

A Comprehensive Plan to Significantly Reduce Homelessness in the Portland Metro Area

By Doug Marshall, President, Hope for the Homeless Foundation

Part I – THE PROBLEM: Why Portland has a Homeless Crisis

Have you ever asked yourself, “Why is Portland’s homeless crisis far more significant than most cities throughout the country? Why is that? Before I answer that question, I want to address three common misconceptions about homelessness.

Three misconceptions about homelessness

- **Misconception #1** – Homelessness is increasing throughout the U.S. That’s simply not true. Between 2009 and 2019, homelessness decreased 10 percent nationwide; and geographically it declined in 39 states.¹ And as we all know, during those years homelessness in Portland got worse, not better.
- **Misconception #2** – Homelessness is concentrated in certain cities and states because of the weather. Not exactly true. Granted, it is easier to be homeless in Portland than Chicago. But weather isn’t the only factor. If it were, why is homelessness relatively low in other warm weather states of Florida, Arizona, Texas, and throughout the South?²
- **Misconception #3** – Homelessness is primarily caused by a lack of affordable housing. Although this is commonly accepted as fact, it is not the primary cause of homelessness. Brandi Tuck, the Executive Director of Portland Homeless Family Solutions said it best when she said, “You don’t become homeless when you run out of money. You become homeless when you run out of relationships.” There are many factors that contribute to homelessness, but the primary causes are addiction to drugs and alcohol and mental illness, not a lack of affordable housing. More about this later.

Public policy is a key factor in determining where the homeless live

There is a far better explanation for the current distribution of homelessness in the United States than warm weather. Despite suffering from high rates of addiction and mental illness, the homeless make rational decisions. They are highly responsive to public policy: they migrate towards cities with the most generous benefits, and towards the most permissive policy environments.

Based on the 2022 Point in Time Homeless Count and the 2020 Census, Oregon has twice the homeless population compared to the national average.

Oregon	14,655 homeless ÷ 4,176,000 total population = 0.35%
U.S.	552,830 homeless ÷ 327,200,000 total population = 0.17%

Oregon compared to U.S. $0.35\% \div 0.17\% = 2$ times national avg.

Generosity compared to other states

State and local governments that are more generous with their benefits than other states and local governments, encourage the homeless to migrate to these localities. Based on Multnomah County's 2019 Point in Time homeless census, 53 percent of Portland's unsheltered are "Homeless Upon Arrival." Two-thirds of these individuals have arrived in Portland from outside of Oregon or Clark County.³ A recent conversation with an executive director of a nonprofit that helps the homeless confirms this statistic. She indicated that over half of those they serve moved here from other states or cities within Oregon and some of them were bused here.

Are benefits for the homeless in Portland more generous than other cities nationwide? To be honest, I don't have any data that corroborates this premise. But what we do know is Multnomah County is proposing to spend \$255 million⁴ this coming fiscal year on the homeless which represents **\$48,776 per homeless person** ($\$255 \text{ million} \div 5,228^5$).

And we also know that Portland has a very compassionate population. We not only fund bond measures that help the homeless, we also financially support 325 nonprofits that help the homeless in the Portland area.⁶

Our generosity, vis-a-vis government spending and public donations, makes it much more bearable for the homeless to live on our streets. **Above all, we need to be compassionate towards the homeless. However, the most compassionate thing we can do is to address the underlying causes of their homelessness, and by doing so, return them back to stability so they are no longer homeless.**

Permissive public policies that inadvertently encourage homelessness

There are five public policies that inadvertently encourage homelessness in the Portland area:

- No longer prosecuting quality-of-life crimes, such as public camping, public urination and defecation, and blocking sidewalks
- No longer prosecuting property crimes such as graffiti, breaking windows, destroying public property
- Normalizing assault when committed by the homeless, particularly against each other
- Making addictive drug use legal, such as heroin, cocaine, meth, and fentanyl creating an atmosphere of lawlessness
- Opposing involuntary treatment for the mentally ill and drug addicted

In summary, Portland is generous towards the homeless in services provided and has the ideal policy conditions to encourage the homeless to sleep on our streets,

feed an addiction, commit property crimes to survive, with little or no law enforcement to change behavior. And that is why we have a growing, festering homeless crisis in Portland.

Part II – A COMPARISON: Two Polar Opposite Approaches to Helping the Homeless

As mentioned in the previous section, homelessness thrives where benefits are most generous and where permissive policies towards the homeless flourish.

But **life on the street is a living hell** as evidenced by these statistics:

- 75 percent of the unsheltered homeless are addicted to drugs and alcohol⁷
- 78 percent have a mental illness⁷
- 72 percent of homeless women and 30 percent of homeless youth have been raped⁸
- Homeless people die on average 22 years earlier than those in the general population⁹

No one should be subjected to these types of conditions.

What are the Root Causes of Homelessness?

We have been told by our elected officials in Portland that a lack of affordable housing is the primary cause of homelessness. True, we have a significant housing affordability problem in Portland. But the housing crisis is not fueling the homeless crisis. The lack of housing affordability, both rental and owner occupied, is caused by years of building fewer housing units than is required to keep up with demand.

Based on interviews¹⁰ by Hope for the Homeless Foundation with nonprofits that help the homeless in the Portland area, the top five reasons for homelessness are:

1. Mental illness
2. Addiction
3. Trauma caused by domestic violence or veterans suffering from PTSD
4. Physical disabilities
5. Lack of living wage job skills

A lack of affordable housing didn't even make the top five list.

So how do we best help the homeless get off the streets and into permanent housing? There are two polar opposite approaches to helping the homeless:

- 1) Housing First coupled with Harm Reduction
- 2) Compassionate Enforcement

What is Housing First?

Housing First is the philosophical underpinning of our elected officials in Portland.¹¹ It is based on the belief that the homeless are victims of circumstance and inequality and simply need a helping hand to improve their lives. As a result, Housing First advocates believe government should provide free or substantially subsidized housing for the homeless in perpetuity, with no expectations of sobriety, work, or participation in rehabilitation programs. According to this view, treatment for addiction and mental illness should be strictly voluntary. Ironically, most addicted, or mentally ill are unlikely to seek treatment.

In a July 28, 2022 article, Metro announced that 265 bond-funded housing units had recently become available to new residents with more on the way.¹² I'm sure that these new residents are very grateful that they are now living in these new apartments. And I am glad for them too. Reading their stories these renters sound like average everyday people. But unfortunately, they don't represent the majority of the homeless who are living on our streets who are addicted or mentally ill. They represent a smaller subset of homeless individuals who are functional, who can lead normal lives if given a helping hand. These individuals benefit from the Housing First approach but they are the easiest cases to address.

But what about providing permanent housing for the addicted and mentally ill? Will giving them housing, solve their underlying causes of homelessness?

Housing First Results

In multiple studies, residents of Housing First programs showed no improvement regarding addiction and mental illness.¹³ An Ottawa, Canada study between Housing First and a control group, that continued living on the street, reported the control group after 24 months having better results with substance abuse, mental health, quality of life than the Housing First group.¹⁴

Why? Housing First programs are deliberately not oriented toward recovery and rehabilitation. They operate on the "harm reduction" model.

What is the Harm Reduction model?

It is based on the belief that addiction is an involuntary brain disease, akin to Alzheimer's or dementia. Any stigma associated with it is therefore an act of ignorance or cruelty. It assumes most people cannot recover from serious addiction and therefore, the social obligation is to provide the space and means for addicts to continue in their addiction.

In 2020 Oregon voters passed Measure 110 which decriminalized possession of heroin, cocaine, meth, and other hard drugs, changing possession to a misdemeanor with \$100 maximum fine. The measure was pitched to voters as a way to expand access to addiction treatment and recovery, but instead it follows the Harm Reduction model. Of the 16,000 Oregonians who accessed services in its first year since the start of the program only 136 entered treatment.¹⁵ The vast majority accessed syringe exchanges and the distribution of naloxone, a drug that

is design to rapidly reverse opioid overdose. These “harm reduction” efforts largely facilitate drug use by people who are homeless.

Another Consequence of Housing First approach

Those who believe in the Housing First approach focus their efforts on constructing expensive permanent housing, about \$300,000 per housing unit¹⁶, and are opposed to shelters, which they consider inhumane. As a result, from 2011 to 2022 the number of shelter beds declined in Portland by approximately 511 beds (1,485 to 974) or 34 percent.¹⁷ Sadly, this reduction in shelter beds occurred during a decade when the need for emergency housing significantly increased.

What is Compassionate Enforcement?

It is the belief that the homeless should be treated compassionately but they should also obey the laws, like all other citizens.

Houston, Texas is the “poster child” for Compassionate Enforcement. “It is simply not acceptable for people to live on the streets; it is not good for them, and it is not good for the city,” says Sylvester Turner, mayor of Houston. “We will tackle this complicated issue, and we will do it humanely with a meaningful approach that balances the needs of the homeless and the concerns of neighborhoods they impact.”¹⁸

The city has built permanent supportive housing for the chronically homeless, built a coalition of nonprofit partners and lobbied the state for mental health and addiction services. At the same time, Turner has enforced a strict ban on public camping and proposed a citywide campaign to discourage citizens from giving money to panhandlers. The Harris County Sheriff’s Outreach Team attempts to connect the homeless with services but also enforces the law. The team shuts down tent cities and conducts regular cleanups.

As a result, Houston has reduced its homeless population by 54 percent over the last eight years while homeless populations have continued to steadily rise for cities along the West Coast that believe in the Housing First approach.¹⁹

What to Consider When Formulating Policies to Reduce Homelessness

To successfully formulate policies towards mitigating homelessness, four criteria should be considered.

- 1) Avoid public policies that can inadvertently encourage homelessness
- 2) Address the problems of substance abuse and mental illness
- 3) Balance the rights of the unhoused and the rights of everyone else
- 4) Measure compassion not by good intentions but by outcomes

So how does Housing First and Compassion Enforcement compare based on these four criteria?

Housing First

Housing First proponents believe public camping should be allowed due to the lack of affordable housing. They favor the legalization of drug use. And they also oppose involuntary treatment of the mentally ill. By their actions, they believe that the rights of the homeless supersede the rights of the community. Housing First proponents are long on good intentions but are short on measuring their policy outcomes.

Compassionate Enforcement

Compassionate Enforcement proponents believe the existing vagrancy laws should be enforced, that the legalization of drug use for meth, heroin and other hard drugs should be repealed. They are in favor of using coercion (treatment vs incarceration) to encourage drug users to get treatment. Compassionate Enforcement proponents believe in involuntary treatment for the mentally ill. They believe the rights of the community should be balanced with the individual rights of the homeless. They believe outcomes should be measured to find out what works and what does not in reducing our homeless crisis.

A Summary of Housing First vs Compassionate Enforcement Four Criteria for Establishing Sound Homeless Policies

	<u>Housing First</u>	<u>Compassionate Enforcement</u>
1. Realize public policies can encourage homelessness	No	Yes
2. Addresses substance abuse & mental illness	No	Yes
3. Balance rights of unhoused with everyone else	No	Yes
4. Compassion measured by outcomes, not good intentions	No	Yes

Housing First is a failed approach to homelessness wherever it has been applied. It fails on all four criteria for establishing sound homeless policies. To significantly reduce homelessness in Portland, the Compassionate Enforcement model should be implemented.

Part III - THE SOLUTION: Adopting Compassionate Enforcement Policies

Below is a nine-step plan for reducing homelessness in the Portland metropolitan area based on the Compassionate Enforcement model.

NINE STEP PLAN SUMMARY

1. Gather data to help understand and solve the homeless crisis
2. Provide shelter beds and services at multiple locations
3. Provide funding for the most effective non-profits assisting the homeless
4. Enforce existing vagrancy laws that ban camping in public places

5. Repeal Measure 110 that decriminalized heroin and meth possession
6. Establish a crisis center for homeless people exhibiting behavioral problems
7. Change criteria for detaining the mentally ill against their will
8. Establish a substance abuse court modeled after Beaverton's B-SOBR program
9. Establish a long-term care facility for the mentally ill

1. GATHER DATA TO HELP UNDERSTAND & SOLVE THE HOMELESS CRISIS

- A database should be created that identifies the number of shelter facilities, their locations, the people they serve (men, women, or families) and the number of beds available at any given time.
- A by-name database of homeless people should be created for every unhoused person in the Portland area using information collected and shared with their consent.²⁰ Their name, homeless history, health, and housing needs would be included on this list. This information would be shared between service providers (compassionate care), emergency service providers (hospitals and police), treatment service providers (substance abuse and mental health) and housing providers (shelter beds and transitional housing) to better match housing solutions with the needs of the individual.
- Each county in the Portland metro area should create a quarterly report highlighting trends in the homeless population based on data taken directly from the Homeless Management Information System (HMIS).

2. PROVIDE SHELTER BEDS

Provide safe, low barrier, sanitary emergency shelters for everyone who needs it. To speed up the process of site selection, local officials should use properties already at their disposal, such as the Post Office site in Old Town or the Expo Center in north Portland. Other site locations should be added by employing the services of the real estate brokerage community who have valuable expertise in the site selection process. Develop 15 to 20 sites for 100 to 125 people each.

To make this successful, three policies should be implemented:

1. Case management services should be available on a voluntary basis. They should not be mandatory. This will remove one reason the homeless are unwilling to move to a shelter.
2. Shelter operators should implement common sense rules of conduct within the shelters. Those who violate these rules will not be allowed to stay.
3. Any disturbances to the surrounding neighborhood by the homeless should be **swiftly** taken care of by the police. If neighborhoods are willing to have a shelter located in their community, they should not have to tolerate increased vandalism, theft, drug use, graffiti, garbage, etc.

3. FUND EFFECTIVE NONPROFITS

Use Hope for the Homeless Foundation's approach to vetting nonprofits that help the homeless by objectively measuring a nonprofit's results:

- Do they know the number of people they attempted to help last year?
- Do they know their success rate?
- Do they know their success rate after 1 year?
- Is their effort cost-effective?

Provide funding to organizations that have a proven track record of successfully helping the homeless return to stability, so they are no longer homeless.

The next step would be to find out what amount of annual funding is needed for these nonprofits to scale up their operations. Monitor their results over time and reward the most successful nonprofits that help the homeless return to stability with additional funding.

4. ENFORCE EXISTING VAGRANCY LAWS

The City of Portland and Multnomah County should end street camping in public places by enforcing existing vagrancy laws. Bob Day, the former Deputy Chief of Police for the Portland Police Department, says that prior to the COVID pandemic, the Portland Police Department were enforcing existing vagrancy laws without violating the Federal 9th Circuit Court's Boise vs Martin case.

The Martin v. Boise ruling which prohibits cities from enforcing anti-camping ordinances if they do not have enough homeless shelter beds available for their homeless population.

The City of Portland and Multnomah County should begin enforcing existing vagrancy laws by creating "no camping zones", particularly in Portland's Central Business District, and work with ODOT to end camping along our highway system.

5. REPEAL MEASURE 110

Oregon Measure 110 in 2020 decriminalized possession of heroin, cocaine, meth and other hard drugs, changing possession to a misdemeanor with \$100 maximum fine. The measure was pitched to voters as a way to expand access to addiction treatment and recovery, but it is based on the flawed assumption that drug-addicted individuals would seek treatment if it were readily available. Most addicts are not interested in seeking treatment. Instead Measure 110 facilitates drug usage by addicts living on the street.

At the one-year anniversary of the Measure, 16,000 Oregonians accessed services through new grant programs, but mostly for syringe exchanges and the distribution of naloxone, a drug that is design to rapidly reverse opioid overdose. These "harm reduction" efforts largely facilitate drug use by people living on the streets.

Only 136 Oregonians entered treatment for substance abuse. The total cost of the program in the first year was \$31.4 million or about \$230,000 per person getting treatment. **Clearly Measure 110 is a failure and is likely making drug usage on the streets more prevalent.**¹⁶

The benefit of re-criminalizing drug possession is that it will make it easier for law enforcement to prosecute those who now are flaunting their drug use and create a safer environment for the homeless who aren't addicted. The potential threat of jail time will provide the necessary incentive to encourage the drug user to get treatment in lieu of incarceration (see Step 8 below).

6. ESTABLISH A CRISIS STABILIZATION CENTER

What happens to homeless people who are considered potentially dangerous to themselves or others due to drugs or mental illness?

Currently, one of three options occur:

1. They are ignored
2. The police jail them
3. They end up in a hospital emergency room

None of these options solve the problem.

As an alternative, police and ambulance services would instead take these people to a crisis center. This would free up our jails and hospital emergency rooms, both of which are not equipped to handle these types of emergencies. Once the person is stabilized, they would be evaluated for the causes of their behavior and treatment would be prescribed.

Local hospitals would be eager for such a facility to reduce the burden off their emergency rooms. In fact, hospitals may want to participate in staffing the facility.

The goal would be for crisis care recipients to seek voluntary treatment for their issues.

- Those with substance abuse problems would be given the opportunity to voluntarily check into a recovery program from a list of approved providers vetted by Hope for the Homeless Foundation.
- Crisis care recipients that are mentally ill would be given the opportunity to voluntarily check into a long-term care facility (see Step 9 below).

7. CHANGE CRITERIA FOR DETAINING MENTALLY ILL AGAINST THEIR WILL

Many homeless people who are mentally ill will not voluntarily seek treatment. Oregon law allows a person to be treated for a mental illness against their will only

if they are experiencing an emotional disturbance and are imminently dangerous to themselves or other or are unable to care for their basic needs.

A suspected mentally ill person can be detained for up to 72 hours. During that time, the emergency facility or hospital is required to do an evaluation of that person, considering his/her medical, psychological, educational, social, financial, and legal situation.

There are two problems with the statute as it is interpreted by the courts:

Problem #1 – With the more potent drugs on the street today, 72 hours is not a long enough time for the drug addicted person to come down from his high in order to have his mental state accurately evaluated.

The 72-hour hold needs to be increased to 5 days or longer to accurately assess the person's mental condition.

Problem #2 – The phrase “imminently dangerous to themselves or others” has been interpreted by the courts to mean at the very moment the person is being evaluated. If that person exhibits dangerous behavior earlier in the day or the day before but is now considered lucid and in his right state of mind, authorities cannot hold him against his will. There are countless examples of mentally ill persons being detained and then let go because they were not considered a danger, only to have them assault someone shortly after being released.

The word “imminently” needs to be deleted from the statute and replaced with a time frame of 72 hours prior to being evaluated. In the last 72 hours has he posed a danger to himself or to others? Yes, or no? So even if he is in his right state of mind at the time of his evaluation, it should be considered irrelevant to the question of whether he is a danger to himself or others.

8. ESTABLISH A SUBSTANCE ABUSE COURT

Crisis care recipients who are drug abusers and choose not to get treatment would then go before a judge where they are given one of two alternatives: 1) get treatment; or 2) go to jail.

A model for this substance abuse court is the B-SOBR program launched by the city of Beaverton in 2011²¹. Below is a description of this program taken directly from their website:

B-SOBR, the first and only evidence-based practice (EBP) DUII court in Oregon, is designed to treat individuals whose drinking and drug use is beyond their control but who continue to drive motor vehicles. B-SOBR participants agree to strict conditions in exchange for remaining out of jail, including regular reports to court, communication with a Case Manager, sobriety and urine tests, wearing an alcohol monitoring bracelet, committing

to Alcoholics Anonymous or a similar program, working, going to school or volunteering, and random check-ins from Beaverton police officers.

The B-SOBR program is designed for driving-related offenses, but the model could be adapted for substance abuse by the homeless.

9. ESTABLISH A LONG-TERM CARE FACILITY

The closure of Dammasch State Hospital for the mentally ill in 1995 created a large gap in our treatment of mental illness. At the time, the Mental Health Association of Portland came out strongly against its closure. Today, we are experiencing the consequences of that decision by the increasing numbers of mentally ill people living on our streets. An employee of a respected nonprofit that helps the homeless recently stated that many of their patrons wouldn't be able to tell you their names if asked, as they lack the cognitive skills to do so. It's time to re-establish a long-term care facility for the mentally ill.

CONCLUSION

Our elected officials in Portland have enthusiastically followed the Housing First model leading to disastrous results. It has failed us miserably. After years of following this approach, it is readily apparent that homelessness in Portland is getting worse, not better. If we are ever to significantly reduce homelessness in Portland, we must adopt Compassionate Enforcement as our model by implementing the nine-step plan listed above.

ABOUT THE AUTHOR

Doug Marshall has been actively involved with the homeless in the Portland area for 28 years. For 16 years he volunteered with Blanket Coverage helping to feed the homeless in downtown Portland. In 2011, Marshall and his wife Carol, started The Jesus Table, a benevolent meal site that provides a weekly meal and a conversation for all who participate. For five years, Marshall was on the board of Fairhaven Recovery Homes, an organization that provides transitional housing for addicts that want to turn their lives around. In 2019, due to his growing frustration that the homeless crisis in Portland was getting worse, not better, Marshall founded Hope for the Homeless Foundation (HHF), a 501(c)(3) nonprofit with a seven-member board.

Marshall believes Hope for the Homeless Foundation has a unique role in helping the homeless: "To our knowledge," he says, "HHF is the only organization in the country that objectively measures a nonprofit's results in helping the homeless return to stability, so they are no longer homeless." Those organizations that have a proven track record of successfully helping the homeless return to stability and become housed are provided financial grants through his foundation.

Footnotes

¹ *The 2019 Annual Homeless Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates of Homelessness*, n.d., 104.

² *The State of Homelessness in America*, Council of Economic Advisors, September 2019, 41, <https://www.whitehouse.gov/wp-content/uploads/2019/09/The-State-of-Homelessness-in-America.pdf>

³ *Unsheltered homelessness crisis can be solved*, Keith Wilson, Portland Tribune (Oswego newspaper), August 12, 2022.

⁴ *Multnomah County budget puts \$255M toward homeless crisis*, by Rebecca Ellis, OPB, May 28, 2022.

⁵ Tri-county Point in Time Count numbers, shared regionally for first time, show shifts in homelessness, Multnomah County, May 4, 2022.

⁶ *Rose City Resource*, a Street Roots publication, 2020

⁷ Janey Rountree, Nathan Hess, and Austin Lyke, “*Health Conditions Among Unsheltered Adults in the U.S.*” Policy Brief, California Policy Lab, October 2019, p.9.

⁸ *Rates of violence against the homeless are worse than you think*, Gov1 by Lexipol, Megan Wells, April 20, 2020. <https://www.gov1.com/public-safety/articles/rates-of-violence-against-the-homeless-are-worse-than-you-think-PZ7QgDNA4F2MXDwf/>

⁹ Center for Health Impact Evaluation, “Recent Trends in Mortality Rates and Causes of Death Among People Experiencing Homelessness in Los Angeles County,” County of Los Angeles, Department of Public Health, October 2019.

¹⁰ Interviews by Hope for the Homeless Foundation, 2020 through 2022.

¹¹ Multnomah County’s groundbreaking plan for supportive housing clears key hurdle; <https://www.multco.us/multnomah-county/news/multnomah-county%E2%80%99s-groundbreaking-plan-supportive-housing-clears-key-hurdle>, February 22, 2021

¹² *Building for belonging, Metro’s housing bond is outpacing promises made to voters*. July 28, 2022, https://storymaps.arcgis.com/stories/b08dbe20c2454ff1b2f6b7bb490b4b12?mc_cid=a7db4c5767&mc_eid=c0ff607240

¹³ *No Way Home: The Crisis of Homelessness and How to Fix It with Intelligence and Humanity*, page 83.

¹⁴ Rebecca A. Cherner, Tim Aubry, John Sylvestre, Rob Boyd, and Donna Pettey, "Housing First for Adults with Problematic Substance Use," *Journal of Dual Diagnosis* 13, No. 3, September 2017: 219-229.

¹⁵ *Why Oregon Affordable Housing is so Expensive*, Oregon Business Report, by Vlad Yuriov, <https://oregonbusinessreport.com/2021/03/why-oregon-affordable-housing-is-so-expensive/>

¹⁶ *Few obtain treatment in first year of Oregon drug-decriminalization grants*, OPB, by Emily Green, February 14, 2022

¹⁷ 2013 & 2022 Multnomah County Point-in-Time Report

¹⁸ "Press Release: City Pursues Strategies for Homeless, Panhandlers," Office of the Mayor, March 2, 2017, <https://www.houstontx.gov/mayor/press/strategies-for-homeless-panhandlers.html>

¹⁹ "Houston Leads the Nation in Reducing Homelessness," SEARCH Homeless Services, accessed May 12, 2020, <http://www.searchhomeless.org/houston-leads-the-nation-in-reducing-homelessness>.

²⁰ What is a by-name list, Community Solutions, <https://community.solutions/quality-by-name-data/>

²¹ Beaverton Sobriety Opportunity for Beginning Recovery (B-SOBR), <https://www.beavertonoregon.gov/652/B-SOBR-DUII>