

Criminal Law and Special Committee on Public Safety
2020/09/29

September 29, 2020

Dear Members of the Senate Criminal Law Committee:

My name is Kathie Kane-Willis and I have been trending the opioid epidemic for more than 15 years. I am writing this as a researcher and as the Chicago Urban League's director of policy. It is imperative that we end the war on drugs and consider health based approaches to drug use.

During the pandemic and prior to it there has been a dramatic increase in the number of drug overdose deaths in Cook County and the state of Illinois. This year we will see an increase in deaths that will kill more people than gun violence or any other single cause of death aside from Covid-19, that will be unprecedented, a near doubling or tripling of deaths due to accidental overdose.

These changes in drug-based mortality make it imperative that we do something to reduce these dramatic increases. One way in which we can do that is by making sure that people do not spend any time in jail if they are in possession of small amounts of controlled substances. People who spend time in jail or prison are likely to lose their tolerance to opioids, which **RAISES** their risk of fatal overdose.

It is time to not only to defelonize small amounts of drugs but to make these violations a civil penalty rather than a criminal justice penalty. This already occurs with cannabis and did so prior to legalization of cannabis.

Legalization and decriminalization are not the same. Legalization means that one can purchase substances legally while decriminalization means that the offense is treated outside of the criminal justice system. Portugal did this in 1999 in the midst of a heroin overdose epidemic and since that time fatal overdoses, blood borne pathogens such as HIV and HCV had plummeted as has youth drug use, one of the lowest rates in any nation in the European Union. It takes bold thinking to address this public health problem as such. I had the opportunity to study the model in Portugal – and they have treatment on demand, outreach programs that provide medications like methadone and buprenorphine to people who are addicted to opioids. Mothers and children are not separated because of drug use, rather they are treated together. Families can flourish, people are supported and simple drug possession is a civil offense.

This might seem a dream but Oregon is likely to decriminalize possession of drugs later this year, following a number of states who have defelonized simple drug possession. The only thing standing between treating this overdose crisis like the health epidemic that it is, is our current laws. Thinking about how to save lives rather than punish people for their health conditions is essential. We also know that the war on drugs has been an unsuccessful in reducing supply. In essence, the drug war has resulted in more dangerous substances some illegal and some currently legal leaching into the drug supply – the result has been novel analogues and more dangerous combinations of drugs that cause death.

The other result of the misguided war on drugs is the mass incarceration of black and brown individuals and whites many of whom have co-occurring mental health conditions. Treating these people by locking them in jail is the tantamount to heaping harm upon people who have already been harmed. These individuals need health care and support not shame and criminal records. It is very expensive to provide health care in a correctional setting, and being locked up in prison and having one's freedom taken away does nothing to help substance use disorder – except make it worse.

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I urge this committee to consider broad new legislation that puts the health of our state's residents first and foremost and that puts the economic need first and foremost. If we created a civil penalty for simple drug possession, we would save many Illinoisans lives and taxpayers' money.

Sincerely,

Kathie Kane-Willis

Director of Policy,

Chicago Urban League