

**From:** [Jason Norelli](#)  
**To:** [Carroll, John \(BOS\)](#); [Stone, Ande](#)  
**Subject:** Public comment related to the 12/10 hearing on overdose  
**Date:** Thursday, December 10, 2020 1:45:31 PM  
**Attachments:** [image001.png](#)

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Hello and thank you for your work,

The following was the notes I took in preparation for the public hearing but I ran out of time:

Hello I am Jason Norelli and I am The Manager of Navigation services here at Glide Harm reduction programs on Ellis street in the Tenderloin.

Overdose is bad and getting worse – **Glide Harm reduction distributes naloxone to people who use drugs in the tenderloin (they are Truly the first responders in most cases) and our agency staff has used naloxone to reverse overdoses ourselves while walking through the streets in the TL. We are just one program in the network of front line essential workers working in harm reduction. We talk with people every day who were able to save lives using this intervention. Some of the community-based life saving has been complicated by police operations focused towards people without housing that split up groups people that may have the life saving ability of naran on them. As a certified counselor for scores of people who use drugs, I think this city should put resources into funding and enlarging the entire spectrum of evidenced based interventions. From obvious Harm reduction interventions all the way to abstinence-based treatment, things like low threshold medically assisted treatments: suboxone & methadone, more options for social model and medically assisted detox programs and sobering centers with loving care, and finally 24 hour access to naloxone vending machines with education and care in SRO's, shelters, and SIP hotels.**

More people are dying from overdoses in San Francisco, than are dying from COVID - this is a crisis that we must do more to address. **We as a city must be careful that we don't overly rely on the historically problematic smash of over-policing, mandated treatment, and conservatorship. What we need is compassionate, evidenced based, super low-threshold, access to VOLITARY treatment for substance use and mental health as well as harm reduction interventions while people are still using. SCS are one proven public health intervention that can save lives as well!**

Overdose deaths in our city are disproportionately impacting black and brown communities and we must do more to serve the communities that have been most left behind by our public health systems. **Health disparity is real and can be attributed to the disparity in COVID deaths as well. Since the time of COVID Glides Opt-in outreach van focuses on the TL but also gets out to the Bayview - is helping bring food, hygiene, masks, hand sanitizer, as well as**

**harm reduction services and HIV/HEPC testing to this community but we need more of that type of outreach love with collaborations with medical staff and other organizations.**

Community-based, peer delivered naloxone is helping, but what is really needed is bigger structural change – housing! Ending economic disparities! **Our city could use new and existing harm reduction outreach workers that distribute naran and educate and refer folks to services and care. Drop in centers, more detox facilities, and treatment centers that are volitary and low-threshold. Again the answer is in relationship building, love, and compassion. As Eileen from DPH mentioned we are launching a super low access tele-health program that links people with suboxone hear at Glide. We only have a fgew people at this point because it is so new -but- The program works because of the compassionate care that centers clients self-determination and motivation to change. We are working on getting some funding for this amazing project to help with staffing with counselors that can help guide people through the process.**

Supervised consumption services are needed as another intervention or tool. No one has ever died of an overdose in an SCS. Until we can provide housing and low-threshold evidenced based treatment access for all we need SCS to save lives. **Thank you for bringing this issue to light and I will continue to be of service and work in collaboration with you all.**

**Thank you.**

**In service,**

**Jason Norelli**

**Harm Reduction Navigation Manager**

HIV/HCV & Harm Reduction Programs

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**Pronouns: he/him/his**

**Black Lives Matter**

**Acknowledge the Native land you're on: <https://native-land.ca/>**



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**From:** [Paul Aguilar](#)  
**To:** [Carroll, John \(BOS\)](#)  
**Subject:** Safe Consumption Services  
**Date:** Thursday, December 10, 2020 1:10:32 PM

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My name is Paul Aguilar I'm a fourth generation native San Francisco currently residing in district seven.

More people are dying from overdoses in San Francisco, than are dying from COVID - this is a crisis that we must do more to address. SCS are one proven public health intervention that can save lives! While community-need, peer administered naxalone is helping, it's not enough!

What's needed is a proven way to prevent these overdoses. Supervised consumption sites have proven an effective tool not only in other countries but here in the United States as well. no one has died from an overdose while at a supervised consumption site period and until we can provide adequate and affordable housing to all, scs's are a vital weapon in our arsenal. If we don't do something to stem the surge of overdoses in this city, the emergency departments in San Francisco well certainly become overrun especially during this pandemic.

Thank you for your time and consideration.

"Nihil de nobis sine nobis"  
"Amor Vincit Omnia"  
"Res ipsa loquitor"

Nothing about us without us  
Love Conquers All  
The thing speaks for itself

Paul A. Aguilar - He/Him/His  
415.577.7755 - mobile

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Read "Get Rid of the Term AIDS (How My Entire Life Suddenly Became Parenthetical) <https://aumag.org/2020/03/17/get-rid-of-the-term-aids/>

Read "The Test" <https://aumag.org/2019/08/06/the-test-nonfiction-by-paul-a-aguilar/>

Read "Never Forget Your First") <https://aumag.org/2019/01/10/never-forget-your-first-nonfiction-by-paul-a-aguilar/>

**From:** [Whit Bastian](#)  
**To:** [Carroll, John \(BOS\)](#)  
**Cc:** [Ande Stone](#)  
**Subject:** Pubic Comment, Item #4, Public Safety Committee Hearing  
**Date:** Thursday, December 10, 2020 10:20:00 AM

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To Whom It May Concern,

Overdose is bad and getting worse – please share any stories or personal info about the impact that you are seeing. More people are dying from overdoses in San Francisco, than are dying from COVID - this is a crisis that we must do more to address. SCS are one proven public health intervention that can save lives!

Overdose deaths in our city are disproportionately impacting black and brown communities and we must do more to serve the communities that have been most left behind by our public health systems.

Community-based, peer delivered naloxone is helping, but what is really needed is bigger structural change – housing! Ending economic disparities!

Supervised consumption services are needed as another intervention or tool. No one has ever died of an overdose in an SCS. Until we can provide housing; as well as, access to other economic and health-related resources for all we need SCS to save lives.

We know this works, and we have a responsibility to provide access to solutions for our community that will work for them.

Warm regards,

Whit Bastian

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**From:** [Taylor Picard](#)  
**To:** [Carroll, John \(BOS\)](#)  
**Cc:** [Ande Stone](#)  
**Subject:** Public Comment (Write Up)  
**Date:** Thursday, December 10, 2020 9:03:53 AM

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To Whom it May Concern,

Below is the write up on what I am planning to say regarding SCS today, starting at 10:00AM.

*Overdose rates are extremely high right now, and they are only getting worse. Currently in SF, 2 people are dying each day from overdose - a number that would be catastrophically higher if it wasn't for the community accessing harm reduction programs and being equipped and trained on using Narcan.*

*At the Harm Reduction Center, we are getting reports from folks that they are reversing anywhere between 2-5 overdoses a week. People are scared, and need support.*

*The Harm Reduction community knows exactly what we need to do to support people who use drugs, and that is to provide a safe sanitary place for people to use, where staff are trained and ready to respond to any crisis that may emerge. We know that there has never been a single fatal overdose in any Safe Consumption Site, and waiting to open these services is costing the lives of our community every single day. This is an epidemic and an emergency, that comes down to a simple question: does the city of San Francisco believe that people who use drugs deserve to live.*

*We do not have time to wait.*

*Thank you.*

In Solidarity,  
Taylor Picard  
Health Educator  
San Francisco AIDS Foundation  
(415)370-0609

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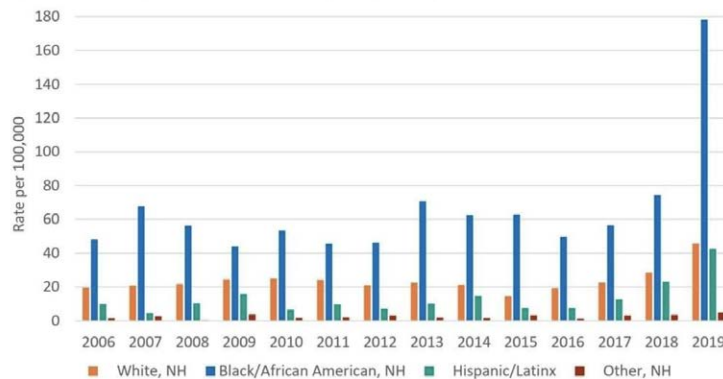
**From:** [Jean-Paul Torres](#)  
**To:** [Carroll, John \(BOS\)](#)  
**Cc:** [Stone, Ande](#)  
**Subject:** Item 4, 201199 Hearing - Overdose Death Reporting and Update on Overdose Prevention Program at Single Room Occupancy Hotels  
**Date:** Thursday, December 10, 2020 8:40:27 AM  
**Attachments:** [Screen Shot 2020-12-10 at 8.26.42 AM.png](#)

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Dear BoS members of the Public Safety and Neighborhood Services Committee:

We are in the midst of a crisis, plain and simple. Many of my Black and brown brothers and sisters (over 80% of total opioid overdose deaths in 2019) are dying on the streets due to a lack of infrastructure in place to address the Opioid Overdose Crisis. This is more deaths than San Franciscans dying from COVID!

Figure 10: Rate of Opioid Overdose Deaths by Race/Ethnicity in CCSF, 2006–2019



Rate is calculated per 100,000 CCSF population. Substance-related overdose deaths were identified using textual cause of death fields. Homicides and suicides were excluded. NH=non-Hispanic.

Sources: Overdose mortality obtained from the California Electronic Death Registration System (CA-EDRS) via the Vital Records Business Intelligence System (VRBIS).

With a lack of secure housing, we can and must do more to support the community in response to this crisis and not wait on crucial housing resources. [Supervised Consumption Sites](#) are one proven public health intervention that can save lives. No one has ever died of an overdose in an SCS.

I urge this committee to support Supervised Consumption Sites as one of the ways to address the Opioid Overdose Crisis. We really need big structural change and SCS will help us get there, along with providing housing.

Thank you,  
Jean-Paul

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Jean-Paul Torres // he/him/his // [jptorres152@gmail.com](mailto:jptorres152@gmail.com)

**From:** [Terry Morris](#)  
**To:** [Carroll, John \(BOS\)](#)  
**Cc:** [astone@sfaf.org](mailto:astone@sfaf.org)  
**Subject:** Overdose Crisis San Francisco's SROs  
**Date:** Wednesday, December 9, 2020 10:09:56 PM

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Dear San Francisco Board of Supervisors Public Safety Committee,

Thank you for all you have done to help San Francisco and San Franciscans over these past months as we all weather the impact of COVID 19.

I was a teenager in San Francisco in the 1980's in the early days of the HIV epidemic. I remember the prejudice, the hate, the inaction of government, and I remember people dying.

Today, San Francisco is seeing overdose deaths skyrocket. As city leaders you could boldly act to save lives.

I have worked at harm reduction and drug treatment programs for over 20 years. I have seen what the stigmatization of drug use does to the emotional, physical, and spiritual health of people.

I have seen people die preventable deaths. I have seen people deteriorate, lose hope, experience violence, succumb to treatable illnesses and infections, avoid helpers (doctors, social workers, drug treatment, mental health providers) because they have been treated so poorly in the past and so harshly judged for their substance use. The people I have met feel so outside of circles of caring and community.

COVID 19 has only made things worse and more dangerous for people who use drugs in our city. People who survived for years on the street are dying alone in SRO rooms. Isolation and overdose are killing people.

Invite people who use drugs into the circle of safety, caring and community. Value the lives of our brothers, sisters, sons, daughters, mothers, fathers, and friends. Safe Consumption Services will save lives.

Sincerely,

Terry Morris