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To: Shane E. Pendergrass, Chair
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House Health & Government Operations Committee Members

From: Major Neill Franklin, Ret., on behalf of the
Law Enforcement Action Partnership (LEAP)

Unfavorable - House Bill 1516

Washington County – Opioid Associated Disease Prevention and Outreach
Program – Prohibition on Establishment

Hearing: Friday, February 28, 2020, 1:00 p.m.

Distinguished Members of the Committee,

I'm pleased to testify today as a retired Major with the Maryland State Police and former commander of training for the Baltimore City Police Department. I am the Executive Director of the Law Enforcement Action Partnership, a nonprofit group of police, prosecutors, judges, and other criminal justice professionals who speak from firsthand experience. We oppose the passage of HB1516 because syringe access programs bring great public health benefits at no cost to public safety.

I spent years working as an undercover narcotics officer and commanding narcotics taskforces. I saw the dangers of overdose and injection-related disease transmission up close and personal. I learned that many people who used drugs would share someone else's syringe because they could be arrested if they carried their own. This put them at far greater risk of contracting HIV and Hepatitis C. They hid not just from police but from everyone who wasn't involved in the drug trade, often avoiding hospitals and doctors until it was too late.

It took us far too long to establish syringe access programs to improve this situation. Syringe access programs greatly reduce the chance of disease transmission. Decades of research are clear that they do not enable drug use; they enable people to take responsibility for the consequences of their drug use.

Syringe access programs also establish crucial connections to bring people into recovery. When someone is actively using drugs, often the only person they encounter with any medical training is their syringe program provider. The relationship they develop with this provider is more likely to bring them into recovery than any number of police officers chasing after them.

I was shocked to see that some people in Washington County are trying to erase these public health programs and the positive connections they are building. We are all better off when people who use drugs come out of hiding. Unfortunately, when a syringe program brings them out of hiding, ill-informed citizens see them coming and going from the program and blame their existence on it.

I want to be crystal clear -- there is no public safety justification for closing syringe access programs. I have never seen police make an arrest of any importance based on syringe possession. These programs do not bring more crime or drug use. In fact, these programs have been known around the country to improve public safety while keeping our police officers safe. Take Connecticut for example where a study of police officers in Rhode Island found that nearly 30 percent of them had been stuck by a needle at one point in their career, with more than 27 percent experiencing two or more needle stick injuries.¹ A second study of Connecticut police officers found that needle stick injuries were reduced by 66 percent after the implementation of syringe exchange programs.²

When people are no longer afraid to divulge to police officers that they have a syringe in their possession, police are safer, and relationships improve. By building relationships, they make it more likely that people who use drugs will report a crime to the police or step forward as a witness. They are an unqualified benefit to every county in our state.

Thank you for the opportunity to share my experience in law enforcement. I urge you to reject this bill and support public health and safety for all Marylanders.

Respectfully,



Major Neill Franklin (Ret.)

Executive Director

Formerly with the Maryland State Police and Baltimore Police Departments

*This testimony does not necessarily represent the views of these departments.

¹Lorentz J, Hill J, Samini B. Occupational needle stick injuries in a metropolitan police force. *American Journal of Preventive Medicine*. 2000;18:146-150.

²Groseclose, SL, Weinstein, B., Jones, TS, Valleroy, LA, Fehrs, LJ, & Kassler, WJ. Impact of increased legal access to needles and syringes on practices of injecting drug users and police officers—Connecticut, 1992-1993. *Journal of Acquired Immune Deficiency Syndromes & Human Retrovirology*; 1995;10(1):82-89.