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House Judiciary Committee
January 27, 2021

House Bill 212
Criminal Procedure - Medical Emergency - Immunity

Support

Amid the COVID-19 pandemic, the pre-existing opioid overdose death fatality crisis has worsened. In Maryland, third quarter data from the Maryland Department of Health shows a 12% increase in the number of deaths in 2020, over the same period the year before. The numbers were up even before the impact of the pandemic early last year. Maryland must focus on proven effective harm reduction strategies.

Powell Recovery Center, Inc. supports House Bill 212 to expand the state’s “Good Samaritan Law” that is meant to encourage people to call for help when someone is experiencing an overdose or other substance-related medical emergency. Powell has provided life-saving addiction and dual recovery treatment since 1994 in Baltimore City.

Drug overdoses continue to be a serious public health challenge in Maryland and across the country. In 2014, Maryland enacted a Good Samaritan law to encourage people to call for help when someone is facing a medical emergency due to drugs or alcohol. This is a life-saving measure, with a State-sponsored public education campaign whose message is “Don’t run - call 911.” But people will not call 911 if they believe they will be arrested because of their involvement.

Maryland’s law currently provides protection from arrest, charge and prosecution for certain specific crimes:

- Possession of a controlled dangerous substance
- Possession or use of drug paraphernalia
- Providing alcohol to minors

House Bill 212 will build on our existing law to do three things:

- 1) Clarify that the victim of the overdose or medical emergency is provided the same immunity from arrest, charge and prosecution as the person calling for help;
- 2) Expand the offenses that people are immune from to include: (over)

- All misdemeanor offenses;
 - Possession with intent to distribute (not volume or king pin dealing); and
- 3) Prohibit a person from being detained or prosecuted in connection with an outstanding warrant of another nonviolent crime if the only reason the police are involved is because of someone calling to save someone's life.

We need to expand the immunities provided in this law because we have seen too many instances where law enforcement seems to intentionally find other offenses with which to charge someone at the scene of an overdose. A recently released study, the Statewide Ethnographic Assessment of Drug Use Services (SEADS)¹, commissioned by the Maryland Department of Health, interviewed hundreds of people using drugs, providers, and other stakeholders, to learn more about the characteristics of drug use in Maryland's jurisdictions and what the barriers to and gaps in services are.

From the Central Maryland region of the state, the findings included, "Many people who use drugs were aware of the Good Samaritan law, but described incidences where law enforcement didn't abide by the law and worried about loopholes that allowed police to legally arrest them." Also, "There is a need for attention to Good Samaritan law implementation and to address appropriate response in the context of outstanding warrants."

From Dorchester County, the report found, "There was some indication that people who use drugs knew about the Good Samaritan Law; however, there was mixed willingness to call the police in the event of an overdose for fear of negative consequences."

And from Frederick County, the report found, "Both people who use drugs and stakeholders noted examples of emergency overdose response that resulted in arrest. Some of these had reached public attention and thus reinforced concerns about effective implementation of the Good Samaritan Law."

At its most fundamental level, the problem is that overdose scenes are treated as crime scenes instead of health crisis scenes. We understand that police want to investigate and find upstream volume dealers. But the approach creates fear and distrust among people who use drugs. Until we shift the framework through which we approach overdoses to one where providing a public health intervention is paramount, there will always be people too scared to call for help. And the death toll will continue to rise.

We at Powell Recovery Center urge your support of House Bill 212.

Sincerely,

Kim Wireman

Kim Wireman, LCSW-C, LCADC
President/CEO

¹ Statewide Ethnographic Assessment of Drug Use and Services, October 2019. Maryland Department of Health