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announced that it wants to be the first city in the U.S. to actually open a site. Has that announcement drummed up any potential funders or operators?

**T.F.:** During the time we were quietly exploring this, we talked to people who expressed some interest in potentially being an operator and other people who were potentially interested in funding this. It was all very hypothetical at that point, and now we're going to go back in a much more open and formal way and try to see who's interested in potentially operating it and funding it. And so we're optimistic we can put together the different pieces to make this happen.

**E.G.:** U.S. Attorney General Jeff Sessions has warned that such a site would violate the law, and your state's attorney general is against the idea, too. What are you risking by moving forward without their approval?

**T.F.:** I'm old enough to remember when syringe exchange sites were very controversial, and they were opened by many very intrepid people who really just wanted to save lives and prevent HIV from being spread. If you were to read federal law or state law right now, you might say that they are operating out of compliance with that law, but they have operated successfully, including here in Philadelphia, for years and saved many, many lives. In fact, syringe exchange has been maybe the biggest success story in the whole history of the AIDS epidemic. And so I think what's important is that the laws that are on the books were not written with the intent of preventing a doctor like me from saving lives. And we think that the federal government has more important things to do than to prevent me from saving lives, likewise with other enforcement agencies, so we're going to go forward in the same way that people just moved forward during the crisis that was AIDS. We have a crisis that's bigger than that now, and we think that other people will understand why that's important to do it as we go forward.

**E.G.:** I was looking at a map of opioid mortality rates in Philadelphia, and much like Portland, there's a higher rate in certain areas, but deaths are also dispersed throughout the city. What kind of approach are you taking to figuring out what the best location should be and how to get people engaged with that location?

**T.F.:** All to be worked out in the future, but we certainly know we need to have conversations with City Council members and community organizations and individual people, with parents who've lost children, people who are still actively using drugs and people in the treatment world. Out of that, we hope to have a consensus that we can find a site for our facility that is convenient for injecting drug users so that they'll use it. There's no point putting it in a place where people won't use it. But there's going to be a whole series of



PHOTO BY EMILY GREEN

In Philadelphia, where drug overdoses resulted in an estimated 1,200 deaths last year, the city is distributing tens of thousands of doses of naloxone, the opioid-overdose-reversing drug.

conversations before we can figure out what is the optimal place.

**E.G.:** Have you thought at all about what you're going to do when it comes to NIMBYism in that area?

**T.F.:** Same answer – it's all about talking to people. My experience has been that so many people have been touched by this crisis, that a lot of people will completely understand the value of this and say, "Yes, I want to be part of saving lives also."

It's worth pointing out, the Vancouver site has been studied, and the kind of problems that people see in the neighborhood where drug use is common are actually lessened by a supervised consumption facility site. The number of needles discarded on the ground, the number of people who are injecting in public go down because people are injecting inside rather than outside. And so we'll certainly discuss that as we have these conversations.

**E.G.:** And finally, I think it's important to mention that opening a safe consumption site is just one of many tactics that Philadelphia plans to employ to rein in the opiate crisis. What other innovative methods do you expect will have the greatest impact?

**T.F.:** We see a lot of the problem as being created by drug companies getting

doctors to prescribe opioid pills far too much, and so that's getting too many people addicted, and so we are working hard to change doctors' prescribing patterns to reduce their prescribing. For example, we have a media campaign on television that's warning people about these drugs. We are sending staff into doctors' offices and talking to them about safer use of these drugs, using them less.

**"In fact, syringe exchange has been maybe the biggest success story in the whole history of the AIDS epidemic. ... We have a crisis that's bigger than that now, and we think that other people will understand why that's important to do (a safe consumption site) as we go forward."**

**DR. THOMAS FARLEY,**  
PHILADELPHIA HEALTH COMMISSIONER

Then, on overdose prevention, we recognize that most people who are using across the city will not be close to a supervised consumption site, regardless of where we put it. It's just too big a city, and the use is too widespread, and so we are distributing tens of thousands of doses of naloxone. Naloxone is available for people to purchase in a pharmacy even if they don't have a prescription.

We will also be running a mass media campaign, starting in the next month or so, that lets your ordinary citizen know how easy it is to save a life with naloxone. We think when we do that, a lot of people will carry that as part of their obligation to help their fellow citizen out there. And a lot of folks will be saving their neighbors' lives. So, with all of that combined, we hope to start to see a reduction in the overdose death rate.

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they're worried about me. And they've been telling me that I'm not alone. And this just fills my heart, because that's exactly what we chant outside every time we're there: "You're not alone."

We have our upcoming tribunal against the detention center on Feb. 4 at noon. This is the third year we've done it, and usually we get at least 200 people. Hopefully we will be announcing a national campaign against ICE. We are going to use testimonies from people detained and formerly detained that expose why we need to shut down these detention centers and why ICE needs to be dismantled.

**A.B.:** A lot of people might say that this is why we need to get Democrats in the White House, but Democrats haven't been perfect allies on immigration and deportation either. So I just wondered if you could talk about the difference between the current administration and when Barack Obama was in office. How different is it?

**M.M.V.:** We warned Obama before he left that you're leaving this huge machine of detention and deportation in the hands of a xenophobic white supremacy group of people. So the only difference is that ICE didn't feel so emboldened to do what they like to do, which is to disrupt people's lives. At least during the Obama administration, we were able to shame the administration. Even the Department of Homeland Security top officials were reachable. At least when we talked to them and said, "Look what your agents in the field are doing," they responded to that. Now ICE, it's a rogue agency. They're not accountable to anybody. And, again, Democrats had the chance in the past to stop the situation from happening, and they didn't. And now we're facing the consequences of the lack of response from the Democrats.

**A.B.:** What kind of action would you like to see from people who have the privilege of citizenship?

**M.M.V.:** We know that these attacks are not exclusively against immigrants or activists in the immigrant justice movement. These are attacks against everybody that doesn't agree with this regime. For those that have the privilege of saying that they are U.S. citizens, and they're not going to be threatened with deportation, I think it's time to step it up. Marching is good, but actually taking real action and following the leadership of those oppressed is better. A lot of people that come our way always come with different ideas. We don't need new ideas. We just need people ready to follow our leadership. We know what we're doing. We follow the leadership of people detained. We don't question them, we just support their decisions.

We're getting into a point in history where, if people want to continue just being comfortable, all they're going to do is end up being targeted sooner or later. Like people say all the time, "Oh they'll come for me today and they're going to come for you tomorrow." I don't want anybody to be a target tomorrow. That's why I'm going to continue the work.

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