

Q&A: DRUG CRIMINALIZATION & HIV

Q: Cascade AIDS Project is an HIV and LGBTQ+ health organization. Why does it support Measure 110, including the decriminalization of drugs?

Substance-use disorder (SUD) is a major contributor to the HIV epidemic in Oregon. Almost one out of every five HIV diagnoses is related to injection-drug use.

When drugs are criminalized, people who inject drugs are more likely to be afraid to access syringe programs, and thus likelier to share needles. A 2018 review in *The Lancet* of over 100 studies examining the link between drug criminalization and HIV found that the research “consistently showed clear patterns of criminalization having negative effects on HIV prevention and treatment.”

In addition, having provided housing services for people living with HIV for decades before Measure 110 was passed, CAP has witnessed the negative impact that drug-related convictions have had on countless clients’ housing stability and health. Having a drug crime on your record makes it harder to secure housing, and for people living with HIV, being unhoused can be fatal.

Q: Has the decriminalization of drug possession in Oregon made the use of “hard” drugs more common here than in other states?

No. According to the federal government’s National Survey on Drug Use and Health (NSDUH), in 2018-19, 4.32% of respondents in Oregon reported having used an illicit drug other than marijuana in the past month. In 2021, after drugs were decriminalized, that number was actually lower: 3.58%.

Q: What about addiction to drugs? Has decriminalization in Oregon made addiction worse here than in other states?

No. According to the NSDUH, the percentage of respondents in Oregon experiencing substance-use disorder hasn’t significantly changed relative to other states since drugs were decriminalized here. We ranked eighth-worst in 2018-19 and seventh-worst in 2021. Several states that have not decriminalized drugs, like Montana and New Mexico, ranked lower than Oregon.

Q: Then why does it seem like the use of hard drugs and drug addiction have gotten worse in recent years?

The entry of fentanyl and other new substances into the illicit drug market has made drug addiction more severe in terms of addictiveness, behavior, and overdose. Meanwhile, fast-rising housing costs and lack of affordable housing in many urban areas have caused a lot of people experiencing addiction to become unhoused. These problems are occurring nationwide and are not unique to Oregon.

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Q: Doesn't the threat of criminal penalties give some people experiencing addiction the "push" they need to enter treatment?

Some people, yes--but historically, it has harmed many more by putting drug crimes on their criminal record that later act as barriers to housing and employment. This harm has fallen disproportionately on people of color.

In addition, currently, Oregon does not have enough capacity in its addiction-treatment programs to serve people voluntarily seeking treatment, so people forced to enter treatment by the criminal-legal system either wouldn't be able to or would take away a spot from those choosing to get help.

Q: If the re-criminalization of drugs won't help, what should Oregon do to address the addiction crisis?

The state should increase funding for badly needed SUD services, including:

- Mobile crisis response services staffed by behavioral-health professionals (e.g., Portland Street Response)
- Walk-in sobering centers
- Addiction treatment programs, including residential and outpatient programs
- Recovery housing
- Overdose prevention centers where people experiencing addiction can use drugs of the street, under professional supervision, and with access to harm-reduction and treatment services

Q: Who can I reach out to if I want to ask further questions about CAP and its policy work?

If you would like to learn more about us and our policy work, including ways to get involved or support us, please reach out to **Jonathan Frochtzajg, Public Policy & Grants Manager**, at jfrochtzajg@capnw.org.

You can also learn more about our policy work, such as our current initiatives in Oregon & Washington, at www.capnw.org/ppa