bill was first presented to the Maryland legislature. The General Assembly must authorize the establishment of OPS to reduce barriers to accessing critical resources. Decades of evidence show that community-run OPS reduce overdose fatalities and disease transmission. OPS engage and save the lives of those most at risk of overdose by permitting drug use under safer conditions than the alternative. As demonstrated by the nation's first sanctioned OPS in New York, these sites are particularly effective in supporting those typically turned away from more traditional programs for their drug use but who have high rates of overdose, such as unhoused people, young people, and people of color.

AMEND PARAPHERNALIA STATUTES AND DECRIMINALIZE SAFETY

Criminal Law - Drug Paraphernalia for Administration - Decriminalization ([HB173](#), [SB762](#))

Maryland law criminalizes people who use drugs for possessing and delivering life-saving and disease-preventing tools. In 2016, the Maryland General Assembly voted to expand syringe services programs, creating an exception to paraphernalia laws for certain affiliates of a program. However, this has not sufficiently prevented police from using paraphernalia as pretext for stopping, searching, and seizing individuals based on suspicion of drug use. This law is particularly unhelpful for those who rely on secondary distributors and are most at risk due to isolation from services, stigma, physical and mental disability. Maryland's paraphernalia laws must be amended to send a clear message to community members and police officers that the possession and delivery of supplies used to improve health and wellness is not a crime. This bill passed the legislature in 2021 but was vetoed by former Governor Hogan.

REDUCE BARRIERS TO HEALTHCARE FOR PREGNANT PEOPLE WHO USE DRUGS

SUPPORT: Pregnant and Perinatal Drug Screening and Testing Workgroup ([HB956](#))

SUPPORT: Pregnant Incarcerated Individuals - SUD Assessment and Treatment ([HB44](#), [SB190](#))

Due to over 145 years of criminalizing drug use, pregnant and parenting people who use drugs are severely stigmatized and understandably untrusting of healthcare providers. Experience with bias, judgment, and scrutiny – especially from healthcare workers – can isolate people and make it harder to seek prenatal care, mental health counseling, social services, and community support. These factors contribute to overdose being the leading cause of maternal mortality in Maryland for several years. The impact of this stigma can also be observed in the recent spikes of perinatal HIV and congenital syphilis in Maryland, both preventable indicators of a lack of prenatal care. Maryland must prioritize reducing the stigma associated with pregnancy and drug use through transparent healthcare and increased access to evidence-based treatment and supportive services.



LIMIT REACH OF CRIMINAL POLICIES THAT UPHOLD THE DRUG WAR

SUPPORT: Criminal Procedure - Reasonable Suspicion and Probable Cause - Cannabis ([SB51](#), [HB1071](#))

OPPOSE: Criminal Law - Fentanyl and Fentanyl Analogues - Penalty ([SB464](#))

OPPOSE: Criminal Law - Overdosing in Public - Prohibition ([HB667](#), [SB532](#))

The most effective strategy to reduce dangerous stigmas associated with drug use is to remove pathways to arrest and incarceration. Fear of police interaction leads to isolation and stigma about real or perceived drug use, which are key factors in perpetuating the overdose crisis. In Maryland, police are two times more likely to use suspicion of cannabis possession as probable cause to search Black drivers and their vehicles during traffic stops compared to the rate of searching white drivers. Doubling the potential sentence length for charges related to fentanyl possession will further marginalize communities who have been targeted by drug-related policing for decades. Drug court mandated treatment has not proven to increase health outcomes and in reality they rely on, and give rationalization for, mass arrests of people who use drugs. Maryland must accept that criminalization for drug-related charges has never and will never reduce the overdose rate.

UPDATE POLICIES ROOTED IN ANTI-LGBTQ BIAS AND INCREASE ACCESS TO CARE

SUPPORT: Trans Health Equity Act ([HB283](#), [SB460](#))

SUPPORT: Transgender Respect, Agency, and Dignity Act ([HB426](#), [SB761](#))

SUPPORT: Public Health - Prohibition on Transfer of HIV - Repeal ([HB287](#))

Transgender and gender non-conforming people experience both disproportionately high rates of substance use and criminal legal system involvement when compared to cisgender populations. BHRC supports efforts to improve the quality of life for transgender communities outside and inside of the carceral system, including protection from discrimination by correctional officers. Denying gender affirming services for trans and gender diverse Marylanders pushes this community further into the margins by exposing them to more employment and housing discrimination, harassment, and interpersonal violence. The statute prohibiting transfer of HIV was enacted in 1989 at the height of HIV misinformation rooted in homophobia, anti-Blackness, and drug war rhetoric. This statute allows for a fine five times as costly and a jail sentence three times as long as compared to the general disease statute. The health and legal community need to eliminate barriers to care and uplift the dignity of Maryland's most marginalized.

STRENGTHEN CAPACITY OF HARM REDUCTION PROGRAMS ACROSS THE STATE

SUPPORT: State Finance and Procurement - Grants - Prompt Payment Requirement ([HB328](#), [SB112](#))

SUPPORT: Behavioral Health Workforce Investment Fund ([HB418](#), [SB283](#))

In order for harm reduction to thrive in Maryland, our state must address the shortage in behavioral health workforce and the funding delays that prohibit smooth operation of our life-saving programs. Behavioral health providers continue to face bureaucratic challenges receiving funds awarded through the Maryland Department of Health. This has led to considerable disruptions in the administration of life saving, necessary public health programming – and placed a greater burden on smaller organizations doing vital work often overlooked by larger institutions and systems. Legislation to aid in prompt payment will benefit Maryland providers and their clients. Without proper workforce or the funding to pay them, Maryland will continue to not meet the needs of residents at risk of overdose.