

CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

Sitting/Acting as (if applicable)

Policy Session Worksheet

Presentation Date: April 19, 2023 **Approx. Start Time:** **Approx. Length:** 30 Minutes

Presentation Title: Refer advisory question to voters regarding repeal or reforms of Measure 110 to the November ballot

Department: County Counsel

Presenters: Jeffrey Munns and Shawn Lillegren, County Counsel, Senior

Other Invitees: District Attorney John Wentworth

WHAT ACTION ARE YOU REQUESTING FROM THE BOARD?

Approval of advisory questions for a ballot measure to be referred to voters by the Board.

EXECUTIVE SUMMARY:

As part of the Project Turnkey discussion, the Board expressed interest in referring a question to the voters concerning Measure 110. Measure 110 was a voter-approved initiative that was intended to provide statewide addiction and recovery services, as well as lowering the penalty from a crime to a civil violation for possession of specified drugs.

FINANCIAL IMPLICATIONS (current year and ongoing):

Is this item in your current budget? YES NO

What is the cost? \$ Unclear at this time.

What is the funding source? County General Fund

STRATEGIC PLAN ALIGNMENT:

- How does this item align with your Department's Strategic Business Plan goals?
- How does this item align with the County's Performance Clackamas goals? Building public trust through good government.

LEGAL/POLICY REQUIREMENTS:

The measure language will need to be finalized with a ballot title, question, and summary. Once approved by the Board the measure is referred to the clerk for publication. The caption cannot exceed 10 words describing the subject of the referral; the question cannot exceed 20 words plainly phrasing the main purpose of the referral so that an affirmative response to the question corresponds to a yes vote on the referral; and a summary that does not exceed 175 words describing the major effect of the referral. August 18, 2023 is the last day for the Board to approve the referral text and submit it to Elections.

PUBLIC/GOVERNMENTAL PARTICIPATION:

Public and Government Affairs reports that there are a number of amendments to Measure 110 under consideration in the current legislative session. The potential for a legislative fix during the current session should be explored.

OPTIONS:

Staff is presenting three different questions for the Board's consideration.

1. Should the Oregon Legislature repeal Measure 110 to reinstate all previous provisions?
2. Should the Oregon Legislature recriminalize possession of small quantities of controlled substances and adequately fund impacts to the justice system?
3. Should the Oregon Legislature adequately fund treatment for persons cited for possession of small quantities of controlled substances?

RECOMMENDATION:

Come to a consensus on the question presented and direct staff to complete the form SEL 805 and return for another policy session with the Board to approve the ballot title, the question, and explanatory statement and file the measure with the Clerk's office.

ATTACHMENTS:

Measure 110 text and statements in support and in opposition.

SUBMITTED BY:

Division Director/Head Approval _____

Department Director/Head Approval _____

County Administrator Approval _____

For information on this issue or copies of attachments, please contact Jeffrey Munns and/or Shawn Lillegren in the Office of County Counsel at 503-655-8362

Proposed by initiative petition to be voted on at the General Election, November 3, 2020.

Measure No.

110

Provides statewide addiction/recovery services; marijuana taxes partially finance; reclassifies possession/penalties for specified drugs

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Result of “Yes” Vote

“Yes” vote provides addiction recovery centers/services; marijuana taxes partially finance (reduces revenues for other purposes); reclassifies possession of specified drugs, reduces penalties; requires audits.

Result of “No” Vote

“No” vote rejects requiring addiction recovery centers/services; retains current marijuana tax revenue uses; maintains current classifications/ penalties for possession of drugs.

Summary

Measure mandates establishment/ funding of “addiction recovery centers” (centers) within each existing coordinated care organization service area by October 1, 2021; centers provide drug users with triage, health assessments, treatment, recovery services. To fund centers, measure dedicates all marijuana tax revenue above \$11,250,000 quarterly, legislative appropriations, and any savings from reductions in arrests, incarceration, supervision resulting from the measure. Reduces marijuana tax revenue for other uses. Measure reclassifies personal non-commercial possession of certain drugs under specified amount from misdemeanor or felony (depending on person’s criminal history) to Class E violation subject to either \$100 fine or a completed health assessment by center. Oregon Health Authority establishes council to distribute funds/ oversee implementation of centers. Secretary of State audits biennially. Other provisions.

Estimate of Financial Impact

The initiative directs the Oregon Health Authority (OHA) to establish Addiction Recovery Centers and increase funding for other substance use disorder services offset by decreasing funding to other programs, changes the distribution of marijuana tax revenues and reduces drug penalties for possession of some drugs.

Marijuana Revenue Redistribution

The initiative creates the Drug Treatment and Recovery Services Fund (DTRSF). It redistributes marijuana revenue above \$11.25 million per quarter from existing recipients to the DTRSF, reducing revenue to the State School Fund, the State Police, mental health programs, and local governments. The revenue redistributions for state agency programs are summarized below:

<i>All dollars in millions</i>	2019-21	2021-23
Drug Treatment and Recovery Services Fund (ARCs)	\$ 61.1	\$ 182.4
State School Fund	\$ (17.1)	\$ (73.0)
Mental Health, Alcoholism and Drug Services	\$ (8.6)	\$ (36.5)
Alcohol and Drug Abuse Prevention and Intervention	\$ (2.1)	\$ (9.1)
Oregon State Police	\$ (6.5)	\$ (27.4)
Net Increase In State Revenue	\$ 26.8	\$ 36.4

OHA is directed to administer grants to fund the Addiction Recovery Centers (ARCs), which will offer 24 hour access to care every day of the year starting October 1, 2021. The grants will be awarded to ARCs for operational expenses as well as to organizations providing substance use disorder treatment, peer support and recovery services, permanent supportive housing, and harm reduction interventions to be provided free of charge to the recipient of the services.

The initiative requires the Legislature to provide \$57 million in annual funding (with increases for inflation) for the DTRSF. Marijuana revenue estimated at \$61.1 million in 2019-21 and \$182.4 million in 2021-23 should be sufficient to meet this requirement.

The initiative reduces the marijuana revenue distribution to cities and counties. The total reduction is \$8.6 million in 2019-21 and \$36.4 million in 2021-23.

Decriminalization of Certain Drug Offenses

The initiative decriminalizes certain drug offenses and transfers the savings due to lower spending on arrests, probation supervisions and incarcerations to the DTRSF to fund additional ARC expenditures. These savings are estimated at \$0.3 million in 2019-21 and \$24.5 million in 2021-23. This will reduce revenue transferred from the Department of Corrections for local government community corrections by \$0.3 million in 2019-21 and \$24.5 million in 2021-23. The savings are expected to increase beyond the 2021-23 biennium.

Committee Members:

Secretary of State Bev Clarno
 State Treasurer Tobias Read
 Katy Coba, Director, Department of Administrative Services
 Betsy Imholt, Acting Director, Department of Revenue
 Tim Collier, Local Government Representative

(The estimate of financial impact was provided by the above committee pursuant to ORS 250.127.)

Text of Measure

Whereas, Oregonians need adequate access to drug addiction treatment. Oregon ranks nearly last out of the 50 states in access to treatment, and the waiting lists to get treatment are too long. Every day, one or two Oregonians die because of drug overdoses. Drug treatment and recovery ought to be available to any Oregon resident who requests it.

Whereas, Oregonians suffering from substance use disorder also need adequate access to recovery services, peer support and stable housing. One in every 11 Oregonians is addicted to drugs. Drug addiction exacerbates many of our state's most pressing problems, such as homelessness and poverty.

Whereas, Oregon needs to shift its focus to addressing drugs through a humane, cost-effective, health approach. People suffering from addiction are more effectively treated with health care services than with criminal punishments. A health care approach includes a health assessment to figure out the needs of people who are suffering from addiction, and it includes connecting them to the services they need.

Whereas, Oregon still treats addiction as a criminal problem. Law enforcement should spend more time on community safety, but Oregon law enforcement officers in 2017 arrested more than 8,000 people in cases where simple drug possession was the most serious offense. In many instances, the same people were arrested for drug possession, again and again, because they are unable to get treatment.

Whereas, punishing people who are suffering from addiction ruins lives. Criminalizing drugs saddles people with criminal records. Those records prevent them from getting housing, going to school, getting loans, getting professional licenses, getting jobs and keeping jobs. Criminalizing drugs disproportionately harms poor people and people of color.

Whereas, punishing people who are suffering from addiction is expensive. It costs an average of \$15,000 per case where a misdemeanor drug conviction is the most serious offense. That is more than the typical cost to provide treatment.

Whereas, marijuana tax revenue has grown significantly. Oregon now receives more than \$100 million in marijuana tax revenue a year. The amount of marijuana revenue is expected to grow by more than \$20 million per year.

The People of Oregon therefore propose this Drug Addiction Treatment and Recovery Act of 2020 to expand access to drug treatment and recovery services and pay for it with marijuana tax revenue.

Be It Enacted by the People of the State of Oregon:

Findings and Policy

Section 1. (1)(a) The people of Oregon find that drug addiction and overdoses are a serious problem in Oregon and that Oregon needs to expand access to drug treatment.

(b) The people of Oregon further find that a health-based approach to addiction and overdose is more effective, humane and cost-effective than criminal punishments. Making people criminals because they suffer from addiction is expensive, ruins lives and can make access to treatment and recovery more difficult.

(2)(a) The purpose of this Drug Addiction Treatment and Recovery Act of 2020 is to make health assessment, treatment and recovery services for drug addiction available to all those who need and want access to those services and to adopt a health approach to drug addiction by removing criminal penalties for low-level drug possession.

(b) It is the policy of the State of Oregon that health assessment, treatment and recovery services for drug addiction are available to all those who need and want access to those services.

(3) The provisions of this Act shall be interpreted consistently with the findings, purposes and policy objectives stated in this section and shall not be limited by any policy set forth in Oregon law that could conflict with or be interpreted to conflict with the purposes and policy objectives stated in this section.

Expanding Treatment and Services

Section 2. Grants Program. (1) The Oversight and Accountability Council shall oversee and approve grants to implement Addiction Recovery Centers and increase access to community care, as set forth below.

(2) **Addiction Recovery Centers.** The Oversight and Accountability Council shall provide grants to existing agencies or organizations, whether government or community-based, to create Addiction Recovery Centers for the purposes of immediately triaging the acute needs of people who use drugs and assessing and addressing any on-going needs through intensive case management and linkage to care and services.

(a) Grants must be disbursed such that at least one Center shall be established within each existing coordinated care organization service area. Centers within each existing coordinated care organization service area shall be established and operational by October 1, 2021.

(b) Grantees must be able to provide or display an ability to provide the following services to any Oregon resident who requests it, in order to receive funding as an Addiction Recovery Center:

(i) **24/7 Triage:** Centers shall assess a client's need for immediate medical or other treatment shortly upon the client's arrival to determine what acute care is needed and where it can be best provided. Centers shall provide this service twenty-four hours a day, seven days a week, 365 days a year.

(ii) **Health Assessment:** Centers shall conduct a comprehensive behavioral health needs assessment for each client, including a substance use disorder screening by a Certified Alcohol and Drug Counselor or other credentialed addiction treatment professional. The assessment shall prioritize the self-identified needs of the client.

(iii) **Individual Intervention Plan, Intensive Case Management and Connection to Services:** If, after the completion of the assessment, the client indicates a desire to address some or all of the identified needs, a case manager shall work with the client to design an Individual Intervention Plan. The plan must address the client's need for substance use disorder treatment, coexisting health problems, housing, employment and training, childcare and other services. Intensive Case Management requires, in the least, that case managers have a sufficiently low staff-to-client ratio to provide daily support as needed to connect clients to services and care needed to fulfill the Individual Intervention Plan and have the capacity to follow-up to ensure clients are accessing care and, if not, to reconnect clients to care as necessary and as desired by clients.

(iv) **Peer Support:** Each Center shall offer ongoing peer counseling and support from triage and assessment through implementation of Individual Intervention Plans as well as provide peer outreach workers to engage directly with marginalized community members who could potentially benefit from the Center's services.

(v) **Outreach:** Each Center shall assess the need for, and provide, mobile or virtual outreach services to reach clients who are unable to access the Center.

(A) Notwithstanding subsection (2)(a) of this section, only one Center within each coordinated care organization service area is required to provide the triage assessments set forth in subsection (2)(b)(i) of this section.

(c) All services provided at the Centers must be evidence-informed, trauma-informed, culturally responsive, patient-centered, non-judgmental, and centered on principles of harm reduction. The goal of the Individual Intervention Plan and Intensive Case Management shall be to address effectively the client's substance use disorder and any other factors driving problematic behaviors without employing coercion or shame or mandating abstinence.

(d) The Centers shall be adequately staffed to address the needs of people with substance use disorder within their regions as determined by the Oversight and Accountability Council, but must include, at a minimum, at least one person qualified in each of the following categories: Certified Alcohol and Drug Counselor or other credentialed addiction treatment professional; intensive case manager; and, peer support specialist.

(e) Each Center shall provide timely verification on behalf of any client who has completed a health assessment, as set forth in subsection (2)(b)(ii) of this section, if the client requests such verification to comply with section 22 or section 23(2) of this Act.

(3) **Increasing Community Access to Care.** The Oversight and Accountability Council shall provide grants to existing agencies or organizations, whether government or community based, to increase access to one or more of the following:

(a) Low barrier substance use disorder treatment that is evidence-informed, trauma-informed, culturally responsive, patient-centered, and non-judgmental;

(b) Peer support and recovery services;

(c) Transitional, supportive, and permanent housing for persons with substance use disorder;

(d) Harm reduction interventions including, but not limited to, overdose prevention education, access to naloxone hydrochloride and sterile syringes, and stimulant-specific drug education and outreach.

(4) The Council shall prioritize providing grants to community-based nonprofit organizations within each coordinated care organization service area. However, if within any such service area a community-based nonprofit organization does not apply for a grant or grants are not sought within that service area for which services are needed, then the Council may request and fund grants to any community care organization or county within that service area.

(5) Services provided by grantees, including services provided by Addiction Recovery Centers, shall be free of charge to the persons receiving the services. To the extent consistent with applicable law, grantees and service providers may seek and obtain reimbursement for services provided to any person from any insurer or entity providing insurance to that person.

Section 3. Oversight and Accountability Council. The Director of the Oregon Health Authority shall establish an Oversight and Accountability Council for the purpose of determining how funds will be distributed to grant applicants and to oversee the implementation of the Centers pursuant to section 2. The Council shall be formed on or before February 1, 2021.

(a) The Council shall be comprised of qualified individuals with experience in substance use disorder treatment and other addiction services. The Council shall consist of at least one member from each of the following categories only:

(i) A representative of the Oregon Health Authority, Health Systems Division Behavioral Health Services;

(ii) Three members of communities that have been disproportionately impacted by arrests, prosecution or sentencing for conduct that has been classified or reclassified as a Class E violation pursuant to section 11 to section 19.

(iii) A physician specializing in addiction medicine;

(iv) A licensed clinical social worker;

(v) An evidence-based substance use disorder provider;

- (vi) A harm reduction services provider;
- (vii) A person specializing in housing services for people with substance use disorder or a diagnosed mental health condition;
- (viii) An academic researcher specializing in drug use or drug policy;
- (ix) At least two people who suffered or suffer from substance use disorder;
- (x) At least two recovery peers;
- (xi) A mental or behavioral health provider;
- (xii) A representative of a coordinated care organization; and,
- (xiii) A person who works for a non-profit organization that advocates for persons who experience or have experienced substance use disorder.

(2) A quorum consists of nine members.

(3) The term of office for a member of the Council shall be four years. Vacancies shall be appointed for the unexpired term.

(4)(a) To the extent permissible by law, a member of the Council performing services for the Council may receive compensation from his or her employer for time spent performing services as a Council member.

(b) If a member of the Council is not compensated by their employer as set forth in subsection (4)(a) of this section, that member shall be entitled to compensation and expenses as provided in ORS 292.495.

(c) Nothing in this subsection (4) of this section excuses or exempts a member of the Council from complying with any applicable provision of Oregon's ethics laws and regulations, including the provisions of ORS Chapter 244.

Section 4. Administration. (1)(a) On or before June 30, 2021 the Oversight and Accountability Council shall adopt rules that establish general criteria and requirements for the Addiction Recovery Centers and the grants required by section 2.

(b) The Council shall from time to time adopt such rules, and amend and revise rules it has adopted, as it deems proper and necessary for the administration of this Act and the performance of its work.

(2) The Council shall have and retain the authority to implement and oversee the Addiction Recovery Centers created by section 2 and the grants program created and required by section 2.

(3) The Oregon Health Authority, Health Systems Division Behavioral Health Services shall administer and provide all necessary support to ensure the implementation of this Act.

(4)(a) The Oregon Health Authority, Health Systems Division Behavioral Health Services, in consultation with the Council, may enter into interagency agreements to ensure proper distribution of funds for the grants created and required by section 2.

(b) The Oregon Health Authority, Health Systems Division Behavioral Health Services shall encourage and take all reasonable measures to ensure that grant recipients cooperate, coordinate and act jointly with one another to offer the services described in section 2.

(5) The Oregon Health Authority, Health Systems Division Behavioral Health Services shall provide requested technical, logistical and other support to the Council to assist the Council with its duties and obligations.

Funding

Section 5. (1) The Drug Treatment and Recovery Services Fund is established in the State Treasury, separate and distinct from the General Fund. Interest earned by the Fund shall be credited to the Fund.

(2) The Drug Treatment and Recovery Services Fund shall

consist of:

- (a) Moneys deposited into the Fund pursuant to section 6;
 - (b) Moneys appropriated or otherwise transferred to the fund by the Legislative Assembly;
 - (c) Moneys allocated from the Oregon Marijuana Account, pursuant to ORS 475B.759(7); and,
 - (d) All other moneys deposited in the fund from any source.
- (3) Moneys in the Fund shall be continuously appropriated to the Oregon Health Authority for the purposes set forth in section 2.
- (4) Unexpended moneys in the Fund may not lapse and shall be carried forward and may be used without regard to fiscal year or biennium.

(5)(a) Pursuant to subsection (2)(b) of this section, the Legislative Assembly shall appropriate or transfer to the Fund an amount sufficient to fully fund the grants program required by section 2.

(b) The total amount deposited and transferred into the Fund shall not be less than \$57 million for the first year this Act is in effect.

(c) In each subsequent year, that amount set forth in subsection (5)(b) of this section shall be increased by not less than:

(i) the percentage (if any) by which the monthly averaged U.S. City Average Consumer Price Index for the 12 consecutive months ending December 31 of the prior calendar year exceeds the monthly index for the fourth quarter of the calendar year 2020; and,

(ii) an amount not less than the increase in moneys distributed pursuant to ORS 475B.759(7).

Section 6. (1) The Department of Revenue shall credit and transfer or cause to be credited and transferred to the Drug Treatment and Recovery Services Fund the savings to the State of Oregon from the implementation of this Act as calculated in section 7.

(2) If the savings calculated for any subsequent biennium under section 7(1) is less than any prior biennium, the amount credited and transferred to the Drug Treatment and Recovery Services Fund shall be the highest amount calculated for any previous biennium.

(3) The savings as calculated in section 7 shall be transferred on or before the end of the fiscal year in which the calculation is completed.

Section 7. (1)(a) Within 180 days of the end of first biennium in which this Act becomes effective, and within 180 days of the end of each subsequent biennium, the Office of Economic Analysis shall calculate the savings to the State of Oregon resulting from the sentence reductions set forth in section 11 to section 20, including any savings resulting from reductions in arrests, incarceration and supervision.

(b) The savings shall be calculated based on a comparison of the most recent biennium concluded at the time the calculation is made and the biennium immediately preceding the biennium in which this Act became effective.

(2) In making the calculations set forth in this section, the Office of Economic Analysis shall use actual data. The Office of Economic Analysis may use best available estimates where actual data is unavailable.

Section 8. Moneys transferred to the Drug Treatment and Recovery Services Fund and distributed pursuant to section 2 shall, to the maximum extent consistent with law, be in addition to and not in replacement of any existing allocations or appropriations for the purposes of providing substance use disorder treatment, peer support and recovery services, transitional, supportive and permanent housing for persons with substance use disorders, harm reduction interventions, and for establishing Addiction Recovery Centers.

Section 9, Account Allocation. (1) The Oregon Health Authority shall cause the moneys in the Drug Treatment and Recovery Services Fund to be distributed as follows:

- (a) An amount necessary for administration of section 2 to section 4 not to exceed 4% of the moneys deposited into the Fund in any biennium.
- (b) After the distribution set forth in subsection (1)(a) of this section, the remaining moneys in the Fund shall be distributed to the grants program as set forth in section 2.

Section 10. ORS 475B.759 is amended as follows:

(1) There is established the Oregon Marijuana Account, separate and distinct from the General Fund.

(2) The account shall consist of moneys transferred to the account under ORS 475B.760.

(3)(a) The Department of Revenue shall certify quarterly the amount of moneys available in the Oregon Marijuana Account.

(b) Subject to subsection (4) of this section, and after making the transfer of moneys required by subsection (7) of this section, the department shall transfer quarterly 20 percent of the remaining moneys in the Oregon Marijuana Account as follows:

(A) Ten percent of the moneys in the account must be transferred to the cities of this state in the following shares:

(i) Seventy-five percent of the 10 percent must be transferred in shares that reflect the population of each city of this state that is not exempt from this paragraph pursuant to subsection (4)(a) of this section compared to the population of all cities of this state that are not exempt from this paragraph pursuant to subsection (4)(a) of this section, as determined by Portland State University under ORS 190.510 to 190.610, on the date immediately preceding the date of the transfer; and

(ii) Twenty-five percent of the 10 percent must be transferred in shares that reflect the number of licenses held pursuant to ORS 475B.070, 475B.090, 475B.100 and 475B.105 on the last business day of the calendar quarter preceding the date of the transfer for premises located in each city compared to the number of licenses held pursuant to ORS 475B.070, 475B.090, 475B.100 and 475B.105 on the last business day of that calendar quarter for all premises in this state located in cities; and

(B) Ten percent of the moneys in the account must be transferred to counties in the following shares:

(i) Fifty percent of the 10 percent must be transferred in shares that reflect the total commercially available area of all grow canopies associated with marijuana producer licenses held pursuant to ORS 475B.070 on the last business day of the calendar quarter preceding the date of the transfer for all premises located in each county compared to the total commercially available area of all grow canopies associated with marijuana producer licenses held pursuant to ORS 475B.070 on the last business day of that calendar quarter for all premises located in this state; and

(ii) Fifty percent of the 10 percent must be transferred in shares that reflect the number of licenses held pursuant to ORS 475B.090, 475B.100 and 475B.105 on the last business day of the calendar quarter preceding the date of the transfer for premises located in each county compared to the number of licenses held pursuant to ORS 475B.090, 475B.100 and 475B.105 on the last business day of that calendar quarter for all premises in this state.

(c) After making the transfer of moneys required by subsection (7) of this section, [Eighty] eighty percent of the remaining moneys in the Oregon Marijuana Account must be used as follows:

(A) Forty percent of the moneys in the account must be used solely for purposes for which moneys in the State School Fund established under ORS 327.008 may be used;

(B) Twenty percent of the moneys in the account must be used solely for purposes for which moneys in the Mental Health Alcoholism and Drug Services Account established under ORS 430.380 may be used;

(C) Fifteen percent of the moneys in the account must be used solely for purposes for which moneys in the State Police Account established under ORS 181A.020 may be used; and

(D) Five percent of the moneys in the account must be used solely for purposes related to alcohol and drug abuse prevention, early intervention and treatment services.

(4)(a) A city that has an ordinance prohibiting the establishment of a premises for which issuance of a license under ORS 475B.070, 475B.090, 475B.100 or 475B.105 is required is not eligible to receive transfers of moneys under subsection (3)(b)(A) of this section.

(b) A county that has an ordinance prohibiting the establishment of a premises for which issuance of a license under ORS 475B.070 is required is not eligible to receive transfers of moneys under subsection (3)(b)(B)(i) of this section.

(c) A county that has an ordinance prohibiting the establishment of a premises for which issuance of a license under ORS 475B.090, 475B.100 or 475B.105 is required is not eligible to receive transfers of moneys under subsection (3)(b)(B)(ii) of this section.

(5)(a) A city or county that is ineligible under subsection (4) of this section to receive a transfer of moneys from the Oregon Marijuana Account during a given quarter but has received a transfer of moneys for that quarter shall return the amount transferred to the Department of Revenue, with interest as described under paragraph (f) of this subsection. An ineligible city or county may voluntarily transfer the moneys to the Department of Revenue immediately upon receipt of the ineligible transfer.

(b) If the Director of the Oregon Department of Administrative Services determines that a city or county received a transfer of moneys under subsection (3)(b) of this section but was ineligible to receive that transfer under subsection (4) of this section, the director shall provide notice to the ineligible city or county and order the city or county to return the amount received to the Department of Revenue, with interest as described under paragraph (f) of this subsection. A city or county may appeal the order within 30 days of the date of the order under the procedures for a contested case under ORS chapter 183.

(c) As soon as the order under paragraph (b) of this subsection becomes final, the director shall notify the Department of Revenue and the ineligible city or county. Upon notification, the Department of Revenue immediately shall proceed to collect the amount stated in the notice.

(d) The Department of Revenue shall have the benefit of all laws of the state pertaining to the collection of income and excise taxes and may proceed to collect the amounts described in the notice under paragraph (c) of this subsection. An assessment of tax is not necessary and the collection described in this subsection is not precluded by any statute of limitations.

(e) If a city or county is subject to an order to return moneys from an ineligible transfer, the city or county shall be denied any further relief in connection with the ineligible transfer on or after the date that the order becomes final.

(f) Interest under this section shall accrue at the rate established in ORS 305.220 beginning on the date the ineligible transfer was made.

(g) Both the moneys and the interest collected from or returned by an ineligible city or county shall be redistributed to the cities or counties that were eligible to receive a transfer under subsection (3)(b) of this section on the date the ineligible transfer was made.

(6)(a) Not later than July 1 of each year, each city and county in this state shall certify with the Oregon Department of Administrative Services whether the city or county has an ordinance prohibiting the establishment of a premises for which issuance of a license under ORS 475B.070, 475B.090, 475B.100 or 475B.105 is required. The certification shall be made concurrently with the certifications under ORS 221.770, in a form and manner prescribed by the Oregon Department of Administrative Services.

(b) If a city fails to comply with this subsection, the city is not eligible to receive transfers of moneys under subsection (3)(b)(A) of this section. If a county fails to comply with this subsection, the county is not eligible to receive transfers of moneys under subsection (3)(b)(B) of this section.

(c) A city or county that repeals an ordinance as provided in ORS 475B.496 shall file an updated certification with the Oregon Department of Administrative Services in a form and manner prescribed by the department, noting the effective date of the change. A city or county that repeals an ordinance as provided in ORS 475B.496 is eligible to receive quarterly transfers of moneys under this section for quarters where the repeal is effective for the entire quarter and the updated certification was filed at least 30 days before the date of transfer

(7) Before making the transfer of moneys required by subsection (3) of this section, the department shall transfer quarterly to the Drug Treatment and Recovery Services Fund all moneys in the Oregon Marijuana Account in excess of \$11,250,000.

Removing Drug Penalties

Section 11. ORS 475.752 is amended to read:

(1) Except as authorized by ORS 475.005 to 475.285 and 475.752 to 475.980, it is unlawful for any person to manufacture or deliver a controlled substance. Any person who violates this subsection with respect to:

(a) A controlled substance in Schedule I, is guilty of a Class A felony, except as otherwise provided in ORS 475.886 and 475.890.

(b) A controlled substance in Schedule II, is guilty of a Class B felony, except as otherwise provided in ORS 475.878, 475.880, 475.882, 475.904 and 475.906.

(c) A controlled substance in Schedule III, is guilty of a Class C felony, except as otherwise provided in ORS 475.904 and 475.906.

(d) A controlled substance in Schedule IV, is guilty of a Class B misdemeanor.

(e) A controlled substance in Schedule V, is guilty of a Class C misdemeanor.

(2) Except as authorized in ORS 475.005 to 475.285 and 475.752 to 475.980, it is unlawful for any person to create or deliver a counterfeit substance. Any person who violates this subsection with respect to:

(a) A counterfeit substance in Schedule I, is guilty of a Class A felony.

(b) A counterfeit substance in Schedule II, is guilty of a Class B felony.

(c) A counterfeit substance in Schedule III, is guilty of a Class C felony.

(d) A counterfeit substance in Schedule IV, is guilty of a Class B misdemeanor.

(e) A counterfeit substance in Schedule V, is guilty of a Class C misdemeanor.

(3) It is unlawful for any person knowingly or intentionally to possess a controlled substance unless the substance was obtained directly from, or pursuant to a valid prescription or order of, a practitioner while acting in the course of professional practice, or except as otherwise authorized by ORS 475.005 to 475.285 and 475.752 to 475.980. Any person who violates this subsection with respect to:

(a) A controlled substance in Schedule I, is guilty of a Class [A misdemeanor] E violation, except as otherwise provided in ORS 475.854, 475.874 and 475.894 and subsection (7) of this section.

(b) A controlled substance in Schedule II, is guilty of a Class [A misdemeanor] E violation, except as otherwise provided in ORS 475.824, 475.834 or 475.884 or subsection (8) of this section.

(c) A controlled substance in Schedule III, is guilty of a Class [A misdemeanor] E violation.

(d) A controlled substance in Schedule IV, is guilty of a Class [C misdemeanor] E violation.

(e) A controlled substance in Schedule V, is guilty of a violation.

(4) In any prosecution under this section for manufacture, possession or delivery of that plant of the genus *Lophophora* commonly known as peyote, it is an affirmative defense that the peyote is being used or is intended for use:

(a) In connection with the good faith practice of a religious belief;

(b) As directly associated with a religious practice; and

(c) In a manner that is not dangerous to the health of the user or others who are in the proximity of the user.

(5) The affirmative defense created in subsection (4) of this section is not available to any person who has possessed or delivered the peyote while incarcerated in a correctional facility in this state.

(6)(a) Notwithstanding subsection (1) of this section, a person who unlawfully manufactures or delivers a controlled substance in Schedule IV and who thereby causes death to another person is guilty of a Class C felony.

(b) For purposes of this subsection, causation is established when the controlled substance plays a substantial role in the death of the other person.

(7) Notwithstanding subsection (3)(a) of this section, unlawful possession of a controlled substance in Schedule I is a Class B felony if: **the**

[(a) The person possesses a usable quantity of the controlled substance and:] [(A) At the time of the possession, the person has a prior felony conviction;]

[(B) At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or]

[(C) The] possession is a commercial drug offense under ORS 475.900(1)(b).[: or]

(b) Notwithstanding subsection (3)(a) of this section and except as provided in ORS 475.900(1)(b), unlawful possession of a controlled substance in Schedule I is a Class A misdemeanor if the [The] person possesses:

(A) Forty or more user units of a mixture or substance containing a detectable amount of lysergic acid diethylamide; or

(B) Twelve grams or more of a mixture or substance containing a detectable amount of psilocybin or psilocin.

(8) Notwithstanding subsection (3)(b) of this section, unlawful possession of a controlled substance in Schedule II is a Class C felony if *[the person possesses a usable quantity of the controlled substance and:] the*

(a) [At the time of the possession, the person has a prior felony conviction;]

[(b) At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or]

[(c) The] possession is a commercial drug offense under ORS 475.900(1)(b).

Section 12. ORS 475.824 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess methadone unless the methadone was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of professional practice, or except as otherwise authorized by ORS 475.005 to 475.285 and 475.752 to 475.980.

(2)(a) Unlawful possession of methadone is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of methadone is a Class C felony if[.] **the**

[(A) *The person possesses a usable quantity of methadone and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] possession is a commercial drug offense under ORS 475.900(1)(b)[; or].

(c) Notwithstanding paragraph (a) of this subsection, unlawful possession of methadone is a Class A misdemeanor if the

[(B) *The*] person possesses 40 or more user units of a mixture or substance containing a detectable amount of methadone.

Section 13. ORS 475.834 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess oxycodone unless the oxycodone was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of professional practice, or except as otherwise authorized by ORS 475.005 to 475.285 and 475.752 to 475.980.

(2)(a) Unlawful possession of oxycodone is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of oxycodone is a Class C felony if[.] **the**

[(A) *The person possesses a usable quantity of oxycodone and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] possession is a commercial drug offense under ORS 475.900(1)(b)[; or].

(c) Notwithstanding paragraph (a) of this subsection, unlawful possession of oxycodone is a Class A misdemeanor if the

[(B) *The*] person possesses 40 or more pills, tablets or capsules of a mixture or substance containing a detectable amount of oxycodone.

Section 14. ORS 475.854 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess heroin. (2)(a) Unlawful possession of heroin is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of heroin is a Class B felony if[.] **the**

[(A) *The person possesses a usable quantity of heroin and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] possession is a commercial drug offense under ORS 475.900(1)(b)[; or].

(c) Notwithstanding paragraph (a) of this subsection and except as provided in ORS 475.900(1)(b), unlawful possession of heroin is a Class A misdemeanor if the

[(B) *The*] person possesses one gram or more of a mixture or substance containing a detectable amount of heroin.

Section 15. ORS 475.874 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess 3,4- methylenedioxyamphetamine.

(2)(a) Unlawful possession of 3,4-methylenedioxyamphetamine is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of 3,4- methylenedioxyamphetamine is a Class B felony if[.] **the**

[(A) *The person possesses a usable quantity of 3,4-methylenedioxyamphetamine and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] possession is a commercial drug offense under ORS 475.900(1)(b)[; or].

(c) Notwithstanding paragraph (a) of this subsection and except as provided in ORS 475.900(1)(b), unlawful possession of methylenedioxyamphetamine is a Class A misdemeanor if the

[(B) *The*] person possesses one gram or more or five or more pills, tablets or capsules of a mixture or substance containing a detectable amount of:

(i) 3,4-methylenedioxyamphetamine;

(ii) 3,4-methylenedioxyamphetamine; or

(iii) 3,4-methylenedioxy-N-ethylamphetamine.

Section 16. ORS 475.884 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess cocaine unless the substance was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of professional practice, or except as otherwise authorized by ORS 475.005 to 475.285 and 475.752 to 475.980.

(2)(a) Unlawful possession of cocaine is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of cocaine is a Class C felony if[.] **the**

[(A) *The person possesses a usable quantity of cocaine and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] possession is a commercial drug offense under ORS 475.900(1)(b)[; or].

(c) Notwithstanding paragraph (a) of this subsection and except as provided in ORS 475.900(1)(b), unlawful possession of cocaine is a Class A misdemeanor if the

[(B) *The*] person possesses two grams or more of a mixture or substance containing a detectable amount of cocaine.

Section 17. ORS 475.894 is amended to read:

(1) It is unlawful for any person knowingly or intentionally to possess methamphetamine unless the substance was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of professional practice, or except as otherwise authorized by ORS 475.005 to 475.285 and 475.752 to 475.980.

(2)(a) Unlawful possession of methamphetamine is a Class [A misdemeanor] **E violation**.

(b) Notwithstanding paragraph (a) of this subsection, unlawful possession of methamphetamine is a Class C felony if[.]

[(A) *The person possesses a usable quantity of methamphetamine and;*

[(i) *At the time of the possession, the person has a prior felony conviction;*

[(ii) *At the time of the possession, the person has two or more prior convictions for unlawful possession of a usable quantity of a controlled substance; or*

[(iii) *The*] **the possession is a commercial drug offense under ORS 475.900(1)(b)[; or].**

(c) Notwithstanding paragraph (a) of this subsection and except as provided in ORS 475.900(1)(b), unlawful possession of methamphetamine is a Class A misdemeanor if the

[(B) *The*] **person possesses two grams or more of a mixture or substance containing a detectable amount of methamphetamine.**

Section 18. ORS 153.012 is amended to read:

Violations are classified for the purpose of sentencing into the following categories:

(1) Class A violations;

(2) Class B violations;

(3) Class C violations;

(4) Class D violations;

(5) Class E violations;

[(5)] (6) Unclassified violations as described in ORS 153.015; and

(7) Specific fine violations as described in ORS 153.015.

Section 19. ORS 153.018 is amended to read:

(1) The penalty for committing a violation is a fine. The law creating a violation may impose other penalties in addition to a fine but may not impose a term of imprisonment.

(2) Except as otherwise provided by law, the maximum fine for a violation committed by an individual is:

(a) \$2,000 for a Class A violation.

(b) \$1,000 for a Class B violation.

(c) \$500 for a Class C violation.

(d) \$250 for a Class D violation.

(e) \$100, or, in lieu of the fine, a completed health assessment as specified in section 2(2)(b)(ii) or section 23(2), for a Class E violation.

[(e)](f) \$2,000 for a specific fine violation, or the maximum amount otherwise established by law for the specific fine violation.

(3) If a special corporate fine is specified in the law creating the violation, the sentence to pay a fine shall be governed by the law creating the violation. Except as otherwise provided by law, if a special corporate fine is not specified in the law creating the violation, the maximum fine for a violation committed by a corporation is:

(a) \$4,000 for a Class A violation.

(b) \$2,000 for a Class B violation.

(c) \$1,000 for a Class C violation.

(d) \$500 for a Class D violation.

Section 20. ORS 423.478 is amended to read:

(1) The Department of Corrections shall:

(a) Operate prisons for offenders sentenced to terms of incarceration for more than 12 months;

(b) Provide central information and data services sufficient to:

(A) Allow tracking of offenders; and

(B) Permit analysis of correlations between sanctions, supervision, services and programs, and future criminal conduct; and

(c) Provide interstate compact administration and jail inspections.

(2) Subject to ORS 423.483, the county, in partnership with the department, shall assume responsibility for community-based supervision, sanctions and services for offenders convicted of felonies or designated drug-related misdemeanors who are:

(a) On parole;

(b) On probation;

(c) On post-prison supervision;

(d) Sentenced, on or after January 1, 1997, to 12 months or less incarceration;

(e) Sanctioned, on or after January 1, 1997, by a court or the State Board of Parole and Post-Prison Supervision to 12 months or less incarceration for violation of a condition of parole, probation or post-prison supervision; or

(f) On conditional release under ORS 420A.206.

(3) Notwithstanding the fact that the court has sentenced a person to a term of incarceration, when an offender is committed to the custody of the supervisory authority of a county under ORS 137.124 (2) or (4), the supervisory authority may execute the sentence by imposing sanctions other than incarceration if deemed appropriate by the supervisory authority. If the supervisory authority releases a person from custody under this subsection and the person is required to report as a sex offender under ORS 163A.010, the supervisory authority, as a condition of release, shall order the person to report to the Department of State Police, a city police department or a county sheriff's office or to the supervising agency, if any:

(a) When the person is released;

(b) Within 10 days of a change of residence;

(c) Once each year within 10 days of the person's birth date;

(d) Within 10 days of the first day the person works at, carries on a vocation at or attends an institution of higher education; and

(e) Within 10 days of a change in work, vocation or attendance status at an institution of higher education.

(4) As used in this section:

(a) "Attends," "institution of higher education," "works" and "carries on a vocation" have the meanings given those terms in ORS 163A.005.

(b) "Designated drug-related misdemeanor" means:

[(A) *Unlawful possession of a Schedule I controlled substance under ORS 475.752 (3)(a);*

[(B) *Unlawful possession of a Schedule II controlled substance under ORS 475.752 (3)(b);*

(C) **Unlawful possession of methadone under [ORS 475.824(2) (a)] ORS 475.824(2)(c);**

(D) **Unlawful possession of oxycodone under [ORS 475.834(2) (a)] ORS 475.834(2)(c);**

(E) **Unlawful possession of heroin under [ORS 475.854(2)(a)] ORS 475.854(2)(c);**

(F) **Unlawful possession of 3,4-methylenedioxyamphetamine under [ORS 475.874(2)(a)] ORS 475.874(2)(c);**

(G) **Unlawful possession of cocaine under [ORS 475.884(2)(a)] ORS 475.884(2)(c); or**

(H) **Unlawful possession of methamphetamine under ORS [475.894(2)(a)] ORS 475.894(2)(c).**

Section 21. ORS 670.280 is amended as follows:

(1) As used in this section:

(a) "License" includes a registration, certification or permit.

(b) "Licensee" includes a registrant or a holder of a certification or permit.

(2) Except as provided in ORS 342.143(3) or 342.175(3), a licensing board, commission or agency may not deny, suspend or revoke an occupational or professional license solely for the reason that the applicant or licensee has been convicted of a crime, but it may consider the relationship of the facts which support the conviction and all intervening circumstances to the specific occupational or professional standards in determining the fitness of the person to receive or hold the license. **There is a rebuttable presumption as to each individual applicant or licensee that an existing or prior conviction for conduct that has been classified or reclassified as a Class E violation pursuant to section 11 to section 19 does not make an applicant for an occupational or professional license or a licensee with an occupational or professional license unfit to receive or hold the license.**

(3) Except as provided in ORS 342.143(3) and 342.175(3), a licensing board, commission or agency may deny an occupational or professional license or impose discipline on a licensee based on conduct that is not undertaken directly in the course of the licensed activity, but that is substantially related to the fitness and ability of the applicant or licensee to engage in the activity for which the license is required. In determining whether the conduct is substantially related to the fitness and ability of the applicant or licensee to engage in the activity for which the license is required, the licensing board, commission or agency shall consider the relationship of the facts with respect to the conduct and all intervening circumstances to the specific occupational or professional standards. **There is a rebuttable presumption as to each individual applicant or licensee that an existing or prior conviction for conduct that has been classified or reclassified as a Class E violation pursuant to section 11 to section 19 is not related to the fitness and ability of the applicant or licensee to engage in the activity for which the license is required.**

Section 22. Any person subject to the penalty set forth in ORS 153.018(2)(e) for a violation that has been classified or reclassified as a Class E violation pursuant to section 11 to section 19, shall be fined up to \$100, but in lieu of the fine, may complete a health assessment, as set forth in section 2(2)(b)(ii), at an Addiction Recovery Center. Upon verification that the person has received a health assessment at an Addiction Recovery Center within 45 days of when the person receives a citation for a violation subject to the penalty set forth in ORS 153.018(2)(e), the fine shall be waived. Failure to pay the fine shall not be a basis for further penalties or for a term of incarceration.

Oversight and Administration

Section 23. Implementation. (1) Not later than February 1, 2021, the Oregon Health Authority, Health Systems Division Behavioral Health Services shall establish a statewide temporary telephone Addiction Recovery Center. The temporary telephone Addiction Recovery Center shall be staffed twenty-four hours a day, seven days a week, 365 days a year. The temporary telephone Addiction Recovery Center shall provide the services set forth in section 2(2)(b)(i)-(iii) and the verification set forth in section 2(2)(e).

(2) Until such time as an Addiction Recovery Center is established in the coordinated care organization service area where a person subject to the penalty set forth in ORS 153.018(2)(e) for a violation that has been classified or reclassified as a Class E violation pursuant to section 11 to section 19 resides, the person shall be fined up to \$100, but in lieu of the fine may complete a health assessment, as set forth in section 2(2)(b)(ii), through the temporary telephone Addiction Recovery Center. Upon verification that the person has received a health assessment through the temporary telephone Addiction Recovery Center within 45 days of when the person

receives a citation for a violation subject to the penalty set forth in ORS 153.018(2)(e), the fine shall be waived. Failure to pay the fine shall not be a basis for further penalties or for a term of incarceration.

(3) When an Addiction Recovery Center is established in each coordinated care organization service area, and not later than October 1, 2021, the temporary telephone Addiction Recovery Center shall be terminated.

Section 24. Audits. (1) No later than December 31, 2022, and at least once every two years thereafter, the Oregon Secretary of State, Audits Division shall conduct financial and performance audits regarding the uses of the Drug Treatment and Recovery Services Fund and the effectiveness of the Fund in achieving the purposes of the Fund and the policy objectives of this Act. The audit shall include:

(a) Data on grant programs, including:

(i) A list of organizations and agencies receiving moneys from the Fund;

(ii) The amount each organization and agency received from the Fund;

(iii) The total number of organizations and agencies that applied for moneys from the Fund;

(iv) The moneys that remained in the Fund after funds were disbursed;

(v) The moneys used to administer the programs selected by the Fund;

(vi) The effectiveness of the grants in increasing access to substance use disorder treatment, peer support and recovery services, harm reduction interventions as well as housing placement, and any other relevant outcome measures;

(b) Data on Addiction Recovery Centers, including:

(i) The outcomes of each Center, including, but not limited to, the number of clients with substance use disorder served by each Center, the average duration of client participation, and client outcomes, including rates of recidivism, substance use disorder treatment completion, ability to obtain housing, employment, and legitimate income;

(ii) The number of people seeking assistance from the Center who are denied or not connected to substance use disorder treatment and other services, and the reasons for such denials;

(iii) The average wait time it takes for people at the Center to be able to fulfill their Individual Intervention Plan and the reason for any delays, such as waiting lists at referred services;

(iv) The total amount of money disbursed to each Center.

(c) Data on implementation, including, the number of citations for Class E violations issued and the race of the person receiving a citation for a Class E violation;

(2) The audits set forth in subsection (a) of this section shall be conducted pursuant to the provisions of Oregon Revised Statutes Chapter 297 (and any subsequent modifications or amendments to those statutes), except to the extent any provision of Chapter 297 conflicts with any provision of this Act, in which case the provisions of this Act shall control.

(3) The Audits Division shall monitor and report annually on agency progress in implementing recommendations made in the audits. The Audits Division shall follow up on recommendations as part of recurring audit work or as an activity separate from other audit activity. When following up on recommendations, the Audits Division may request from the appropriate agency evidence of implementation.

Miscellaneous

Section 25. Effective and Operative Dates. (1) This Act shall become effective pursuant to Article IV, section 1(4)(d) of the Oregon Constitution.

(2) The amendments to statutes by section 11 to section 21, and section 22, become operative on February 1, 2021.

Section 26. Severability. If any provision of this Act or its application to any person or circumstance is held invalid, the invalidity does not affect any other provision or application of this Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.

Note: **Boldfaced** type indicates new language; *[brackets and italic]* type indicates deletions or comments.

Explanatory Statement

Ballot Measure 110 mandates the establishment of at least one addiction recovery center in each existing coordinated care organization service area in the state. The centers triage the acute needs of persons who use drugs, provide connections to other services and offer peer support. The measure requires that services provided by the centers be free of charge and allows service providers to seek reimbursement from insurance providers. All services provided at the centers must be evidence-informed, trauma-informed, culturally responsive, patient-centered, non-judgmental, and centered on principles of harm reduction.

The measure establishes the Oversight and Accountability Council appointed by the Oregon Health Authority to provide grants to existing agencies or organizations to establish the centers. The measure directs the council to oversee the centers and requires that the centers be operational by October 1, 2021. The measure requires that the authority establish a temporary telephone addiction recovery center by February 1, 2021, and terminate the temporary center by October 1, 2021.

To fund the centers, the measure requires legislative appropriations to the authority, redirects marijuana tax account balances above \$11,250,000 quarterly to the authority and dedicates to the authority any savings to the state from reductions in arrests, incarceration and supervision resulting from the measure. Current law allocates marijuana tax revenue for other uses by state and local governments. The measure reduces the marijuana tax revenue for the other uses. The measure also requires that the Secretary of State biennially conduct a financial and performance audit of the fund established by the measure.

The measure eliminates criminal penalties for possession of specified quantities of controlled substances by adults and juveniles involving: heroin (1 gram or less), cocaine (2 grams or less), methamphetamine (2 grams or less), MDMA (less than 1 gram or 5 pills), LSD (less than 40 user units), psilocybin (less than 12 grams), methadone (less than 40 user units) and oxycodone (less than 40 pills, tablets, or capsules). Instead, possession of these specified quantities of controlled substances becomes a non-criminal Class E violation for which the maximum punishment is a \$100 fine or completion of a health assessment with an addiction treatment professional. The measure also 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 \$6,250 fine, or both.

The measure creates the rebuttable 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.

Committee Members:
 Anthony Johnson*
 Kimberly McCullough*
 Kevin Barton
 Jim Ferraris
 Richard Baldwin

Appointed by:
 Chief Petitioners
 Chief Petitioners
 Secretary of State
 Secretary of State
 Members of the Committee

*Member dissents (does not concur with explanatory statement)

(The above committee was appointed to provide an impartial explanation of the ballot measure pursuant to ORS 251.215.)

Racial & Ethnic Impact Statement

The Oregon Criminal Justice Commission (CJC) received a written request from a member of the Legislative Assembly from each major political party requesting a racial and ethnic impact statement pursuant to ORS 137.685 for a state measure that is related to crime and likely to have an effect on the criminal justice system.

Criminal Justice System Changes Examined by Race/Ethnicity
The initiative changes several criminal sentencing laws regulating the possession of controlled substances (PCS). Relevant to the creation of the data estimates reported below, Measure 110 would change PCS convictions to criminal violations, except where an individual possesses a substantial quantity of drugs, which would be a misdemeanor, or is convicted of a commercial drug offense, which would be a felony.

A conviction for simple possession of controlled substances results in either probation or a short term sentence in a local jail in Oregon. The CJC examined the type of sentence individuals received for PCS in 2019 (probation versus jail) as well as sentence lengths by race/ethnicity and found few differences. The primary source of racial/ethnic disparities is in the rate at which individuals of different races/ethnicities were convicted of PCS. Currently, Black and Native American Oregonians are overrepresented compared to their Census populations.

Convictions in 2019 for PCS

Race/Ethnicity	Misd.	Felony	Total	Pct.
Asian	16	19	35	0.9%
Black	120	69	189	4.7%
Hispanic	238	198	436	10.7%
Native American	27	25	52	1.3%
Unknown	5	4	9	0.2%
White	1,733	1,603	3,336	82.2%
Total	2,139	1,918	4,057	100.0%

CJC estimates that if Measure 110 were to pass, a substantial reduction in the number of felony and misdemeanor convictions for PCS would follow. The total number of convictions for PCS would fall from 4,057 to 378, a nearly 91% reduction. This reduction would also be substantial for all racial groups, ranging from 82.9% for Asian Oregonians to approximately 94% for Native American and Black Oregonians. This means that approximately 1,800 fewer Oregonians per year are estimated to be convicted of felony PCS and nearly 1,900 fewer convicted of misdemeanor PCS. Prior academic research suggests this drop in convictions will result in fewer collateral consequences stemming from criminal justice system involvement, which include difficulties in finding employment, loss of access to student loans for education, difficulties in obtaining housing, restrictions on professional licensing, and others.

Estimated Convictions for PCS if Measure 110 were to Pass

Race/Ethnicity	Misd.	Felony	Total	Pct.
Asian	5	1	6	-82.9%
Black	9	3	12	-93.7%
Hispanic	40	19	59	-86.5%
Native American	1	2	3	-94.2%
Unknown	25	0	2	-77.8%
White	219	77	296	-91.1%
Total	276	102	378	-90.7%

The changes proposed by Measure 110 would also lead to a reduction in racial disparities for PCS convictions at both the misdemeanor and felony levels. Using a disparity metric called the Raw Differential Representation (RDR), CJC estimates that racial disparities for misdemeanor and felony PCS convictions will be narrowed substantially if Measure 110 passes.

The CJC also estimates that arrests for PCS would fall substantially. Using the estimated reduction in convictions as a guide, CJC estimates that PCS arrests would fall from 6,726 to 615. Currently, Black Oregonians are substantially overrepresented in PCS arrests compared to white Oregonians. Should Measure 110 pass, it is estimated that this disparity would fall by nearly 95% according to the RDR.

Other disparities can exist at different stages of the criminal justice process, including inequities in police stops, jail bookings, bail, pretrial detention, prosecutorial decisions, and others. The CJC lacks sufficient or appropriate data in each of these areas and therefore cannot provide estimates for these other stages. Similarly, while the CJC is required by statute to include an estimate of the racial/ethnic makeup of crime victims, data concerning victims of individuals convicted of drug possession are not available.

Argument in Favor

Drug arrests cost taxpayers too much. Measure 110 would save money.

As someone who has been involved in Oregon's business and civic leadership for over 30 years, I care about how the government spends money, so I looked into an independent economic study conducted on Measure 110 by ECONorthwest, a respected and independent Oregon economics firm.

Using the best analytical methods available, ECONorthwest studied exactly how much money it costs taxpayers each time a person in Oregon is arrested for simple drug possession. The economists added up all the costs—the arrest costs, the adjudication costs, the incarceration costs, the parole/supervision costs—and found the annualized cost per arrest for misdemeanor drug possession:

The cost per misdemeanor drug possession arrest and conviction is as much as \$35,217!

That's more than Oregon spends every year on a high school student.

This estimate of arrests is conservative. It doesn't account for opportunity costs (such as lost wages to individuals who are arrested), or for reduced wages (because people who have criminal records are often paid less).

Maybe those costs wouldn't be a big deal if Oregon police rarely arrested people for simple drug possession. **However, drugs are one of the most arrested offenses in Oregon.** Every year, Oregon law enforcement arrests about 8,900 people in cases where drug possession is the most serious offense.

That's the equivalent of arresting someone once every hour.

Furthermore, many people with drug addiction return to jail the moment they get out because they are unable to get treatment, often for more serious offenses that cost taxpayers even more. Felony drug possession arrests/convictions cost twice the amount of misdemeanors.

Our current approach is expensive, and providing treatment would cost less. And people who have received treatment and are no longer addicted to drugs will more likely stay out of jail.

Measure 110 would reduce Oregon's criminal justice costs and save taxpayers money.

Please vote YES on Measure 110.

Tom Imeson, former corporate executive

(This information furnished by Janie Gullickson.)

Argument in Favor

Drug Addiction is a health issue. We should treat it as one.

We are a broad coalition of Oregon clinicians and healthcare advocates working to improve the health of our patients and our communities.

We see firsthand just how damaging Oregon's current drug addiction crisis is. Did you know:

- Nearly two people die every day from overdose in Oregon.
- One in 11 Oregonians is addicted to drugs.
- Oregon ranks nearly last of all states in access to drug addiction treatment.
- There aren't enough treatment beds available in Oregon to send our patients who need it and want it.
- Many people don't come forward to seek help for fear of being arrested.

We urgently need a change to save families and save lives.

Yet, instead of treating addiction as a health issue, we're still treating it as a crime: arresting people and giving them long-term criminal records.

Criminalizing drug addiction ruins lives. People with a criminal record have a difficult, if not impossible, time getting housing, jobs, student loans, professional licenses and more. Jailing people for their addiction derails their access to health care, rips families apart, and leads to negative health outcomes.

Punishing people for drug use and addiction is costly and hasn't worked.

More drug treatment, not punishment, is a better approach.

Measure 110 will not legalize any drugs. Rather it will greatly expand access to drug treatment and recovery services for those who want and need them—without creating any new taxes. It'll be paid for with existing marijuana tax money.

Help us implement a more humane, effective, and cost-effective approach to drug addiction in Oregon.

Vote YES on Measure 110

Oregon Nurses Association

Oregon Chapter American College of Physicians

Oregon Academy of Family Physicians

Virginia Garcia Memorial Health Center

Healthcare for All Oregon

Cascade AIDS Project

Prism Health

NARAL Pro-Choice Oregon

Planned Parenthood Advocates of Oregon

Human Impact Partners

(This information furnished by Haven Wheelock, Harm Reductionist & Overdose Prevention Specialist.)

Argument in Favor

Addiction is a health issue, not a moral shortcoming. Not addressing Oregon's addiction crisis would be the real moral failure.

As faith leaders, we witness firsthand Oregon's addiction crisis. Our houses of worship often serve as primary supports to those struggling with addictions. We open our doors to recovery meetings and connect parishioners with social services. But, when it comes to addiction treatment, we are outmatched.

Addiction is a health issue. Oregon has a desperate lack of the resources required to address it. Wait lists for treatment are too long, and the high cost makes it inaccessible for many. The longer people are forced to wait for treatment, the more likely they are to overdose and die. Right now, one to two Oregonians die every day from drug overdose.

All too often, instead of getting help, they get a criminal record that drives them further from hope, recovery and a decent life.

Measure 110 will:

- Give more people access to treatment and recovery services, including access to housing.
- Eliminate unnecessary criminal convictions that prevent people from finding housing, jobs, professional licenses, and more.
- Keep families together. Addiction, and the arrests that often result, are leading reasons why children in Oregon are placed into foster care.

This measure does NOT legalize drugs.

Join us in voting YES on 110!

Ecumenical Ministries of Oregon
 Interfaith Peace & Action Collaborative
 Farm Worker Ministry Northwest
 Clergy For a New Drug Policy
 Jewish Federation of Greater Portland
 Lutheran Community Services Northwest
 Bridgeport United Church of Christ
 Rabbi Michael Z. Cahana, Congregation Beth Israel
 Rev. Erika Spaet, United Methodist Church and
 Evangelical Lutheran Church of America
 Rev. Eilidh Lowery, Trinity UMC
 Rev. Dr. W. J. Mark Knutson, Senior Pastor,
 Augustana Lutheran Church
 Rabbi Debra Kolodny, Portland's UnShul/
 As The Spirit Moves Us
 Nate Macy, Pastor, Yamhill County
 J.W. Matt Hennessee, Pastor,
 Vancouver First Avenue Baptist Church
 Reverend Taylor Gould, La Grande United Methodist Church
 Rev. Theresa "Rivka" Gevurtz, Shelter For The Spirit

(This information furnished by Devon Downeysmith.)

Argument in Favor

5 Reasons Clackamas County Residents Urge You to Vote YES on Measure 110

In Clackamas County, as in other parts of our state, we have a major problem with drug addiction. The current approach is failing.

According to the Oregon Health Authority, in Clackamas county:

- Nearly 1 in 5 residents ages 18 to 25 have a drug addiction issue.
- More than 3 in 10 residents ages 26 and older have a drug addiction issue.
- Someone gets charged for drugs nearly every day on average.
- Someone overdoses on drugs about once every three days.

We need a better approach. Measure 110 would establish a more humane, effective and cost effective approach to drugs, expanding access to low-cost, low-barrier treatment in our communities. Here's why we urge you to vote yes:

1. Oregon ranks nearly last of all states in people's access to drug treatment.
2. Our current drug laws can ruin lives based on a single mistake. Possession of a small amount of drugs can land someone in jail, saddling them with a lifelong criminal record that prevents them from getting a job, getting housing and more.
3. People suffering from addiction need help, not criminal punishments. Measure 110 will allow people to get the treatment they need instead of putting them in jail and giving them criminal records.
4. Professionals and community leaders support Measure 110, including Clackamas County resident Janie Gullickson, the director of the Mental Health and Addiction Association of Oregon.
5. Save money and lives. It costs over \$30,000 to arrest, adjudicate, incarcerate and supervise someone for drug possession. Treatment costs less and saves lives.

Join us in voting YES on Measure 110.

Bethany Taft, Oregon City
 Mark Gamba, Milwaukie
 Janie Gullickson, Clackamas
 Pete Tutmark, Clackamas
 Kathy Wai, Clackamas
 Valdez G. Bravo, Clackamas
 Arielle Bloom, Lake Oswego
 Kristina Naranjo-Rivera, Estacada
 Grace Lanaras, Clackamas
 Kyla Schmidt, Lake Oswego

This is one of seven regional statements representing areas across Oregon.

Look for your area in this mix of pages.

(This information furnished by Janie Gullickson, Clackamas Resident.)

Argument in Favor

Oregon's current approach to drug policing is failing Lesbian, Gay, Bisexual, Transgender, Queer Oregonians.

Measure 110 will change that.

LGBTQ people face higher rates of drug and alcohol addiction, are more likely to experience over-policing, and have a harder time getting access to the help they need. According to the National Survey on Drug Use and Health, LGBTQ people are twice as likely to experience addiction, and only half as likely to have access to treatment.

That's why we need Measure 110.

Measure 110 will increase access to low-barrier, culturally-responsive treatment, recovery, housing and harm-reduction services to those who need and want them. It's an urgently-needed step to help our communities.

The trauma and marginalization that LGBTQ communities face because of homophobia and transphobia make our communities particularly vulnerable to addiction, homelessness, and mental health struggles. Criminalizing these health issues is cruel, ineffective, and can cause more trauma and isolation.

LGBTQ people are three times more likely to be stopped by police and be incarcerated. Trans youth are particularly over-represented. In addition, jail and prison can be particularly unsafe for LGBTQ individuals.

Jail is not the best place to send people who have drug addiction. Furthermore, the resulting criminal records from drug convictions create lifelong barriers to accessing basic needs like housing, education, and employment, exacerbating inequities, and making it harder to recover. **Treatment is more effective.**

LGBTQ communities need access to treatment that meets our needs, not incarceration.

That's why advocates for equality urge a YES vote on M110.

Basic Rights Oregon
 Cascade AIDS Project
 Prism Health
 Forward Together
 Black & Beyond the Binary
 Planned Parenthood Advocates of Oregon

(This information furnished by Peter Zuckerman, More Treatment for a Better Oregon. www.VoteYesOn110.org.)

Argument in Favor

Working Families Support Measure 110

Drug addiction impacts all kinds of people across Oregon, including workers. Even workers who aren't addicted to drugs are impacted by addiction, because we have friends, family, colleagues and co-workers who are. One in 11 Oregonians are addicted to drugs, and nearly two people in Oregon die every day from overdose, according to the federal government.

To truly build an economy that works for everyone, we need an adequate system to address drug addiction. Unfortunately, right now we don't have such a system.

- Our state ranks nearly last in the nation in access to addiction treatment for those who need it.
- Low-income households particularly struggle to find access to the treatment they need.
- Treatment is unavailable in many parts of the state, and unaffordable to many of the rest of us.

Meanwhile, our current drug laws are counterproductive. Instead of helping people who struggle with addiction by providing access to treatment, we rely too much on arresting people and giving them criminal records. Even a minor drug arrest can set up lifelong barriers that prevent people from getting jobs, professional licenses, college financial aid, housing, or being eligible for a promotion. Oregonians need access to treatment and recovery services, not jail.

Together, we can win a system that's more humane, equitable, effective and cost-effective. That's why we're urging you to vote yes on Measure 110.

Measure 110 does NOT legalize any drugs. All sales will remain a crime. Instead, Measure 110 removes criminal penalties for small amounts of personal possession of drugs and connects people with no cost and low cost drug treatment services.

Please join us and other workers in voting yes on Measure 110.

- Oregon AFL-CIO
- Oregon AFSCME 75
- UFCW Local 555
- Oregon Nurses Association
- IBEW Local 48
- Pineros y Campesinos Unidos del Noroeste (PCUN)
- Oregon Machinists' Council
- Oregon Working Families Party
- Portland Jobs with Justice

(This information furnished by Janie Gullickson, The more humane, effective approach. Vote Yes on 110.)

Argument in Favor

Desperate for help and nowhere to go: Southern Oregon Communities Need Access to Drug Treatment Vote YES on Measure 110.

Oregon has a destructive revolving door for people with drug addictions: detox (sometimes while in jail), back out and using, arrested and in trouble again -- the cycle continues, with no support, and very little drug treatment and support services available to help people find a way out.

And as bad as it is across the state, here in Southern Oregon it is even worse. Across the Rogue Valley, thousands are desperate for treatment, with nowhere to turn.

For us, this isn't a statistic. These are our loved ones, neighbors and friends. Our jails are nearly always full, often with people charged only for non-violent drug offenses. **Measure 110 will give our communities resources we desperately need, expanding access to low-cost, low-barrier treatment and recovery services in our region.**

Our people can't wait. They need immediate, compassionate, care. And these services are most effective when offered within their home communities.

But right now, providing our communities with the services and support we need, addiction treatment is an afterthought. The cost is counted in lives, with people dying every day, sometimes from overdose while waiting to get into treatment.

Vote YES on Measure 110. Please give our communities and families access to effective drug treatment, and a way out of addiction.

- Karen Meurer, Phoenix
- Monserrat Alegria, Central Point
- Rich Rohde, Ashland
- Scott Perry, Medford
- Rita Sullivan, Medford
- Bev DeLeonardis, Central Point
- Erica Ledesma, Medford
- Silvia T. Arroyo, Medford
- Ana Gutierrez, Talent
- Floran McGee, Bandon
- Mariah Hollingshed, Medford
- Elizabeth Silver, Ashland
- Claudia Little, Ashland
- Derek Nelson, Grants Pass
- Eleanor Ponomareff, Talent
- Marjorie Lininger, Medford
- Crystal Reyes, Medford

This is one of seven regional statements representing areas across Oregon. Look for your area in the mix of pages.

(This information furnished by Anthony Johnson, Vote Yes on Measure 110, The More Humane, Effective Approach.)

Argument in Favor

Columbia Gorge Residents: Vote YES on Measure 110

Drug addiction isn't just a big city problem. It impacts people in every part of Oregon, including where we live -- the Columbia Gorge.

Most Oregonians know someone with addiction issues. In our community, young people are especially impacted. The numbers are devastating: 1 in 5 young adults (between ages 18 and 25) in Hood River County are addicted to drugs, according to the Oregon Health Authority.

Oregon has the fourth-highest addiction rate in all 50 states and also ranks nearly last in access to drug treatment, according to the federal Substance Abuse and Mental Health Services Administration.

Addiction treatment is especially hard to access when you live outside a major city. For many people in the Columbia Gorge, there are no options at all. To get treatment, you need a car and enough time to drive to a big city, several times a week. You need money to pay for treatment, or the "right" insurance plan to cover it.

We have jail on demand in the Columbia Gorge. But we don't have treatment on demand.

Measure 110 does not legalize drugs. Rather, it establishes a more humane, effective and cost-effective approach to drugs and addiction. Instead of arrests and punishments, Oregon would shift to a health-based approach that actually works.

Measure 110 will expand access to low-cost, low-barrier treatment in our communities, giving those struggling with addiction the tools they need to get well, and build a recovery support network after treatment in the communities where they work and live.

Join us in voting YES on Measure 110:

- Matt Ellis
- Eric Burnette, Hood River
- Alisa Fowler, Hood River
- Kourtney Nelson-Cocks, Hood River
- Brendan Cocks, Hood River
- Amber Orion, The Dalles
- Douglas Nelson, The Dalles
- Connie Yost
- Jill Burnette, Hood River
- Gene Hallman
- Mary Hallman

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(This information furnished by Haven Wheelock, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

Over 100 organizations across Oregon endorse Measure 110. (Too many to fit!)

We are organizations, large and small, from around Oregon. We represent healthcare providers, law enforcement, communities of color, immigrants and more. We have vetted Measure 110 and believe it's the right approach.

Join us in voting YES on Measure 110!

- ACLU of Oregon; Ainsworth United Church of Christ; Alano Club of Portland; Oregon Chapter - American College of Physicians; Asian Pacific American Network of Oregon (APANO); Basic Rights Oregon; Brown Hope
- Cascade AIDS Project Prism Health; Causa; Central City Concern; Centro Latino Americano; Changing Patterns; Clergy for a New Drug Policy; Coalition of Communities of Color; Community Alliance of Tenants; Confederated Tribes of Grand Ronde
- Ecumenical Ministries of Oregon; Elevate Oregon; Escudo Latino; Family Forward Oregon; Farm Worker Ministry Northwest; Forward Together; Freedom to Thrive; Gang Impacted Family Team
- Hacienda CDC; Health Care for All Oregon; Human Rights Watch; IBEW Local 48; Impact NW; Interfaith Peace and Action Collaborative; Jewish Federation of Greater Portland; Jobs with Justice Portland; JOIN; Justice Advocates
- Latino Network; Law Enforcement Action Partnership; Lutheran Community Services Northwest; Men Building Men; Mental Health and Addiction Association of Oregon; Moms United
- NAACP - Eugene Springfield Chapter; NAACP - Portland Chapter; National Alliance on Mental Illness - Southern Oregon; NARAL Pro-Choice Oregon; National Association of Social Workers Oregon Chapter; NAYA Family Center; Next Up Oregon; Northwest Down Syndrome Association

- Oregon Academy of Family Physicians; Oregon AFL-CIO; Oregon AFSCME 75; Oregon Latino Health Coalition; Oregon Machinists' Council; Oregon Nurses Association; Oregon Physicians for Social Responsibility; Oregon School Social Worker Association; Oregon School Psychologists' Association; Oregon State Council For Retired Citizens; Oregon Working Families Party; Outside In

- Pineros y Campesinos Unidos del Noroeste (PCUN); Planned Parenthood Advocates of Oregon; Remnant Initiatives; Rosewood Initiative

- Transition Projects; UFCW 555; Unite Oregon; United Seniors of Oregon; Virginia Garcia Memorial Health Center; White Bird Clinic; YWCA of Portland

(This information furnished by Anthony Johnson, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

**Children shouldn't get prosecuted for drug addiction
Youth Advocates Urge a YES Vote on Measure 110**

Often, when a student is found to have drugs or alcohol on school property, the first call goes to the police, and that child receives a "minor in possession" charge. A criminal record can follow a young person for life. It can hurt their ability to stay in school, go to college, rent an apartment, or get a job.

When a minor struggles with drugs, we have a choice: we can punish them and push them aside, or we can see it as a call for help. All too often, Oregon makes the wrong choice. Addiction is a health problem that can be solved with evidence-based drug treatment and recovery services.

Access to drug treatment is severely limited in Oregon.

Oregon ranks nearly last out of the 50 states in access to drug treatment services for those who want them.

The longer students are out of school without drug treatment and support, the more they fall behind.

Measure 110 offers a more effective approach, expanding access to drug treatment for youth across Oregon, and intervening early to help them recover. It does NOT legalize drugs.

As professionals who have dedicated our careers to advocating for children, we support Measure 110. It's the best way to help youth who struggle with drug addiction.

**Kids with Addictions Need Treatment, Not Punishment
Vote YES on 110.**

- Moms United to End the War on Drugs
- Parents for Addiction Treatment & Health
- Portland Opportunities Industrialization Center
- The Mother PAC
- Men Building Men
- Lily Lines, Peer Crisis Intervention Specialist
- Joe McFerrin, Executive Director, Portland OIC
- Hannah Reynolds,
- High School Teacher & Debate Coach, Tillamook
- Margaret Whiting, High School Counselor, Wheeler
- Dennis Morrow, Executive Director, Janus Youth Programs
- Donell Morgan, Executive Director, Elevate Oregon
- Hannah Nebeker, Early Childhood Educator, Bend
- Antoinette Edwards
- Tony Hobson, Sr.
- Roy Pittman
- Kali Thorne Ladd

Jay Bloom
YWCA of Portland

(This information furnished by Haven Wheelock, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

**Addiction is a housing issue.
Homeless and Affordable Housing Providers
and Advocates Agree:
YES on Measure 110**

Housing plays an important role in helping people recover from drug addiction.

If you can't pay rent or find a job, live in an unsafe situation, or don't know where you're going to sleep at night, the resulting stress can contribute to drug use and relapse.

It's hard to recover from drug addiction when you do not have a safe, stable place to live.

At the same time, the criminalization of addiction can make it much more difficult to access the things people need to recover. For example, criminal records for drug possession can make it nearly impossible for people to get a job, rent an apartment, or go to school. Criminal records can trap people in poverty, homelessness and addiction.

Unfortunately, Oregon's current approach to drug addiction often makes these housing and addiction problems worse. **We need a better approach.**

That's why we support Measure 110. This measure expands access to drug addiction treatment and recovery support, and removes unfairly harsh punishments for minor, nonviolent drug offenses, so people with addiction can more easily get the help they need.

People will no longer be arrested and put in jail simply for possession of small amounts of drugs. **Instead, they will receive a health assessment and be connected to the right treatment or recovery services, including housing assistance, to help them get their lives back on track.** This initiative does NOT create any new taxes to pay for all this. Instead, it relies on existing marijuana tax revenue.

Vote YES on 110

Cascade AIDS Project
Prism Health

Central City Concern

Hacienda CDC

Community Alliance of Tenants

JOIN

Transition Projects, Inc.

Outside In

Steve Rudman, Executive Director (retired), Home Forward

Lawashia Smith, Shelter Manager, Portland

James Cook, Homeless Advocate, Redmond

Sam Bouman, Housing Case Manager, Portland

Colleen Thomas, Homeless Advocate, Bend

(This information furnished by Haven Wheelock, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

**Willamette Valley Communities Agree:
Oregonians need more access to drug treatment services.**

Vote YES on Measure 110.

When a person struggling with drug addiction reaches out for help, the first thing their loved ones may do is to try to connect them with drug treatment services in their area.

Along the 150 mile length of the Willamette Valley, we're lucky to have more options than some parts of Oregon. But it's nowhere near enough.

Compared to the need, the number of drug treatment spots in the valley are dangerously limited. Families are desperate, coming up empty-handed when trying to find help for their loved one.

Treatment centers are almost always full, with anywhere weeks to months-long waiting periods. When people with drug addictions are made to wait many revert back to problematic drug use. And the longer the wait, the higher the risk of overdose.

Measure 110 will increase access to low-cost, low-barrier, local treatment and recovery services, including:

- Treatment that is evidence-based, trauma-informed, culturally responsive and patient-centered;
- Peer support and recovery services to help individuals rely upon a support network after treatment;
- Housing (stabilizing and transitional) for persons with substance use disorder.

For someone struggling with addiction, access to treatment can be the difference between life or death.

For the people who love them, treatment offers hope and progress. For once, they can answer their phone or their door without dreading it's news that something bad has happened.

**Treatment saves lives,
but only when those who need it can access it.
Join us in voting YES on Measure 110.**

Linda Hamilton, Eugene

Debbie O'Dea, Corvallis

Nate Macy, Newberg

Joshua Purvis, Eugene

Sergio Guitierrez, Independence

Sam Sappington, Corvallis

Lee Mercer, Silverton

Laurel Lisovskis, Eugene

Sean Nikas, Salem

Rico Perez, Eugene

Miriam Cummins, Albany

Lisa Gettig, Salem

Mike Ellison, Salem

Heather Bishop, Albany

Christy Crisman, Newberg

**This is one of seven regional statements
representing areas across Oregon.
Look for your area in the mix of pages.**

(This information furnished by Devon Downeysmith, More Treatment for a Better Oregon, Vote Yes on 110.)

Argument in Favor

**As Treatment Providers,
We See Oregon's Addiction Crisis Firsthand**

**Oregon needs to address drug addiction
with treatment, recovery and housing.
Now.**

We are medical doctors and treatment providers who specialize in addiction. We work across Oregon, and among us have seen thousands of cases. Drug addiction affects all kinds of families and people, from all communities and backgrounds.

Oregon ranks nearly last of all states in access to drug treatment services. **It is unacceptable how often we have to tell someone in crisis that we simply don't have a place for them or their loved one.**

When we call weeks or months later to let them know a space has finally opened up, we often cannot reach them. Sometimes people fall back into the throes of active drug addiction. Sometimes they have overdosed and died.

We are losing one to two Oregonians to drug overdoses every day — in cities, suburbs, and rural areas.

Measure 110 offers a better path forward, making addiction treatment and long-term recovery and support services available on-demand.

Measure 110 will implement a more compassionate, effective approach to addiction — one that recognizes it as a health issue that demands an immediate health-based response

Vote YES for Measure 110

Dr. Andy Seaman, Healthcare for the Homeless Clinician

Aubrey Henshaw, Case Manager,
Eastern Oregon CCO Baker County CAC

Dr. David Lawrence, Central City Concern

Monta Knudson, Executive Director, Bridges to Change

Theodor Miller, Diversion Counselor,
Union County Juvenile Department

Dennis Morrow, Executive Director, Janus Youth Programs

Dr. Rebecca Cantone, Founding Medical Director,
Oregon Outpatient Treatment Program

Dr. Jessica Gregg,
Hospital-Based Addiction Treatment Provider

Cami Bean, NP, Treatment Provider, La Grande

Dr. Alisha Moreland, MD, Former Executive Director,
Avel Gordly Center for Healing

Ed Blackburn, retired Executive Director, Central City Concern

Richard Harris, retired Director of Mental Health and
Addiction Services for the State of Oregon

Cami Miller, Community Health Worker, LaGrande

Heidi Hug, CADC II, CRM, QMHA, Baker City

(This information furnished by Anthony Johnson, More Treatment for a Better Oregon, Vote Yes on Measure 110.)

Argument in Favor

My dad died of an accidental drug overdose while waiting to get into treatment.

I'm voting yes on 110 so that other families don't have to experience what I did.

My dad struggled with addiction for much of his life, but he wanted to get better.

A fatal drug overdose took his life just days before he was to begin medically assisted treatment for his drug addiction.

There is not a doubt in my mind that his overdose was an accident, and that if he had been able to access treatment earlier, he would be alive today.

My dad was my biggest cheerleader, always behind me 100 percent. He was at every cross country meet, basketball and lacrosse game. He worked two jobs to make sure my brother and I could stay in the school district we grew up in. My dad wrote to me every week while I was in bootcamp and was with me as I boarded a plane to Afghanistan. When I graduated from college, the first person in my family to do so, my dad flew across the country to be there. My dad never let me forget how much he loved me. I could not have accomplished what I have without him.

It is hard to watch someone that you love struggle with addiction. It was incredibly hard for us to find him affordable treatment. Once we did, he had to wait weeks to access it. Weeks may not seem long, but **when it comes to addiction, an extra day can mean life or death.**

Measure 110 will expand access to affordable treatment so no one will have to spend months searching for it, or waiting to access it.

We do not have months -- or weeks, or days -- to wait when someone is ready for treatment.

I will vote yes on Measure 110 so that no other family has to lose a loved one to overdose.

Amelia Fowler

(This information furnished by Janie Gullickson.)

Argument in Favor

I'm the former US Attorney for Oregon and have prosecuted drug cases. Our current approach to drug addiction doesn't work.

Vote YES on Measure 110

I've prosecuted many drug crime cases firsthand—and seen how the way we take on drug addiction is dysfunctional.

The system we have right now often creates a revolving door in and out of jail. Thousands of people are arrested every year because they are addicted to drugs. They never get the treatment they need. They are put behind bars. Black, indigenous and people of color are disproportionately harmed.

When people leave jail for drug possession, they receive little or no support. They struggle to find employment and housing because now they have criminal records. With no support, they often return to drugs. And the cycle continues...

As an experienced law enforcement official, I think this is wrong. We shouldn't be filling our jails with people suffering from addiction. What we should do is provide drug treatment services and recovery support so that people can get and stay clean.

But there isn't enough drug treatment available; Oregon ranks nearly last in the country in access to drug treatment for those who want it.

Measure 110 offers a better approach, expanding drug treatment services and halting the ineffective practice of jailing people caught with a small amount of drugs.

Measure 110 does NOT legalize drugs. Instead, Measure 110 reduces criminal penalties for low-level drug possession; it incentivizes people to get drug treatment, and expands access to treatment and recovery services. Independent research from the Oregon Criminal Justice Commission shows it will reduce racial disparities in arrests by 95%.

From my point of view as a longtime officer of the court, it's time for a more humane and effective approach to drug addiction in Oregon.

Vote YES on Measure 110.

Kris Olson, former US Attorney for the District of Oregon

(This information furnished by Janie Gullickson.)

Argument in Favor

Central Oregonians Need Better Access to Drug Treatment and Recovery Services.

Vote YES on Measure 110.

"I am 16 months sober, and forever grateful for the drug treatment I received, and the new shot I got at life. Not all people have the opportunity to get this chance like I did. People CAN change for the better, and measures like this could be the blessing that helps many people find a way out of the horrible grips of addiction."

- Anonymous; Bend Resident

In Central Oregon, we're used to driving long distances for appointments, groceries and basic needs, especially those of us living outside of cities. But even when someone is willing to drive the distance for drug addiction treatment, there is simply nowhere to go for what they need.

More people in Central Oregon are dying from drug overdoses now than ever before.

Deschutes, Jefferson, and Crook counties are growing faster than Oregon as a whole. Yet addiction treatment services are less accessible here than ever. Oregon is in an addiction crisis, and our communities are falling through the cracks.

Measure 110 will expand access to low-cost, low-barrier drug treatment services in Central Oregon. This measure does not legalize drugs, but shifts our approach to addiction away from criminalizing people, to one providing health services.

Join us in voting YES on Measure 110 so that anyone in Central Oregon who wants treatment can get it.

Kim Reynolds, Bend

Frank Patka, Bend

Gonzalo Mendez, Bend

Matthew Rock, Redmond

Sydney Dedrick, Bend

GG Johnson, Bend

Erika Spaet, Bend

Hannah Nebekker, Redmond

Zavi Borja, Bend

John Hummel, Bend

Anna Rhodes, Redmond

James Cook, Redmond

Gavin MacFarland, Bend

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(This information furnished by Devon Downeysmith, Yes on Measure 110. It's time for a more humane, effective approach.)

Argument in Favor

Physicians: Our current system excludes vulnerable populations. Oregon needs adequate and equitable access to drug addiction treatment

YES on 110

At Oregon Physicians for Social Responsibility, we represent medical and health professionals and public health advocates, with approximately 2,500 members and supporters. We work to protect human life from the gravest threats to health and survival.

Drug overdoses kill nearly two Oregonians every day. These deaths are preventable. But we need a system that treats people more fairly.

You're probably aware of the disparities in drug arrests and how Black, Indigenous and people of color are disproportionately harmed. Measure 110 would reduce disparities in drug arrests by 95%.

But systemic racism isn't just found with policing. It's also found in healthcare, including drug addiction treatment.

Oregon already ranks nearly last in access to drug treatment for those who want it. People unable to access treatment tend to be those who can't afford it, lack the ability to travel long distances to get treatment, don't have the "right" insurance plan, or are stigmatized to the point of being afraid to get treatment, in many cases because they are worried about police arresting them for seeking help.

These are among the many reasons our current system disproportionately excludes poor people, people living in rural communities, LGBTQ communities, people with disabilities, and Black, Indigenous, Latinx, and people of color.

Measure 110 is a measure for everyone—a more humane, equitable and effective approach.

Measure 110 does NOT legalize any drugs. Drug testing will remain in place. DUIs will still be a crime. All illegal drug sales, of any kind, will remain a crime.

Measure 110:

- **Expands access to drug addiction treatment all around Oregon.**
- **Reduces the cost and long wait time to get treatment.**
- **Pays for treatment using an existing tax on marijuana.**
- **Treats addiction as a health issue, not as a criminal punishment issue.**

This approach will save lives and be more equitable.

Oregon Physicians for Social Responsibility

(This information furnished by Peter Zuckerman, Yes on Measure 110, www.VoteYESon110.org.)

Argument in Favor

**Every Day in Oregon,
We Lose Nearly Two People to Drug Overdose
Help Fix this Broken System**

The Centers for Disease Control reports that Oregon's rate of deaths by drug overdose went up by 10% over the last year. These deaths occur in rural and urban parts of Oregon, in every Oregon county, among people old and young, Black and white, Republican and Democratic. We got here because Oregon has failed to adequately provide low-cost, no barrier drug treatment and recovery services to people when they need it.

According to the federal government, Oregon ranks nearly last in availability of drug treatment for those who want it.

In many parts of the state, there is no drug treatment available at all. In other places, the waitlist to get treatment at all can be long, and the wait to get affordable treatment can be months long.

People in Oregon regularly die of overdoses while they are still waiting to get treatment. Another reason for the overdose death rate Oregon largely treats addiction as a criminal matter instead of a healthcare issue, arresting nearly 9,000 people a year for simple drug possession. Many suffering from addiction don't come forward for help for fear of arrest. Instead they hide and continue to use.

Punishing people for drugs and addiction has failed.

Research shows that it's counterproductive: People leaving jail from arrests for drugs are actually much more likely to die of overdose because they return to what's familiar. They resume using drugs at the same rate as before, but their body isn't used to it.

It doesn't have to be this way.

Measure 110 will establish a more humane, effective and less expensive approach to drug addiction.

Measure 110 will greatly expand access to low-cost, no barrier drug addiction treatment and recovery services for those who need them, paying for it with a portion of existing taxes on marijuana.

Reduce Deaths by Overdose

Vote YES on 110

(This information furnished by Anthony Johnson, Chief Petitioner, More Treatment for a Better Oregon, www.voteyeson110.org.)

Argument in Favor

We're from Eastern Oregon.

We have practically no access to drug addiction treatment

Vote YES on Measure 110.

It's hard to overstate how bad Oregon's drug addiction and overdose crisis is in eastern Oregon.

The opioid epidemic has hit us hard. A lot of people want to quit. But there is practically no access to drug addiction treatment at all.

Even if you have the money to pay for treatment and the "right" insurance plan—which all too often is NOT the case—you have to drive hours to the nearest place for help. That's very hard for someone to do if they're addicted to drugs, have a family, or do not have a lot of money.

For those fortunate enough to get treatment, there is inadequate support afterwards. So people relapse, often shifting from prescription drugs to illegal drugs, and eventually end up with criminal records that stop them from getting jobs, housing and more.

Criminalizing drug addiction is expensive. It costs about \$30,000 per person, per year, to arrest, adjudicate, incarcerate and supervise them in a simple drug possession case. A treatment-based approach would save money. In addition, criminalizing drug addiction takes a lot of law enforcement's time, when there are more important things to focus on, like unsolved murder and rape cases.

Measure 110 does NOT raise taxes. It does NOT legalize any drugs. Drug testing will remain in place. All sales, of any size, will remain a crime. Rather, it uses existing taxes on marijuana to expand access to low-cost, low-barrier treatment all around the state—including eastern Oregon.

Vote YES on 110.

Wallowa Valley Center for Wellness

Cami Miller, La Grande

Aubrey Henshaw, Baker City

Micah Engum, Pendleton

Zaira Sanchez, Hermiston

Eugene Hallman, Pendleton

Mary Hallman, Pendleton

Reverend Taylor Gould, La Grande

Cami Bean, La Grande

Chantay Jett, Enterprise

This is one of seven regional statements representing areas across Oregon.

Look for your area in this mix of pages.

(This information furnished by Haven Wheelock, More Treatment for a Better Oregon: Yes on 110.)

Argument in Favor

Drug treatment and recovery services save lives. They saved mine.

Vote YES on Measure 110

I battled addiction for 20 years. In 2013 I was arrested, charged with a felony for personal possession and sentenced to jail.

I was never offered treatment in jail, or upon release.

In jail, I detoxed from drugs without medical supervision. Everyone detoxing was placed in a group cell together. There was one toilet, and we were given a floor mat and blanket. We were so cold we huddled together for warmth, even though we were strangers. Every time someone got sick—which happens often while detoxing—we were forced to take cold showers. Jail was traumatizing and dehumanizing.

Once released, I went back to using. Using drugs was the only way I knew how to cope, and my time in jail only created more trauma I needed to escape from.

In 2015, I was finally able to get into treatment. I graduated, and found transitional housing through Central City Concern. The wrap-around support I received saved my life.

Measure 110 makes these types of supports more accessible, available when someone wants it, rather than through sheer luck like me.

Even though my nightmare with addiction has ended, my criminal record continues to haunt me. I have been denied housing. I have received job offers only to have them rescinded when my background check came back. I used to work as a Certified Nursing Assistant, but my record prevents me from being able to do that ever again.

Today I'm a mother and grandmother. I work as a Mentor and Peer Development Supervisor. In my work, I am constantly confronted with stories from others seeking the same roadblocks I faced when trying to get access drug treatment.

It doesn't have to be this way. Measure 110 can change this. Please Vote YES on 110.

Serina Woods

(This information furnished by Haven Wheelock.)

Argument in Favor

Our organizations represent more than 3,000 medical doctors and health professionals in Oregon.

**We Urge a Yes Vote on Measure 110
Oregon Academy of Family Physicians
Oregon Chapter of the American College of Physicians**

Our members include addiction medicine doctors and researchers who study drug addiction. We see what works and what doesn't.

As medical doctors throughout Oregon, we are first hand witnesses to the failure of our current approach to drugs and addiction.

People are dying, families are breaking apart, and lives are being ruined—because instead of addressing Oregon's lack of treatment and recovery services, we treat people with addiction as criminals.

Oregon needs a humane, equitable and effective approach to drug treatment.

- Oregon ranks nearly last in access to treatment.
- The wait time to obtain treatment is so long in Oregon that **people sometimes die while waiting to get treatment.**
- Punishing people for addiction is ineffective, expensive and inhumane.
- **Drug addiction is a health issue that deserves a health-based response.** Arresting people and giving them a criminal record makes recovery from addiction even harder.

Measure 110:

- Does NOT legalize drugs.
- Does NOT create any new taxes.
- NO CHANGE is made to other crimes associated with drug use, such as manufacturing or driving while impaired.
- Workplace drug testing isn't changed.
- All sales, of any amount, remain a crime.

Measure 110 will establish a health-based approach to addiction. Instead of arresting people for possession of small amounts of drugs, Measure 110 will greatly expand access to drug treatment and recovery services. This includes:

1. **Establishing Addiction Recovery Centers throughout the state** to immediately assess the needs of people who use drugs, and link them to treatment, care and services.
2. **Increasing the availability of services, including:**
 - Drug Treatment
 - Peer support and recovery services so people are able to remain clean and sober
 - Supportive Housing
 - Harm reduction interventions

Please Vote Yes on Measure 110
www.VoteYESon110.org

(This information furnished by Peter Zuckerman, The Campaign for More Treatment, A Better Oregon. Vote Yes on Measure 110.)

Argument in Favor

Las leyes de las drogas de Oregon se dirigen de manera desproporcionada a la comunidad latina. Necesitamos un mejor enfoque.

Vote Sí a la Medida 110.

Los latinos enfrentan consecuencias desproporcionadamente duras en muchas etapas del sistema de justicia penal, a pesar de que la evidencia muestra que los latinos consumen drogas en niveles similares o más bajos.

La policía perfila injustamente a muchos latinos. Los latinos condenados por delitos relacionados con las drogas pueden afrontar sentencias severas que resultan en más tiempo en la cárcel y la separación de familias.

Una acusación de un delito menor de drogas puede tener consecuencias de por vida, creando antecedentes penales que dificultan la obtención de vivienda, empleo, y más.

La Medida 110:

- Eliminará casi por completo las disparidades raciales en los arrestos y condenas por drogas. Esto es según un nuevo informe de la Comisión de Justicia Criminal de Oregon.
- Ampliará el acceso al tratamiento culturalmente sensible ofrecido en diferentes idiomas.
- Mantendrá unidas a las familias.

Lo instamos a votar Sí en la Medida 110.

Oregon's drug laws disproportionately target the Latino Community. Time for a better approach.

Vote YES on Measure 110.

Latinos face disproportionately harsh consequences at many stages of the criminal justice system, despite evidence showing Latinos use drugs at similar or lower rates than others.

Many Latinos are unfairly profiled by police. Latinos convicted of drug offenses can face harsh sentences that separate families and lead to more jail time.

A misdemeanor drug charge can create a lifelong criminal record, making it harder to obtain housing, employment, and more.

Measure 110 will:

- Nearly eliminate racial disparities in drug arrests and convictions. This is according to a new report by the Oregon Criminal Justice Commission.
- Expand access to culturally-responsive treatment offered in different languages.
- Keep families together.

Vote YES on Measure 110.

Latino Network
 Latino Health Coalition
 Mi Voz Cuenta
 Escudo Latino
 Centro Latino Americano
 CAUSA
 Hacienda CDC
 Virginia Garcia Memorial Health Center

(This information furnished by Haven Wheelock, Vote Sí a la Medida 110/Vote YES on Measure 110.)

Argument in Favor

It happened to me: Vote YES to end the cruel practice of criminalizing drug addiction. Drug laws in Oregon are unfair. I should know.

Oregonians use drugs at about the same rate, regardless of race, but **Black and Brown people like me are three times more likely to be arrested, charged and convicted of drug crimes.** People of color are also sentenced more harshly and forced to pay higher fines.

When I was arrested in North Portland over two decades ago, police officers on the scene told the white people involved to leave—and only arrested me. Throughout the entire process of being charged, prosecuted, jailed and released, **I was never offered treatment or recovery support.**

I had to find help on my own, and it was very difficult. I was treated like a criminal, not like someone with a health issue needing help.

In the 26 years since, the criminal record I received has been a barrier I deal with constantly. It has made it nearly impossible to qualify for a home loan, kept me from getting permanent jobs, held me back from promotions and prevented me from getting professional licenses.

Our current approach does not help people with addictions. It makes things worse. Unnecessary arrests and criminal records ruin lives.

Nonetheless, right now one Oregonian is arrested for simple drug possession about once every hour. Drugs are the most arrested offense in America.

Voting YES on Measure 110 will end the cruel practice of criminalizing addiction in Oregon, and reduce racial disparities in our criminal justice system.

Measure 110 can't erase the inequities I have encountered, but it will help stop them in the future.

We need to fix our broken system that criminalizes addiction and unfairly targets Black and Brown Oregonians. It's time to stop ruining lives—and start saving them.

Vote YES on Measure 110.

Bobby Byrd, Rock Creek Resident

(This information furnished by Anthony Johnson, Vote Yes on Measure 110 for a more humane, effective approach.)

Argument in Favor

**The View from Inside the Courtroom:
Measure 110 Can Help Stop Ruining Lives—
and Start Saving Them**

As courtroom attorneys, we have represented people struggling to recover from addiction. Based on our experience, we believe treating addiction as a crime is counter-productive.

Measure 110 doesn't legalize any drugs. All sales, of any amount, will remain a crime, and drug testing will remain in place.

Measure 110 changes the approach to drug addiction from punishment-based to health-based.

When a person with addiction is arrested and criminally convicted for possessing a small amount of drugs, their work to build a safe, healthy life in recovery becomes harder:

- A criminal conviction creates a barrier to finding a job and housing.
- A person in jail or fulfilling arduous probation requirements for minor possession can lose their job. As a result, they can lose their apartment, health insurance, access to medication, and ability to buy food.

Our current drug laws stigmatize substance use disorder.

This prevents people from accessing help when they need it. We have known clients, colleagues, friends, and family members who had such shame and fear of arrest around their addiction that they didn't seek the help they needed. For some, this has led to serious harm and even death.

We believe that people struggling with addiction need help, not arrests and criminal convictions. They need access to treatment and recovery support to help achieve sobriety, find supportive housing, and get back to work.

**Please join us in voting Yes on Measure 110.
It's a better, more effective,
and more humane response to addiction.**

Jessica Kampfe, Salem
Phil Studenberg, Klamath Falls
David McDonald, Portland
Kara Davis, Pendleton
Bob Moon, Baker City
Brook Renhard, Eugene
Bruce Tarbox, Oregon City
Carl Macpherson, Portland
Holly Preslar, Grants Pass
Justin Rosas, Medford
Diana Bettles, Klamath Falls
Amanda Theibeault, Hillsboro
Jeni Feinberg, Medford

Joel A. Wirtz, Bend
John B. Lamborn, Burns
Eric Dietrick, Salem

(This information furnished by Peter Zuckerman, Treatment not Punishment: The More Effective Approach.)

Argument in Favor

"We Must Pass Measure 110."

Former Multnomah County Chief Criminal Judge Edward Jones

I was a trial court judge in Multnomah County for 18 years, serving as Chief Criminal Judge during my final years on the court. I've spent more than 40 years in criminal law and participated in the resolution of thousands of drug cases. Based on that experience, I have come to a firm conclusion:

We must pass Measure 110.

As a trial court judge, I sentenced drug offenders. I ordered them into treatment. But there wasn't really enough treatment, and there was little support for people in treatment, and there were many who didn't get what they needed and ended up back in custody, still addicted. We failed those people. They needed treatment, but all we gave them was a criminal conviction.

A drug crime conviction, or even a drug crime arrest, can have a dramatic effect on a life. It can limit where you live, who you live with, and what you can do for a living.

And the burden of that conviction doesn't fall only on the defendant. As each case passes through the system, everyone who touches it, from the arresting officer at the beginning to the supervising probation officer at the other end, has better things to do.

My job as a judge was to apply the law, and I did. But based on that experience, I can tell you that the law must change. **Our current drugs laws make our problems worse.** Measure 110 will not legalize any drug. It will not remove criminal penalties for selling or manufacturing drugs, or any crimes that may go along with drugs. It just stops criminalizing addiction.

The criminal justice system is the wrong tool to address a healthcare issue: it is expensive, it is cruel, and it doesn't work.

Please join me in voting Yes on Measure 110.

Edward Jones, Former Multnomah County Chief Criminal Judge

(This information furnished by Peter Zuckerman, More Treatment for a Better Oregon: The more humane and effective approach.)

Argument in Favor

Help eliminate racial disparities in our criminal justice system.

Vote YES on Measure 110

Disparities in drug possession arrests and convictions will nearly be eliminated if Measure 110 passes.

That's according to a research released by the Oregon Secretary of State and conducted by the Oregon Criminal Justice Commission, **the most reliable and authoritative independent government researchers on this issue.**

Read more: <https://voteyeson110.org/cjc/>

What the report found:

- **Racial disparities in drug possession arrests will drop by 95%.**
- **Convictions of Black and Indigenous Oregonians, including Native American Oregonians, would drop by 94%.**

What the report says:

"This drop in convictions will result in fewer collateral consequences stemming from criminal justice system involvement, which include difficulties in finding employment, loss of access to student loans for education, difficulties in obtaining housing, restrictions on professional licensing, and others."

The actual reduction of racial disparities could be even more dramatic: "Other disparities can exist at different stages of the criminal justice process, including inequities in police stops, jail bookings, bail, pretrial detention, prosecutorial decisions, and others." However, the Criminal Justice Commission could not obtain local data on such disparities.

More context:

- **About 8,900 Oregonians are arrested every year in cases where simple drug possession is the most serious offense**, according to the latest numbers from the Oregon Criminal Justice Commission. That's the equivalent of about one arrest an hour. Black and Indigenous Oregonians are disproportionately targeted.
- **About one in 10 adults in Oregon need treatment for addiction but have not received it**, according to the national statistics, and Oregon ranks nearly last in people's access to drug treatment.

Vote YES on Measure 110:

Reduce racial disparities within our criminal justice system while expanding access to drug addiction treatment.

- ACLU of Oregon
- Human Rights Watch
- Partnership for Safety and Justice
- Next Up Oregon
- Law Enforcement Action Partnership
- Remnant Initiatives
- The Insight Alliance
- Central City Concern
- Ceasefire Oregon
- Justice Advocates
- YWCA

(This information furnished by Anthony Johnson, Let's stop ruining lives, and start saving them. Vote yes on Measure 110.)

Argument in Favor

**Treatment providers and advocates say:
Vote YES on Measure 110**

Oregon was in an addiction crisis before the pandemic hit:

- Oregon ranks nearly last in the nation in access to drug addiction treatment.
- Our waitlists to get treatment are weeks long.
- In some parts of the state there is no treatment at all.
- One in 11 Oregonians is addicted to drugs.
- One to two people die every day from overdose.

Then Covid-19 happened, and it got even worse. Financial stress, social isolation and uncertainty all contribute to addiction, which is probably why the pandemic has led to an increase in drug addiction and overdose.

We see the consequences: More people are using drugs to try and cope. People in recovery are relapsing. Overdosing. Dying. **The situation is even more desperate than before.**

We're doing what we can, but often, we have to turn people away. There aren't enough slots to help everyone, and not enough funding to add more.

Most Oregonians know someone who has struggled with addiction, but even if you don't, it still impacts you. Drug addiction contributes to homelessness, mental health issues, our foster care system, domestic violence, our high school dropout rate, and more. These problems will continue to get worse without a better approach to drug addiction.

We need Measure 110 right now more than ever. It will establish a humane, effective approach to drug addiction in Oregon -- without raising taxes, using existing taxes on marijuana. Marijuana tax revenue has come in at a much higher rate than expected; it makes sense that this unexpected tax windfall should go to people who struggle with drug addiction.

Vote yes on Measure 110.

- Oregon Nurses Association
- Wallowa Valley Center for Wellness
- Planned Parenthood Advocates of Oregon
- Healthcare for All Oregon
- Oregon Latino Health Coalition
- Virginia Garcia Memorial Health Center
- White Bird Clinic
- Outside In
- Bridges to Change
- National Alliance on Mental Illness (NAMI) of Southern Oregon

(This information furnished by Janie Gullickson, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

"As a doctor and researcher who has studied addiction, I've seen firsthand how treatment helps people recover and how criminal punishments can make recovery more difficult. Instead of punishing people for having substance use disorder, we should provide them with the help that they need."
- Dr. Jessica Gregg, Portland Hospital

**Scientists who study drug addiction agree
It's time for Measure 110**

We are doctors and researchers who have studied drug use and addiction for years. In most cases, people with addiction problems want to seek treatment and recover from their problematic drug use. Measure 110 does NOT legalize any drugs, but it will move Oregon towards an effective policy based on science.

Scientific studies show that putting people in jail for their addictions isn't working. Providing people with treatment, instead of a criminal record, will save lives. But in Oregon, finding treatment is a big problem: There aren't enough treatment slots available for those who need it, when they need it.

"When they need it" is an important phrase. People who cannot find treatment regularly give up and go back to addictive behaviors and drug use. Here's what science tells us DOESN'T work: punishing people for their addiction.

Not only is it ineffective in relieving substance use disorder, giving people a criminal record creates a different set of problems, keeping them from jobs, educational opportunities, and even a place to live.

We have carefully studied the results of decriminalization in Scandinavia and Portugal. The evidence is compelling: replacing punishment with treatment and recovery helps more people.

"Punishment is not a humane approach for addiction treatment. People with addictions should instead have access to 21st century treatment and recovery interventions. Oregon ranks 50th in the nation in addiction treatment access; we can and must do better!"
- Dr. Kelsey Priest, Opioid Treatment & Policy Researcher

Dr. Alexia DeLeon, Ph.D.

Dr. Adie Rae, Ph.D.

Dr. Jessica Gregg, MD, Ph.D.

Dr. Kelsey Priest, Ph.D.

Dr. Andy Seaman, MD

(This information furnished by Anthony Johnson, More Treatment for a Better Oregon, www.voteyeson110.org.)

Argument in Favor

**K-12 Public School Teachers Urge
a YES VOTE on Measure 110.**

**Students who come from homes
with addiction struggle with school.**

We see firsthand that when a family member struggles with addiction, children struggle in school, impacting how they learn and succeed.

Addiction issues often create unstable home environments. As teachers, we see what that means for kids:

- They often miss school.
- They can't focus or keep up; they are tired and distracted.
- Sometimes kids enter the foster care system because their home life is so unstable, or because their parents get arrested instead of offered treatment and recovery services. Addiction, and the arrests that often result, are leading reasons children in Oregon are placed into foster care.

As teachers, we agree that drug addiction should be treated as a health issue. Measure 110 will provide many more people access to essential treatment and recovery services.

Treatment and recovery services support the well-being of whole families and communities. Currently, these services are difficult to access. Measure 110 does NOT legalize any drugs. It will make drug treatment and recovery services available to all who need it, providing a path away from addiction.

Measure 110 expands services that can keep families together and help students succeed. It's just that simple. **Join us in voting YES on Measure 110.**

Sarah Lawson, Teacher, Forest Grove

Amélie Rousseau, High School Teacher, St. Helens

Jo Strom Lane, High School Teacher, Portland

Don Cruise, Retired Elementary Teacher, Philomath

Mia Burch, Elementary Educator, Nehalem

Randy Heath, High School Teacher, Portland

Kristin Ventura-Stein,
Elementary School Teacher, Oregon City

Monica Zeigler, Elementary Special Educator, Portland

Lisa Gettig, Retired Elementary School Teacher, Salem

Sandy Cruise, Retired Elementary Teacher, Philomath

Trisha Todd, High School Teacher, Portland

Bethany Taft, Teacher, Oregon City

Steve Naganuma, High School Teacher, Portland

Anna Rhodes, Elementary School Teacher, Redmond

Gaye Chapman, High School Health Teacher, Portland

Irynne Padua, High School Health Teacher, Portland

Greg Burrill, K-12 Educator, Portland

(This information furnished by Anthony Johnson, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

We are school counselors, social workers, and psychologists who advocate for Oregon's children every day. We support Measure 110.

"I've been a school social worker for over 20 years, and I've seen firsthand the devastating impact that addiction has on students and families. Measure 110 will give Oregon a real, sustainable way to support adolescents and adults struggling with addiction. **Currently, our state ranks at the bottom in terms of funding treatment.** By passing Measure 110, we have an opportunity to change this."
- Mary Krogh, K-12 Drug & Alcohol Support Services Coordinator

Many families receive support with housing, healthcare, and food insecurity. These services are essential to support kids through high school graduation. **Access to addiction treatment and recovery services is also critical for students in families struggling with those issues.**

But in Oregon, the general fund allocation for drug addiction services has declined by nearly 90% in the past four years.

We need to make drug treatment a priority. As funding has decreased for addiction treatment, we've seen the trauma, worry and anxiety our kids bring to school increase.

Drug treatment provided to a parent/guardian or other family member with drug addiction supports the entire family—including their school-aged kids.

These children need your support. As school counselors, social workers and psychologists, we urge a yes vote on Measure 110.

National Association of Social Workers

Oregon School Social Worker Association

Oregon School Psychologists' Association

Cristy Crisman, School Counselor, Newberg

Ellen Baltus, North Clackamas Social Worker, Retired

Kate Allen, High School Social Worker

Michael Ralls, Director of Social Services,
North Clackamas School District

Amelia Fowler, MSW

Neha Mahajan Hertzog, LSSW, Ph.D., School Social Worker

Margaret Whiting, High School Counselor, Wheeler

Amy Henry, High School Counselor, Portland

Sara Doig, School Social Worker, Beaverton

Caroline Bleckmann, K-12 High School Wellness Coordinator
and Social Worker

Gavin MacFarland, School Counselor, Bend

Solen Chu, Social Worker, Gresham

Mary Krogh, District Coordinator, Substance Use Support

(This information furnished by Devon Downeysmith, More Treatment for a Better Oregon. Vote Yes on Measure 110.)

Argument in Favor

We served our country. Now we can't get basic drug addiction treatment. Veterans Support Measure 110.

After serving our country, we now find ourselves on the front lines of Oregon's addiction crisis.

Many who have served in the US military come home and struggle with drug addiction.

It doesn't matter how long it has been since we were exposed to the circumstances that lead us into addiction. Whether serving in Vietnam, Iraq or Afghanistan, Post Traumatic Stress Disorder (PTSD) remains a challenge to veterans. Coping with that trauma is a significant cause of Substance Use Disorder.

The rate of drug addiction among Oregon veterans is far higher than that of the general population.

Every day a veteran is denied access to drug treatment and recovery services is another day of hell-on-earth, as they relive their traumas and turn to substances in a desperate attempt to self-medicate their pain. It's another day we risk losing a brother or sister in arms to suicide or overdose.

Veterans with addictions are entitled, after their service to our country, to receive professional, compassionate treatment. Measure 110 will make sure they get it.

As soldiers, we are trained to never show weakness, to "buck up" in tough situations. It takes courage to finally be able to reach out for help, and it's devastating for that plea to be met with long wait lists or outright denials because we don't have the funds or right insurance plan. Or worse, to be met with arrest for drug use.

Measure 110 offers veterans with addiction a way back to a stable life. We urge you to vote YES.

David Michael Smith, Vietnam Veteran

Amelia Fowler, Marine Corps, Operation Enduring Freedom (OEF) Veteran

Jeremy Lankenau, Army Combat Veteran, Afghanistan

Debbie O'Dea, Veteran, Oregon Army National Guard

David Barton, Marine Veteran, Desert Storm

Valdez G. Bravo, US Army, Operation Enduring Freedom (OEF) Veteran

Roy Pittman, Veteran

James Ward, Marine Corps, Operation Enduring Freedom (OEF) Veteran

(This information furnished by Devon Downeysmith, Vote Yes for More Treatment. Vote Yes on Measure 110.)

Argument in Favor

Recovery organizations urge a YES Vote on Measure 110.

Recovery is a personal experience; there's no "one size fits all" model. For people with addictions, there is nothing as powerful as being able to relate your experience with someone who has shared similar struggles, and to be able to work together toward living a healthy, productive life -- one day at a time. This 'peer support' is something all successful recovery models share.

Drug treatment gives people a way out of their addictions, while recovery services create the foundation for long term recovery. A person can go through treatment, but if they don't have access to recovery services when they complete treatment, they often relapse. And relapse can mean the difference between life and death.

For families of loved ones with addictions, relapse can mean losing them -- either literally, to an overdose, or because their loved one is lost in the throws of their addiction.

Measure 110 will fund more treatment and recovery services throughout Oregon, providing the dual support that health-care providers and recovery leaders agree are essential to long term recovery.

Recovery houses provide a safe place for those with addictions to meet and find recovery. Measure 110 makes recovery more accessible by providing funding to:

- Appoint Addiction Recovery Centers throughout the state to immediately assess people's individual needs, and link them to treatment, care and services.
- Increase peer support and recovery services to help people stay on track;
- Offer housing (stabilizing and transitional) for persons in recovery.

Measure 110 is the most innovative and hopeful solution we've seen in our decades of working in the recovery field in Oregon.

Join us in voting YES on Measure 110

Alano Club of Portland

Bridges to Change

Mental Health & Addiction Association of Oregon

Outside In

Changing Patterns

Central City Concern

(This information furnished by Janie Gullickson, Executive Director, Mental Health & Addiction Association of Oregon.)

Argument in Favor

Oregon Doctors Agree:

Addiction is a health issue.

It's time to treat it that way.

As medical doctors, we are on the front lines of Oregon's drug addiction crisis. Whether we serve patients in clinics, ERs or through non-profits, we see many Oregonians struggling with addiction. And we have one thing to say about treating this health crisis through the criminal justice system:

Stop it. Now.

The practice of arresting people for their addiction is cruel and ineffective. People with drug addictions do not benefit from being arrested and going to jail. All they get from that is a harmful criminal record. A more effective, humane approach is to provide treatment and recovery, housing and supportive services so people can get their lives back on track and return to their families and jobs.

But right now, when a patient needs help with addiction, we have a very difficult time finding a spot for them in a drug treatment program. That's because Oregon is 50th of 50 states in the availability of drug treatment to those who want it. The wait times can be days, weeks and sometimes months.

Measure 110 will do the two most important things we need to fight addiction: provide funding for treatment and recovery services people need to get their lives back on track. And stop ruining lives by giving people a criminal record because of their addiction.

As doctors we can tell you without a doubt: Measure 110 is the right prescription for Oregon.

Join us in voting YES!

Dr. Don Girard, General Internist

Dr. Rebecca Cantone, Family Medicine Doctor

Dr. David Grube, Primary Care Physician

Dr. Jessica Gregg, Internal Medicine Specialist

Dr. David Cutsforth, Primary Care Physician

Dr. Sharon Meieran, Emergency Physician

Dr. David Lawrence, Primary Care Physician

Dr. Andy Seaman, Addiction Medicine Doctor

Dr. Ray Stangeland, Emergency Specialist

Dr. David Grunkemeier, Physician & Surgeon
 Dr. Lauren McNaughton, MD, Salem
 Dr. John French, MD, Keizer

(This information furnished by Anthony Johnson, The more humane approach. The more effective approach. Vote Yes on Measure 110.)

Argument in Favor

Take it from us: Arresting people for simple drug possession has failed.

Law enforcement leaders urge a YES vote on Measure 110.

We work in law enforcement. From that experience, we've seen that making services available like treatment and recovery—not arrests—is a more humane, equitable, effective, and cost-effective approach to addressing drug addiction.

Arresting people for simple drug possession hasn't worked.

- In Oregon, we arrest nearly 9,000 people each year for low levels of drug possession. That's about one every hour.
- Drugs are the most arrested offense in America and yet...
- **Punishing people for small amounts of drugs has NOT made our communities safer from addiction or overdose.**

The sentences people receive for drug possession in Oregon rarely fit the crime. And the criminal record they receive from this offense is tethered to them for the rest of their lives. Black and Indigenous people of color are disproportionately harmed.

Measure 110 will replace these needless arrests with access to drug treatment, recovery and housing services, and it will reduce disparities in drug arrests.

Oregon has unsolved murders, rape cases, plus a huge backlog of cold cases. **Measure 110 will allow law enforcement to focus on more important issues.**

Treatment needs to be more available.

Oregon ranks nearly last out of the 50 states in access to treatment, and nearly two people die every day from overdose. **Drug addiction is a health issue; it deserves a health-based response.**

Vote YES on Measure 110

Carla Piluso, Retired Police Chief, City of Gresham
 John Hummel, Deschutes County District Attorney

Pete Tutmark, Retired Patrol Sergeant,
 Clackamas County Sheriff's Office

Kris Olson, Former US Attorney for the District of Oregon

Inge Fryklund, Former Prosecuting Attorney

Matt Ellis, Wasco County District Attorney Elect

Paul Steigleder, Retired Deputy Sheriff,
 Clackamas County Sheriff's Office

Kevin Modica, Retired Former Assistant Chief, Portland

George Weatheroy, Retired Portland Police Sergeant

Don Clark, Former Multnomah County Sheriff

Mike Schmidt, Multnomah County District Attorney

(This information furnished by Anthony Johnson, Measure 110: The More Cost-Effective Approach.)

Argument in Favor

Frontline Emergency Health Providers Urge a Yes Vote on Measure 110

We are in the middle of an addiction crisis. And our current lack of treatment is making it worse.

As frontline emergency workers, we are first responders to the devastation of our addiction crisis.

One of the most common problems we respond to related to drug addiction is people at or near a drug overdose. These are emergent situations because family and friends don't know what to do, so they drive their loved one to the emergency room or call 911.

Our best response is to help the patient immediately and then direct them to treatment services that can help further. But all too often in that critical moment we have nowhere to send them. Treatment slots are almost always full, with long waiting lists.

So we must send patients on their way. Many return in a few weeks or months with the same issue. Sometimes it's too late, and the patient has died of an overdose. It's happening all across Oregon, way too often.

According to data compiled by the Substance Abuse and Mental Health Services Administration, [Oregon is 50th of 50 states in availability of drug treatment to those who need it.](#)

What's the answer? More access to drug treatment and recovery services. That's what Measure 110 will create.

Measure 110 will greatly expand funding for treatment across Oregon, using existing marijuana taxes. Recovery services are also funded so that after treatment, patients have support to continue on the road back to their lives.

Responding to medical emergencies caused by addiction is important. But a better outcome is not to have that emergency to begin with,

Be an emergency responder. Vote Yes on 110.

Ray Stangeland, MD, Board Certified Emergency Physician

Sharon Meieran, MD, Board Certified Emergency Physician

Derek Nelson, Firefighter, Grants Pass

Lily Lines, Youthline Peer Crisis Intervention Specialist

Lex Albrandt, Emergency Paramedic

Laurel Lisovskis, MSW, CSWA, Cahoots Crisis Worker

(This information furnished by Haven Wheelock, Let's Save Lives, Not Ruin Them. Vote Yes for Measure 110.)

Argument in Favor

Do you need to get arrested to stop using drugs? NO! Treatment works better than criminal punishments.

As a wife, a daughter and a mother, the last thing I would want for one of my loved ones is for them to be arrested, especially for simple drug possession. If a member of my family were caught with drugs, or suspected to be using drugs problematically, I would do almost anything to get them real help. **The last place I would want to send them to is jail.**

But in Oregon, that's where we send a lot of our family members who struggle with drug addiction. In Oregon, according to Oregon Criminal Justice Commission statistics, we arrest about 9,000 people a year for simple drug possession. That's about 24 a day, or one per hour.

Here's what arresting people for drugs in Oregon does:

- **Turns people into criminals.** In jail, people who are addicted to drugs meet more people who can get them drugs.

- **Ruins lives.** People leave jail from a drug arrest with a permanent criminal record. That record makes it hard to rent an apartment and get a job.
- **Stigmatizes people.** This drives drug users underground, where they are reluctant to get help and more likely to use drugs alone and die of overdose.

Jail doesn't provide people with treatment. Jail results in people spending up to 364 days behind bars—just for simple drug possession.

After serving their time, or as a result of a plea agreement, a person may be required to enter treatment. But forced treatment is rarely effective. **People recover from addiction because they are open to getting help, not because they are forced to.**

What's more effective is to make treatment easily available, on demand, the moment someone wants it, to everyone who wants it, without huge costs, long commuted and long wait times.

Treatment, not punishment, is a better approach.
www.VoteYESon110.org

*Devon Downeysmith, in long term recovery, Forest Grove
 (This information furnished by Devon Downeysmith.)*

Argument in Favor

**Three Top County Prosecutors.
 One Message:
 Yes on Measure 110**

These prosecutors come from very different parts of Oregon. All are dedicated to keeping their communities safe. [All support Measure 110.](#)

"Continuing to criminalize addiction is wrong and ineffective. In order to create safe communities, people need to feel comfortable asking for help when they need it. But when we make addiction a crime, people often feel too afraid to seek the help they need, which in turn makes our communities less safe. Measure 110 creates the change needed to empower those struggling with addictions to reach out for help, and ensures that when they do, help will be available."

—John Hummel, District Attorney, Deschutes County

"Misguided drug laws have created deep racial disparities in our justice system. We know that Black and Indigenous people of color are much more likely to be arrested and face longer sentences - even though the data shows that drug use is similar across racial groups. That's just not fair. **Arresting people suffering from addiction is a cruel punishment, because having a criminal record can make it even harder for someone to get their life back on track.** We need to change our approach and focus on treating addiction. The two pillars of Measure 110 are lowering criminal penalties for simple drug possession and providing much-needed treatment and recovery services. Please join me in voting yes."

—Mike Schmidt, District Attorney, Multnomah County

"Addiction can't be solved by throwing people in jail. Punishing people for drug use is ineffective and cruel. Measure 110 removes unfairly harsh criminal punishments for minor, nonviolent drug offenses, and provides people with addictions the services they need to recover and get their lives back on track. **By connecting people with treatment and recovery services, we're offering them hope and giving them the tools to correct their course in life.** I urge all Oregonians to vote yes on Measure 110."

—Matt Ellis, District Attorney Elect, Wasco County

(This information furnished by Anthony Johnson, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

School Board Members:

Measure 110 directly supports our students.

Elected school board members represent public school districts across Oregon, advocating for our students and all school staff, grades K-12. Along with the safety of our students, we champion school funding to ensure our kids get a well-rounded education, and we champion equity to ensure kids who are struggling get the differentiated support they need to be successful.

Many students come to school from challenging environments, where they've witnessed broken homes, addiction and lack of permanent housing. We work to provide in-school counselors, social workers and other supports, but we can't fully meet their needs without enough wrap-around supports from the community.

Measure 110 will provide access to vital drug addiction treatment and recovery supports for our kids and their families.

We know that if a parent, guardian or older sibling can access treatment for an addiction, that treatment benefits the entire family, including school-age kids. More stability, less trauma.

Let's give our students the best chance for success.

Please join elected school board members in voting yes on Measure 110!

These members of the Oregon School Boards Association Board Members of Color Caucus:

- Bill Graupp, North Marion
 - Donna Tyner, Beaverton
 - Helen Ying, MESD
 - Anthony Medina, Woodburn
 - Sami Al-AbdRabbuh, Corvallis
 - Sonja McKenzie, Parkrose
 - Lori Theros, Klamath City
 - Kathy Wai, North Clackamas
 - Linda Hamilton, Lane
 - Miriam Cummins, Linn Benton Lincoln ESD
 - Ricki Ruiz, Reynolds
 - Amanda Orozco-Beach, Gresham-Barlow
- And**
- Carla Piluso, Gresham-Barlow
 - Kristin Cornuelle, MESD
 - Eilidh Lowery, Portland Public Schools
 - Joshua Singleton, Parkrose
 - Steve Lowell, Klamath Falls
 - Douglas Nelson, High Desert ESD (former)
 - Don Cruise, Philomath School Board (former)
 - Bobbie Regan, Portland Public Schools Board (former)

(This information furnished by Anthony Johnson, More Treatment, A Better Oregon.)

Argument in Favor

Addiction is a health issue. The solution is – and always has been – effective and available health care and supportive services.

But instead our nation criminalized drug users with a century-long failed experiment with state and federal policies that led to biased policing, mass incarceration, racial injustice, and unaddressed overdose deaths.

The criminalization of addiction also has created a fundamentally destructive dual system in addressing drug use. One system is reserved for privileged individuals and communities, providing treatment, services, and uninterrupted access to the benefits of American society.

The second, parallel system funnels Black, Latinx, and indigenous people into the criminal justice system, escalating the racial and economic disparities that damage Oregon's communities. This response to drug use also penalizes people who are lower income and lack healthcare, contributing to a deepening underclass in American society.

It did not have to be this way.

Today we know so much more about addiction, effective treatment, and the need for harm reduction services. We know that a public health crisis is only made worse by policies that punish rather than help our fellow Oregonians.

We also know that a dramatic increase in treatment and other services is needed to effectively address drug dependence and to prevent the tragedy often experienced by drug users and their loved ones.

Measure 110 is an essential step in finally ending the failed and destructive drug war and prioritizing drug use as a public health crisis.

Partnership for Safety and Justice fully supports Measure 110 and its promise for Oregon and our nation.

Oregon is ready. We can do this.

Vote Yes on Measure 110!

Andy Ko
Executive Director

Partnership for Safety and Justice is Oregon's leading public safety and criminal justice policy reform organization, transforming society's response to crime with innovative solutions that ensure accountability, equity, and healing.

(This information furnished by Talia Gad, Partnership for Safety and Justice.)

Argument in Favor

Oregon's drug laws are deeply inequitable. Measure 110 will nearly ELIMINATE racial disparities for drug arrests and convictions.

Nationally, the War on Drugs has been a failure -- unsuccessfully reducing the harm of drugs, and resulting in systematic over-criminalization, racial profiling, and mass incarceration of people of color, particularly Black and Indigenous people.

In Oregon, people use drugs at similar rates, but Black and Indigenous people of color are three times more likely to be arrested. People of color face unfair racial disparities at every stage of the criminal justice system that can be traumatic and ruin lives.

Drug arrests can set up lifelong barriers to access housing, employment, student loans, and professional licenses, making it nearly impossible for people to get their lives back on track. For immigrants and refugees, the criminalization of addiction can lead to families being torn apart.

An independent government research report released by the Secretary of State on behalf of the Oregon Criminal Justice Commission found:

Measure 110 will nearly eliminate racial disparities for drug arrests and convictions:

- **Racial disparities in drug arrests will drop by 95%**
- **Convictions of Black & Indigenous Oregonians, including Native American Oregonian, would drop by 94%**

Instead of criminalizing people struggling with addiction, Measure 110 will expand access to low-barrier, culturally-responsive treatment and recovery services that will better serve our communities.

It's time to stop the unfair criminalization of Black, Indigenous, and people of color communities and shift to a health care based approach.

Join us in voting YES on Measure 110!

Asian Pacific American Network Oregon
Black & Beyond the Binary
Brown Hope
CAUSA
Centro Latino Americano
Coalition of Communities of Color
Community Alliance of Lane County
Confederated Tribes of the Grand Ronde
Forward Together
Hacienda CDC
Latino Network
NAACP Portland and Springfield Eugene Branches
Native American Youth and Family Center
Oregon Latino Health Coalition
Unite Oregon

(This information furnished by Haven Wheelock, Chief Petitioner, Yes on Measure 110.)

Argument in Favor

**Addiction Harms Senior Citizens, Too
Oregon State Council for Retired Citizens and
United Seniors of Oregon:**

Please Vote YES on Measure 110

If you suspected your grandparents seemed too dependent on that little bottle of pills, what would you do? If you saw their behavior turn more and more inward, or change, would you suspect drug addiction?

Research tells us that nearly 20% of people over age 60 struggle with alcohol and drug dependency. In fact, the rate might be higher than statistics show.

There can be many reasons:

- Many older people are isolated and turn to substance use.
- Others feel intense loss after losing a spouse, from declining health, or from no longer working.
- Medical conditions can make long-term use of strong drugs necessary, and some older people don't recognize dependency.
- And, there is the shame and fear created by our current broken system of dealing with addiction as a crime, instead of a medical crisis.

This problem is especially serious in Oregon, which is 50th in the availability of drug treatment to those who want and need it. For seniors who are struggling alone, it's even worse.

As organizations representing the interests of retired Oregonians, we support Measure 110 because of the urgent need to greatly increase the availability of drug treatment, including specialized treatment for older citizens.

Also important is Measure 110's reduction in criminal penalties for small amounts of simple drug possession, which stops some senior citizens from seeking help for fear of being arrested. It does not legalize any drugs.

If you are an older Oregonian, or care about one, please consider our request to vote YES on Measure 110. **Oregon desperately needs improved access to drug treatment and to stop making criminals of people who seek help with addiction.** Even if you don't expect it, someday that person could be someone you love.

Vote Yes on Measure 110

United Seniors of Oregon
Oregon State Council for Retired Citizens

(This information furnished by Janie Gullickson, Yes on Measure 110, www.voteyeson110.org.)

Argument in Favor

Who Supports Measure 110?

**From Every Part of Oregon
From Every Walk of Life
People Are Coming Together to Say:
"Vote YES for a More Humane and Effective Approach to
Oregon's Addiction Crisis!"**

Measure 110 has been endorsed by
more than 100 organizations:

- Doctors Nurses, and other Medical Professionals
- Treatment and Recovery Experts and Service Providers
- Scientists Who Study Drug Addiction
- Law Enforcement
- Educators
- Social Workers
- Housing and Homeless Advocates
- Black, Indigenous, Latinx, Immigrants and People of Color
- LGBTQIA+
- Working Families
- Faith Leaders
- Senior Citizens
- Crime Victims
- Economic Justice Advocates

**...and more than 170,000 Oregon voters signed the petition
to place Measure 110 on the November ballot.**

See the list of organizational endorsers at:

www.VoteYesOn110.org/organizations

(This information furnished by Peter Zuckerman, Vote yes on Measure 110! More Treatment and a Better Oregon: The more humane, equitable, and effective approach.)

Argument in Favor

**K-12 Education Leaders Say:
Voting Yes on Measure 110 is a Vote for Our Kids**

As Oregon education leaders, we work hard to implement practices and procedures that foster a healthy school environment where students can learn and succeed.

But it's hard to succeed if your family is impacted by drug addiction.

When students enter the classroom, they bring with them every bit of weight that their families carry. They simply cannot learn effectively when their minds are consumed with worry over a family member's problematic drug use.

Statewide funds for addiction services in Oregon have been slashed in recent years, and we see that decision's devastating impact in our classrooms.

Measure 110 provides funding for services that will help our students and their families:

- Expanded access to treatment that is evidence-based, trauma-informed, culturally responsive and patient-centered;

- Peer support and recovery services so people are able to remain clean and sober;
- Housing (transitional and long-term) for persons with drug addiction who need it;
- Overdose prevention education.

Measure 110 funds services throughout the state, so that those working toward recovery can find support in their own communities. This measure will not legalize drugs and does not create any new taxes. It will help students and their families throughout Oregon.

**For our kids and their futures,
join us in voting YES on Measure 110.**

- Michael Ralls, Director, Social Services, North Clackamas
- Lorna Fast Buffalo Horse,
Multiple Pathways to Graduation Director, Portland
- Douglas Nelson, Retired Superintendent,
Bend-La Pine Schools
- Scott Perry, Retired Superintendent,
Southern Oregon Education Service District
- Dawn Joella-Jackson, High School Principal, Portland
- Carla Gay, Executive Director, Gresham-Barlow
- Korinna Wolfe, Senior Area Director, Portland
- James Hui, District Administrator, Gresham-Barlow
- John Wilhelmi, Retired High School Director, Portland
- Mike Verbout, Retired School Principal, Portland
- Marjorie Lininger, Retired School Principal, Medford
- David Nielslanik, High School Principal, Beaverton
- Kathy McCollum, Alternative Education, Redmond
- Katy Wagner, High School Principal, Columbia County

Read the full list of K-12 Leaders Who Support 110:
<https://voteyeson110.org/voices/>

(This information furnished by Devon Downeysmith.)

Argument in Favor

**Oregon Coastal Communities Agree:
Vote YES on Measure 110.**

We all know someone who struggles with addiction, often a family member or friend. You pray for the moment that they may be ready to find recovery. You know when that moment comes you must seize it, or it will be too late. Then comes the next, heartbreaking moment: you make calls to find treatment in your community only to find **there are no local options**. You call treatment centers across Oregon, willing to drive them anywhere there's room because you know treatment could be the difference between life or death.

No one has room. No one can help. This is what it's like across coastal communities in Oregon.

Measure 110 will increase access to low-cost, low-barrier treatment services in our communities and yours, making them more accessible- closer to home. Instead of long wait lists and full facilities far away, our communities can find support near their families and jobs. They will be able to build a local support network after treatment to help them maintain their recovery.

**Oregon ranks nearly last of all states
in access to basic drug treatment.**

YES on Measure 110.

- Debra Greenlee, Manzanita
- Joel Bernhard, Cannon Beach
- Pamela Wev, Astoria
- Debra Smith-Stephens, Nehalem

Lynda Chick, Nehalem
 Teresa Eastin, Nehalem
 Beverly Stein, Cape Mears
 Natasha Stevens, Manzanita
 Sarah Conyers, Seaside
 Terri Steenbergen, Astoria
 Rebecca Parker, Seaside
 Ann-Marie Radich, Cannon Beach
 Hannah Reynolds, Manzanita
 Clark Miller, Manzanita
 Olga Oleynikova, Manzanita
 Laura Walsh, Nehalem
 Rachel Ann Conyers, Cannon Beach
 Watt Childress, Cannon Beach
 Jan Boal, Newport
 Tiffany Mitchell, Astoria
 Ryan Dewey, Cannon Beach
 Dixie Lee Anderson, Manzanita
 Mia Burch, Nehalem
 Margaret Whiting, Wheeler
 Jennifer Visser-Harper, Seaside
 Emily Fanjoy, Nehalem
 Claire Hall, Newport
 Sarah Nebeker, Astoria
 David McCall, Bay City

This is one of seven regional statements representing areas across Oregon.

Look for your area in the mix of pages.

(This information furnished by Devon Downey-Smith, More Treatment for a Better Oregon, Vote Yes on 110.)

Argument in Favor

WHAT MEASURE 110 DOESN'T DO

And What It DOES

Measure 110 DOES NOT legalize any drug. All sales, of any amount, will remain a crime.

Measure 110 DOES remove criminal penalties for the possession of small amounts of drugs, when that is the most serious violation. Possession of large amounts, selling, manufacturing drugs will all continue to be criminal offenses.

Measure 110 DOES NOT increase taxes.

Measure 110 DOES significantly increase resources for treatment and recovery services throughout Oregon by using existing marijuana tax revenue.

Measure 110 DOES NOT increase bureaucracy.

Measure 110 DOES add and use resources efficiently. Addiction Recovery Centers can be operated by existing qualified service providers. It will not put current providers out of business; instead, it will provide substantial additional resources to existing providers to ensure that more people can be served.

NO change is made in the criminal code for delivery, manufacture, and other commercial drug offenses.

These offenses will remain a crime. All sales, of any amount, will remain a crime.

NO CHANGE is made to the criminal code for crimes that may be associated with drug use, such as driving under the influence and theft.

These offenses will also remain crimes. **Drug testing will remain in place.**

HERE ARE SOME THINGS THAT MEASURE 110 DOES:

It provides an Oregon solution. Measure 110 was carefully written with input from Oregon addiction, treatment and recovery, equity, medical and community leaders, and is supported by over 80 Oregon organizations.

It will help people in every corner of Oregon. Right now, many parts of Oregon have little or no access to treatment and recovery services. Measure 110 changes that.

It will make Oregon more just. Right now, people of color are 3 times more likely to be arrested for drugs, even though they use drugs at the same rate as white people. According to a report by Oregon's Criminal Justice Commission, Measure 110 will nearly eliminate that disparity.

(This information furnished by Peter Zuckerman, Let's save lives, not ruin them. Vote Yes on Measure 110. www.voteYESon110.org.)

Argument in Favor

My best friend was desperate to get help for her drug addiction, but she couldn't get into treatment.

If Measure 110 had been in effect then, I believe she would be alive today.

I lost my best friend last year. Meredith was that friend you always call first in rough times. No matter how busy she was, she always made time to be there for me. I laughed harder with Meredith than anyone else. We had a brother and sister type of friendship, and I miss her every day.

A drug overdose took Meredith away from me, and from all those who loved her.

Meredith struggled with drug addiction for years, and she wanted to get help. She was so ready for treatment that she moved back home where her family could get her help. They didn't realize how impossible that would be. They called treatment services daily for three weeks straight, but she couldn't get in. There was always a barrier -- no beds available, she didn't have the right kind of insurance, the funds, or something else.

In the end, she died alone from a drug overdose.

Too many of us know the heartbreak of losing someone we love to drug addiction. Oregon ranks nearly last of all states in access to basic drug treatment, and one to two Oregonians die of drug overdoses every day.

Measure 110 will change the current broken system that allows people like my best friend to fall through the cracks. Measure 110 will:

- Expand access to treatment throughout Oregon, so that no one else has to wait weeks for help.
- Fund treatment that is evidence-based, trauma-informed, culturally responsive and patient-centered.
- Fund peer support and recovery services so people are able to remain clean and sober;
- Fund housing (stabilizing and transitional) for persons with substance use disorder.

Join me in voting YES for Measure 110.

I'll be voting yes in memory of Meredith.

Derek Nelson, Grants Pass

(This information furnished by Haven Wheelock.)

Argument in Favor

Drug Counselors say vote YES on Measure 110 We see it everyday, and we know that access to treatment works best.

People used to think the best way to address addiction was to punish people for it. But if that approach worked, Oregon would not be facing such an addiction crisis.

We are licensed drug counselors. We keep up with the latest research on how to best help people end their drug addictions. We follow protocols that are informed by the most current scientific research and our experience. We help clients to deal with their problematic drug use, and support them in their journey to recovery.

We have tried different approaches and seen what works—and doesn't.

Oregon has arrested people for drug addiction for decades. This is out of line with best practices. **Punishing people for being addicted to drugs is not only ineffective, but usually counterproductive.** Punishments make people afraid to get help because they are worried they will get in trouble. Punishments impede recovery because they give people criminal records that can prevent them from getting housing, jobs and more.

There are better approaches. Research and experience shows that many people who are addicted to drugs want to quit one moment, and then go back to their addiction a moment later. The key to helping them is to make treatment easily available at that critical moment, in a non-judgmental, culturally-responsive way.

That is what Measure 110 requires. It would end harmful drug arrests, reduce long wait times to get treatment, and make treatment more available all over the state, to anyone who wants and needs it. It would put our current law and practices more in line with what research and experience shows works. And it doesn't legalize any drugs.

Join us in voting YES on Measure 110.

Matt McCullough, MA, CADC-I

Jacob Hunt, MSW, CADC-I

Sergio Gutierrez, CADC I, CGAC I, QMHA

Rita Sullivan, PSY, PhD

Heidi Hug, CADC II, CRM, QMHA

(This information furnished by Haven Wheelock, More Treatment for a Better Oregon.)

Argument in Favor

Oregon Nurses See the Devastation of Drug Addiction Firsthand

We are nurses and healthcare providers in hospitals, ER's, and clinics. One of the most urgent issues we see is people struggling with drug addiction.

Sometimes it's too late.

Nearly two Oregonians die of drug overdoses every day, and one in 11 Oregonians is addicted to drugs. Once they reach us, people with drug addiction are way down the road. We often lose them to overdose because they could not access treatment soon enough.

The problem: Oregon's lack of treatment and recovery services.

Oregon ranks nearly last in access to drug addiction treatment. Even if you seek help for drug use, it can take weeks or even months to find an open, affordable treatment program. People in crisis can't wait that long.

Addiction is treated as a crime.

Oregon police arrest nearly 9,000 annually for possession of small amounts of drugs. Many won't seek help for fear of being arrested. They remain addicted -- sometimes dying alone, never making it to an ER or clinic.

Measure 110 offers a better approach.

Measure 110 would greatly increase funding for treatment, recovery and stable housing so that people get the tools they need to maintain their recovery.

For those with addiction and their families, passing measure 110 is a matter of life or death.

Vote YES on Measure 110.

- Oregon Nurses Association
- Lynda Chick, RN, Nehalem
- Cami Bean, FNPC, MN, La Grande
- Claudia Little, Retired NP, Ashland
- Katie Baumont, RN, Portland
- Malori Butler, RN, Portland
- Lillian Nickerson, RN, Scappoose
- Janette Boal, Newport
- Bridget Bassett, RN, Gresham
- Rachel Seidelman, RN, Portland
- Jason Phillips, RN, Portland
- Virginia Connell, RN, Milwaukie
- Liz Banks, FNP-BC, Salem
- Rusty Bonham, RN, Portland
- Grace Lanaras, RN, Lake Oswego
- Bella Almario, RN, Portland
- Skye Frome, FNP, Portland

(This information furnished by Janie Gullickson, Chief Petitioner, Yes on Measure 110, www.VoteYESon110.org.)

Argument in Favor

Drug addiction treatment saves lives— but only if you can get it

I used to be addicted to drugs. I lived on the streets, unable to care for myself. I sought treatment multiple times but couldn't get it.

Instead, I got arrested, again and again. Sometimes my drug use landed me in the emergency room. But when I got out of jail or the ER, I didn't get much help, and I often didn't have anywhere to go.

So the cycle continued—for 22 years.

Eventually I got lucky because some people went out of their way to help me. I got the treatment and recovery support I needed. But it took far too long. I've been rebuilding my life ever since and now work as the executive director of the Mental Health and Addiction Association of Oregon.

Through this experience, I learned a lot about how Oregon currently addresses drugs and addiction. This is what I am sure of: **What we're doing right now doesn't work.**

Instead of saving lives by providing treatment and recovery services, our current approach to drug addiction relies on arresting people, and giving them criminal records that make it harder for them to recover and secure jobs, housing, professional licences, student loans and more.

We need a more humane, equitable and effective approach. People with addiction need treatment, not punishment.

Measure 110 doesn't legalize any drugs. It shifts us to a health-based approach to addiction. Using money from Oregon's existing marijuana tax, Measure 110 greatly expands access to drug treatment and recovery support services, so more people can get them—not just those who live in the right city, or have the money or right insurance plan. Measure 110 provides an opportunity to help those struggling with addiction find a new chance at life. It's an opportunity we must not miss.

Please join me in voting YES on Measure Measure 110.

Janie Gullickson
Executive Director
Mental Health and Addiction Association of Oregon

(This information furnished by Janie Gullickson.)

Argument in Opposition

PHYSICIANS TAKE AN OATH TO DO NO HARM... MEASURE 110 CREATES HARM.

I'm a physician with a hospital-based practice focused on treating patients with chronic pain and addiction.

During my 25-year career, I've observed firsthand the adverse health and societal effects of illicit drug use in our community including: overdoses, HIV and Hepatitis C infections, heart valve infections, epidural abscesses, skin-grafts due to injection drug use, homelessness, domestic violence, suicide, psychiatric holds, work-loss, divorce, loss of child custody, and social isolation.

An unfortunate fact of treating patients with addictions:

Despite clear harms of continued use, most addicted individuals will refuse treatment when it's offered. In fact, recent epidemiological data reveals treatment refusal rates for both opioid and methamphetamine addictions exceed 80%. Consequently, those experiencing addiction often require external incentives/disincentives such like threat of loss of family and friends; drug courts; and collaboration between law enforcement, courts, probation, DHS, and the treatment community to collaboratively nudge addicted individuals into long-term recovery.

Measure 110 framers portray individuals with active addictions as rational actors who will naturally seek out and accept treatment for their condition.

I can assure you as a front-line provider it's simply not true. Nor will levying a token \$100.00 fine be financial disincentive of sufficient magnitude to coax ambivalent or pre-contemplative people into a life of abstinence or long-term recovery.

Unfortunately, removing the threat of incarceration and abandoning collaboration between law enforcement, 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 overdoses, infections, and drug-induced psychosis.

We need look no further than recent problems surrounding the Portland sobering center or staggering financial losses at the Unity Center to appreciate the magnitude of the illicit drug crisis we face in Oregon.

As a healthcare provider **I urge you to join me and vote no on Ballot Measure 110.**

Oregon can do better.

Paul Coelho, MD

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

Portland-area Certified Intervention Specialist urges you to VOTE NO on Measure 110

Measure 110 DOES NOTHING to address Oregon's biggest treatment problem.

Oregon lacks residential treatment beds for people without private insurance. Medicaid doesn't cover residential treatment. **The young and the poor have to wait for weeks to get into residential treatment** where they can receive the appropriate level of care to treat heroin, cocaine, meth and oxycodone.

Measure 110 doesn't fund any more residential treatment beds for those without private insurance.

Instead it creates more assessment and referral centers.

Oregon has enough assessment and referral centers already. What we need is more funding for treatment beds!

Measure 110 actually takes money away from treatment services funded by Marijuana Tax money.

MEASURE 110:

- **Decreases existing treatment access.**
- **Creates unnecessary assessment and referral centers.**
- **Fails to fund more residential treatment beds.**

The out-of-state backers of Measure 110 have not studied Oregon's needs. They have presented evidence that shows Oregon is ready for a drastic change in the way addicts get into treatment.

Potential legal consequences accelerate motivation to enter treatment. Fear of jail often gets people to go to treatment before they lose everything.

The court system provides the two things addicts need to get into recovery: motivation and being held accountable for entering and completing treatment.

For the homeless, the judicial system is a path to treatment which they otherwise cannot afford. Most homeless people are addicted to the drugs Measure 110 wants to decriminalize.

Oregon needs more judicial intervention programs which show the stick of authority but do not use it when people get into recovery. **Remember:** people who are not in recovery risk death every day.

Oregon needs to develop a comprehensive substance abuse plan that involves the treatment community, courts, law enforcement, and patient stakeholders, not out-of-state interests.

In my opinion, Measure 110 will cause great harm and no good.

Please VOTE NO on Measure 110!

Sincerely,

Billy Anderson

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

Sheriffs of Oregon urge you to VOTE NO on Measure 110

Measure 110 decriminalizes drug possession for dangerous substances. Minors and adults could possess these amounts:

1 gram of **Heroin**, 2 grams of **Methamphetamine**, 12 grams of **Psilocybin (mushrooms)**, 5 user units of **MDMA (Ecstasy)**, and 40 user units **LSD (Acid)**, **Oxycodone**, and **Methadone**.

Individuals found with possession of these drugs would simply be issued a citation with a fine not to exceed \$100.00. The fine could be reduced to zero by taking a "health assessment."

Measure 110 reduces criminal penalties for possessing drugs in amounts greater than the above-specified quantities to a Misdemeanor with less than 1-year imprisonment, a \$6,250 fine or both. Larger quantities of drugs that would constitute a commercial drug offense would still be treated as a felony.

While we support alternatives for individuals who possess user-amounts of drugs, **Measure 110 goes too far.** It puts our community's **quality of life at risk** through **increased street-level drug dealing**, elevates property crime users often commit to support their habits, and the number of individuals using these substances will increase, especially amongst youth.

Measure 110 will reduce or eliminate access to evidence-based and emerging best-practice drug intervention programs including Drug Courts, drug diversion programs, Law Enforcement Assisted Diversion (LEAD) program for adults, and similar programs for minors.

Measure 110 doesn't increase capacity of drug treatment services within our communities. Access to treatment services in Oregon is currently at one of the lowest levels nationwide.

Measure 110 **will cause the need for additional drug treatment services**, while at the same time decreasing the available funding for that treatment.

Measure 110 **will divert millions of dollars** in marijuana tax revenue from schools, mental health and addiction services, state police, cities, counties, and drug prevention programs. Instead, these funds will be redirected into the Measure 110 fund.

For a safer, stronger, and healthier community

Sheriffs of Oregon urge you to VOTE NO on Measure 110.

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

RECOVERING ADDICT SAYS MEASURE 110 DOESN'T FIX THE DECRIMINALIZATION PROBLEMS...

...AND WILL MAKE ADDICTION AND CRIME WORSE.

Dear Oregon Neighbors,

If you've never suffered from or been touched by drug addiction, **PLEASE PLEASE PLEASE** listen to the voices of those of us who have. Hear us: **Measure 110 is the wrong track for Oregon.**

For many who've suffered addiction, the legal system is the one avenue that can break the addiction cycle; because it's the only place we can truly be held accountable for our actions.

Addiction took me to a dark place that not once, not twice, but three times, I was placed under arrest.

Court ordered treatment was a God-send. Had I not intersected with the justice system, I'm not sure where I would be. Certainly, I wouldn't be where I am today.

Since the court ordered me into treatment:

- I've been free from crime for 15 years.
- I successfully completed treatment and paid off court fines.
- I enrolled at Portland Community College and became a Certified Alcohol and Drug Counselor.
- I achieved a bachelor's degree in Social and Behavioral Studies from George Fox.
- I'm successfully employed in the drug treatment community.
- I sponsor other recovering addicts.

Most importantly, I got the life I knew I wouldn't have if I was still chasing my addiction.

Measure 110 removes the path for other addicts to have court-mandated supervision. For many of us, it's the only way we get off the rollercoaster.

Measure 110 doesn't fund new treatment beds we desperately need.

Measure 110 doesn't create new treatment beds for addicted youth.

Measure 110 doesn't restore DMV privileges or expunge old crimes.

Measure 110 is fool's gold for addicts, and it will increase societal costs associated with addiction.

Please listen to someone who has "been there and done that"...addiction isn't the life any of us want for our family, friends, and children.

Sincerely,

Lisa Bingham

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

DEMOCRATIC STATE REPRESENTATIVE SAYS:

"MEASURE 110 IS THE WRONG PATH FOR OREGON"

Dear Oregon Voters,

Please **VOTE NO** and let the Legislature keep working towards decriminalization and treatment funding for those suffering from addiction.

For 18 years in the Oregon Legislature, and nearly a decade as Chair of the House Judiciary Committee, I've used my 31-year law enforcement experience to balance Oregon's criminal justice laws in a way that keeps communities safe, but also works towards rehabilitating people who commit crime.

In no area of criminal law have we been more productive than Oregon's efforts to stop treating drug addicts like criminals, instead, recognizing addiction for what it is: a disease which needs intervention.

If you had cancer, you'd make an appointment to see a doctor.

But addiction traps people's cognitive ability to make rational, informed decisions about their health. Addiction also leads to secondary crimes like identity theft, property crimes, and sometimes, violent crimes, if left unchecked.

In 2017, with collaboration and bi-partisanship, lawmakers removed personal drug possession from felony sentencing guidelines, but kept a door open for addicts to get court-sponsored treatment. We've made great progress.

Measure 110 backers would have you believe Oregon is locking people up for drug possession (we aren't) and simply giving a referral to treatment means addicts go by themselves (they don't).

In my police career, it was heartbreaking to see the same faces (and new ones) over and over who couldn't get themselves into treatment alone. **You never get over to responding to a call where someone, particularly a young person, has tragically died due to an overdose.**

My work in the Legislature was informed by those experiences, and by local experts in law enforcement, judges, and medical professionals, **not political consultants and special interest groups with radical ideas for Oregon's justice system.**

There's still work to do; let the Legislature determine how to fund needed rehabilitation.

Measure 110 isn't the solution!

Representative Jeff Barker
Washington County

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

**AS A RECOVERED TREATMENT PROVIDER
FOR ALMOST 40 YEARS,**

I URGE YOU TO VOTE NO ON MEASURE 110.

For 18 years, I've worked in Oregon helping alcoholics and drug addicts find hope and recovery.

I've helped hundreds of people find hope and recover from heroin, methamphetamine, oxycodone and cocaine addiction.

The reality of heroin, meth and cocaine addiction is:

Seeking and using drugs becomes the highest priority for people with active substance abuse disorder.

Drugs cost \$50 to \$100 PER DAY cash for many addicts.

Most addicts lose employment due to health issues and functional impairment.

Active addicts without means must commit crime to support their habit. Therefore it's not truly a victimless crime, it affects others.

Most addicts won't stop abusing drugs until they have an event or crisis preventing them from using, such as an arrest or an overdose. **Most addicts don't voluntarily stop their habit.**

Oregon has already reduced normal daily possession of these substances from a felony to a misdemeanor. The volume of criminal cases has dropped drastically.

Measure 110 will NOT remove drugs from the Federal Schedule II list of illegal drugs, creating complicated, inconsistent practices for agencies receiving federal funding and subjecting Oregonians to federal criminal arrest for possession of these substances.

I oppose Measure 110 because the effective legalization of heroin, meth, oxycodone and cocaine removes a necessary crisis event that helps numerous addicts break their ongoing addiction.

While federal criminal law for cannabis possession isn't being enforced, the same cannot be expected for these deadly and crime-generating drugs. Those drugs are going to come mainly from cartels.

I believe fully decriminalizing these drugs will lead to an increase in crime, increased chronic medical problems for those with substance abuse disorder, and increased overdose deaths. Better options for reform include increasing funding for court-mandated or correction drug treatment programs and expanded alternative sentencing options.

Please Join Me in Voting NO on Measure 110.

Milt Parham
Recovered treatment provider.

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

As a candidate for the Oregon legislature, **homelessness** is one of the major concerns that voters in my House District have expressed to me. On their behalf—and on behalf of the homeless themselves—I submit this statement in opposition to Measure 110.

Many people are homeless because of their drug addictions. I believe Measure 110 will likely increase hard drug use and, therefore, addictions.

"If it's legal, it must be OK!"

When an illegal activity (such as the possession and use of hard drugs) is decriminalized, many people think that means it's OK now to engage in that once-illegal activity. And they do so in greater numbers. Eventually, this will likely increase the homeless numbers.

"If I don't have to worry about going to prison (or juvie), I'm free to use drugs!"

Today most persons charged with misdemeanor possession are given the choice of getting treatment or a conviction. But with Measure 110, the choice for both juveniles and adults is gone because there would no longer be any conviction. Eventually, this will likely increase the homeless numbers, as Measure 110 removes a helpful, extrinsic motivation to avoid drug use and experimentation.

"Hey, Mom and Dad. I don't have to listen to you. It's legal."

Measure 110 will allow both juveniles and adults to possess up to 1 gram of heroin and MDMA, 2 grams of cocaine, 12 grams of psilocybin, and 40 user units of LSD, methadone, and oxycodone. Parents lose legal leverage in their ability to control their children's use. Eventually, this will likely increase the homeless numbers.

Homelessness and addiction can be successfully addressed through a combination of evidence-based, tough love and rewards programs. But making it easier for children and adults to use highly dangerous hard drugs and become addicted is not part of a reasonable solution.

For the sake of the homeless, the addicted, children and their parents, neighborhoods, businesses, and schools, **please vote NO on Measure 110.**

Sandra Nelson

(This information furnished by Sandra K Nelson, Candidate for State Representative, House District 27.)

Argument in Opposition

PARENTS BEWARE

MEASURE 110 SENDS A TERRIBLE MESSAGE TO KIDS AND REMOVES THE ONE TOOL PARENTS CAN COUNT ON IN THE FIGHT AGAINST JUVENILE DRUG ADDICTION

Vote NO on Measure 110

My child was like many kids, growing up in a drug-free, loving home.

After marijuana legalization, some in my child's friends started experimenting with pot. At age 14, my child's response was, "It's legal." It wasn't, but legalizing pot suddenly normalized using for kids. Social media apps made it worse.

My child began sneaking out at night, driving with no license in search of drugs.

Like many kids who use, experimentation quickly turned into dependency: pills, acid, and more. Drugs trip-wired an addictive personality.

We tried rehab. We paid over \$50,000 for various treatments. We love our child, who was 100% supported through recovery. It failed because, as parents, our consequences couldn't get past the addiction.

I finally called the police and begged them to arrest my child. In Oregon, parents can't make teenagers go to treatment without a court-order. You can't get a court-order without the justice system. If Measure 110 passes, that option is gone.

Parents shouldn't have to beg law enforcement and courts for help. Our justice system needs to be reformed. We need more treatment beds for kids and help for families to afford treatment. Measure 110 removes access families currently have to court-mandated juvenile treatment. It's shortsighted.

Measure 110 removes any semblance of deterrence from a child's mind if the only consequence for using dangerous drugs is a fine less than a speeding ticket.

We cannot allow our kids to grow up believing that using drugs is somehow normal, and we cannot live in a society that takes away a parent's options to help their child get drug treatment.

If you're a parent, I hope you'll listen to those of us whose children have suffered and join us in saying **NO to Measure 110**.

Marnae Powell
Mom
Bend, Oregon

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

As a family who lost our son/brother/grandson to addiction, we passionately oppose this measure. This measure will likely lead to more death and addiction.

Don't let it be your loved one.

Measure 110 is a drug legalization measure designed to mislead Oregon citizens into supporting the **legalization** of large "user amounts" of deadly, illegal drugs including: heroin, methamphetamine, cocaine, oxycodone, and LSD.

Decriminalization is legalization. The "gas lighting" strategy used to sell this measure will lead to increased risk in our vulnerable citizens, including both adults and children, from drug dealers who will profit off of their addiction, leading to potential death.

Measure 110 implies, "court ordered sanctions are not a deterrent or motivator to people with addiction disorders." **This simply is not true, and seems to ignore the obvious.** The majority of society does not commit crimes, because of the consequences.

Recovery communities acknowledge that people with addictions often need to "hit bottom" before choosing recovery. For many, "hitting bottom" comes with being arrested and the associated consequences of justice system interventions.

In my 35 years of working directly with people with addictions I have heard many times the sobering reality "if I hadn't been arrested I would be dead".

The addicted mind, left with a choice, will continue to abuse drugs. Measure 110 assumes that people with addiction, given a ticket, will pay or voluntarily participate in addiction assessment. This is not based on facts. Violators in other states with similar laws, do not pay fines or seek treatment.

Measure 110 provides no structure or incentive for participation in treatment as court ordered treatment programs do. Measure 110 siphons money derived from marijuana tax away from worthwhile programs and only provides voluntary assessments, which is not the same as treatment.

Measure 110 legalizes heroin, methamphetamine, cocaine, oxycodone, and LSD for children as well as adults. Children will get the message that "drugs are really not that bad."

Brian, Brenda Martinek and family

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

**DON'T LET OUT-OF-STATE SPECIAL INTERESTS
WRITE LAWS FOR OREGON**

Measure 110 halts Justice Reinvestment efforts being worked on by the Oregon Legislature.

Dear Oregon Voters,

You might be surprised to learn in 2017, a bipartisan effort in Oregon's Legislature reduced drug sentencing from FELONY to MISDEMEANOR status in criminal sentencing guidelines.

As a Republican Senator representing Rural Oregon, I joined with liberal Democratic senators in supporting this effort. I believed, and still do, that Oregonians suffering from addiction need treatment, not incarceration. Everybody deserves a second chance at sobriety and the life that comes when you are free from addiction.

In just a few years since passing that law, District Attorneys across Oregon were freed to work with people arrested for drug possession like Heroin, Methamphetamines, and Cocaine, and can court-order addicts into state-sponsored or county-sponsored treatment.

THE LEGISLATURE'S EFFORTS ARE WORKING!

As a lawmaker, I appreciate Oregonians' right to use the initiative process to make laws when they see the Legislature failing to act on important issues. That's not the case with Measure 110.

Measure 110 was drafted by and funded with millions of special-interest dollars by an out-of-state group who clearly wants full-on decriminalization of drugs.

Oregon isn't a petri-dish for an extreme policy agendas.

Measure 110:

- Determines JUVENILES will only be cited for hard-drug possession while being cut off them off from juvenile court treatment programs.
- Takes MILLIONS OF DOLLARS from Marijuana taxes that would have gone to public schools.
- Disconnects drug treatment from Courts.
- Identifies no new funding source to pay for treatment.

I support evaluating proposals to help people get their addictions in check and lives back on track. But Measure 110 is no solution, and it's not the Oregon Way that we've relied on for robust policy-making processes.

Please say NO to out-of-state agendas for Oregon. Please let Oregon's Legislature keep doing its job.

Join me in **Voting NO** on Measure 110.

Senator Bill Hansell

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

MEASURE 110 Takes Money from Our Classrooms and Opens the Door to Drug Use in Schools

As a school superintendent, I'm urging you to **VOTE NO on Measure 110**. Please take the time to really read up on this measure before you vote.

You'll see that Measure 110 is bad for our schools, and bad for students.

First, the official financial impact statement for Measure 110 makes it clear that if passed, **Measure 110 would sweep upwards of \$73 MILLION DOLLARS away from money already earmarked for the K-12 education budget.**

At a time when schools are already facing serious budget cuts due to the Covid-19 pandemic, **taking \$73 MILLION from our classrooms is the same as cutting 760 teachers** across Oregon. Our public schools can't afford to lose funds, especially during the worst education crisis in our lifetimes with schools shut down due to Covid-19. Every dollar is needed to make sure students don't lose ground.

Second, **Measure 110 sends the wrong message to our students** that drugs like methamphetamines, cocaine, heroin, and other illicit substances, are ok to use. As written, it **allows juvenile users to possess the same amount of hard drugs as adults would be allowed.** That's totally unacceptable!

As educators, we're constantly working to teach students about the dangers of drug use. Measure 110 provides conflicting messages and sets us back in our work. It will make it almost impossible to prevent student drug use. **If Measure 110 passes, it could tie a school district's hands with regard to campus drug enforcement and open school districts up to costly litigation.**

Lastly, as a parent, I've seen the heartbreak of families who've had to say goodbye to a child due to drug overdose. **Measure 110 works against families** trying to protect their kids from substance abuse.

Please join me in voting NO to protect our kids and our schools from the dangers of drug abuse!

Superintendent Mark Thielman
Alsea School District

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

DECRIMINALIZATION HAS FAILED PEOPLE OF COLOR IN SAN FRANCISCO...

SO WHY BRING IT TO OREGON?

People of color need systemic changes to the justice system...

...not more drugs flooded in our communities for our kids.

In an attempt to right some disparities in our judicial system, an out-of-state organization has put an out-of-state "solution" on our Oregon ballots. **As an African-American Oregonian** and someone who spent 45 years working to better the lives of families in Portland, **I applaud efforts to fix the problem of unequal justice** for people of color, **but Measure 110 has serious flaws.**

Decriminalizing the drugs on listed in Measure 110 – **heroin, cocaine, methamphetamines, oxycodone** - will open Pandora's Box in a way that we do not want to see happen.

Our current system of drug treatment and recovery is lacking. We need more treatment beds to meet the needs we have today. Measure 110 doesn't create new funding for treatment. It doesn't help poor people pay for treatment. Decriminalizing drugs in this measure will not only overwhelm our current system it would severely set us back attempts to help those who need help.

Measure 110 will affect children and **will substantially increase - not reduce-our drug crisis.**

This approach has been tried in San Francisco and failed miserably. Since its inception, San Francisco has seen a **rise in drug usage, homelessness, crime and mental illness.** There are **street gangs openly selling heroine, fentanyl, and meth** in an area covering 50 city blocks. This situation began as an honest attempt to fix a problem by decriminalizing these drugs; it backfired, thus leaving San Francisco with a huge problem, **one that disproportionately impacted people of color.**

I believe we can fix our current inequities in justice and service our homeless, mentally ill and addicted citizens in a much more effective way. Not by opening the drug floodgate and creating more problems.

Fred W. Douglas Jr.
Retired Youth Minister

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

There is No Justice or Peace for Black Lives if voters support a Measure 110 that will flood our communities with Drugs.

Measure 110 supporters say this measure reduces instances of Black people intersecting with police because drug penalties will be dropped to a violation.

They're wrong...Dead wrong!

Flooding drugs into communities creates more opportunities for young people (often people of color) to be arrested because the secondary crimes committed while on drugs are typically the cause of the altercation with police.

And that's when tragedies occur.

How many times will we watch these tragedies play out in Oregon's communities? If more of our kids get hooked on drugs because there are no consequences, no programs, no treatment, and they end up committing crimes to score drugs – children lose.

As a retired Black sheriff's deputy working 25 years at Multnomah County Sheriff's Office and two years in Oregon's Juvenile Justice Department, I believe our children's futures are at stake. I've always focused on supporting, in particular, youth and families. I sit on a community board helping youth in recovery and let me tell you by giving young people this kind of access to drugs and lowering the perception of harm, we're setting them up to fail.

Measure 110 will affect our youth by:

- INCREASING drug ADDICTION by lowering the perception of harm.
- INCREASING the homeless population.
- Negatively affect young people's mental and physical health as the brain is in its development stage.
- Allowing youth to possess nearly 2 grams of meth and cocaine; 1 gram of heroin; and 40 user units of LSD, to name a few.
- Increasing the chance of drug-related crimes to support an addiction habit perhaps.
- Increasing medical problems and increased risk of death.
- Increasing the chances of health issues and impairments that affect school, family, and overall quality of life.

If you believe ALL YOUTH LIVES MATTER, Vote NO on Measure 110.

Rob Ward,
West Linn

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

Oregon's District Attorneys Urge Your NO Vote on Measure 110

District Attorneys across Oregon urge your NO vote on Measure 110, a dangerous approach to our drug addiction crisis. This measure recklessly **decriminalizes** possession of the most **dangerous** types of drugs, including methamphetamine, cocaine, heroin and ecstasy.

This measure is the wrong answer to our drug addiction crisis.

Oregon leads the country in pain reliever misuse (1st), methamphetamine use (2nd), prevalence of mental illness (3rd) and cocaine use (4th) and yet we are nearly last (48th) in access to treatment.

Decriminalization will lead to an **increase** in **acceptability** of dangerous drugs, normalizing hazardous experimentation for our youth and **increasing accessibility**, surging supply and lowering costs of dangerous street drugs.

Law Enforcement is an important partner in this public health crisis but Measure 110 will all but remove them from this conversation.

Today, possession of most drugs are only misdemeanor offenses – which means people do not go to prison for simple possession, rather, they are connected with treatment options including Drug Courts and innovative diversion programs that are life-saving bridges to resources, lending support and *motivation* for success and early intervention, making all our communities safer.

District Attorneys Across Oregon Urge Your NO Vote on Measure 110:

John Haroldson	Benton County
John Foote	Clackamas County
Ron Brown	Clatsop County
Jeff Auxier	Columbia County
Wade Whiting	Crook County
Josh Spansail	Curry County
Rick Wesenberg	Douglas County
Marion Weatherford	Gilliam County
Joseph Lucas	Harney County
John Sewell	Hood River County
Beth Heckert	Jackson County
Josh Eastman	Josephine County
Patty Perlow	Lane County
Doug Marteeny	Linn County
Dave Goldthorpe	Malheur County
Paige Clarkson	Marion County
Justin Nelson	Morrow County
Aaron Felton	Polk County
William Porter	Tillamook County
Dan Primus	Umatilla County
Kelsie McDaniel	Union County
Rebecca Frolander	Wallowa County
Kevin Barton	Washington County
Gretchen Ladd	Wheeler County
Brad Berry	Yamhill County

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

**MEASURE 110 PUTS PUBLIC HEALTH AND SAFETY PRESSURE ON CASH-STRAPPED COMMUNITIES
VOTE NO ON MEASURE 110**

As a Wilsonville City Councilor, and former Oregon Corrections Department nurse, I have significant concerns about Measure 110 and its impacts on our local resources at a time when cities are already faced with rising homelessness and lack of public health funding.

When I provided healthcare in Oregon's prison system, for many inmates, the first time they ever had the opportunity to get drug treatment was when they intersected with the justice system. They recognized their addiction led them to commit crimes. It was keeping them away from their families and their shot at a better life.

Measure 110 disconnects drug violations from the court system in a way where offenders won't be compelled into drug treatment. That's taking us in the wrong direction! As written, Measure 110 doesn't make it clear that people cited for drug violations will be required to get treatment at all, only a referral.

As a City Councilor, I look at the community challenges we face through the lens of my nursing experience. **The recent uptick in homelessness across the METRO area is in large part due to rising, unchecked drug addiction.** I see this firsthand when people who are devastated by addiction show up in our emergency rooms during an overdose. And if they survive, they have no home to recover in – they go back out into the streets.

Measure 110 won't provide cities and counties any new resources to combat the increase in addiction that is sure to follow if we disconnect treatment from our justice system. To implement a significant change in fully decriminalizing drugs like methamphetamines, cocaine, and opioids, cities and counties need time and funds to support the social service crisis this change will create in our local communities.

Measure 110 will negatively impact public health and safety.

PLEASE VOTE NO!

Ben West,
Registered Nurse
Wilsonville City Councilor

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

GET THE FACTS – THEN VOTE NO ON MEASURE 110!

Measure 110 does not help people with addictions.

It does not create new funding for treatment.

FACT: Measure 110 decriminalizes drug possession of less than 1g of heroin; 2g of cocaine; 2g of methamphetamine; 12g of psilocybin; 5 user-units MDMA (ecstasy); 40 user-units LSD, Oxycodone and/or Methadone.

FACT: It decriminalizes those drugs for children and teenagers.

FACT: The penalty for possessing these drugs will be less than the average speeding ticket.

FACT: Measure 110 removes the court's authority to order youth, teens, and adults into drug treatment.

FACT: Measure 110 will reduce and/or eliminate funding otherwise being spent on PROVEN drug treatment programs utilized by Oregon drug courts and district attorneys in all 36 counties.

FACT: Measure 110 fails to contemplate that no new tax revenues are being collected for treatment, and that the Legislature isn't constitutionally bound to redirect any purported "savings" from reduced incarcerations to drug treatment programs.

FACT: For the biennial 2021-2023 state budget, **Measure 110 reduces funding** to addiction treatment, mental health, Oregon State Police, prevention, city and county budgets and school districts, by an estimated \$182.4 MILLION **including an estimated \$73 MILLION in K-12 funding** voters approved for schools when they legalized Marijuana. **That's like cutting 730 teachers out of classrooms.**

FACT: Health care professionals, including surgeons, would be presumed fit to practice regardless of multiple violations for possessing two grams of heroin, cocaine, methamphetamine, and oxycodone.

FACT: Without court-sponsored treatment, more people suffering addiction will lose jobs, experience homelessness, and fuel their addiction by committing crime. **Many will die.**

FACT: **Measure 110 isn't a local grassroots effort.** This is a radical agenda funded by an out-of-state special interest group which has poured millions into a campaign to change Oregon law.

READ the FACTS.

REJECT out-of-state special interests.

REMEMBER to **VOTE NO** on Measure 110.

Learn More: www.VoteNoOn110.com

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

Join a School Nurse in saying NO to Measure 110

On the surface, Measure 110 looks absolutely brilliant: creating recovery programs, funding treatment services using evidence-based, trauma-informed, culturally-responsive, patient-centered, non-judgmental care with oversight and accountability.

Addiction is both a personal and societal issue. **Incarceration is not the answer - effective treatment is.** We must have parity in addiction/mental health and physical health services. People with addiction must be able to receive timely, and when needed, state-funded services.

What would be even more effective is to provide mental health and wellness services so people do not resort to substance abuse to try to cope with issues.

The problem with Measure 110???????

When you take time to read the extensive ballot measure, there is a huge fatal flaw.

[This measure decriminalizes drugs- LSD, heroin, methamphetamine, cocaine, heroin and more for ALL PEOPLE.](#)

The problem? CHILDREN ARE PEOPLE!!!!!!!

[This means that your adolescent could use heroin with no mandatory treatment required.](#)

Nothing.

As a school nurse, I advocate for children and this measure runs counter to what I do to keep students healthy, safe and ready to learn.

We KNOW that adolescent brains are not fully developed, causing some children to make risky decisions and that drugs negatively affect the adolescent brain. Now, more than ever, our kids are dealing with significant increases in mental health issues. We want them to deal with these issues head on and not choosing to use addictive substances.

Measure 110 doesn't identify any kind of new funding source for treatment.

[Measure 110 will take money](#) from other sources including about **\$73 million a biennium out of our schools** (marijuana tax money) which will impact valuable student services, perhaps our counselors, social workers, psychologists, nurses, other mental health interventionists, and school-based health access.

Many people, including myself, voted to legalize recreational cannabis for adults in Oregon. This law is nothing like recreational cannabis and is DANGEROUS for our kids.

Kim Bartholomew
School Nurse

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

RECOVERING YOUTH ADDICTS HOPE YOU'LL HELP SAVE LIVES BY VOTING "NO" ON MEASURE 110

We are young people between the ages of 19 and 36. We reflect the diversity of sex, gender, races, color, religious and political beliefs. We were young people trapped in active addiction. With the help of the justice system, we've found recovery. **PLEASE DON'T VOTE TO TAKE THAT PATH AWAY.**

During our active addiction many of us overdosed, almost died, were sick, abused, homeless, hospitalized, and jailed before we got into recovery.

Our parents and friends didn't have the tools to help us, and addiction was so debilitating, we couldn't help ourselves stop using drugs.

We're all now in recovery thanks to interventions from courts. Many of us did not have insurance and couldn't afford treatment except through court programs. It was life-changing!

Without those programs most of us would still be using, in jail or prison for serious crimes, or dead. Many of us know others who've experienced those dire consequences.

We have jobs and many of us work in the alcohol and drug treatment field. We help those who still suffer in active addiction. And the justice system is a good partner, not a hindrance, to helping those we support.

Measure 110 will not help those who still suffer in active addiction.

Please do not cut off children and young people like us from judicial interventions and treatment by voting for Measure 110.

It's better to get a *"nudge from the judge"* than to go through all the horrible things that happen to young addicts.

Please Vote No on Measure 110.

Thomas Hooks	Ryan Opsahl
Madisen Taylor	Taralynn Rayburn
Ivana Jungic	Tanis Hayden
Nathanial Wade Thomas	Chelsea Hawes
Cody Lane	Daniel Mata
Austin Phillips	Robert Sanders
Chelsea Champaigne	William Fletcher
Lane Kerans	Amber Hatkoff
Melanie Labrie	Garth Swanson
Glenn Brinson	Kyle Rochez
Tyler Kern	Hugh Patrick Porter Leonard

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

Measure 110 will cost lives...PERIOD.

As a lawyer with 42 years-experience defending people charged with drug crimes, who has spent 35 years in recovery, and is the parent of children with addictions, I was asked to look at Measure 110.

Like many voters, I was busy with work and distracted by Covid-19. When I finally read it, **I WAS HORRIFIED.** I realized voters were being misled about Measure 110. Voters deserve to know the truth. Here it is.

My life's work is helping people, particularly young people, get into recovery.

I know what kids go through when active in addiction.

I know what their parents go through.

No one should suffer what we went through.

Measure 110 will hurt far more people than it will ever help.

Most addicts resist treatment. They cannot help themselves; they resist others' efforts to help.

I know outside pressure creates motivation which helps addicts choose treatment and recovery. It worked for me.

Measure 110 breaks down the systems that allow the Juvenile Courts to help children get treatment services many families can't afford.

I know that when you decriminalize **DEADLY** drugs for adults, you decriminalize **DEADLY** drugs for children under 18.

I know that working people, the poor and people of color...and their children...will be disproportionately affected by Measure 110. They need access to state-funded treatment programs.

Measure 110 assessments are not drug treatment.

Measure 110 does absolutely nothing to help people of color or anyone else overcome barriers they face because of their present drug convictions.

The Legislature can remove those barriers by passing laws which let people get early expungement of their criminal records and early reinstatement of driving privileges when they've finished treatment and/or have remained drug-free for a certain period of time. We must encourage the Legislature to remove these barriers and to provide real treatment for all Oregonians.

**Please join this grassroots effort –
START BY VOTING NO on Measure 110.**

James O'Rourke

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

ADDICTION TREATMENT PROFESSIONAL SAYS "NO" ON MEASURE 110

Measure 110 proposes decriminalizing possession of dangerous drugs, including heroin and methamphetamine, making drug possession essentially legal for children as well as adults. Measure 110 would also divert marijuana taxes to fund unproven "Addiction Recovery Centers".

As the director of a substance abuse treatment program, I believe the unintended consequences of decriminalizing drugs outweigh any benefits of extra funding—especially for the most vulnerable Oregonians suffering addiction.

People suffering addiction cannot stop using drugs on their own. Being charged with possession of drugs has motivated thousands of people to make life changes and quit drugs. Courts leverage existing laws to get people into treatment. There's a saying in the recovery community: **"You have to feel the heat before you can see the light."**

Across Oregon, drug courts and other diversion programs help people quit drugs. Drug court provides structure and support for people suffering from addiction. They receive evidence-based treatment in group and individual counseling. They're supported with GED classes and employment services. They remain sober-monitored by random urine drug tests. These things are necessary for them to abstain from drugs and change their lives.

In contrast, Measure 110 wants "Addiction Recovery Centers" to provide assessment and treatment referrals. **These centers don't provide treatment, especially much-needed residential treatment beds.** Oregon has a similar setup for DUIs called Alcohol and Other Drug Screening Specialists (ADSS). ADSS are expensive to patients, and their assessments cannot be used by treatment providers. Addiction Recovery Centers don't provide evidence-based treatment. They are a risky gamble!

Passing Measure 110 will cause vulnerable people to lose access to drug treatment and needed accountability through our courts. Because they cannot quit using drugs on their own, the result will be more drug use, ruined lives, and damaged families. We should reevaluate spending marijuana tax money to fund needed treatment, but Measure 110 isn't the way.

Please vote NO on Measure 110.

Chris Wig
Springfield, Oregon

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)

Argument in Opposition

We are Oregon Association Chiefs of Police, sworn to protect and serve all Oregonians, and we urge you to vote "No" on Measure 110.

We know that decriminalizing drug possession will significantly increase the number of child neglect and abuse cases in Oregon. It will also dramatically increase the number of drug-addicted young people and lead to more overdose deaths. By definition, addicts will not seek help unless they have no other choice. Oregon's drug laws are rehabilitative, not punitive in nature, and we must not take away our courts' ability to order drug treatment.

HERE'S WHAT MEASURE 110 DOES:

DECRIMINALIZES user amounts of:

Heroin

Methamphetamine

Ecstasy

LSD

Psilocybin

REMOVES the judicial system's legal authority to Court order children, teens and adults into addiction treatment & recovery support services.

REDUCES OR ELIMINATES access to drug intervention programs in Oregon, including the successful "Drug Courts, Diversion programs, LEAD program for adults, STAR program for juveniles and other treatment services directed by the Court for both juveniles and adults.

WILL NOT help break the cycle of drug addiction nor reduce associated crime rates.

INCREASES street level drug dealing.

INCREASES drug related crime resulting in more crime victims.

WILL NOT hold people accountable to enter & complete in-patient or out-patient addiction treatment.

DOES NOT require more in-patient treatment beds or higher quality treatment than is already available.

ALLOWS violators choose between a \$100 violation ticket and completing a "health assessment".

ALLOWS professionals like doctors, lawyers, teachers and other professionally or occupationally licensed workers to keep practicing regardless of the number of "Class E Violation" convictions for drug possession.

ROBS tens of millions of dollars in marijuana tax revenue from schools, mental health and addiction services, state police, cities, counties, and drug prevention programs and redirecting funds into the Measure 110 fund.

The Oregon Association Chiefs of Police urge you to VOTE "NO" ON MEASURE 110

(This information furnished by James O'Rourke, No On Measure 110 - Volunteer Coordinator.)