Submitter:	Lauri Hoagland
On Behalf Of:	
Committee:	Joint Committee On Addiction and Community Safety Response
Measure:	HB4002

I am a Nurse Practitioner in Southern Oregon who has cared for patients with Substance Use Disorder for the last 39 years. SUD is a medical condition and our current situation in Oregon is a public health crisis. HB 4002 will not provide the resources to solve this complicated problem, it merely shifts the focus from the community to the individual. In 2020 Oregon voted to move away from the "war on drugs' and decriminalize substance use. We have had difficulty accomplishing this because we did not have adequate treatment services and, in fact, still don't; instead we've placed responsibility for this transition on police officers who are trained to handle criminal behavior not to provide medical care. The pandemic slowed the process of expanding services and increased depression, substance use and homelessness, and Fentanyl arrived in Oregon in a big way. So, now we want to return to our old familiar ways and re-criminalize this medical condition "lightly". The language in 4002 spells out how to handle criminals under the jurisdiction of the Department of Corrections. There is no mention of marijuana tax funding which I guess goes away since the bill replaces Measure 110. The individual's insurance will handle the cost. There is no mention of additional training for law enforcement to provide trauma informed and compassionate care. There is no mention of Naloxone distribution and there is little detail about the community-based pathway to treatment which is still to be figured out between law enforcement and behavioral health; this feels like we will be "enforcing treatment with a gun to the addict's head". I am glad there is increased accessibility to harm reduction medications and that will be provided in the jail. I am glad there is additional funding for behavior health professional education and there is a pathway to expunge the class C misdemeanor. I want deflection to NOT be optional. We need this choice available to all Oregonians regardless of where they live. I also want to see language to expand inpatient care for people who need medical support as they go through withdrawal and more opportunities to expand peer support and transition housing. It is very difficult to overcome an addiction. Most people need a lot of support medically and behaviorally for an extended period of time. We need to be willing to change our community approach not just put all the responsibility on the individual to change under threat. This bill does not give me faith that Oregon can improve on its public health crisis of addiction. Criminalizing substance use has never worked, with Measure 110, the people of Oregon recognized that. We need transformative solutions that support people in our communities to heal.