OREGON’S BALLOT MEASURE 110

THE NATION’S FIRST-OF-ITS-KIND DRUG DECRIMINALIZATION LAW

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OREGON SJOL
One of the things in this picture is illegal in Oregon.
BALLOT MEASURES IN OREGON

- Petitions
- Approval
- Signature Gathering
• Signature Verification
• Fiscal Review
• Simple Majority Makes It Law
• The Legislature Can Repeal Or Amend An Initiated Statute By Simple Majority
BALLOT MEASURE 110

• **Supporters:**
  • 4 Committees were the main sponsors
  • They raised $6 million in cash and in-kind contributions
  • $5 million came from the Drug Policy Alliance
STATEMENT OF DRUG POLICY ALLIANCE IN SUPPORT

• “Oregonians have always been early adopters of drug policies that shift the emphasis towards health and away from punishment... the idea behind this groundbreaking effort is simple: people suffering from addiction need help not criminal punishments. Instead of arresting and jailing people for using drugs, the measure would fund a range of services to help people get their lives back on track.”
NJ: weed is legal

Oregon.

Peanutbutter and crack sandwich.
• **Opposition:**
  - One lone committee opposed BM 110
  - It raised $167,000
STATEMENT OF SALEM HEALTH HOSPITALS AND CLINICS IN OPPOSITION

• “The framers of ballot measure 110 portray individuals with active addictions as rational actors who will naturally seek out and accept treatment for their condition. But I can assure you as front line providers this is simply not true... removing the threat of incarceration and abandoning the collaboration between law enforcement, the judiciary, probation, and the drug court system will result in a revolving door of drug abuse, treatment refusal, crime, homelessness and ongoing costly health related expenditures for hospitalizations due to overdose, infections and drug-induced psychosis”
BALLOT MEASURE 110

- Oregon Voters passed BM 110 in November 2020
- It passed 58.5% to 41.5%
- Took effect February 1, 2021 (sort of)
- Pre-Election estimates project that PCS convictions would drop by 90% (about 4,000 cases per year)
- Will reduce the number of people in specialty courts by over 25% and some project much higher
BM 110: WHAT IT DOES

- Establishes addiction and recovery centers in every region of the State for free assessment and referral to health care and services.
- Shifts a portion of marijuana tax money to pay for the centers and directs any state and county savings from the reduction in drug arrests and convictions to the fund for addiction treatment.
- Creates an Oversight and Accountability Council, appointed by the Oregon Health Authority, to oversee the centers, the funds, and the grants to the centers.
• Eliminates criminal penalties for possession of specified quantities of controlled substances by adults and juveniles. Possession changes from a misdemeanor or a felony (depending on an individual’s criminal history) to a Class E violation with a $100 fine (which is waived if the person participates in a free assessment at one of the addiction and recovery centers).

• Reduces penalties for possession of controlled substances, other than possession constituting a commercial drug offense, in amounts greater than specified quantities, to a misdemeanor with less than a year imprisonment, a maximum fine of $6,250 (never imposed) or both.
• Creates the presumption that a person applying for an occupational or professional license or other authorization, and who was convicted of a controlled substance Class E violation, is NOT unfit to hold the license or other authorization.
When your friend from Oregon goes camping with you
DRUGS INVOLVED AND THEIR AMOUNTS

- Reduces the crime classification from Class A misdemeanor to Class E Violation (essentially a less expensive traffic ticket) for possession of:
  - Schedule I, Schedule II and schedule III controlled substances;
  - Methadone (less than 40 units);
  - Oxycodone (less than 40 pills);
  - Heroin (less than 1 gram);
  - Cocaine (less than 2 grams);
DRUGS INVOLVED AND THEIR AMOUNTS (CONT’D)

• MDMA (less than one gram or 5 pills);
• LSD (less than 40 units);
• Methamphetamine (less than 2 grams);
• Psilocybin (less than 12 grams);
DRUGS INVOLVED AND THEIR AMOUNTS (CONT’D)

• The measure also reduces from a felony to a misdemeanor simple possession of substances containing:
  • 1 to 3 grams of Heroin
  • 1 to 4 grams of MDMA
  • 2 to 8 grams of Methamphetamine
  • 2 to 8 grams of Cocaine
OTHER PROVISIONS:

• If the possessor has previous convictions, removes the increase in crime classification from a Class A misdemeanor to a Class B Felony for Possession of:
  • A Schedule I substance;
  • Heroin; and
  • MDMA
OTHER PROVISIONS:

• If the possessor has previous convictions, removes the increase in crime classification from a Class A Misdemeanor to a Class C Felony for possession of:
  • A schedule II substance;
  • Methadone;
  • Oxycodone;
  • Cocaine;
  • Methamphetamine
IMPLEMENATION

• The Oregon Health Authority must designate a temporary, statewide Telephone Addiction Recovery Center (TARC) by February 1, 2021. It is to be operated 24/7/365.

• By October 1, 2021, the telephone system will be terminated because Addiction Recovery Centers (ARC’s) will be up and running.

• Persons charged with the Class E violation can pay a fine of $100 or complete a health assessment in lieu of paying the fine.

• The health assessment is to be a comprehensive behavioral health assessment, including substance abuse disorder screening by a certified A+D counselor.
IMPLEMENTATION

- The ARC’s will get money by asking for it in the form of grants.
- Grants are issued by the Oversight and Accountability Council.
- Members of the Council are comprised of someone from OHA, three community members of color, a physician, a social worker, a treatment provider, a harm reduction provider, a housing specialist, an academic, two people who suffer from addiction, two recovery peers, a mental health provider and two others whose jobs aren’t entirely clear.
- Four year terms, filled by appointment, they are paid positions and they make their own rules.
FUNDING

• They are funded by marijuana taxes and in the first year they have $57 million to spend. It’s expected to climb to $91 million.

• The measure has a tricky way of calculating and securing money saved via the reduction in arrests, incarceration and supervision. They estimate $15k per case so their fund could really grow.

• Takes marijuana tax money from schools and police who received it before.
ARE WE READY? …. NO
ARE WE READY? …. NO

“The biggest success, I think, of 110 is decriminalization,” said Reginald Richardson, director of the state Alcohol and Drug Policy Commission. “But in terms of creating a system where people can get more treatment, which is what was advertised, that's absolutely not what's going to be happening.”
Another complicating factor is that even now, treatment centers face staffing shortages.

Addiction counselors on average earn less per hour than their counterparts in mental health, state reports have found.

That remains a barrier to expanding treatment.

“We’re competing with Starbucks and right now Starbucks is winning,” Richardson said. He means the comparison literally. He said he’s aware that some rural addiction treatment centers struggle to retain employees after the coffee chain opened a nearby store, where the pay and benefits are comparable or better.

“We have people who are working in the addiction field who still get food stamps,” Richardson said.
• Marijuana has been essentially legal in Oregon for awhile.
• Marijuana is Oregon’s largest cash crop (before legalization).
• Oregon started with medical MJ and quickly legalized it all.
• Marijuana is both big business and a growing (no pun intended) part of our tax base
There are more marijuana shops in Oregon than Starbucks and McDonald’s

Staring Wednesday, adults in Oregon will be able to legally possess and consume marijuana. But the state already has more ganja shops than Golden Arches or places to buy Grande Frappuccinos.

There are currently 269 medical marijuana dispensaries open for business in Oregon, according to the state’s health authority.
MARIJUANA LEGALIZATION VS. BM 110

• Big increase in marijuana related DUII’s and vehicular homicides.
• Poly substance DUII’s and vehicular homicides were already on the rise and are expected to rise.
• Homeless/drug addict “tourism” on the rise
AFFECT ON TREATMENT COURTS

• In a word: Bad

• The Oregon Criminal Justice Commission believes PCS convictions will plummet by 90% (from 4,057 felony and misdemeanor PCS convictions in 2019 to a predicted 378 after passage of the measure).

• Many treatment courts are drug possession only courts and would have to shut down.

• Some treatment courts involve other charges and may still be viable but if they are simply misdemeanors participants may decline entering a treatment court.
NEXT STEPS FOR SPECIALTY COURTS

• The Behavioral Health Advisory Committee Specialty Court Subcommittee is working on ways to address the impact of BM 110.

• Checking with system partners: How is law enforcement handling arrests now? Is the District Attorney’s Office issuing PCS cases at all and at what level and are they still referring to treatment courts? Has BM 110 affected the defense bar’s willingness to recommend treatment courts?

• Review referral process and eligibility criteria to expand who is eligible.
NEXT STEPS FOR SPECIALTY COURTS

- Consider allowing other cases into treatment court’s not previously contemplated:
  - Property offenses
  - Addiction-driven delivery of controlled substance cases
  - Certain types of violent offenses/offenders
  - Downward Departures (those cases that would be presumptively prison)
  - Probation violations in lieu of revocation
  - Require specialty court screening as a condition of probation at sentencing
WE WOULD LIKE TO CONGRATULATE DRUGS

FOR WINNING THE WAR ON DRUGS