Submitter:	James Spears
On Behalf Of:	Oregonians left out of the room
Committee:	Joint Committee On Addiction and Community Safety Response
Measure:	HB4002

"I agree with the points far below but I also want to add some personal notes:

I think open public hard drug use should be a crime akin to indecent exposure, with appropriate punishments in place. However, criminalizing people just for using drugs... We already know that doesn't work! Why waste energy and our already-stressed criminal justice system perusing a strategy already proven pointless and damaging by decades of failure? We can't even prosecute shoplifters now as it is!

Also, the problem with hard drugs is nation-wide. If Oregon were the only place with these issues then I would understand re-thinking 110, but that is not the case. 110 is only a scapegoat. Obviously. And it hasn't even been correctly implemented yet.

Further, it is rather easy to see that the current fentanyl crisis is really a byproduct of the failed drug war. It is no coincidence that this is happening shortly after the tightening on availability of prescription opiates. People are going to use drugs no matter what laws we put in place. More laws around this only leads to more tragedy, from lives ruined due to the justice system, and from tainted/unknown supply issues. Decades have proven this quite clearly.

We need regulation, not prohibition. Decriminalization was a step in the right direction. Please do not step backwards.

Thank you for reading.

And the canned response, which you have probably read many times already:

I am a constituent who is extremely disappointed and saddened to see state leaders pursue harmful criminalization policies instead of taking meaningful action to increase access to treatment services and housing for Oregonians.

Just like the hundreds of Oregonians who submitted testimony earlier this month against harmful criminalization proposals, including HB 4002 and HB 4036, I strongly urge lawmakers to follow the evidence and the data: decades of the failed war on drugs tell us that sending people to jail for having an addiction only ruins lives.

I've opposed HB 4002 from the start but I'm particularly frustrated by the -24 amendment, including the special interests behind it.

When I read that lawmakers invited prosecutors and law enforcement into closed door meetings to amend HB 4002, I knew the result would be harmful to the people left out of those "negotiations," including people with and communities with lived experience of disparities in the criminal justice system, the behavioral health system, and housing systems. Organizations representing Black and brown communities were shut out of the room.

HB 4002 -24 embraces a dangerous and damaging criminalization approach at the expense of the safety, health, and well-being of Black and brown communities. I strongly oppose HB 4002 for failing to consider the Oregonians most at-risk of overpolicing and government harm: Black and brown people, Indigenous Oregonians, low-income Oregonians, and rural Oregonians.

The latest version of HB 4002 -24 creates massive inequities between counties. People who live in counties without a deflection program will face immediate HB 4002 arrests while people living just a few miles away will be offered connection to treatment. Your zip code shouldn't determine your ability to access treatment services. An easy fix to this would be to simply require all counties to set up deflection programs.

HB 4002 -24 sets deflection programs in select counties up to fail - in the same way Oregon failed to implement Measure 110. For lower income Oregonians, the shortage of public defenders means cases will be dismissed with no connection to care, but leaving people with arrest records. And HB 4002 -24 recriminalizes addiction long before deflection programs will be set up.

HB 4002 -24 also falls short of investing in Oregon's woefully under resourced mental health and drug addiction treatment services. The status quo of providing just 50% of the capacity necessary to meet the substance use disorder services needed