

**WRITTEN TESTIMONY for PUBLIC SAFETY AND SECURITY COMMITTEE via
Email: PSTestimony@cga.ct.gov**

Of Jason Crowell, CAC – Director of Outreach

In Opposition to Raised HB 5583: AN ACT CONCERNING EMERGENCY INTERVENTION BY A POLICE OFFICER WHEN A PERSON SUFFERS AN OVERDOSE

Public Hearing: March 2, 2021

Chairpersons Horn and Bradley, Ranking Members Champagne and Green, and Distinguished Members of the Public Safety and Security Committee, thank you for the opportunity to provide public testimony. My name is Jason Crowell, and I am Director of Outreach for SWAN (Sex Workers and Allies Network). To counter the harms of structural disempowerment, SWAN: (1) connects to people on the streets to basic resources—often meeting people at their point of most urgent need, SWAN bridges the gap between the streets and social service organizations; (2) advocates alongside clients to local authorities and service providers, as they generally have little understanding of the needs of those involved in sex work and active addiction. Through outreach, SWAN provides local sex workers, the homeless and those impacted by substance use disorders with harm-reductive personal care kits that help to minimize the harms associated. Furthermore, several SWAN members are authorized to operate a needle exchange, allowing many individuals to engage in safer drug use.

I write you today in opposition of HB 5583: AN ACT CONCERNING EMERGENCY INTERVENTION BY A POLICE OFFICER WHEN A PERSON SUFFERS AN OVERDOSE. While the proposed bill may come from a place of good intentions, as it stands today, HB 5583 opens the opportunity to further criminalize and increase harms to people who use drugs. The impacts of the overdose crisis can be extremely painful; however we cannot allow desperation to guide our policy.

The wording “take a person into custody” is overly vague and quite concerning, with no indication as to whether overdose survivors will encounter compulsory treatment, incarceration, or forced hospitalization. There is no indication that any compulsory treatment would be evidence-based. There is also limited evidence that indicates compulsory treatment is beneficial, with some studies demonstrating harm.¹ In our neighboring state of Massachusetts the Department of Public Health found that those who received involuntary treatment were more than twice as likely to die of opioid-related overdoses.² Furthermore, clients who received voluntary treatment had better outcomes than clients who received involuntary treatment.³

Should this wording indicate incarceration, there are additional concerns. Nationwide, drug overdose is the leading cause of death following a period of incarceration and in the state of Connecticut more than

¹ http://fileserv.idpc.net/library/compulsory_drug_treatment_effectiveness_werb_et_al.pdf

² <https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:e5497512-c5ab-4fa2-ade6-d051047cc869>

³ <https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:e5497512-c5ab-4fa2-ade6-d051047cc869>

half of those who died by overdose in 2016-2018 were formerly incarcerated.⁴ It is critical that we protect the public's health, rather than facilitate poorer outcomes.

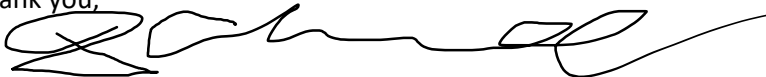
Rather than produce fruitful results related to drug use or substance use disorder for those refusing transport to the hospital post-overdose, this law would serve to undermine public confidence in Connecticut's existing Good Samaritan Law (CGS § 52-557b) and discourage the use of 911 in the event of an overdose. Forced compliance in these cases, even if simply transporting someone to the emergency room, would also likely increase costs to hospital systems with little to show in return. These resources would be better invested elsewhere.

Our law enforcement is already overburdened by the overdose crisis and are not the appropriate actors to determine a survivor's need for medical care. Further, racial inequity in the criminal-legal system, including the enforcement of laws, has been well documented.⁵ There is no indication in the bill regarding how this policy would be equitably and reasonably implemented, and not used as another tool of criminalization and coercion among communities of color.

After experiencing the trauma of overdose, no survivor should then suffer the secondary trauma of being taken into law enforcement custody. The right to consent to or refuse care is a fundamental right of any patient which must not be eroded, no matter how much one may disagree. This legislation, if passed, would represent a step backwards in our efforts to treat substance use disorder as a public health issue with a trauma-informed lens.

There is simply no evidence that this approach will produce any positive outcomes, either for the individual or the community. As the literature and evidence supporting harm reduction and decriminalization of drugs and the people who use them continues to grow more robust, I urge you to oppose HB 5583 which, if passed, will likely cause significant damage to the health and wellbeing of people who use drugs, worsen outcomes for people who experience an overdose, and exacerbate the opioid overdose crisis in CT.

Thank you,

A handwritten signature in black ink, appearing to read "Jason Crowell", written in a cursive style.

Jason Crowell, CAC

SWAN

⁴ https://portal.ct.gov/-/media/OPM/CJPPD/CjCipac/CJPAC-Presentations-Folder/2019-Presentations/Presentation-Kyle_CJPAC-OCT-2019.pdf?la=en

⁵ <https://www.sentencingproject.org/issues/racial-disparity/>