

California Society of Addiction Medicine

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August 12, 2022

The Honorable Gavin Newsom Governor, State of California State Capitol, Suite 1173 Sacramento, CA 95814 Via <u>leg.unit@gov.ca.gov</u>

Re: SB 57 (Wiener) – Overdose Prevention Program – Request for Signature

Dear Governor Newsom,

On behalf of the <u>California Society of Addiction Medicine</u> (CSAM) and the American Society of Addiction Medicine (ASAM), of which CSAM is a state chapter, we write to express our strong support for Senate Bill 57 (Wiener). If signed, this life-saving legislation would allow the City and County of San Francisco, the City and County of Los Angeles, and the City of Oakland the discretion to authorize overdose prevention sites (OPSs) where adults may use controlled substances under the supervision of staff trained to prevent and treat overdose, prevent HIV and hepatitis infection, and facilitate entry into drug treatment and other services.

On July 22, 2021, ASAM adopted a Public Policy Statement on this topic that states

"Pilot OPSs should be developed and implemented in communities where there is perceived need and local support by people who use drugs (PWUD)and other community members." This bill is also consistent with the <u>policy</u> adopted by the American Medical Association announced June 12, 2017, to support the:

"development and implementation of pilot supervised injection facilities (SIFs) in the United States that are designed, monitored, and evaluated to generate data to inform policymakers on the feasibility, effectiveness, and legal aspects of SIFs in reducing harms and health care costs related to injection drug use."

OPSs — also known as supervised consumption services (SCS) or supervised injection facilities (SIFs) — such as those that could be established under this bill, provide a sanctioned, safe space for people to consume pre-obtained drugs in controlled settings under the supervision of trained staff. These staff have access to sterile consumption equipment and tools to check participants' drug supply for the presence of fentanyl. Participants can also receive health care, counseling, and referrals to health and social services, including treatment.

OPPs have been shown to reduce health and safety problems associated with drug use, including public drug use, discarded syringes, HIV, hepatitis infections, and overdose deaths. A recent study of an unsanctioned site in the United States found that overall criminal activity did not

increase in the surrounding area.¹ OPPs are an evidence-based, effective public health intervention that could help address the harms of drug use for individuals and communities.

The COVID-19 pandemic has greatly increased the urgency for these services in San Francisco, Los Angeles, and Oakland. PWUD and are unhoused are experiencing the brunt of the dislocations, economic pressures, and closure of services that resulted from the Coronavirus Pandemic. San Francisco saw over three times as many deaths from drug overdoses as from COVID-19 in 2020 — a 60 percent increase in overdose deaths compared to 2019 —and overdose fatalities continued to rise in 2021.² OPPs not only reduce overdose deaths, but also reduce the need for ambulance calls, emergency department visits,³ and hospital beds — resources that are stretched thin by the pandemic. OPPs are complementary to other alternatives to incarceration strategies since it addresses drug use through a public health lens rather than through a law enforcement approach. OPPs do this by removing PWUD drugs from the streets, consequently reducing potential interactions with the police.

In July 2021, Rhode Island became the first state in the nation to authorize a two-year pilot program⁴ to establish "harm reduction centers" where people can consume pre-obtained substances under the supervision of trained staff. In December 2021, New York City opened the nation's first-ever Overdose Prevention Centers in Harlem and Washington Heights.⁵ Since opening, the sites have helped reverse about 280 overdoses,⁶ and within a month of opening, the

³ Lambdin, B.H., Davidson, P.J., Browne, E.N. *et al.* Reduced Emergency Department Visits and Hospitalisation with Use of an Unsanctioned Safe Consumption Site for Injection Drug Use in the United States. *Journal of General Internal Medicine* (2022). https://doi.org/10.1007/s11606-021-07312-4

⁴ Drug Policy Alliance. (2021, July). Drug Policy Alliance Statement on Rhode Island Becoming First in the Nation to Authorize Harm Reduction Centers to Prevent Overdose Deaths. Retrieved from <u>https://drugpolicy.org/press-release/2021/07/drug-policy-alliance-statement-rhode-island-becoming-first-nation-authorize</u>

⁵ Drug Policy Alliance. (2021, November). New York City to Open Nation's First-Ever Overdose Prevention Center Pilots to Save Lives Amid Record Overdoses. <u>https://drugpolicy.org/press-release/2021/11/new-york-city-open-nations-first-ever-overdose-prevention-center-pilots-save</u>

¹ Davidson, P.J., Lambdin, B.H., Browne, E.N., Wenger, L.D., Kral, AH. (2021) "Impact of an unsanctioned safe consumption site on criminal activity," 2010–2019. *Drug and Alcohol Dependence* 220(108521). https://doi.org/10.1016/j.drugalcdep.2021.108521

² Thadani, Trisha. "2020 was SF's deadliest year for overdoses, by far." *San Francisco Chronicle*, Jan. 15, 2021. https://www.sfchronicle.com/local-politics/article/lt-didn-t-have-to-happen-2020-was-15872937.php

⁶Shannon Young. New York experiment with government-approved drug use could become a national model. *Politico, May 14,* 2022. <u>https://www.politico.com/news/2022/05/14/new-york-experiment-drug-use-national-model-00031876</u>

syringes count in the park near one of the safe injection sites dropped from 13,000 to 1,000.⁷ New York City has demonstrated that the operation of overdose prevention programs is possible.

Providing PWUD with overdose prevention services saves costs due to a reduction in the transmission of infectious disease; a decline in overdoses and overdose deaths; and a decreased reliance on law enforcement, courts and jails, emergency rooms, and related medical services. A 2016 study found that every dollar spent in San Francisco on an OPS would generate \$2.33 in savings, for a total annual net savings of \$3.5 million for a single 13-booth facility.⁸

We urge you to sign SB 57 and allow San Francisco, Los Angeles, and Oakland to move forward these pilot projects that will provide these three communities with the opportunity to test these services.

Sincerely,

Kimberly Andosca Executive Director, CSAM

William F. Haning, III, MD, DLFAPA, DFASAM President, American Society of Addiction Medicine

⁷ Zipkin, Michael. "QTBIPOC leaders hold annual health symposium." *Philadelphia Gay News*, Feb. 9, 2022. https://epgn.com/2022/02/09/qtbipoc-leaders-hold-annual-health-sypmposium/

⁸ Irwin, A., Jozaghi, E., Bluthenthal, R. N., Kral, A. H. "A Cost-Benefit Analysis of a Potential Supervised Injection Facility in San Francisco, California, USA." *Journal of Drug Issues* 47.2 (2016): 164–184. <u>https://idhdp.com/media/531280/sifsanfrancisco.pdf</u>