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Testimony of the Maine Municipal Association

In Support of Part A and Opposition to Part B of

L.D. 1975 - An Act to Implement a Statewide Public Health Response to Substance Use and Amend the Laws Governing Scheduled Drugs

January 17, 2024

Senator Baldacci, Representative Meyer and members of the Health and Human Services Committee, my name is Rebecca Graham, and I am submitting testimony in support of Part A of the bill, and in strong opposition to Part B of the bill, on behalf of the 70 municipal leaders elected by their peers to serve on the Association's Legislative Policy Committee and directed to establish positions on bills of municipal interest.

Substance use and the cycle of dependency is a complex condition with the fall out not only affecting the individuals trapped in the cycle, and their family members but also those who must manage many of the social burdens this creates for the public-at-large, municipal employees and programs, and the free use of our public spaces. Municipalities need support and tools to assist supporting individuals into the programs that will successfully interrupt this cycle of substance abuse.

It is for this reason that officials support section §7281. which creates the Substance Use, Health and Safety Fund. Short term housing that allows individuals to continue to use drugs are a challenge to find or build for large municipalities in Maine, and the complex needs of those individuals' experiencing homelessness that leads to their inability to engage with temporary housing programs is directly related to their inability to maintain their ability to continue to use substances. Municipalities have invested property tax revenues to assist this in all the ways their limited municipal boundaries can provide but these programs need more wrap around support on a statewide level.

It is for these same reasons that officials are opposed to Part B of the bill. Title 17-A is as much of a tool to combat substance use disorder as a fund to address the obstacles that frequently keep individuals out of the care, they need to be in a place to make good use of any of the resources the fund in Part A would create. Municipalities need both greater availability for treatment and supports outlined in Part A but also tools to keep the public safe from the greater public harms that stem from trafficking of drugs and their open use.

Largely rural municipalities have already experienced a significant rise in the exploitation of our current legalized cannabis use laws by organized criminal groups. When discovered, these residences are also the location of human trafficking activity, human smuggling operations and in some cases, led to the targeted killings of perceived competitors.

Additionally, until the fund in Part A produces all the support necessary to assist individuals in substance use crisis currently, moving forward with Part B is at the very best premature. It's important to understand the enforcement, and judicial discretion tools that already assist in creating diversions into care for individuals who are in no place to engage with those services currently without the motivation to avoid charges, or have their children returned to their care.

An individual's motivation to seek treatment is most frequently as a method to avoid stronger criminal penalties and the first treatment an individual may receive currently is not self-sought but instead is as a result removal of someone's liberty. Not only do brief incarceration or drug court processes create the space to allow individuals to get the treatment they need, but it is also vitally important to protect minors who return to unsafe situations at home.

Officials have listened to their peers in state that have followed this course and think there are many lessons to be learned from the struggles those cities have managed since their pivot towards more lenient statutes. Without the right mix of social programs already in place, decriminalization of such large amounts of deadly substances has created significantly more issues that can be avoided if Maine pivots towards this path. Any decriminalization efforts should be reviewed in balance with their fall out by those communities who have gone before us.

Officials encourage the committee to pass Part A of the bill only, and also ask that as you review this section you engage with the substance use and mental and behavioral health delivery that is currently in place and unfunded in county jails and make sure that those existing providers and services are supplemented and grown to a statewide consistently available resource by the program envisioned in §7281-2(B).