

**DRUG
POLICY
ALLIANCE.**

**NATIONAL
HARM REDUCTION
COALITION**



SKYWATCHERS



Maitri

March 20, 2025

Connie Chan, Supervisor First District
Stephen Sherrill, Supervisor Second District
Danny Sauter, Supervisor Third District
Joel Engardio, Supervisor Fourth District
Bilal Mahmood, Supervisor Fifth District
Matt Dorsey, Supervisor Sixth District

Myrna Melgar, Supervisor Seventh District
Rafael Mandelman, Supervisor Eight District
Jackie Fielder, Supervisor Ninth District
Shamann Walton, Supervisor Tenth District
Chyanne Chen, Supervisor Eleventh District

Legislative Chamber, Room 250
City Hall, 1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: Opposition to File NO. 250190 Recovery First Ordinance

Dear San Francisco Board of Supervisors,

We write in respectful opposition to the Ordinance NO. 250190, also known as the 'Recovery First Drug Policy,' amending our city's drug policy to singularly focus on the abstinence and cessation of drug use. As advocates working on policies that prioritize social support and community well-being, we believe that San Francisco's drug policies should be grounded in scientific evidence, health, and equity.

We share in the vision and the urgency that individuals with substance use disorders (SUD) receive the urgent treatment that they desire and need, limiting or preventing the adverse consequences associated with SUD. However, we are deeply concerned with the introduction of the Recovery First Ordinance, which, as written, signifies a drastic departure from San Francisco's long-established data-driven drug and harm reduction policies. The proposed measure presents a very narrow view of recovery, obscuring the different pathways toward recovery. **Recovery is**

not a one-size fits-all, rather, it exists on a spectrum. The federal Substance Abuse and Mental Health Service Administration crafted a consensus definition to capture the nuance of recovery as, “a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential”.¹

For over thirty years, San Francisco has been at the forefront of adopting innovative strategies that reduce health risks associated with drug use and that improve the recovery of people who use drugs (PWUD). A critical component of such measures has been the implementation of harm reduction policies and practices, driven by community public health strategies that engage directly with people who use drugs to prevent overdose and infectious disease transmission, improve physical, mental, and social well-being, and offer low-barrier options for accessing healthcare services, including substance use and mental health treatment.

In 2000, San Francisco’s Health Commission passed a resolution adopting a Harm Reduction Policy for Substance Use, sexually transmitted disease, and HIV treatment and prevention services, and/or programs that serve people who use drugs in their programs.² The adoption of this policy followed a community-led building of programming and services to support people who used drugs impacted by AIDS. It signaled San Francisco’s openness to embed an evidence-based approach into their system of care and support services to meet people where they are and build trusting relationships that will connect people to health and social services. Moreover, it represented a commitment to ensure that drug policies and services to people impacted by drug use were guided by a public health approach, recognizing that cessation of all drug use is not necessary to receive supportive services. The Recovery First Ordinance will undermine a well-developed drug user health framework that maximizes the wellbeing of our communities by focusing the city’s drug policy solely on one approach. The abstinence only model ignores the fact that recovery from substance use is not a linear nor rigid path and forecloses on the continuum of approaches available to support individuals in their recovery journey.

The reality is that recovery from substance use is a complex and often unpredictable process influenced by each individual’s circumstances, and cessation of drug use is one part of the many components of recovery. Returning to drug use, or relapsing into substance use, is a component of the recovery change process, and for this reason it is critical to implement strategies to improve the retention of non-abstinent patients in the continuum of care. We are deeply concerned about San Francisco adopting a definition of recovery that is severely limited. This definition is not aligned with best treatment practices, but rather places abstinence-based models as the only standard for treatment when people need access to a variety of treatment options beyond medication-assisted treatment, such as contingency management, behavioral health treatment, and trauma-recovery services.³

¹ “Recovery and Support,” February 16, 2023. <https://www.samhsa.gov/substance-use/recovery>.

² Harm Reduction Training Institute (HRTI). <https://www.sf.gov/information--harm-reduction-training-institute-hrti>

³ National Institute on Drug Abuse (NIDA). “Treatment and Recovery,” July 6, 2020. <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery>.

We also believe that the language of this ordinance could exacerbate the existing stigma against substance use disorders and substance users and thus, inhibit successful outreach and connection of PWUD to services. Having a policy defining recovery as being “abstinent from drug use” will discourage people from seeking overdose prevention and other critical resources, knowing that any indication of their substance use could prevent access or remove them from shelter, housing or treatment. Alarming, this policy could redirect funding for abstinence-based models only, stripping harm reduction-based programs from critical funding necessary to distribute overdose prevention medication and life-saving harm reduction supplies, offer drug and treatment-related education, and facilitate connections to social services and treatment. We risk isolating individuals away from services when San Francisco should address this from both angles and incorporate harm reduction principles into treatment models to match people's experiences better.

Investing in public health approaches will help people stay on their path towards recovery, which include but are not limited to shelter and housing options that meet their needs before and after exiting treatment; having access to low-barrier and effective treatment services, naloxone and overdose response training and education, and drug checking services. These low barrier treatment options still lack adequate funding to meet the scale of need - we must build up the spectrum of effective programs, not narrow our scope of care. San Francisco must also deliver on the promise to establish wellness hubs, a key cornerstone of the 2022 Overdose Prevention Plan to provide linkages to care, which will strengthen our current system of services.⁴

We must prioritize the adoption of evidence-based and health-centered solutions to increase the opportunities for people struggling with substance use to seek and get treatment. This ordinance has the potential to hinder the long and established progress the City of San Francisco has developed to address the overdose crisis. We urge your “No” vote on this ordinance. For questions about our position, please contact echen@drugpolicy.org.

Respectfully,

Grey Gardner
California State Director
Drug Policy Alliance

Laura Guzman
Executive Director
National Harm Reduction Coalition

Jennifer Friedenbach
Executive Director
Coalition on Homelessness

Calder Lorenz
Director of Operations
The Gubbio Project

Celestina Pearl
Director of Outreach and Harm Reduction
Lyon Martin

Jes Distad
Vice President of Communications
Harvey Milk LGBTQ Democratic Club

⁴ City & County of San Francisco Department of Public Health. “Overdose Deaths Are Preventable: San Francisco’s Overdose Prevention Plan,” 2022. <https://www.sf.gov/sites/default/files/2022-09/SFDPH%20Overdose%20Plan%202022.pdf>.

Anne Bluethenthal
Lead Artist
ABD Productions / Skywatchers

Analise Velazquez
Advocate
Underbelly Archive Project

Lucie R.
Volunteer
Martin de Porres House

Lauren Hall
Co-Founder and Co-CEO
Delivering Innovation in Supportive Housing

Britt Creech
Operations Manager
Vanguard Lab

Ann Berg
Clinical Program Director
The Harm Reduction Therapy Center

Michael E. Armentrout
Chief Executive Officer
Maitri Compassionate Care

Larisa Pedroncelli
Chair
SF Latino Task Force Street Needs Committee

Joseph Mitchell
Peer Support Specialist
Abode Services

From: [Elle Chen](#)
To: [Board of Supervisors \(BOS\)](#); [Crayton, Monique \(BOS\)](#)
Cc: [Grey Gardner](#); [Norma Palacios](#); [Laura Guzman](#); [Jennifer Friedenbach](#); [Lupe Velez](#); lilla@cohhsf.org
Subject: Re: Recovery First Ordinance - Opposition
Date: Wednesday, April 9, 2025 12:47:54 PM
Attachments: [Recovery First Ordinance - Letter of Opposition \(April 2025\).pdf](#)

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Good afternoon everyone,

On behalf of the Drug Policy Alliance, Coalition on Homelessness, National Harm Reduction Coalition, and our undersigned signatories, I am reaching out with an updated letter on the Recovery First Ordinance.

We extend our heartfelt appreciation to Supervisor Dorsey for meeting with our coalition and accepting the amendments below:

- Broaden treatment modalities past Medically Assisted Treatment (MAT) and
- Changing 'qualified' to 'licensed' providers

In order to withdraw our opposition, we request that the definition of 'recovery' include the [consensus and standardized definition](#) developed by the federal Substance Abuse and Mental Health Service Administration (SAMHSA) (see letter for proposed language).

We appreciate the Board and staff for their continued engagement. We are devoted to working collaboratively to align SF's drug policy with national best practices and support diverse pathways to recovery.

Warm regards,

Elle C. Chen, MSc | Policy Manager
Drug Policy Alliance

Pronouns: they.them.theirs

Phone: 510.679.2309 | Email: echen@drugpolicy.org

[X](#) | [Instagram](#) | [Facebook](#)

www.drugpolicy.org

From: Elle Chen <echen@drugpolicy.org>

Sent: Thursday, March 27, 2025 12:22 PM

To: bos@sfgov.org <bos@sfgov.org>; Victor.Young@sfgov.org <Victor.Young@sfgov.org>

Cc: [Grey Gardner](mailto:Grey.Gardner@drugpolicy.org) <ggardner@drugpolicy.org>; [Norma Palacios](mailto:Norma.Palacios@drugpolicy.org) <npalacios@drugpolicy.org>; [Laura Guzman](mailto:Laura.Guzman@harmreduction.org) <guzman@harmreduction.org>; [Jennifer Friedenbach](mailto:Jennifer.Friedenbach@cohhsf.org) <jfriedenbach@cohhsf.org>; [Lupe](mailto:Lupe.Velez@cohhsf.org)

Velez <lvelez@cohsf.org>; lilla@cohsf.org <lilla@cohsf.org>

Subject: Recovery First Ordinance - Opposition

Good afternoon all,

On behalf of the Drug Policy Alliance, Coalition on Homelessness, National Harm Reduction Coalition, and our undersigned partners, we are in respectful opposition to Ordinance No. 250190, also known as the 'Recovery First Drug Policy.'

I have attached our letter which articulates our opposition to the shift in San Francisco's drug policy to singularly focus on the abstention and cessation of drug use.

We thank the Board of Supervisors and their staff for their ongoing engagement. We will continue to work diligently and collaboratively to ensure that SF's drug policy is truly health-centered, community-driven, and offers the full spectrum of the continuum of care.

Let us know if you have any additional questions about our position. Thank you!

Warm regards,

Elle C. Chen | Policy Manager
Drug Policy Alliance

Pronouns: they.them.theirs

Phone: 510.679.2309 | Email: echen@drugpolicy.org

[X](#) | [Instagram](#) | [Facebook](#)

www.drugpolicy.org

**DRUG
POLICY
ALLIANCE.**

**NATIONAL
HARM REDUCTION
COALITION**



SKYWATCHERS



Maitri



**ONE VOICE
RECOVERY**



**Vilomah
FOUNDATION**



**IN THE
WORKS**



March 20, 2025

Connie Chan, Supervisor First District
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We sincerely thank Supervisor Matt Dorsey for meeting with our coalition and accepting amendments to broaden treatment options past Medically Assisted Treatment (MAT) as a requisite of recovery and for specifying that 'licensed' healthcare providers will administer MAT. However, **to remove our opposition**, we request that the definition of 'recovery' reference the consensus definition developed by the Substance Abuse and Mental Health Service Administration (SAMHSA).¹ The federal agency enlisted expert stakeholders to develop a recovery framework, acknowledging that the cessation of drug use is one of the many essential components of recovery.

(b) Definitions. For purposes of this Section 15.19, the following terms have the following meanings:

(1) "Recovery" as defined by Substance Abuse and Mental Health Services Administration (SAMHSA) means a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery signals a dramatic shift in the expectation for positive outcomes for individuals who experience mental and substance use conditions or the co-occurring of the two.

We share in the vision and the urgency that individuals with substance use disorders (SUD) receive the urgent treatment that they desire and need, limiting or preventing the adverse consequences associated with SUD. However, we are deeply concerned with the introduction of the Recovery First Ordinance, which, as written, signifies a drastic departure from San Francisco's long-established data-driven drug and harm reduction policies. The proposed measure presents a very narrow view of recovery, obscuring the different pathways toward recovery. ***Recovery is not a one-size fits-all, rather, it exists on a spectrum.***²

¹ "SAMHSA's Working Definition of Recovery | SAMHSA Library - Substance Abuse and Mental Health Services Administration." Accessed April 7, 2025. <https://library.samhsa.gov/product/samhsas-working-definition-recovery/pep12-recdef>.

² "Recovery and Support," February 16, 2023. <https://www.samhsa.gov/substance-use/recovery>.

Having a policy defining recovery as being “abstinent from drug use” will discourage people from seeking overdose prevention and other critical resources, knowing that any indication of their substance use could prevent access or remove them from shelter, housing or treatment. We believe that the narrow language of this ordinance could exacerbate the existing stigma against substance use disorders and substance users and thus, inhibit successful outreach and connection of people who use drugs (PWUD) to services. Alarming, this policy could redirect funding for abstinence-based models only, stripping harm reduction-based programs from critical funding necessary to distribute overdose prevention medication and life-saving harm reduction supplies, offer drug and treatment-related education, and facilitate connections to social services and treatment. We risk isolating individuals away from services when San Francisco should address this from both angles and incorporate harm reduction principles into treatment models to match people's experiences better.

For over thirty years, San Francisco has been at the forefront of adopting innovative strategies that reduce health risks associated with drug use and that improve the recovery of PWUD. A critical component of such measures has been the implementation of harm reduction policies and practices, driven by community public health strategies that engage directly with people who use drugs to prevent overdose and infectious disease transmission, improve physical, mental, and social well-being, and offer low-barrier options for accessing healthcare services, including substance use and mental health treatment.

In 2000, San Francisco's Health Commission passed a resolution adopting a Harm Reduction Policy for Substance Use, sexually transmitted disease, and HIV treatment and prevention services, and/or programs that serve people who use drugs in their programs.³ The adoption of this policy followed a community-led building of programming and services to support people who used drugs impacted by AIDS. It signaled San Francisco's openness to embed an evidence-based approach into their system of care and support services to meet people where they are and build trusting relationships that will connect people to health and social services. Moreover, it represented a commitment to ensure that drug policies and services to people impacted by drug use were guided by a public health approach, recognizing that cessation of all drug use is not necessary to receive supportive services. The Recovery First Ordinance will undermine a well-developed drug user health framework that maximizes the wellbeing of our communities by focusing the city's drug policy solely on one approach. The abstinence only model ignores the fact that recovery from substance use is not a linear nor rigid path and forecloses on the continuum of approaches available to support individuals in their recovery journey.

The reality is that recovery from substance use is a complex and often unpredictable process influenced by each individual's circumstances. Returning to drug use, or relapsing into substance use, is a component of the recovery change process, and for this reason it is critical to implement strategies to improve the retention of non-abstinent patients in the continuum of care. We are deeply concerned about San Francisco adopting a definition of recovery that is severely limited. This definition is not aligned with best treatment practices, but rather places abstinence-based models as the only standard for treatment when people need access to a variety of treatment

³ Harm Reduction Training Institute (HRTI). <https://www.sf.gov/information--harm-reduction-training-institute-hrti>

options beyond medication-assisted treatment, such as contingency management, behavioral health treatment, and trauma-recovery services.⁴

Investing in public health approaches will help people stay on their path towards recovery, which include but are not limited to shelter and housing options that meet their needs before and after exiting treatment; having access to low-barrier and effective treatment services, naloxone and overdose response training and education, and drug checking services. These low barrier treatment options still lack adequate funding to meet the scale of need - we must build up the spectrum of effective programs, not narrow our scope of care. San Francisco must also deliver on the promise to establish wellness hubs, a key cornerstone of the 2022 Overdose Prevention Plan to provide linkages to care, which will strengthen our current system of services.⁵

We must prioritize the adoption of evidence-based and health-centered solutions to increase the opportunities for people struggling with substance use to seek and get treatment. This ordinance has the potential to hinder the long and established progress the City of San Francisco has developed to address the overdose crisis. We urge your “No” vote on this ordinance. For questions about our position, please contact echen@drugpolicy.org.

Respectfully,

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⁴ National Institute on Drug Abuse (NIDA). “Treatment and Recovery,” July 6, 2020. <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/treatment-recovery>.

⁵ City & County of San Francisco Department of Public Health. “Overdose Deaths Are Preventable: San Francisco’s Overdose Prevention Plan,” 2022. <https://www.sf.gov/sites/default/files/2022-09/SFDPH%20Overdose%20Plan%202022.pdf>.

Delivering Innovation in Supportive Housing

Britt Creech
Operations Manager
Vanguard Lab

Kevin Liu
Community Organizer
Supportive Housing Overdose Prevention Network

Marnie Regen
Division Director of Government
Larkin Street Youth Services

Kenneth B Hughs
Pastor
St. Mark Institutional Missionary Baptist Church

Justice Dumlao
Community Mobilization Manager
Treatment on Demand

Susan Ousterman
Executive Director
Violomah Foundation

Patrick Rezac, SUDRC
Founder/Executive Director
One Voice Recovery, Inc.

Katia Padilla
COO Policy, Equitable and Strategic Partnerships
Latino Task Force

Kaylena Katz
Member
SFSU Public Health Organization of Graduate
Students

Laura Thomas
Senior Director of HIV and Harm Reduction Policy
San Francisco AIDS Foundation

Ry Dalporto
Volunteer
Harm Reduction Outreach Collective (HROC)

Abode Services

Mary Howe
Executive Director
Homeless Youth Alliance

Paul Boden
Director
Western Regional Advocacy Project

Eric Brooks
Campaign Coordinator
Our City San Francisco

Kathleen Cochran
Founder
Moms for All Paths

Justice Dumlao
Community Mobilization Manager
Safer Inside Coalition

Taeko Frost
Principal & Co-Founder
In the Works

Ethan Makulec
Executive Director
Humboldt Area Center for Harm Reduction
(HACHR)

Kevin Liu
Community Organizer
Rad Mission Neighbors

Joseph Wilson
Executive Director
Hospitality House

Jenn Autry
Founder
Black Heart Harm Reduction

From: [Board of Supervisors \(BOS\)](#)
To: [BOS-Supervisors](#); [BOS-Legislative Aides](#)
Cc: [BOS-Operations](#); [Crayton, Monique \(BOS\)](#); [Calvillo, Angela \(BOS\)](#); [De Asis, Edward \(BOS\)](#); [Entezari, Mehran \(BOS\)](#); [Mchugh, Eileen \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [Somera, Alisa \(BOS\)](#)
Subject: FW: Letter regarding Administrative Code – “Recovery First Drug Policy,” File No. 250190 — SUPPORT
Date: Wednesday, April 16, 2025 9:51:22 AM
Attachments: [Outlook-1504893741.png](#)
[Letter in Support of Recovery First in San Francisco.doc](#)

Hello,

Please see attached regarding **File No. 250190**:

Ordinance amending the Administrative Code to establish the cessation of illicit drug use and attainment of long-term recovery from substance use disorders as the primary objective of the City’s drug policy.

Regards,

John Bullock
Office of the Clerk of the Board
San Francisco Board of Supervisors
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102
(415) 554-5184
BOS@sfgov.org | www.sfbos.org

***Disclosures:** Personal information that is provided in communications to the Board of Supervisors is subject to disclosure under the California Public Records Act and the San Francisco Sunshine Ordinance. Personal information provided will not be redacted. Members of the public are not required to provide personal identifying information when they communicate with the Board of Supervisors and its committees. All written or oral communications that members of the public submit to the Clerk's Office regarding pending legislation or hearings will be made available to all members of the public for inspection and copying. The Clerk's Office does not redact any information from these submissions. This means that personal information—including names, phone numbers, addresses and similar information that a member of the public elects to submit to the Board and its committees—may appear on the Board of Supervisors website or in other public documents that members of the public may inspect or copy.*

From: Keith Humphreys <knh@stanford.edu>
Sent: Tuesday, April 15, 2025 2:25 PM
To: Board of Supervisors (BOS) <board.of.supervisors@sfgov.org>
Cc: Dorsey, Matt (BOS) <matt.dorsey@sfgov.org>
Subject: Letter regarding Administrative Code – “Recovery First Drug Policy,” File No. 250190 — SUPPORT

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Dear Board of Supervisors

Please find attached my letter supporting this policy.

Thank you

Keith Humphreys





Keith Humphreys, Ph.D.
Esther Ting Memorial Professor
401 N. Quarry Road, Room C-305 (MC:5717)
Stanford University School of Medicine
Stanford, CA 94305-5717
KNH@Stanford.edu

April 16, 2025

Board of Supervisors
City Hall
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4689

Re: Administrative Code – “Recovery First Drug Policy,” File No. 250190 — SUPPORT

Dear Honorable Members of the San Francisco Board of Supervisors:

As someone who has studied addiction for over 35 years, served as a drug policy advisor in multiple White Houses, and currently volunteers in the Tenderloin, I am writing in strong support of the measure introduced by Supervisor Dorsey to make recovery the primary goal of drug policy in San Francisco.

As we all know, addiction to drugs – particularly to fentanyl and methamphetamine – is doing enormous damage to San Francisco. This damage is experienced not only by those who use drugs but also by their families, their communities, local businesses, and health and social service agencies. The city is blessed with many talented, committed individuals and organizations that attempt to respond to the addiction crisis, but to date they have lacked a North Star, i.e., a clear statement of what the ultimate goal of these efforts should be and to what standard they should be held.

The “Recovery First” ordinance would provide such a North Star. It reflects compassionate optimism about the potential and dignity of every person who experiences addiction and simultaneously assures the city’s taxpayers that the resources they provide are being wisely employed.

I recognize that some have characterized aiming for recovery as a rejection of harm reduction, so please let me take a moment to say why I disagree. I support harm reduction; indeed I wrote the first White House endorsement of bringing the overdose rescue drug naloxone into communities and also helped expand funding for syringe

exchange when I worked for President Obama. At the same time I recognize that a life of continued fentanyl addiction *even if we can make it less harmful than usual* does not generate anywhere near the health and quality of life as does recovery from addiction. Harm reduction will continue under a recovery first policy as a way to address immediate needs and help addicted people survive each day, and this will be coupled with a longer-term aspiration for something more, namely a life without illicit drugs.

Just as we aim for the best possible outcome for San Franciscans who experience less stigmatized disorders like cancer and heart disease, we should also aim for full recovery for those who experience addiction. They deserve that high level of aspiration and so do all the San Franciscans who are suffering along with them.

Sincerely,

A handwritten signature in black ink, reading "Keith Hayles". The signature is written in a cursive, slightly slanted style.

From: [Ellen Grantz](#)
To: [Calvillo, Angela \(BOS\)](#); [Crayton, Monique \(BOS\)](#); [Board of Supervisors \(BOS\)](#); [BOS-Legislative Aides](#); [BOS-Supervisors](#)
Cc: [Lurie, Daniel \(MYR\)](#); [Jacqui Berlin](#); [Gina McDonald](#); [Tanya Tilghman](#)
Subject: MADAAD's Support for San Francisco's Recovery-First Ordinance (File No. 250190)
Date: Thursday, April 17, 2025 11:39:37 AM
Attachments: [MADAAD Letter in support of Recovery First ordinance file 250190 4-17-2025.pdf](#)

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Dear Honorable Members of the San Francisco Board of Supervisors:

We, the members of Mothers Against Drug Addiction & Deaths (MADAAD), write to express our strong support for the “Recovery First” ordinance introduced by Supervisor Matt Dorsey and co-sponsored by Board President Rafael Mandelman and Supervisors Bilal Mahmood, Stephen Sherrill, Myrna Melgar, Joel Engardio and Danny Sauter, that establishes the cessation of illicit drug use and the attainment of long-term recovery as the ***primary goal*** of San Francisco’s response to the overdose crisis. As an organization of mothers who have witnessed the devastating toll of addiction on our children, our families, and our communities, we believe this policy offers the clarity and hope needed to save lives and help individuals reclaim their futures.

MADAAD was founded to fight for the lives of those struggling from addiction, drawing on the shared experiences of mothers who have searched for their children on the streets, mourned their losses, and advocated for systemic change. We have seen firsthand how drugs like fentanyl and methamphetamine fuel cycles of addiction and homelessness, tearing families apart. Our mission is to prevent more communities from enduring this pain by promoting policies that prioritize recovery and provide a clear path to a life free from drug addiction.

We understand the concerns some may have about a recovery-first approach. There’s a fear that prioritizing abstinence from illicit drugs might oversimplify the complex, often non-linear nature of recovery. As mothers who have watched our loved ones struggle—and, in too many cases, lose their lives to addiction—we know recovery isn’t always a straight path. Setbacks are real, and each person’s journey is unique. The “Recovery First” ordinance recognizes this by embracing multiple pathways, including Medication-Assisted Treatment (MAT) when prescribed by licensed professionals, while keeping recovery from addiction as the ultimate goal. We believe that setting this clear target and allowing for multiple pathways to reach it will provide the focus and structure needed for lasting change, offering hope to those trapped in addiction’s grip.

Another concern is that a recovery-focused policy might increase stigma, discouraging people from seeking help. At MADAAD, we’ve lived the pain of watching our children battle shame and isolation—we know how stigma can keep them from reaching out. Far from being discouraging, the “Recovery First” ordinance embraces

effective harm reduction services as vital entry points to care, ensuring no one is turned away. Having recovery as a goal isn't about judgment; it's about honoring the potential of those we love to heal and rebuild their lives, giving them a future beyond the perpetual management of their addiction. At the same time, we must affirm that cessation of illicit drugs is our health policy because it is essential for long-term wellbeing.

San Francisco's overdose crisis demands a bold new approach. The rise of deadly synthetic drugs like fentanyl and methamphetamine has shattered families, with 3,900 people in San Francisco lost to overdoses since 2019. The "Recovery First" ordinance will provide the direction our overdose response needs without sacrificing the best elements of our current system.

We urge the Board of Supervisors to adopt the "Recovery First" ordinance that prioritizes recovery as the primary goal of our city's drug response. The stories of MADAAD's kids—stories of loss, struggle, and determination—underscore the urgent need for a system that offers hope to every person fighting this battle. Let's build a future where no child has to wonder if a life of addiction is the best they can ever hope for.

In solidarity:

Jacqui Berlinn, Bay Area mother of Corey, an unsheltered resident in San Francisco
Gina McDonald, Bay Area mother of a Sam, in recovery after surviving on the streets of SF

Tanya Tilghman, SF mother of Roman, currently incarcerated in SF after relapsing
Ellen Grantz, San Francisco mother of two teenagers in San Francisco public schools

MOTHERS AGAINST DRUG ADDICTION & DEATHS

San Francisco Board of Supervisors
City Hall
1 Dr Carlton B Goodlett Pl
San Francisco, CA 94102

April 17, 2025

Subject: MADAAD's Support for San Francisco's Recovery-First Ordinance (File No. 250190)

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We, the members of Mothers Against Drug Addiction & Deaths (MADAAD), write to express our strong support for the "Recovery First" ordinance introduced by Supervisor Matt Dorsey and co-sponsored by Board President Rafael Mandelman and Supervisors Bilal Mahmood, Stephen Sherrill, Myrna Melgar, Joel Engardio and Danny Sauter, that establishes the cessation of illicit drug use and the attainment of long-term recovery as the **primary goal** of San Francisco's response to the overdose crisis. As an organization of mothers who have witnessed the devastating toll of addiction on our children, our families, and our communities, we believe this policy offers the clarity and hope needed to save lives and help individuals reclaim their futures.

MADAAD was founded to fight for the lives of those struggling from addiction, drawing on the shared experiences of mothers who have searched for their children on the streets, mourned their losses, and advocated for systemic change. We have seen firsthand how drugs like fentanyl and methamphetamine fuel cycles of addiction and homelessness, tearing families apart. Our mission is to prevent more communities from enduring this pain by promoting policies that prioritize recovery and provide a clear path to a life free from drug addiction.

We understand the concerns some may have about a recovery-first approach. There's a fear that prioritizing abstinence from illicit drugs might oversimplify the complex, often non-linear nature of recovery. As mothers who have watched our loved ones struggle—and, in too many cases, lose their lives to addiction—we know recovery isn't always a straight path. Setbacks are real, and each person's journey is unique. The "Recovery First" ordinance recognizes this by embracing multiple pathways, including Medication-Assisted Treatment (MAT) when prescribed by licensed professionals, while keeping recovery from addiction as the ultimate goal. We

believe that setting this clear target and allowing for multiple pathways to reach it will provide the focus and structure needed for lasting change, offering hope to those trapped in addiction's grip.

Another concern is that a recovery-focused policy might increase stigma, discouraging people from seeking help. At MADAAD, we've lived the pain of watching our children battle shame and isolation—we know how stigma can keep them from reaching out. Far from being discouraging, the "Recovery First" ordinance embraces effective harm reduction services as vital entry points to care, ensuring no one is turned away. Having recovery as a goal isn't about judgment; it's about honoring the potential of those we love to heal and rebuild their lives, giving them a future beyond the perpetual management of their addiction. At the same time, we must affirm that cessation of illicit drugs is our health policy because it is essential for long-term wellbeing.

San Francisco's overdose crisis demands a bold new approach. The rise of deadly synthetic drugs like fentanyl and methamphetamine has shattered families, with 3,900 people in San Francisco lost to overdoses since 2019. The "Recovery First" ordinance will provide the direction our overdose response needs without sacrificing the best elements of our current system.

We urge the Board of Supervisors to adopt the "Recovery First" ordinance that prioritizes recovery as the primary goal of our city's drug response. The stories of MADAAD's kids—stories of loss, struggle, and determination—underscore the urgent need for a system that offers hope to every person fighting this battle. Let's build a future where no child has to wonder if a life of addiction is the best they can ever hope for.

In solidarity:

Jacqui Berlinn, Bay Area mother of Corey, an unsheltered resident in San Francisco
Gina McDonald, Bay Area mother of a Sam, in recovery after surviving on the streets of SF
Tanya Tilghman, SF mother of Roman, currently incarcerated in SF after relapsing
Ellen Grantz, San Francisco mother of two teenagers in San Francisco public schools

From: [Charlton Yu](#)
To: [Crayton, Monique \(BOS\)](#)
Subject: Support Supervisor Dorsey's Recovery First Ordinance
Date: Friday, April 18, 2025 8:51:31 AM

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Clerk Monique Crayton,

I'm writing to express my support for Supervisor Dorsey's "Recovery First" ordinance which calls for the cessation of illicit drug use to be the primary goal of our public health policy for people struggling with addiction.

For too long San Francisco has failed to prioritize long-term recovery for people who are struggling with addiction. Instead, our City has acted as if the best we can do is give drug users clean supplies and Narcan, while we look the other way and hope they don't die.

Supervisor Dorsey's legislation is pragmatic. By calling for the cessation of illicit drug use as the "north star" for our public health policy, it will align our health policy with virtually every other public health system in the world. His policy is also progressive, embracing treatments like prescription medicines such as Methadone and Suboxone, as well as harm reduction, as part of the continuum of care.

Without Supervisor Dorsey's "Recovery First" ordinance, our public health policy is deeply flawed, suggesting that people should not expect to recover, despite mountains of evidence that people can overcome addiction to illicit drugs. At a time when synthetic drugs are flooding our City, our policy of tolerating illicit drugs sends a dangerous message to our children.

I urge you to support the "Recovery First" ordinance. This approach isn't about choosing between compassion and accountability; it's about a common sense reform that's long overdue.

Sincerely,

Charlton Yu
charlton_yu@yahoo.com

San Francisco, California 94118