Every year, Massachusetts courts mandate thousands of people suffering from addiction to submit to invasive drug-testing as a condition of pretrial release or probation. If relapse occurs, many are incarcerated – even when they are actively working to achieve long-term recovery. It is both unsafe and unjust to require defendants suffering from addiction to remain relapse-free or else face jail.

Incarceration disrupts treatment and endangers recovery. This bill will allow judges to order a defendant to participate in treatment, but prohibit courts from imposing incarceration if relapse is the only infraction and the defendant is otherwise engaged in treatment.

Criminal activity while on probation, including drug possession charges, will still be a violation. This bill simply stops the court from interfering with treatment for people who are committed to and consistently attending treatment, but nonetheless relapse.

**THIS BILL WILL:**

- Enhance public safety by enabling defendants to authentically engage in treatment – and communicate honestly with their providers about relapse – without fear that they will be locked up as result.
- Prevent courts from disrupting the treatment process.
- Decrease incarceration rates, saving MA taxpayer dollars.
- Save lives by helping people exit the dangerous cycle of relapse and incarceration and instead find sustained recovery.
BECAUSE ADDICTION REQUIRES TREATMENT, NOT IMPRISONMENT.

Addiction is a disorder, not a moral failing.

• Severe substance use disorder – addiction – is a brain disorder; its hallmark feature is compulsive use of a substance despite significant negative consequences.
• Neuroscience research shows that the structure and function of the brain is altered, even after drug use stops.

Addiction requires treatment, not imprisonment.

• For a century, we have predominantly responded to drug addiction with punishment.
• Scientific breakthroughs have revolutionized our understanding of drug addiction as a brain disorder that responds favorably to treatment, not imprisonment.
• If our Commonwealth is serious about ending the opioid crisis, we need to reframe our approach to addiction – to one that is rooted in public health, not punishment.

Relapse is a common symptom of substance use disorder.

• Because addiction is an all-consuming, developmental, and chronic brain disease, most people with addictions experience several relapses before achieving sustained recovery.
• Therapeutic intervention after relapse works to help strengthen the recovery process.

Punishing people for relapse disrupts treatment.

• A punitive response to relapse decreases the likelihood that people with addictions will seek care and remain in treatment.
• Fear of punishment interferes with authentic treatment because patients are afraid to speak honestly about their struggles with their healthcare professionals.

Incarcerating people suffering from addiction endangers lives.

• While incarcerated, few inmates receive treatment – and most “treatment” in jails and prisons is not evidence-based.
• The opioid overdose death rate is 120 times higher for those recently released from incarceration compared to the rest of the adult population.