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May 5, 2023

Members of the House Judiciary Committee,

Please accept this letter as written testimony from County Sheriffs of Colorado (CSOC) in support of SB23-109 Criminal Penalty Controlled Substance Supplier.

In 2022 the Fentanyl Bill, HB1326 included a penalty for holding drug dealers accountable when the illegal drugs they are selling results in death. The penalty only addresses fentanyl and drugs related to fentanyl under this bill.

While this is a good start, it leaves a dangerous gap by not addressing the deaths from other illegal drugs such as methamphetamine, cocaine, heroin, and others, not to mention the new synthetic drugs being introduced daily. In order to adequately address our growing number of overdose deaths, the penalty in HB23-1326 must be applied to all schedule I and II drugs.

Of the 1,881 overdose deaths in Colorado in 2021, 912 cases involved fentanyl while 969 deaths were from other drugs alone. This leaves 969 victims and their families without equal justice under the law.

SB23-109 will close the gap by adding a sentencing enhancer to the crime of Distribution of a Controlled Substance for defendants convicted as a drug dealer, regardless of the type of illegal substance. This equalizes the sentencing options for all deaths caused by overdoses of illegal drugs.

CSOC urges your support of this bill that will improve the tool law enforcement has to help stop the useless loss of life that we are experiencing due to illegal drug consumption.

Sincerely,

Amy J Nichols, Executive Director
CSOC Board of Directors
CSOC Legislative Committee Members



To: Representative Mike Weissman, House Judiciary Committee Chair
Representative Jennifer Bacon, House Judiciary Committee Vice Chair
Members, House Judiciary Committee

From: Matt Pagnotti, State & Local Government Relations Director, Vivent Health
Olivia Haloj, MD/MPH, Colorado Director of Prevention Services, Vivent Health

Re: Opposition to SB23-109 Concerning Criminal Penalty for Controlled Substance Suppliers

Vivent Health appreciates the opportunity to submit testimony regarding SB23-109, concerning criminal penalties for the supplier when a person dies as a result of the use of a controlled substance. Our organization has long believed that we cannot end the HIV epidemic without also ending the overdose epidemic and we appreciate the General Assembly's attempts to respond swiftly to this crisis. However, decades of data as well as our own on-the-ground experience have made clear that this public health problem can only be solved through public health solutions. SB109 would instead double down on ineffective policies of the past and we are deeply concerned about the harm that this legislation will have on our efforts and on those we serve. ***Vivent Health respectfully urges the committee to vote "no" on SB23-109.***

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. All the services Vivent Health provides are available regardless of the ability of the people we serve to pay for them, or their insurance status.

In addition, we proudly provide life-saving harm reduction services through our Lifepoint program, including:



Colorado Center
on Law and Policy

789 N. Sherman Street, Suite 300 · Denver, CO 80203
303.573.5669 · info@cclponline.org · cclponline.org

May 5, 2023

House Judiciary Committee
Colorado General Assembly
200 E. Colfax Ave. HCR0112
Denver, Colorado 80203

Re: SB23-109 Criminal Penalty Controlled Substance Supplier

Dear Mr. Chair, Madam Vice Chair, and Committee Members:

Thank you for the opportunity for the Colorado Center on Law and Policy (“CCLP”) to submit written testimony opposing Senate Bill 23-109, Criminal Penalty Controlled Substance Supplier. CCLP is an anti-poverty organization that dedicates advocacy, litigation, and research to topic areas including affordable housing, employment, and access to healthcare and food. The criminal legal system is inextricably intertwined with each of our four focus areas.

Drug overdoses are undoubtedly devastating for families and loved ones. But we should treat such overdoses as the public health concerns that they are rather than doubling down on our historic urge to criminalize drug-related deaths. Reverting back to old, failed policies of hyper criminalizing drug use – even when linked to death – will do nothing to deter substance use, will not decrease overdose deaths, and will only serve to rip apart families and communities who are already experiencing tragedy. Even with the extraordinarily narrow and out of touch exemptions added in the senate, individuals in crisis will refrain from calling for help out of fear of prosecution.

It should come as no surprise that policies like SB23-109 will not target drug kingpins or dealers, but instead will have a disproportionate and harmful impact on Coloradans who do not deserve to spend decades in prison. We know that our criminal legal system unfairly targets lower income people and communities of color and there is no reason to think that this policy will be any different. Indeed, studies have already found that drug-induced homicides are pursued disproportionately against Black and brown people, who receive far harsher sentences as compared to white people.

Coloradans have certainly endured countless heartbreaks from overdoses and a public health response is needed to prevent further tragedy. Increasing criminal penalties for selling and sharing drugs, however, is not the answer. It will cost the state more money yet have little deterrent effect and will only further perpetuate the harmful impacts of past policies. For these reasons CCLP urges the Committee to vote no on SB23-109.

Thank you for your time and attention.



Sincerely,

s/ Ellen K. Giarratana _____

Ellen K. Giarratana
Interim Legal Director
Colorado Center on Law and Policy

- 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 were able to distribute more than 1,300 doses of naloxone and reversed 31 overdoses in 2020 alone. 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.

Drug-induced homicide (DIH) laws like SB109 have proven to be ineffective at best, and outright dangerous at worst. These laws mostly target low-level dealers or the friends and family of overdose victims, NOT kingpins.¹ Many of those charged also use drugs themselves and are disproportionately people of color.² Worse still, drug-induced homicide laws discourage people from calling for help when an overdose occurs, costing additional lives.³

As a harm reduction provider on the frontlines of the overdose crisis in our state, we can attest to these impacts firsthand. Our Lifepoint participants frequently tell us they are afraid to call 9-1-1 and risk being arrested. They worry that they will lose their job, housing, or healthcare, so they prefer to rely on each other for help instead. SB109 will only exacerbate this problem and lead to more preventable overdose deaths. Though the bill was amended in the Senate, the narrow carve outs added do not reflect the actual experiences of those we serve. For example, the weight thresholds are far lower than what many of our participants regularly carry with them for personal use, and it's not uncommon for them to pay a friend back for sharing some of their drug that they then use together. Witnessing an overdose is also deeply traumatic, and some of the

¹ Beletsky, Leo. [America's Favorite Antidote: Drug-Induced Homicide in the Age of the Overdose Crisis](#), *Utah Law Review*: Vol. 2019: No. 4, Article 4 (2019)

² Northeastern University, Health in Justice Action Lab. <https://www.healthinjustice.org/drug-induced-homicide>

³ Kung et al., [Analysis of the Effect of Drug Induced Homicide Prosecution Media Reports on Drug Overdose Deaths](#), Joint Statistical Meeting Nationwide 2020 Conference Paper (2020)

people we serve have seen multiple overdoses throughout their life. Expecting someone to coherently decipher complex legal provisions during these emergencies is not only unrealistic, but wastes valuable time needed to save lives.

Vivent Health also operates Lifepoint programs through the state of Wisconsin, which is one of the leading states for bringing drug-induced homicide charges. Though the state files hundreds of charges each year, the vast majority are against low-level dealers or the friends and family of overdose victims. A local Fox news investigation, for example, found that only 11 of the 100 most recent DIH cases involved a higher-level dealer.⁴ Wisconsin's DIH laws also impeded the effectiveness of the state's Good Samaritan protections, since individuals were still frequently charged regardless. Many Vivent Health Lifepoint participants in Wisconsin have told our staff they are afraid to call 9-1-1 or take someone to the ER in the event of an overdose despite the Good Sam law, and some participants have even taken overdosing friends to our program instead because they trust us more than first responders.

SB109 is clearly the wrong approach for Colorado. ***We urge the committee to reject this bill and invest instead in the evidence-based solutions that we know will truly save lives.***

- Matt Pagnotti, State & Local Government Director, Vivent Health

My name is Olivia Haloi and I work as the Director of Prevention Services at Vivent Health, the only federally recognized Medical Home for people living with HIV and which provides holistic services in Colorado and multiple other states. I oversee our Lifepoint Program, Denver's only fully mobile syringe access program. My team conducts outreach to safe outdoor spaces and encampments throughout Denver to distribute sterile syringes, safer injection supplies, fentanyl test strips, and naloxone to people who use drugs because needle sharing and inadequate health resources can lead to long-term health consequences, such as contracting HIV or Hepatitis C, permanent vein and skin damage, and opportunistic infections. This summer Vivent Health plans to launch a full-fledged Prevention Navigation Program to complement

⁴ Fox News 6 Milwaukee Report: <https://www.fox6now.com/news/high-level-drug-dealers-rarely-charged-with-drug-related-homicides-as-wisconsin-death-toll-reaches-10k>

these services with dedicated Navigators. This team will actively work to address the unmet needs of our participants and connect them to additional wrap around services, eliminating barriers to care through a client-centered, step-by-step approach.

Drug-induced homicide laws like SB109 are not evidence-based and rather wrongfully feed the myth that punitive measures against people who use drugs will reduce the drug crisis even though years' of research has proven otherwise. Evidence-based harm reduction programs continue to be one of the most effective methods of decreasing drug overdose deaths, preventing the spread of disease, and connecting people who use substances to treatment programs. Legislation like SB109 will outright defeat the purpose of harm reduction programs like ours by creating an alarming sense of fear, fueling distrust, and compromising safety in the community. In the stories that participants have shared with me I see a repeated pattern of distrust of law enforcement and hesitancy to call 911 for help during an overdose despite the existence of the Good Samaritan Law. They express a fear of being arrested and charged, and this has significantly contributed to the overdose death crisis in this state. This law will accentuate this problem further, leading to even more deaths and discouraging people from engaging in public health programs.

The people we serve often lack the legal expertise to understand the nuances of criminal codes in terms of the weight or volume of a drug. What they will understand is the punitive aspects of this bill that they hear about from friends or in the media, and they will be even more likely to refrain from seeking help for fear of being charged with a felony. Now more than ever, it is important for people who use drugs to feel safe and supported as substances are being laced with benzodiazepines and xylazine, which naloxone cannot reverse. These trends further disproportionately impact people of color and the unhoused community. Drug-induced homicide laws do not get ahold of the real culprits, but rather target lower-level street dealers and friends and family of overdose victims who have no intention of killing anyone.

It is my ardent request to the committee to vote NO on Senate Bill 109 because this law will do more harm and will further exacerbate the opioid overdose crisis in the state, which is already at its worst.

- Oivia Haloi, MD/MPH, Colorado Director of Prevention, Vivent Health



Public Health

Friday, May 5, 2023

House Judiciary Committee
Representative Mike Weissman
Representative Jennifer Bacon

Opposition to SB 23-109: Criminal Penalty Controlled Substance Supplier

Dear State Representatives,

I am writing on behalf of Boulder County Public Health to express our **opposition** to SB 23-109: Criminal Penalty Controlled Substance Supplier.

The evidence is overwhelmingly clear that Colorado is in the midst of a fentanyl crisis; however, evidence from other states and years of drug wars waged against American communities shows that too often bills like this one inappropriately result in imprisoning family members and friends – who often struggle with substance use themselves – while drug dealers and cartels remain free to target their next victim and profit from tragedy. **We believe criminal penalties should be focused on drug dealers and those supplying them.**

In Illinois, a review of drug-induced homicide prosecutions¹ showed that the person charged was typically the last person who was with the deceased and was often a friend. A study from Pew found no relationship between state drug imprisonment rates and overdose deaths², and the Office for National Drug Control Policy has found that rates of substance use increased despite an increase in drug sentences.³ A number of other studies reinforce the conclusion that this bill will likely have little positive impact and could have significant negative impact on our communities.

Most critically, this bill could deter people from calling 911 when witnessing an overdose and make Good Samaritan laws less effective. This will impact the community's trust in law enforcement and emergency medical systems that are key to preventing deaths and will undermine Public Health's efforts to prevent and reverse overdoses.

In 2022, Boulder County Public Health formed an inter-agency Fentanyl Planning and Response Group that developed a comprehensive plan to reduce fentanyl overdose deaths, hospitalizations, and occurrences by working with community to: 1) train on harm reduction and naloxone; 2) promote anti-stigma campaigns; 3) increase awareness and access to naloxone; and, 4) use ODMAP data to place resources in the community. We would like to see the state of Colorado promote a community-driven public health approach such as this to prevent fentanyl overdose deaths.

Sincerely,

Alexandra Nolen, PhD, MPH
Interim Executive Director
Boulder County Public Health

¹ <https://fairandjustprosecution.org/wp-content/uploads/2022/07/FJP-Drug-Induced-Homicide-Brief.pdf>

² <https://www.pewtrusts.org/~media/assets/2017/06/the-lack-of-a-relationship-between-drug-imprisonment-and-drug-problems.pdf>

³ https://obamawhitehouse.archives.gov/sites/default/files/ondcp/policy-and-research/ndcs_data_supplement_2014.pdf

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Public Health

Friday, May 5, 2023

House Judiciary Committee
Representative Mike Weissman
Representative Jennifer Bacon

Support of SB 23-296: Prevent Harassment and Discrimination in Schools

Dear State Representatives,

I am writing on behalf of Boulder County Public Health to express our **support** of SB 23-296: Prevent Harassment and Discrimination in Schools.

The 2021 Healthy Kids Colorado Survey results show us that many students are experiencing teasing at school. For 5.8% of Boulder County High School youth and 9.5% of Colorado youth, this was harassing enough that they did not go to school because they felt unsafe. It is so important for these students to know how to not only report this harassment but to know how they are going to be supported by their school. Safety is such an important component for learning and the rates of LGBTQ+ and youth of color who are missing school due to feeling unsafe are even higher.

Students in Boulder County often share that they do not know how to report incidents and also do not know what is going to happen to the report they have made. We have heard from many students that they have little faith in the current procedures for reporting harassment or discrimination. Many of the young people we work with will tell us there's no point in reporting to the school because nothing will be done. SB23-296 would not only require education providers to provide a way for students to report incidents, but would also require them to have a policy in place that includes the school's role in responding to the reports. Policies of this sort will likely increase the trust students have in reporting harassment and discrimination.

Another important component of the bill is that it would require that school staff be trained about harassment and discrimination and trained on the school's policy. Research has shown that in order to intervene with instances of harassment and discrimination school staff need to receive training. When staff with training were compared to staff without training they were more likely to respond directly and intervene with students, discuss the incidents with other staff and refer the students involved to supports.

Access to education is a key social determinant of health. It is imperative that we do everything within our power to ensure young Coloradans feel safe accessing the education they are entitled to which is why we support SB23-296. We hope that you'll stand alongside us in public health as we work to make schools safer for all youth.

Sincerely,

Heather Crate
Heather Crate, LCSW
Community Health Division Manager
Boulder County Public Health

References:
<https://cdphe.colorado.gov/hkcs>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8654354/>



Bryon Adinoff, M.D.

Adinoff Addiction Psychiatry, PLLC

Addiction Psychiatry Consultant

April 4, 2023

Re SB-109 Criminal Penalty Controlled Substance Supplier

House Judiciary Committee

Denver, Colorado 80203

Chair Jordan and Committee Members:

My name is Bryon Adinoff. I am an addiction psychiatrist, neuroscientist, and Clinical Professor at CU Anschutz Medical Campus. I am here representing the Colorado Psychiatric Society, which opposes SB-109.

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 200 papers and chapters and have spoken widely on the biological effects and treatment of addictive disorders and I am the Editor of *The American Journal of Drug and Alcohol Abuse*.

During my four-decade career, I have watched drug prohibitionist policies, language, and practice permeate our politics and justice system, resulting in millions of arrests and incarcerations at enormous economic and societal costs. And little, if any, benefit.

As a clinician, however, I have seen multiple advances that have improved our care and treatment of those with substance use disorders. Needle exchange to prevent HIV and hepatitis, medications for opioid use disorder, widespread naloxone distribution to reverse overdoses, fentanyl strips, Good Samaritan laws, and increased access to treatment, to name a few.

As a scientist, I can provide you with clear, empirical, peer-reviewed evidence that these prevention and treatment approaches are highly effective. But I challenge you to provide similar evidence supporting the effectiveness of DIH prosecutions. In fact, the evidence shows that drug-induced homicide prosecutions can exacerbate the risk of fatal overdoses, negate the benefits of Good Sam laws, do not reduce drug sales and use, by and large target low-level drug users and/or friends and family of the deceased, and perpetuate racial disparities.

The message from the DIH law is “don’t call for help when someone is overdosing.” The increasing death toll from drugs have taken a terrible toll on my colleagues, particularly our first responders and ER physicians and nurses. Having individuals brought to the hospital long after medical intervention is possible is heart-breaking and frustrating. It is a horrible thought - knowing that the person lying before you could easily have been saved if only the call for help had come sooner. If this bill passes, the deaths will continue.

Over the past few years, Colorado has made great strides in supporting evidence-based practices to guide our approach to substance misuse. My colleagues in the Colorado Psychiatric Society and I encourage you to continue in this more humane and effective effort to stop drug overdose deaths.

Sincerely,

Bryon Adinoff, MD

Jennifer Bacon
Vice Chair, House Judiciary Committee
200 E Colfax Avenue
Denver, CO 80203



May 4, 2023

Dear Representative Bacon:

Thank you for this opportunity to provide written testimony regarding SB 23-109, “Criminal Penalty Controlled Substance Supplier.” I am writing on behalf of CORA Colorado, a statewide nonprofit organization whose mission includes promoting public health strategies that work in the real world to prevent HIV and provide access to effective treatment for those living with HIV. We at CORA Colorado oppose this Bill because it does not reflect good public health practice and will increase the shame, stigma, and risk experienced by our constituents, who include people who use injection drugs.

When facing a public health crisis like worsening overdose rates, it is tempting to rely on “obvious” strategies, like stiffening criminal penalties. Years of public health research are clear: we must resist the pressure to impose such strategies because they do very little to address the core issue and will only increase the suffering. The major problems with SB 23-109 are:

- The Bill, even as amended, will almost certainly be used to prosecute co-users of the deceased, friends, relatives, romantic partners. **It will disproportionately impact communities of color.** Some claim that this trend has not been seen in Colorado due to the recently passed fentanyl “drug-induced homicide” law, but research tells us that it will take years for this effect to be obvious.
- The Bill sends a clear message not to call for help when someone is overdosing. This is inhumane. The addition of a “probation option” does not ameliorate this flaw in the law; other states have tried this strategy, and it had very little effect.
- The law claims to go after “kingpins” and “drug lords.” In the states that have experimented with similar laws, the effects on such “higher level” criminals have been negligible. Instead, those who have borne the brunt of such laws have been those who have much in common with the one who overdoses: young people trying to escape poverty, college students selling drugs to their peers, and family member caught in the vicious cycle of addiction.
- This law undermines good public health practice, which calls for reducing barriers of stigma that keep addiction hidden and make people afraid to seek out help for themselves or others in their lives. Effective public health encourages people to seek help and provides the support needed to reduce harm and manage addiction.

In the name of good public health practice, and in the name of common decency and humanity, please oppose SB 23-109.

Sincerely,

Robert Bongiovanni
Board Chair
303-882-0880

Madame Chair and committee members.

I am Anaya Robinson, the Senior Policy Strategist with the ACLU of Colorado, here today in support of SB 296, to protect students against discriminatory practices in school.

These protections exist under Title IX, and the 14th amendment also ensures a constitutional right to public education, inclusive of equal protection and due process. This is a foundational right that all students in Colorado public schools have, yet is not equally provided to all students in public schools.

According to the Colorado statistics from the GLSEN 2021 National School Climate Survey, 40% of LGBTQ+ students experienced online harassment because of their sexual orientation, 61% of LGBTQ+ students experienced verbal harassment because of their gender expression, and 24% of LGBTQ+ students experienced physical harassment because of their gender identity. 10%, 11% and 11% of LGBTQ+ students experienced physical assault because of their sexual orientation, gender expression, and gender identity respectively. 25% of LGBTQ+ students also experienced victimization at school based on religion, 39% based on disability, and 23% based on race and/or ethnicity. 63% never reported the incident to school staff, and of those who had, only 30% of LGBTQ+ students said that it resulted in effective staff intervention. These statistics don't include the other approximately 80% of students in Colorado who identify as heterosexual and cisgender.

These incidents happen often, but go unreported for multiple reasons. Schools don't receive reports because of reasonable fear of retaliation, lack of investigation, lack of support and protection they receive when making a report, or knowing that they can report and who to report to in the first place.

Colorado students deserve to have a learning environment where their focus and concern is on the content of their classes, not the rhetoric of students and staff around who they are, how they look, or what they believe in. Colorado anti-discrimination law is more inclusive than federal law, because as a state, we recognize that violence, whether mental or physical, is experienced at higher rates for some of us because of who we are. We have an obligation to make sure that these protections are available to all Coloradans, but especially to our youth.

The reality of experiencing harassment and violence decreases educational performance, increases risks of interaction with school discipline and law enforcement, and decreases rates of graduation and movement to post-secondary education. Kids deserve to be protected from these realities, especially when caused by adults, and when that protection fails, kids deserve recourse with due process that is known and accessible to them. SB296 provides both transparently.

The ACLU of Colorado asks you to vote Yes on SB 296. Thank you.

Colorado State Senate Education Committee:

Thank you for the opportunity to provide comments on SB23-96 “Preventing Harassment & Discrimination in Schools.” We the undersigned are [ETR](#), a nonprofit organization committed to improving health outcomes and advancing health equity for youth, families, and communities.

The comments herein are based generally on our 30-year history of working effectively in the K-12 milieu as researchers, independent evaluators, policy and program consultants, curriculum developers, and health educators across many health and wellness issues. Our perspectives are specifically informed by our [K12T9 Initiative](#), which since 2014 has been helping K-12 school communities strengthen their efforts to eliminate, prevent, and address sexual and gender-based harassment and sexual assault. Since 2019, ETR has been providing consultation and technical assistance to school and community stakeholders in Colorado. We have provided direct support to the student- and parent-led movement in Boulder (i.e., BVSD Survivors), successfully advocated for expanded data collection on the Healthy Kids Colorado Survey on these issues, and closely followed the disturbing disclosures, media attention, and court cases as they have unfolded in school communities across Colorado.

ETR supports SB23-96 and strongly advocates its adoption into law. The bill is clear in its intention to make every student and parent fully aware of their legal protections from harassment and discriminatory policy in schools; ensure that every school employee is trained on harassment and discrimination; and require that resources are posted clearly and prominently on district websites and in each school.

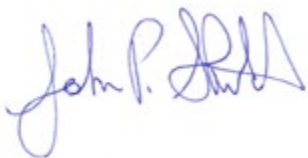
We also submit for your consideration the following observations:

1. Section 1 (1) (d) – The definition of a “respondent” is included in the proposed legislation, but other case parties are not defined. Consider **adding definitions of other case parties** (i.e., complainants, witnesses, advisors of choice, Title IX Coordinators, and others as appropriate) to provide clarity on the diverse roles in the school community.
2. Section 1 (1) (f) – The definition of “school staff” could be expanded to include additional persons who commonly provide support to the school community, including, for example, **parent volunteers and guest speakers**.
3. Section 1 (2) (c) – We are delighted to see this provision focused on improving the accessibility of information about school-based reporting pathways. Consider including a requirement that schools also provide the **required information in languages other than English** based on the needs of their school community and ensure the information is accessible to persons with disabilities.
4. Section 1 (2) (d) (l) – We support the State’s efforts to clarify and operationalize federal guidance around investigation timelines and agree that 60 days is the appropriate benchmark. Consider also including a stipulation that a **concurrent law enforcement investigation is not by itself sufficient justification** for an extension beyond the 60-day deadline.
5. Section 1 (2) (e) – We strongly support the inclusion of mandates around record keeping and urge the State to consider requiring Districts to implement **electronic case management systems** to manage intake, investigations, and remediation. While the adoption of an electronic case management system may present a financial burden for small districts, the benefits for medium to large districts far outweigh initial investments. Electronic case management systems support data-driven practice improvements, ensure accountability, create significant efficiencies, and reduce risk.

6. Section 1 (2) (f) and Section 1 (2) (g) (I) – To ensure that all students are supported through investigation and remediation processes, consider expanding the provision of **supportive measures and accommodations to all students associated with a case**, including witnesses and respondents.
7. Section 1 (3) (a) – The clarification that school policy is separate from and in addition to Title IX is welcome. Since policies tend to be written using language that is inaccessible to the layperson, consider including a requirement that schools develop **supplementary, clarifying materials in plain language**, in languages other than English based on local needs, in a way that is accessible to persons with disabilities, and that use graphics, flowcharts, or other visual/audio/text-based guides.
8. Section 1 (3) (b) (IV) – We are grateful for the inclusion of the requirement that schools provide contact information for crisis resources at the local, state, or national level for domestic violence and sexual violence support. Consider also including requirements that focus specifically on **adolescent suicide prevention** (i.e., the national 988 lifeline) and the **LGBTQ+ community** (e.g., Trevor Project).
9. Section 1 (4) – In our experience, school systems commonly train staff in short, one-off sessions at the beginning of employment and at the beginning of each school year, which are not plausibly associated with positive behavior or culture change. From our perspective, the laudable requirement on training of all school staff could be strengthened by **requiring evidence of training**, including training content, participation records, and, most importantly, training outcomes.
10. Section 1 (4) – This section on staff training also provides an opportunity to require **universal prevention education for students and families**. While health education broadly and sex education specifically is addressed in other law, consider how this legislation might advance sexual violence prevention education for all students and families.
11. Section 1 (5) (I) – We strongly support the inclusion of data collection and reporting around key indicators, including the proposed requirements (i.e., the number of harassment or discrimination reports received by the school, the types of bias reported, and the time required to complete investigations and make findings). We also strongly recommend requiring schools to report in the aggregate on the **demographics of involved students** (e.g., race/ethnicity, gender identity, sexual orientation, age) and **case finding outcomes** (i.e., the number of cases where allegations were substantiated, unsubstantiated, or determined to be unfounded).

Thank you for the opportunity to comment on SB23-96. We strongly support the proposed legislation, urge the Committee to consider our recommendations through the amendments process, and congratulate Colorado for this important step forward to protect the safety and well-being of all students.

Sincerely,



John Shields, PhD, MSW
Director, ETR K12T9 Initiative



Vignetta Charles, PhD (on behalf of ETR)
Chief Executive Officer, ETR



May 2023

To: House Judiciary Committee

Re: SB23-296 Prevent Harassment & Discrimination In Schools

Dear Committee Members,

The American Association of University Women (AAUW) is one of the oldest women's organizations in the country, empowering women since 1881. The mission of AAUW is to advance equity for women and girls through research, education and advocacy.

AAUW led the fight for Title IX protections many years ago, and today we continue to fight for full implementation of this important law. For many, the focus has been on women in sports, but the law requires equality for women and girls in all aspects of education

AAUW of Colorado believes Senate Bill 296 will be a step forward in fulfilling the intent of Title IX. We believe this bill will add transparency and accountability requirements that will lead to a more equitable environment for women and girls.

For these reasons, AAUW of Colorado strongly supports Senate Bill 296 and requests your YES vote in committee and throughout the process of becoming law.

Respectfully submitted,

A handwritten signature in blue ink that reads "Su Ryden".

Su Ryden
AAUW Colorado Public Policy Co-Director

16699 E. Kentucky Ave.
Aurora, CO 80017
303.898.5797
su@ryden.com

American Association of University Women--AAUW is a top-rated 501(c)3 charitable organization whose mission is to advance gender equity for women and girls through research, education, and advocacy.