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IN THE UNITED STATES COURT OF APPEALS  
FOR THE THIRD CIRCUIT

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UNITED STATES OF AMERICA,  
v.  
SAFEHOUSE, A Pennsylvania Nonprofit Corporation; JOSE BENITEZ,  
as President and Treasurer of Safehouse, *Appellants*.

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SAFEHOUSE, A Pennsylvania Nonprofit Corporation, *Appellant*,  
v.  
UNITED STATES DEPARTMENT OF JUSTICE; ATTORNEY  
GENERAL UNITED STATES OF AMERICA; and UNITED  
STATES ATTORNEY EASTERN DISTRICT OF  
PENNSYLVANIA, *Appellees*.

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On Appeal from the United States District Court  
for the Eastern District of Pennsylvania, No. 1:19-cv-00519  
District Judge Gerald A. McHugh

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BRIEF OF FAITH LEADERS AS *AMICI CURIAE* IN SUPPORT OF  
APPELLANTS AND REVERSAL

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## INTRODUCTION

“The City of Philadelphia is in the midst of an unprecedented public health emergency due to the opioid epidemic and the opioid overdose crisis.” Second Am. Countercl. ¶ 17, Appx187. “On average, Philadelphia [loses] three of its citizens each day to opioid overdoses.” *Id.* ¶ 18, Appx187. A disproportionate number of the victims of these crises lack access to health services. *See id.* ¶¶ 24, 26, Appx188.

Safehouse seeks to fill that inhumane lack of access by providing a range of overdose prevention and harm reduction services in Philadelphia. *Id.* ¶¶ 29–38, Appx189–191. If allowed to open, Safehouse’s facility “could reduce overdose deaths annually by 30% in the site’s immediate vicinity.” *Id.* ¶ 38, Appx191 (footnote omitted).

Safehouse’s mission is driven by its Board of Directors, who are “adherents of religions in the Judeo-Christian tradition.” *Id.* ¶ 124, Appx210. “At the core of [their] faith is the principle that the preservation of human life is paramount and overrides any other considerations.” *Id.* ¶ 126, Appx211.

In the initial phase of this dispute, the Government prevailed on its argument that the Controlled Substance Act (“CSA”) prohibits Safehouse

from opening a facility that provides the life-saving services described above. *See United States v. Safehouse*, 985 F.3d 225 (3d Cir. 2021). But the Third Circuit did not resolve Safehouse’s counterclaim, which alleges that applying the CSA to Safehouse would infringe the sincerely held religious beliefs of certain members of Safehouse’s Board of Directors, thereby violating the Religious Freedom Restoration Act (“RFRA”). *Id.* at 243. The litigation returned to the District Court for resolution of Safehouse’s RFRA counterclaim, as well as a second counterclaim that Safehouse subsequently raised alleging that the Government’s action violates Safehouse’s right to free exercise of religion under the First Amendment. Second Am. Countercl. ¶¶ 168-177, Appx222–224.

Earlier this year, the District Court granted the Government’s motion to dismiss Safehouse’s counterclaims, holding that Safehouse’s proposed activities do not amount to “an exercise of religion” that warrant protection under RFRA or the First Amendment. *United States v. Safehouse*, Court No. 19-519, 2024 WL 1442162, at \*3-4 (E.D. Pa. Apr. 3, 2024). Because Amici Curiae respectfully disagree with the District Court, they file this brief in support of Safehouse.

## STATEMENT OF IDENTIFICATION<sup>1</sup>

Amici are forty-six faith leaders from eighteen states whose sincerely held religious beliefs compel them to adhere to the overriding principle of preserving human life. Amici provide important context to corroborate Safehouse’s counterclaims. The addendum to this brief includes a complete list of Amici, including their names, titles, and affiliations. For the reasons provided below, the Court should bar the Government from infringing the sincerely held religious beliefs of certain members of Safehouse’s Board of Directors and allow Safehouse to provide the life-saving treatment that countless Philadelphians deserve.

## LEGAL FRAMEWORK

### I. RFRA

“Congress enacted RFRA in 1993 in order to provide very broad protection for religious liberty.” *Burwell v. Hobby Lobby Stores, Inc.*, 573 U.S. 682, 693 (2014). Indeed, RFRA “provide[s] greater protection for

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<sup>1</sup> All parties have consented to the filing of this amicus brief. See Fed. R. App. P. 29(a)(2). No counsel for a party authored this brief in whole or in part. No party, or counsel for a party, made a monetary contribution intended to fund the preparation or submission of this brief. No person other than Amici Curiae, their members, or their counsel made such a monetary contribution. See Fed. R. App. P. 29(a)(4)(E).



religious exercise than is available under the First Amendment.” *Holt v. Hobbs*, 574 U.S. 352, 357 (2015) (citing *Hobby Lobby*, 573 U.S. at 694–95).

RFRA straight-forwardly provides that the Government “shall not substantially burden a person’s exercise of religion even if the burden results from a rule of general applicability[.]” 42 U.S.C. § 2000bb-1(a). RFRA protects all sincerely held religious beliefs, regardless of whether those beliefs are central to (or mandated by) a particular religious tradition. *See Tenafly Eruv Ass’n v. Borough of Tenafly*, 309 F.3d 144, 171 (3d Cir. 2002) (rejecting a contention that courts should determine whether the religious practices at issue are “mandatory” or “optional”).

Congress created a limited exception to this command: the “Government may substantially burden a person’s exercise of religion *only if* it demonstrates that application of the burden to the person . . . (1) is in furtherance of a compelling governmental interest; and (2) is the least restrictive means of furthering that compelling governmental interest.” 42 U.S.C. § 2000bb-1(b) (emphasis added).

In assessing whether government action meets this limited exception, a reviewing court must assess that action against a three-part

test. *See Real Alts., Inc. v. Sec’y Dep’t of Health & Hum. Servs.*, 867 F.3d 338, 355 (3d Cir. 2017). First, the court must inquire whether the Government has imposed a substantial burden on an individual’s exercise of religion. *Id.* at 356. The burden imposed by government action rises to a “substantial” level if that action “coerce[s] the individuals to violate their religious beliefs or den[ies] them the rights, benefits, and privileges enjoyed by other citizens.” *Id.* at 357 (internal quotation marks omitted) (quoting *Lyng v. N.W. Indian Cemetery Protective Ass’n*, 485 U.S. 439, 449 (1988)); accord *Washington v. Klem*, 497 F.3d 272, 280 (3d Cir. 2007). In assessing whether a substantial burden exists, the court “should defer to the reasonableness of the [claimant’s] religious beliefs,” though the court may undertake an “objective evaluation of the nature of the claimed burden and the substantiality of that burden on the [claimant’s] religious exercise.” *Geneva Coll. v. Sec’y U.S. Dep’t of Health & Hum. Servs.*, 778 F.3d 422, 436 (3d Cir. 2015), *vacated on other grounds by Zubik v. Burwell*, 578 U.S. 403 (2016). Nevertheless, “[i]t is not within the judicial ken to question the centrality of particular beliefs or practices to a faith, or the validity of particular litigants’ interpretations of those creeds.” *Hernandez v. Comm’r*, 490 U.S. 680, 699

(1989) (citing *Thomas v. Rev. Bd. of Ind. Emp. Sec. Div.*, 450 U.S. 707, 716 (1981)).

If the government action substantially burdens the individual's exercise of religion, the court must next determine under the second step of the applicable test whether the Government has a compelling interest in imposing that burden. *See Real Alts.*, 867 F.3d at 355. "[O]nly those interests of the highest order . . . can overbalance legitimate claims to the free exercise of religion." *Wisconsin v. Yoder*, 406 U.S. 205, 215 (1972). Congress's mere placement of a drug under Schedule I of the CSA "simply does not provide a categorical answer that relieves the Government of the obligation to shoulder its burden under RFRA." *Gonzales v. O Centro Espirita Beneficente Uniao do Vegetal*, 546 U.S. 418, 432 (2006); *see id.* at 432–33 (explaining that the text of the CSA itself "contemplates that exempting certain people from its requirements would be consistent with the public health and safety" (internal citation and quotation marks omitted)).

If the Government overcomes the heavy burden of demonstrating that it has a compelling interest, then under the third step of the applicable test the Government must show that it has adopted the least

restrictive means to further that interest. *See Real Alts.*, 867 F.3d at 355. “The least-restrictive means standard is exceptionally demanding.” *Hobby Lobby*, 537 U.S. at 728 (citation omitted). Under this standard, the Government must “show that it lacks other means of achieving its desired goal without imposing a substantial burden on the exercise of religion by the objecting party.” *Holt*, 574 U.S. at 364 (citation omitted).

Finally, in reviewing suspect government action under the framework discussed above, courts must apply strict scrutiny, which “is the most demanding test known to constitutional law[,]” because “[c]laims that a law substantially burdens someone’s exercise of religion will often be difficult to contest.” *City of Boerne v. Flores*, 521 U.S. 507, 533–34 (1997) (citation omitted), *superseded by statute*, Religious Land Use and Institutionalized Persons Act (RLUIPA) of 2000, Pub. L. No. 106-274, 114 Stat. 803 (codified at 42 U.S.C. §§ 2000cc to 2000cc-5 (2006)), *as recognized in Ramirez v. Collier*, 142 S. Ct. 1264 (2022). The burden to prove that the Government has not done so—or even that it is justified in doing so—rests with the Government. *See id.*; *see also Holt*, 574 U.S. at 362. The strict scrutiny, burden-shifting review under the RFRA places a relatively low bar on claimants asserting statutory violations so

long as they can allege a substantial burden to the exercise of their sincerely held religious beliefs. *See Hobby Lobby*, 573 U.S. at 724–25.

## II. FIRST AMENDMENT'S FREE EXERCISE CLAUSE

The Free Exercise Clause of the First Amendment provides that “Congress shall make no law . . . prohibiting the free exercise” of religion. U.S. Const. amend. I. That Clause protects “the ability of those who hold religious beliefs of all kinds to live out their faiths in daily life through the performance of (or abstention from) physical acts.” *Kennedy v. Bremerton Sch. Dist.*, 142 S. Ct. 2407, 2421 (2022) (internal quotation marks and citation omitted).

Individuals must comply with a “valid and neutral law of general applicability,” even if that law “proscribes . . . conduct that his religion prescribes.” *Oregon v. Smith*, 494 U.S. 872, 879 (1990) (internal quotation marks and citations omitted). But an individual may raise a valid free exercise claim under the First Amendment by showing that the law lacks general application or neutrality and burdens her sincere religious beliefs. *See Kennedy*, 597 U.S. at 525. For example, “[a] law is not generally applicable if it invites the [G]overnment to consider the particular reasons for a person’s conduct by creating a mechanism for

individualized exemptions.” *Fulton v. Philadelphia*, 593 U.S. 522, 523 (2021) (citation omitted). When the Government creates exemptions for a law for those engaged in non-religious activity, it “may not refuse to extend that system to cases of religious hardship without a compelling reason.” *Id.* (citation omitted).

If the individual demonstrates that the law lacks general application, the Government must satisfy “strict scrutiny by demonstrating that [the law] was justified by a compelling [] interest and was narrowly tailored in pursuit of that interest.” *Kennedy*, 597 U.S. at 525 (internal quotation marks, citation, and footnote omitted). “Put another way, so long as the [G]overnment can achieve its interests in a manner that does not burden religion, it must do so.” *Fulton*, 593 U.S. at 541.

## ARGUMENT

### I. BOARD MEMBERS LEGITIMATELY CLAIM A SUBSTANTIAL BURDEN ON THEIR CLOSELY HELD RELIGIOUS BELIEFS

The Government “does not challenge the sincerity of Safehouse’s board members’ asserted religious beliefs in the value of human life.” Gov’t’s Mem. in Supp. of Mot. to Dismiss 21, Dist. Ct. Dkt. 211. In view of that concession, the Court must determine whether the Government

meets the limited exception under the RFRA and whether the Government's enforcement of the CSA here passes muster under the First Amendment. *See Kennedy*, 597 U.S. at 525; *Real Alts.*, 867 F.3d at 355.

To provide the Court with important context as it undertakes these inquiries, Amici Curiae confirm below that the Government's efforts to apply the CSA to Safehouse would substantially impair the ability of its Jewish and Christian Board Members to practice at least three key tenets that they sincerely hold: (1) saving lives generally; (2) providing life-saving treatment; and (3) caring for individuals who engage in illicit activities. We discuss each of these principles in turn and describe how these religious beliefs have borne out over history.

#### **A. Saving Lives Generally**

Judeo-Christian traditions unite around a core message—humans are created in God's image (i.e., *Imago Dei*). *See United States v. Colon-de-Jesus*, No. 10-251, 2012 WL 2710877, at \*6 (D.P.R. July 6, 2012) (“It is a basic tenet of Judeo-Christian religions that human beings were created by God in its image and likeness.”). This sentiment is illustrated

in Genesis, the very first book of the Hebrew Bible, otherwise known as the Old Testament in Christianity:

Then God said, “Let Us make man in Our image, according to Our likeness; let them have dominion over the fish of the sea, over the birds of the air, and over the cattle, over all the earth and over every creeping thing that creeps on the earth.” So God created man in His own image; in the image of God He created him; male and female He created them.

*Genesis* 1:26–27. This core principle provides human beings with a unique status in creation—if all human beings are created in God’s image, then all are worthy of love, understanding, and advocacy.

Christianity draws from Judaism in affirming the inherent dignity of every human based on the *Imago Dei*.<sup>2</sup> In the Bible, Jesus has taught Amici to “Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.” *Matthew* 22:37–40.

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<sup>2</sup> See, e.g., *Franciscan All., Inc. v. Burwell*, 227 F. Supp. 3d 660, 674 (N.D. Tex. 2016) (explaining that a Roman Catholic faith-based hospital system founded by a Roman Catholic order “believes that part of the image of God is an organic part of every man and women, and that woman and men reflect God’s image in unique, and uniquely dignified, ways”).



The belief that human beings are made in the image of God is the basis for loving your neighbor as yourself and treating human life as sacred. The Old and New Testaments contain many examples of these principles:

- The Gospel of John teaches Christians that, “[i]f someone who has worldly means sees a brother in need and refuses him compassion, how can the love of God remain in him? Children, let us love not in word or speech but in deed and truth.” *John* 3:16–18.
- *Matthew* 25:34–40 directs Amici to take in and care for the sick: Jesus “will say to those on his right, ‘Come, you who are blessed by my Father. Inherit the kingdom prepared for you from the foundation of the world. For I was . . . ill and you cared for me . . . . Amen, I say to you, whatever you did for one of the least brothers of mine, you did for me.’”
- Paul the Apostle instructed Amici to “[b]ear one another’s burdens, and so fulfill the law of Christ.” *Galatians* 6:2.
- The Book of Leviticus contains the clear commandment that Amici “shall not go up and down as a talebearer among [our] people; neither shall [we] stand idly by the blood of [our] neighbor: I am the Lord.” *Leviticus* 19:16.
- In Deuteronomy, Moses conveyed God’s commandment to us: “You shall open wide your hand to your brother, to the needy and to the poor, in your land.” *Deuteronomy* 15:11.
- And the Talmud teaches Amici that “anyone who destroys a life is considered by Scripture to have destroyed an entire world; and anyone who saves a life

is as if he saved an entire world.” *Mishnah Sanhedrin* 4:5.

Those communities following the Judeo-Christian tradition have historically affirmed the sacredness of human life through action. In the Greco-Roman world of the First Century, it was culturally acceptable to leave infants—particularly females who were culturally devalued—to die of exposure. The same was true for malformed infant males. First Century Christians defied cultural norms and rescued the discarded infants because of their convictions that all humans are made in the image of God and that God created even the discarded child for a purpose. See Rodney Stark, *THE RISE OF CHRISTIANITY: HOW THE OBSCURE, MARGINAL JESUS MOVEMENT BECAME THE DOMINANT RELIGIOUS FORCE IN THE WESTERN WORLD IN A FEW CENTURIES* 124–25, 161 (Harper 1997).

This is the moral logic of *Imago Dei* in action—if humans love God, they must love, protect, and aid other humans whom God has created. See *John* 13:35 (“By this everyone will know that you are my disciples, if you love on another.”). Helping humans through difficulty and saving lives when able is the natural product of Judeo-Christian beliefs. Cf *Jude* 1:23; *Proverbs* 24:11; *Jeremiah* 22:3; *Psalms* 82:4. Indeed, Jesus left

humanity with clear instructions: “My command is this: Love each other as I have loved you.” *John* 15:12.

## **B. Providing Life-Saving Treatment**

The Judeo-Christian calling to save lives has significant implications for providing treatment to those who are ill or suffering. The Bible contains no shortage of passages depicting Jesus providing life-saving treatment:

- “When Jesus came down from the mountainside, large crowds followed him. A man with leprosy came and knelt before him and said, ‘Lord, if you are willing, you can make me clean.’ Jesus reached out his hand and touched the man. ‘I am willing,’ he said. ‘Be clean!’ Immediately he was cleansed of his leprosy.” *Matthew* 8:1–3.
- “When Jesus came into Peter’s house, he saw Peter’s mother-in-law lying in bed with a fever. He touched her hand and the fever left her, and she got up and began to wait on him. When evening came, many who were demon-possessed were brought to him, and he drove out the spirits with a word and healed all the sick.” *Matthew* 8:14–16.
- “[Jesus] withdrew by boat privately to a solitary place. Hearing of this, the crowds followed him on foot from the towns. When Jesus landed and saw a large crowd, he had compassion on them and healed their sick.” *Matthew* 14:13–14.

Jewish scripture similarly commands its followers to provide life-saving treatment to the ill. See Rabbi Dov Linzer, *Treatment of Terminally Ill*

*Patients According to Jewish Law*, 15 AM. MED. ASS'N J. OF ETHICS 1081, 1081 (2013) (“Jewish law recognizes a Biblically derived duty to heal the sick and to preserve life. When a life is at risk, even when the risk is small, this duty is so great that it overrides religious prohibitions.”).

### **C. Caring for Individuals Who Engage in Activities Deemed Illicit**

The Judeo-Christian tradition has a long history of supporting and treating individuals who are sick, even if they engage in activities outside the norm. For example, in the Gospel of John, Jesus refused to condemn to death a woman who had sinned, cautioning his followers “[l]et any one of you who is without sin be the first to cast a stone.” *John* 8:7–11.

Individuals struggling with addiction are no exception to this calling. Addiction has historically been stigmatized as a personal choice and moral failing; this stigmatization has led to a public health failure depriving drug and alcohol addicts of advocacy and care. See TENEILLE R. BROWN, ADDICTION AS DISEASE 22 (2019) (“The stigma from incarceration itself can lead to a ‘why try?’ effect, where people anticipate stigma and thus see no point in trying to integrate back into their communities.” (footnote omitted)). Indeed, it is well-established that addiction is a disease that requires compassion and treatment:

[T]here is a large and growing body of evidence about the neurobiologic basis for addiction behaviors, the role of genetic, environmental and epidemiologic factors, and the effectiveness of biologically based interventions for addiction (including harm reduction strategies). This evidence demonstrates that substance use is not a simple matter of choice . . . . Many genetic polymorphisms have been identified that enhance addictive responses by altering receptor sensitivity or drug metabolism. Over time, continued substance use causes permanent anatomic and chemical changes in the brain. Addiction is a chronic relapsing disease that we must treat as we do other such diseases. We do not expect the hearts of patients with heart failure to behave normally—we understand that their function has been altered by disease. Why, then, do we expect the brains of substances abusers to behave normally, since we know that their function has also been altered by disease? We understand how genetic polymorphisms can make cancers resistant to treatment; we are quick to show compassion to patients with such cancers. Why, then, can we not show the same understanding and compassion toward people whose genetic polymorphisms make them resistant to stopping smoking, abusing alcohol or injecting narcotics?

Matthew B. Stanbrook, *Addiction is a disease: We must change our attitudes toward addicts*, 184(2) CAN. MED. ASS'N J. 155, 155 (2012). It is equally well-established that addiction—especially opioid addiction—significantly increases an individual's risk of mortality.<sup>3</sup>

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<sup>3</sup> See NAT'L INST. ON DRUG ABUSE, *Drug Overdose Death Rates* (June 30, 2023), <https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates> (showing that opioid-related deaths rose from 2019–2021, with 70,601 overdose deaths reported in 2021).

Addicts are deserving of advocacy, and Judeo-Christian beliefs call on humanity to provide them with love, treatment, and care, even when social customs (or even the law) regard them as outsiders. To that end, Reverend Jack Abel (a signatory to this brief) employs a simple phrase in his chaplaincy duties to advocate for harms reduction and the destigmatization of addiction: “God loves people who use drugs.”

#### **D. How These Religious Beliefs Have Borne Out Over History**

The Judeo-Christian beliefs that compel Amici to act consistent with the tenets described above are not unique to the context of the modern-day opioid epidemic. Faith leaders throughout history have been compelled by their religious beliefs to save lives, provide life-saving treatment, and care for individuals who engage in illicit activity and are otherwise marginalized from mainstream society.

The advent of hospitals that provide life-saving treatment can be traced to the Judeo-Christian tradition. See Louise Cilliers & Francois Pieter Retief, *The evolution of the hospital from antiquity to the end of the middle ages*, CURATIONIS (Nov. 2002) (“Christians’ typical attitude towards the sick was based on Christ’s parable of the Good Samaritan – mercy and compassion for anyone in need.”). The foundation of the first

hospital in A.D. 379 is widely credited to Basil of Caesarea, a Christian monk and later bishop whose faith-based service to the community centered on providing care to the sickest and “abject and hated class.”<sup>4</sup>

In the context of the U.S. healthcare system, the hospital system was “initiated in the late eighteenth and early nineteenth centuries as a welfare institution framed motivated by the responsibilities of Christian stewardship.” Charles E. Rosenberg, *THE CARE OF STRANGERS: THE RISE OF AMERICA’S HOSPITAL SYSTEM* 8 (1987). Faith-based health organizations continue to make significant contributions to public health in hospitals in the United States and around the world today. See Cristiane Schumann et al., *The contribution of faith-based health organisations to public health*, 8 *J. OF INT’L PSYCHIATRY* 3 (2011).

These same Judeo-Christian principles have animated responses from faith leaders and adherents during epidemics and pandemics throughout the centuries. During periods of widespread illness and

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<sup>4</sup> Timothy S. Miller, *Basil’s House of Healing*, *CHRISTIAN HIST. INST.* (2011), <https://christianhistoryinstitute.org/magazine/article/basils-house-of-healing> (noting that Basil’s medical philosophy included care of individuals with leprosy, who were considered amongst the most marginalized in society).

suffering, the general tenets of faith have mandated providing life-saving treatment—even at the expense of personal safety:

We die at our posts. Christian doctors cannot abandon their hospitals, Christian governors cannot flee their districts, Christian pastors cannot abandon their congregations. The plague does not dissolve our duties: It turns them to crosses, on which we must be prepared to die.<sup>5</sup>

This commitment to saving lives is guided by the sacredness of human life and the inherent dignity of every human being, irrespective of health status.

These tenets have held even among the most marginalized communities and individuals in need of treatment. For example, faith leaders and faith-based organizations were instrumental in responding to the HIV epidemic and in providing treatment to individuals living with HIV. The Government itself has recognized the instrumental role that

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<sup>5</sup> See Lyman Stone, *Christianity Has Been Handling Epidemics for 2000 Years*, FOREIGN POL'Y (Mar. 13, 2020), <https://foreignpolicy.com/2020/03/13/christianity-epidemics-2000-years-should-i-still-go-to-church-coronavirus/> (reviewing the role of Christian adherents in epidemic response throughout the centuries).



faith leaders played by providing funding to these organizations to administer HIV control and prevention programs around the world.<sup>6</sup>

## CONCLUSION

We provide this brief to the Court to confirm, in concrete terms, that the application of the CSA against Safehouse conflicts with sincere religious beliefs held by Jews and Christians. The Government's efforts, if successful, will substantially impair the ability of Jewish and Christian Safehouse Board Members to practice their sincere religious beliefs.

For the foregoing reasons, the Court should reverse the District Court's judgment.

Respectfully submitted,

s/ Devin S. Sikes

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<sup>6</sup> AIDSVu, *HIV and the Faith Community*, <https://aidsvu.org/hiv-and-the-faith-community/> (discussing history of funding of HIV control and prevention services by the U.S. Centers for Disease Control and Prevention).

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September 11, 2024

**ADDENDUM – LIST OF AMICI CURIAE**

<p>Reverend Jack Abel Caron Treatment Centers Wernersville, PA</p>	<p>Betsy Bentrup Armstrong St. Andrew Lutheran Church Surry, ME</p>
<p>Reverend Edward Maurice Bailey Bethel African Methodist Episcopal Church Lancaster, PA</p>	<p>Reverend Kearstin Bailey First Congregational Church United Church of Christ North Ridgeville, OH</p>
<p>Reverend Tara Barber United Church of Christ Seattle, WA</p>	<p>Minister Blyth Barnow HEAL Ohio Newark, OH</p>
<p>Reverend Burton Barr West Side Baptist Church St. Louis, MO</p>	<p>Reverend &amp; Doctor Anna Blaedel Enfleshed Iowa City, IA</p>
<p>Chaplain Fred Brason II Project Lazarus Moravian Falls, NC</p>	<p>Minister Hill Brown United Church of Christ Harm Reduction &amp; Overdose Prevention Ministries Faith in Harm Reduction National Green Mountain, NC</p>
<p>Reverend Kathy Randall Bryant Summerfield Peace United Methodist Church Summerfield, NC</p>	<p>Reverend Micah Bucey Judson Memorial Church New York, NY</p>
<p>Minister Jes Cochran The Never Alone Project Faith in Harm Reduction Indiana Indianapolis, IN</p>	<p>Reverend Lin Crowe The Navigators Manheim, PA</p>

<p>Pastoral Counselor Jessica Davis Evangelical Lutheran Church Norristown, PA</p>	<p>Reverend Jeffrey Dodson First Congregational Church of Ripon United Church of Christ Ripon, WI</p>
<p>Doctor Sharon Fennema United Church of Christ Join the Movement Toward Racial Justice Initiative Oakland, CA</p>	<p>Rabbi Eli Freedman Congregation Rodeph Shalom Philadelphia, PA</p>
<p>Reverend Shannon Garrett-Doege Smithfield United Church of Christ Pittsburgh, PA</p>	<p>Reverend &amp; Doctor Jodi Hayashida Moral Movement Maine Maine People's Alliance Auburn, ME</p>
<p>Minister Ashley Hogue Purpose of Life Ministries Indianapolis, IN</p>	<p>Reverend Sarah Howell Green Street United Methodist Church Winston-Salem, NC</p>
<p>Reverend Sonja Ingebritsen Glenside United Church of Christ Glenside, PA</p>	<p>Reverend Lisa Jester Emmaus Road Lutheran Church Levittown, PA</p>
<p>Faith Leader Terrell Jones Judson Memorial Church New York, NY</p>	<p>M. Kaiser Enfleshed Iowa City, IA</p>
<p>Reverend Chesley Kennedy Heidelberg United Church of Christ Thomasville, NC</p>	<p>Reverend Charles King Housing Works, Inc. Brooklyn, NY</p>

<p>Chaplain Jacquelin Lawson  Hazelden Betty Ford Foundation  Plymouth, MN</p>	<p>Reverend Pamela Lee-Miller  Bluegrass United Church of  Christ  Lexington, KY</p>
<p>Reverend &amp; Doctor Cheryl  Lindsay  United Church of Christ  Cleveland, OH</p>	<p>Reverend Melani Longoni  First Congregational United  Church of Christ  Phoenix, AZ</p>
<p>Reverend Michelle Mathis  Olive Branch Ministry  Hickory, NC</p>	<p>Minister Peggy Matteson  Wellness Ministries  Portsmouth, RI</p>
<p>Reverend &amp; Doctor Kerr Mesner  Metropolitan Community  Churches  Trumansburg, NY</p>	<p>Reverend Linda Noonan  United Church of Christ  Haverford, PA</p>
<p>Director of Community Outreach  Anits Parker  St. Luke A.M.E. Church  New York, NY</p>	<p>Rabbi Max Reynolds  Sunnyside, NY</p>
<p>Reverend &amp; Doctor J. Michael  Robertson  Elk Creek Baptist Church  Mineral, VA</p>	<p>Rabbi John L. Rosove  Temple Israel of Hollywood  Los Angeles, CA</p>
<p>Reverend &amp; Doctor Donna  Schaper  Shelburne Falls Trinity United  Church  West Haven, CT</p>	<p>Reverend Alexander E. Sharp  Clergy for a New Drug Policy  Chicago, IL</p>

Reverend & Doctor Edward Treat Center of Addiction & Faith Woodbury, MN	Reverend Corey Turnpenny Church in the Wild United Methodist Church Windsor, NY
Reverend Davi Weasley First Congregational Church of Bellingham Bellingham, WA	Doctor Beth Wiese Helping People Help People LLC Los Angeles, CA

## CERTIFICATE OF BAR MEMBERSHIP

Pursuant to Local Appellate Rule 28.3(d), I hereby certify that I am a member in good standing of the Bar of the United States Court of Appeals for the Third Circuit.

s/ Devin S. Sikes

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Devin S. Sikes

September 11, 2024

## CERTIFICATE OF COMPLIANCE

The foregoing brief is in 14-point New Century Schoolbook proportional font and contains 4,081 words, and thus complies with the type-volume limitation set forth in Rule 32(a)(7)(B) of the Federal Rules of Appellate Procedure.

I further certify that the text of this electronic brief is identical to the text of paper copies of this brief that will be filed with the Court, and that a virus detection program (Symantec Antivirus, Version 8.1.13.0) has been run on this file and no virus was detected.

s/ Devin S. Sikes  
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Devin S. Sikes

September 11, 2024



## CERTIFICATE OF SERVICE

I hereby certify that, on September 11, 2024, I served the foregoing brief upon all counsel of record by filing a copy of the document with the Clerk through the Court's electronic docketing system.

s/ Devin S. Sikes

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Devin S. Sikes