

To Senate members of the Health & Human Services Committee,

In SUPPORT OF HB23-1202 Overdose Prevention Center Authorization

My name is Maggie Seldeen and I am the founder and director of High Rockies Harm Reduction, an organization committed to reducing overdose deaths and the negative consequences of drug use by bringing evidence-based treatments and services directly to rural Colorado communities. I live in and was raised in Carbondale, Colorado, but have lived, worked, and learned all over the state. I have a bachelor's degree from Colorado Mesa University and am considered by many to be an expert on substance abuse and addiction issues, based on my academic, professional and personal experience as someone who has lost countless loved ones to overdose and a person in harm reduction based recovery.

People in our community are dying because the unregulated street drug supply is so toxic. It is vital that we keep people alive if we want them to have the opportunity for recovery and a better life. Overdose prevention centers don't enable drug use, studies show they encourage people who already use drugs to make incremental changes to keep themselves safe. Criminalization of drug use only drives people who use underground and disconnects them from services and treatment (and from society at large), but OPCs protect and connect. That's why they are so effective.

House Bill 1202 provides the opportunity for communities to choose for themselves an evidence-based option that has been proven to save lives and improve the health and safety of communities where they are placed. We should not continue to keep this life-saving tool out of reach for those communities ready to try them.

Even with all of our current efforts to mitigate the overdose epidemic, rates of overdose and substance abuse continue to soar across the state and nation. We must employ all the tools and resources at our disposal, including every evidence-based strategy that currently exists, to combat overdose deaths. Overdose Prevention Centers do nothing but save lives and keep all community members safe and healthy. Five people a day die of overdose in Colorado, needlessly, pointlessly, preventably. Colorado desperately needs Overdose Prevention Centers so I am asking you to please vote yes on House Bill 1202, and allow those communities ready to implement this vital solution to do so. Thank you for your time.

Maggie Seldeen

Founder, Director, Peer

High Rockies Harm Reduction

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April 20, 2023

Dear Members of the Senate Health & Human Services Committee,

On behalf of Mental Health Colorado, we are writing in support of HB23-1202 Overdose Prevention Center Authorization. Mental Health Colorado is the state's leading non-profit, non-partisan organization advocating for healthier minds across the lifespan for all Coloradans.

Our state is struggling to rein in and effectively combat our overdose crisis. Despite the work and resources we have already invested in supporting people who use substances, the number of Coloradans dying from a drug-related overdose continues to rise – [nearly 1,900 people](#) died in Colorado in 2021, a 75% increase from 2019. We can do better.

We support Overdose Prevention Centers because they will improve survival rates—and saving human lives is a priority for us. HB23-1202 unlocks a vital tool for ensuring a continuum of care is in place for people who use substances. New York City established the nation's first overdose prevention centers (OPCs), which have been a proven solution to prevent fatal overdoses. Since being implemented, the OPCs have intervened in [over 800 overdoses](#), registered over 3,000 people in their programs, and been used by over 68,000 New Yorkers. Not a single person has died in these centers – a 100% survival rate.

It is time for Colorado to focus intelligence and resources on saving human lives and to stop being distracted by the thinking that substance use will be eradicated through criminalization and criminal neglect of a public health crisis. What Colorado urgently needs to do is everything in our power to reduce harm, prevent overdose deaths, and create accessible pathways to the health care, supports, and services that are essential to well-being and recovery.

Let's invest in a solution that will keep Coloradans alive. Thank you for the opportunity to submit written testimony. We urge this committee to vote yes on HB23-1202.

Bridget Anshus
Senior Policy Advocate
Mental Health Colorado



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Date: April 20, 2023

Re: HB 1202 - Overdose Prevention Centers

Position: SUPPORT

To: Colorado Senate Health and Human Services Committee

Distinguished Members of the Committee,

Thank you for the opportunity to testify today in support of HB 1202, which would allow Colorado cities to choose to establish life-saving overdose prevention centers (OPCs). I represent myself, having served as a Colorado state corrections officer and Arapahoe County sheriff's deputy, and as a speaker for the Law Enforcement Action Partnership (LEAP).

LEAP is a nonprofit group of police, prosecutors, judges, and other criminal justice professionals who speak from firsthand experience. Our mission is to make communities safer by focusing law enforcement resources on the greatest threats to public safety, working toward healing police-community relations, and addressing the root causes of crime.

Colorado faces an overdose crisis, with opioid overdose deaths increasing by 93% in 2020 and [again by 70% in 2021](#). Yet these deaths are preventable. As law enforcement, it is our duty, first and foremost, to save lives. One day, someone is using drugs in an alley or gas station bathroom. The next day, officers are called because the person has overdosed. These calls haunt the police who respond too late to save the person's life and then have to break the tragic news to their family.

A proven public health and safety approach to saving lives is the implementation of overdose prevention centers (OPCs), which are safe spaces supervised by medical and harm reduction professionals. People can bring in and use their previously obtained drugs. If they begin to overdose, staff can rapidly administer naloxone to reverse the overdose and save the person's life. They can also help a person test

LawEnforcementActionPartnership.org

Formerly known as Law Enforcement Against Prohibition

their drugs for fentanyl, get counseling and connect to treatment. There are [over 165 OPCs around the world](#), including two in New York City, where staff [prevented 600 overdose deaths last year](#). In addition to [significantly reducing overdose deaths in their local communities](#), OPCs have also been shown to reduce [public drug use](#) and [discarded syringes](#).

Fortunately, Colorado legislators have introduced HB 1202, which would permit Colorado municipalities to authorize the implementation of OPCs. It would follow the lead of Rhode Island, which passed legislation to authorize OPCs in 2021. The bill would not force any city to allow OPCs and requires community forums once an OPC opens for residents to voice their opinions and concerns. HB 1202 would empower our communities to reduce public safety problems, including public drug use, discarded syringes, and overdose deaths.

OPCs also reduce the health risks for police officers and correctional officers. Research shows that [OPCs decrease HIV and Hepatitis C infections related to injection drug use](#). We all benefit when a needle in someone's pocket or on the sidewalk is less likely to transmit HIV. Officers benefit in particular because we often have to reach into someone's bag or search through a trash can, knowing that a needle stick could transmit a life-threatening virus. Even inside a state prison in Canon City, I once had to pat down a man who was HIV-positive and turned out to have a syringe in his coat pocket. OPCs would reduce the transmission of communicable diseases, allowing law enforcement to protect ourselves and our communities more safely.

In short, I support HB 1202 because OPCs are a common-sense next step to reduce overdose deaths and 911 calls. Our entire state will benefit from OPCs, from our police officers, correctional officers, and first responders to people who use drugs and people who see drug use in their community. As drug overdose deaths continue to cause tragedies for families across Colorado, it is time for our legislators to take the next step and allow the opening of OPCs.

Thank you for the opportunity to share my perspective in support of this bill.

Respectfully,

Deputy Sheriff Carrie Roberts (Fmr.)
Arapahoe County Sheriff's Office, CO
Speaker, Law Enforcement Action Partnership

Bryon Adinoff, M.D.

Adinoff Addiction Psychiatry, PLLC

Addiction Psychiatry Consultant

April 20, 2023

Re HB-1202 Overdose Prevention Center Authorization

Senate Health & Human Services

Denver, Colorado 80203

Chair Fields and Committee Members:

My name is Bryon Adinoff. I am an addiction psychiatrist and Clinical Professor at CU Anschutz Medical Campus. I am here representing the Colorado Psychiatric Society, which supports HB-1202.

Prior to moving to Colorado upon retirement from full-time academia in 2018, I was the Distinguished Professor of Alcohol and Drug Abuse Research at the University of Texas Southwestern Medical Center in Dallas and for over 30 years I was a physician in the Department of Veterans Affairs. I have published and spoken widely on the biological effects and treatment of addictive disorders and I am the Editor-in-Chief of *The American Journal of Drug and Alcohol Abuse*.

I applaud the committee's consideration of HB-1202. Deaths from drug overdose have claimed over one million lives since the opioid epidemic started in the 1990s, primarily from opioids. Death rates have only increased over the past few years, as the presence of fentanyl has entered the drug supply. In Colorado, almost 1900 lives were lost to drug overdose in 2021 – and 2022 is likely even worse. Almost all of these lives could have been saved if only medical assistance was quickly available. Overdose Prevention Centers provide such lifesaving care.

The first OPC started operating in Switzerland in the 1980's and since then the use of OPCs has greatly expanded. There are now close to 200 OPC locations operating in at least 15 countries across the globe. OPCs have been operating underground in the U.S. for over five years and legal OPCs have been operating in New York City since 2021.

Some have expressed concern that the presence of OPCs will encourage drug use. That has proven not to be true. In fact, over my four-decade career as an addiction psychiatrist, I have heard the same concerns voiced regarding methadone and buprenorphine (opioid agonists that are now our mainstay for the treatment of opioid use disorder), needle exchange (which has been proven to dramatically decrease rates of hepatitis and HIV/AIDS in persons who use intravenous drugs), and Narcan/naloxone (which rapidly reverses the effects of opioids). *All harm reduction techniques, including OPCs, are part of our continuum of care and offer a path to recovery. These approaches do not enable drug use. Rather, they allow the drug user to avoid many of the serious consequences of their use until they are ready to seek treatment and ultimately lead a healthy and productive life.*

In fact, a wealth of literature now demonstrates that OPCs successfully manage overdoses (there have been no reported deaths in OPCs); increase access to drug treatment; reduce public disorder and public drug use and increases public safety; realize cost savings from reduced disease, overdoses, and need for emergency medical services; increase preventive healthcare and drug treatment utilization; and do not

increase drug-related crimes. Because of these highly successful outcomes, both the American Medical Association and American Society of Addiction Medicine support Overdose Prevention Centers.

Last month I spent five days in Vienna attending the UN 66th Commission on Narcotic Drugs (CND), the commission that has oversight over the substances under international control under the International Drug Control Conventions. I was pleasantly surprised to hear the CND Chair and CND Executive Director speak of the enormous financial and personal cost of drug prohibition – yet noting that every year the supply of drugs has increased. Volker Türk, the High Commissioner of the UN Office of Human Rights stated “It is clear to many that the so-called War on Drugs is not working and a number of countries have led the way forward. We must continue this progress in all regions of the world order and stop this so-called War on Drugs. Instead, let us focus on transformative change, crafting drug policy based on evidence which puts human rights at the center...and ultimately will improve the lives for the millions of individuals effected.”

Denver has already approved the use of Overdose Prevention Sites. HB-1102 simply requires the state to approve the local control necessary for Denver (or any other city) to implement this program. Consistent with the concept of local control, no city is required to allow an OPC if they choose not to.

Thank you for your time and your consideration of this life-saving bill.

Sincerely,

Bryon Adinoff, MD

Additional References:

Colorado Criminal Justice Reform Coalition: Fentanyl in Colorado - Overview and recommendations for addressing the overdose crisis

IDPC Briefing Paper - Drug Consumption Rooms: Evidence and Practice

There has been a secret underground overdose prevention site in the United States for five years. New information was released that crime decreased in that area.

The impact of the Sydney Medically Supervised Injecting Centre (MSIC) on crime

Vancouver's INSITE Service and Other Supervised Injection Sites: What Has Been Learned from Research? - Final Report of the Expert Advisory Committee on Supervised Injection Site Research [Health Canada, 2008]



To: Senator Rhonda Fields, Colorado Senate Health & Human Services Chair
Senator Joann Ginal, Colorado Senate Health & Human Services Vice Chair
Members, Colorado Senate Health & Human Services Committee

From: Matt Pagnotti, State & Local Government Relations Director, Vivent Health

Re: Support for HB23-1202 Overdose Prevention Center Authorization

Vivent Health appreciates the opportunity to submit testimony regarding HB23-1202, permitting Colorado cities to authorize operation of an overdose prevention center within its boundaries for the purpose of saving the lives of people at risk of preventable overdoses. Vivent Health (previously Rocky Mountain Cares) is a 501(c)3 non-profit organization serving more than 2,100 Coloradans affected by HIV in the Denver and Pueblo areas each year. Our unique integrated, comprehensive model of care brings together medical, dental, and mental health care; clinical and traditional pharmacy services; food pantry and nutrition services; housing assistance; legal aid; and care management and coordination services for people living with HIV. Vivent Health also provides prevention programs, including Pre-Exposure Prophylaxis (PrEP), testing, and harm reduction services to help reduce the transmission of HIV. We've long believed that we cannot end the HIV epidemic without also ending the overdose epidemic. ***We enthusiastically urge the committee to vote "yes" on HB23-1202 to ensure that Colorado communities can access the public health tools they need to save lives.***

At Vivent Health we proudly provide life-saving harm reduction services through our Lifepoint program, including:

- Providing sterile syringes and safer injection supplies to people who inject drugs
- Safely disposing used syringes
- Distributing naloxone and fentanyl test strips
- Referring participants to medical, mental health, and other supportive services

Thanks to the judgment-free care we provide at our Denver program, we are able to distribute thousands of naloxone doses and fentanyl test strips each year. These services are well-studied and have consistently been found to be highly effective at

preventing overdose deaths and improving the health of people who use drugs. Our Lifepoint team is also able to reach many individuals who have difficulty accessing care due to stigma and discrimination, financial hardship, lack of transportation, and the impact of criminalization. Our organization can attest firsthand that the way to end this crisis is by meeting people who use drugs where they are and providing harm reduction services without stigma, not through more criminalization and failed “war on drugs” approaches.

History has repeatedly shown that criminalization-based approaches to drug use are ineffective and perpetuate the harms caused by mass incarceration. Decades of data has made abundantly clear that drug possession charges are disproportionately applied against Black, Latinx, and other communities of color, low-income individuals, individuals experiencing homelessness, people with disabilities, and LGBTQ folks. An arrest alone can be hugely disruptive to an individual’s ability to maintain employment, housing, or healthcare, in turn putting them at greater risk for drug use or relapse. Colorado must abandon these failed tactics if we are to effectively stem the tide of overdose deaths in our state.

Overdose Prevention Centers (OPCs) are evidence-based, public health interventions that have been proven to effectively prevent overdose deaths¹. The sooner an individual experiencing an overdose receives medical care the less likely they will die or experience other serious injuries. This is why individuals who use alone are at the greatest risk of having a fatal overdose. OPCs address this problem by providing space for someone to use drugs in a controlled setting with trained emergency response staff present. Contrary to popular misconceptions, staff at these programs do not provide participants with drugs or directly assist with their use.

OPCs have a proven track record of preventing overdose deaths – not a single confirmed overdose death among a participant utilizing any of the nearly 200 OPCs worldwide. Numerous studies have also found that OPCs are NOT associated with increased local rates of crime or drug use. In fact, evidence shows these programs are

¹ Samuels EA, Bailer DA, Yolken A. Overdose Prevention Centers: An Essential Strategy to Address the Overdose Crisis. *JAMA Netw Open*. 2022;5(7):e2222153.
doi:10.1001/jamanetworkopen.2022.22153.

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2794326>

highly effective at connecting individuals to substance use treatment or other supportive services and reducing drug use rates among participants. Other demonstrated benefits of OPCs include reduced syringe litter in surrounding areas (program sites provide safe disposal of used equipment and often send staff out for community clean ups); reduced sharing of used syringes or other equipment, which increases the risk of HIV or hepatitis transmission; and overall cost-savings due to less need for emergency medical care. The [American Medical Association](#), [the Cato Institute](#), the [American Public Health Association](#), the [American Society of Addiction Medicine](#), the [National Alliance of State & Territorial AIDS Directors](#), and many other organizations have recognized the lifesaving potential of these programs and expressed their support.

Other cities and states across the country are acknowledging the need to use every evidence-based tool available to save lives. Since New York City opened two overdose prevention centers in November, 2021, [they have already served over 2,000 individuals and averted more than 600 overdoses](#). Rhode Island will begin operating a pilot OPC early next year and several major cities across the U.S. are considering doing so as well. With Colorado experiencing five overdose deaths a day, it is critical that communities in our state have this option as well. Coloradans are looking to the General Assembly to follow public health and take the bold steps we need to prevent further deaths. Please vote “yes” on HB23-1202 so we can end this crisis and save lives.

Dear Madame Chair, Madame Vice Chair, and Members of the Committee,

My name is Dr. Nicole Speer. I am a Boulder City Councilmember and on behalf of the City of Boulder, I urge you to pass HB23-1202 out of committee.

This afternoon you will be hearing from many people about the life-saving potential of overdose prevention centers, and the myriad ways they improve public health and increase community safety.

I was studying the effectiveness of harm reduction methods in people using methamphetamine in Denver over a decade ago. As a neuroscientist, I can assure you there are plenty of data on the benefits of harm reduction methods and overdose prevention centers for people who are using drugs.

As someone who has experienced the trauma of witnessing overdoses (including witnessing three overdoses just in the last few weeks here in Boulder), and as someone who lost a beloved friend to an overdose, I can assure you these benefits extend far beyond those who use drugs.

As a representative of Boulder's City Council, I want to highlight the impacts of overdose and public drug use on our community spaces and local resources, and why cities urgently need the freedom to explore proven interventions to this growing issue.

Boulder is one of a half dozen Colorado cities that temporarily closed a library in recent months due to contamination from public drug use. Boulder's downtown RTD station has also temporarily closed.

Last summer and fall, us Councilmembers and staff received a steady stream of complaints from caretakers who found discarded syringes while enjoying our public spaces with their children.

Our first responders have responded to more than a half dozen overdoses in the past week, at significant cost to our emergency and healthcare resources.

And the impact of increasing overdose rates on our first responders and healthcare systems, particularly when recruitment and retention is already low, threatens our ability to respond to other health emergencies.

This situation is not sustainable for our cities. We don't know if Boulder will follow Denver on opening an overdose prevention center if this bill passes, but we would like to see whether Denver has success in reducing overdoses using this model. And we want the authority to consider options to reduce harm in our community.

Thank you,

Nicole Speer, Ph.D.
Councilmember
City of Boulder

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