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ADVANCING JUSTICE AND PUBLIC SAFETY SOLUTIONS

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Date: February 26, 2024

Re: Oregon HB 4002 - Relating to the Addiction Crisis in this State

Position: OPPOSE

To: The Oregon Joint Committee on Addiction and Community Safety Response

Distinguished Members of the Committee,

My name is Richard Goerling, and I served for 22 years with the Hillsboro Police Department. I spent six years on active duty with the United States Coast Guard and retired as a Commander from the U.S. Coast Guard Reserve after 27 years of service. I hold an affiliate faculty appointment with the Graduate School of Psychology at Pacific University. I am also a speaker for the Law Enforcement Action Partnership (LEAP), a non-profit organization of police, prosecutors, judges, and other criminal justice professionals who speak from firsthand experience. Our mission is to make communities safer by focusing law enforcement resources on the greatest threats to public safety, working toward healing police-community relations, and addressing the root causes of crime.

I appreciate the opportunity to submit testimony in opposition to House Bill 4002. This bill would roll back Measure 110 and recriminalize drug possession as a misdemeanor charge, potentially subject to fines and jail time. HB 4002 would abandon the goal of a public health approach to addiction by treating it as a crime. I believe this bill would damage police-community trust, create significant obstacles to recovery, foster discriminatory police practices within marginalized communities, and prevent police from focusing on more serious crimes.

First, this bill would damage police-community trust. During my service as a lieutenant in the Investigations Division, I supervised criminal investigations involving family violence, child exploitation, drugs and vice, and other criminal violations. I saw that in order to solve the most serious crimes, we need people to talk to us. Additionally, it was clear that the roots of criminal activity involving drugs were

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*Formerly known as Law Enforcement Against Prohibition*

complex and that the Nation's War on Drugs was fraught with failures and human consequences.

I founded the Mindful Badge Initiative, which trains law enforcement leaders and operators on how to incorporate mindfulness into their policing practices, with the goal of enhancing the health of police officers, the tradecraft of policing and police-community relations. Police officers are deeply, and often negatively, impacted by the complex forces that drive criminal activities in our communities. A [large body of research literature](#) suggests that our humanity easily erodes when exposed to this landscape of suffering in our communities; [trauma injury among police officers](#) is the norm rather than the exception. With this erosion of humanity and connection to members of our community comes a [measurable reduction](#) in the [performance of the individual officer](#).

Across policing, the research underscores that cultivating and maintaining trust from the people we serve [directly impacts public safety](#) because, without connection and trust, people do not report crimes or cooperate with law enforcement. Often, when we arrest a person suffering from Substance Use Disorder for personal drug possession, the community sees us wasting taxpayer resources and punishing someone who needs treatment and they become less open to working with us to investigate serious crime.

Police will lose trust particularly where we need it most – in Black and brown communities. Today, even after Measure 110, Black Oregonians are [more than twice as likely](#) as white Oregonians to be issued M110 citations. Portland police have the [fifth highest arrest rate disparities in the country](#). While police agencies have created diversion programs that connect people struggling with addiction to treatment and other rehabilitation services, these programs are more likely to exclude or fail people of color. If we recriminalize drug possession, we know that Black and brown Oregonians will be arrested and incarcerated at higher rates. These disparities will prevent police from solving crime in communities of color and will create barriers of connection and trust in these communities.

Second, this bill would prevent people from stabilizing their lives to recover from addiction. A criminal record can be a lifelong bar to opportunity and [can cost someone their employment, housing, and public benefits](#). This is a significant barrier to recovery, self-efficacy and vertical growth into an engaged member of society. Together, these factors create a chain of system oppression and cause the person to lose hope - as well as all of the supports designed to help them out of poverty and unemployment. This only serves to increase their chances of relapse and recidivism. By criminalizing drug possession, HB 4002 would increase [unemployment, homelessness](#), and [re-incarceration](#) – particularly in Black and brown communities, where arrests occur at higher rates.

Third, recriminalizing drug possession would prevent law enforcement from focusing on serious crime. [Oregon is already under federal court order to release people held on serious charges](#) due to the lack of public defenders. HB4002 would increase the public defender caseload, bringing thousands of new people into a system that is already in crisis. Most people arrested for low-level drug possession are not higher-level drug manufacturers and traffickers. Many of them have [little or no prior criminal history](#). By recriminalizing

addiction, we would be dedicating critical resources to arrest and jail people who do not pose a significant threat to public safety -- not only preventing police from focusing on homicides and sexual assaults, but also forcing our jails to release people held on more serious charges.

Finally, this bill would foster discriminatory police practices within marginalized communities and enhance the risk of excessive force against community members. It is clear that Measure 110 came about due to consistent failures in police policy and practices with marginalized community members suffering from addiction. [The trauma](#) behind the badge often emerges as [loss of compassion and empathy, dysregulated emotion, aggression](#) and a [higher risk of decision-making errors](#) leading to unnecessary use of force.

I understand that some lawmakers believe that recriminalizing drugs would decrease overdose deaths. However, according to a joint study by the CDC, the Center for Opioid Epidemiology and Policy at NYU Langone, and the Network for Public Health Law, drug decriminalization in Oregon and Washington [has not led to increases in overdose deaths](#).

This makes sense, because we see that arresting people for drug possession does not stop overdose. [Studies](#) have shown that increasing incarceration does not reduce drug overdose deaths. States like West Virginia passed harsh new mandatory minimum laws years ago, and they continue to [lead the nation in overdose and addiction](#). There is no evidence that these laws have helped to deter overdose.

In fact, drug recriminalization may increase overdose deaths by decreasing calls for help. Facing the threat of a criminal penalty, people who witness an overdose will flee the scene rather than call the police to save a life. This is why [all but 5 states have enacted Good Samaritan laws](#), which extend immunity from criminal liability for drug possession to those who call 911 to help victims of overdose. Bystanders to an overdose are more willing to call 911 when there is no risk of arrest for drug related charges. By recriminalizing drug possession, legislators would stop bystanders from calling in time for first responders to administer life-saving care that would prevent overdose deaths.

I agree that Oregon must reduce overdose deaths, and we can actually do so by establishing proven and effective harm reduction services. One solution is to institute state-wide access to the life-saving overdose reversal drug naloxone. Another is to implement Overdose Prevention Centers (OPCs), which are safe spaces supervised by medical and harm reduction professionals. People can bring in and use their previously obtained drugs, and if they begin to overdose, staff can rapidly administer naloxone to reverse the overdose and save the person's life. In 2021, two OPCs opened up in New York City, where staff [prevented 636 overdose deaths](#) and [averted 39,422 instances of public drug use](#) in their first year. In addition to [significantly reducing overdose deaths in their local communities](#), OPCs have also been shown to reduce [discarded syringes](#) and [crime](#).

I believe this legislation would be a threat to Oregon's public health and safety, it would unnecessarily put police officers and community members at risk. The recriminalization of drug possession would reduce

police-community trust, prevent people from recovering from addiction, prevent law enforcement from focusing on the most serious threats to public safety, and foster discriminatory police practices within marginalized communities enhancing the risk of excessive use of police force. Oregon can and must do better to address the addiction and overdose crisis.

Thank you for the opportunity to share my perspective in opposition to this bill.

Respectfully,

Lt. Richard Goerling (Ret.)  
Hillsboro Police Department, OR  
Speaker, Law Enforcement Action Partnership