

## County of San Diego Comprehensive Harm Reduction Strategy

### INTRODUCTION/BACKGROUND

Despite longstanding commitments and efforts by leaders from across sectors within San Diego County, harms related to substance use remain at an all-time high. To make a significant impact on this trend, a broader approach focusing specifically on reducing harms needs to be taken. Overdose deaths in the region jumped from 616 in 2019 to 941 deaths in 2020, and the higher monthly trend continues in the early part of 2021, on pace for nearly 1,200 overdose deaths for the year if the current trend continues. Over thirty years of evidence around the world has shown that harm reduction approaches reduce the spread of the Hepatitis C virus (HCV) and the human immunodeficiency virus (HIV), lead to greater engagement with treatment, and reduce overdose deaths, among other positive outcomes, with no increase in usage rate of substances.

In the effort to address the needs of people who use drugs (PWUD)—a high need population—a Comprehensive Harm Reduction Strategy is being put forth in this document, pursuant to Board of Supervisors' direction on January 26, 2021 (13). The Harm Reduction Strategy will guide the County of San Diego in addressing the most pressing issues at the intersection of behavioral and public health to initiate and effect data-driven decision-making and evidence-based solutions to improve outcomes for both the PWUD population and the broader San Diego community.

### MISSION

To protect San Diegans from the individual and community harms of drug use by enacting a harm reduction approach towards substance use which prioritizes human dignity, saving lives, providing appropriate levels of care for people who use drugs (PWUD), and best-practices in addressing substance use, abuse, and addiction.

### VISION

Envisioning a world where harms related to substance use are seen as concerns of overall health and well-being, where stigma does not impede access to services, and where we realize a community free of substance use-related harms.

### GUIDING PRINCIPLES

Guiding principles of the harm reduction approach in San Diego County are as follows:

#### Human Rights and Dignity

Substance Use and Harm Reduction approaches in San Diego respect all human beings, meeting them “where they’re at” without judgment and aim to reduce the stigma of people who use drugs (PWUD).

#### Diversity and Social Inclusivity

The County of San Diego strives to respect all PWUD, as well as their families and communities, regardless of gender, race, age, sexual orientation, ethnicity, culture, spirituality, health or socioeconomic status.

### Health and Well-Being Promotion

The County of San Diego aligns with the *Live Well San Diego* vision of healthy, safe, and thriving communities. Harm reduction efforts are always oriented toward improving the health, safety, and capacity to thrive for all PWUD.

### Partnerships & Collaborations

Harm reduction approaches will be informed by and carried out through partnerships and collaborations across all sectors in the community. Partnerships will be built upon the foundation of shared goals and trust in the interest of serving our community.

### Participation (“Nothing about us without us”)

The County of San Diego recognizes the right of PWUD to be involved in the efforts to ameliorate the harms of drug use in their communities.

### Accountability and Improvement

The County of San Diego is committed to continuous improvement in the quality of its harm reduction efforts and intends to use data, population feedback, and community input to continually assess current state and future state needs.

## **STRATEGIC APPROACH AND PRIORITIES**

Leveraging the expertise of behavioral health professionals, public health professionals, clinical experts, housing experts, and other subject matter experts, the Harm Reduction Strategy will inform collaborative efforts, evidence-based programming, and data-informed approaches to realize a physical health and behavioral health landscape which addresses the unique needs of specific populations in San Diego County. The strategy will guide decision-making for population health interventions initiated, designed, and implemented by the County of San Diego.

- Prioritize parity, healthcare integration, and a *harm reduction in all policies and programs* approach across all key areas of work.
- Use an approach that employs equity in the governance of mental health, substance use disorder, and physical health services.
- Utilize a data-driven approach and best practices of harm reduction.
- Work with existing initiatives - such as Getting to Zero, Ending Hep C in San Diego County, Ending the HIV Epidemic, TB Elimination, and others - as touchpoints to further the goals of eliminating disease and reducing harms to our focus population.

## **TACTICAL FOCUS AREAS**

The foundation of a successful substance use and harm reduction ecosystem in San Diego County will be worked on and operationalized within four tactical areas. These tactical focus areas are as follows:

### I. Cross-Sectoral Convening

The mission of greater health equity and improved health outcomes for the PWUD population in San Diego County requires integrated, cross-sector approaches. Convening and collaboration between County of San Diego business units, as well as health networks, community-based organizations, physical health entities, community voices, and other stakeholders is necessary to address the multifactorial challenges facing the PWUD population.

II. Housing

Substance use and homelessness often overlap, with homelessness exacerbating the harmful effects of drug use, and vice versa. Being on the street and pushed to the margins increases the likelihood of risky behaviors and decreases the effectiveness of interventions aimed at reducing harms of substance use. Housing, therefore, must be a key pillar of a comprehensive harm reduction strategy.

III. Workforce

To carry out the mission and realize the vision of the Harm Reduction Strategy, a workforce that is trained and skilled in the philosophy, approaches, and interventions of harm reduction will be a necessity. Creating and developing a harm reduction-savvy workforce will be prioritized in our strategy.

IV. Healthcare Integration and Access

The health and well-being of individuals do not exist in silos. Integration of care and access to the right services for this population is paramount. The effects of substance use impact the mental health and physical health of an individual, and the physical health and mental health of an individual impact the course and outcomes of their substance use. Integration across behavioral health, physical health, and community-based services is a key component of addressing the well-being of PWUD and managing care of individuals in a lower-acuity, chronic care context rather than expensive episodic, acute care contexts. Treating the whole person and ensuring access to best practices in harm reduction guide this focus area.

**TACTICAL FOCUS AREAS**

**(1) Cross-Sectoral Convening**

**(2) Housing**

**(3) Workforce**

**(4) Healthcare Integration and Access**

**Immediate-term Tactics**

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| <ul style="list-style-type: none"> <li>• Public Health leadership and representation in governance of key regional convenings.</li> <li>• Public Health Services and Behavioral Health Services epidemiologists to be deployed to provide technical assistance to key regional convenings to support development of a harm reduction approach, (i.e., development of data reports and dashboards).</li> </ul> | <ul style="list-style-type: none"> <li>• Collaborate with housing technical expert(s) for review and comparison of needs and/or investments, including recommendations for leveraging national best practices and funding strategies that integrate harm reduction principles in housing settings.</li> </ul> | <ul style="list-style-type: none"> <li>• Ensure that harm reduction is a core component of peer service delivery.</li> </ul> | <ul style="list-style-type: none"> <li>• Issue Local Standing Order and implement broad local Naloxone distribution sprint to address COVID-19-related patterns of substance use.</li> <li>• Syringe Service Action Plan Development</li> <li>• Pursue care management coordination with Federally Qualified Health Centers (FQHCs) for mental health (mild/moderate) and physical health.</li> <li>• Conduct academic detailing to address barriers and expand access to Buprenorphine in collaboration with FQHCs and other partners.</li> <li>• Collaborate with partners to pursue fentanyl-specific testing for use in Emergency Departments and other healthcare settings.</li> </ul> |
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(1) Cross-Sectoral Convening	(2) Housing	(3) Workforce	(4) Healthcare Integration and Access
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<b>Intermediate-term Tactics</b>			
<ul style="list-style-type: none"> <li>Implement joint annual harm reduction strategy-setting between key regional convenings.</li> <li>Leverage new data reports and dashboards to inform upstream prevention efforts as part of cross-sectoral convenings.</li> </ul>	<ul style="list-style-type: none"> <li>Implement strategies identified via the above review to integrate harm reduction principles in housing settings, including strategies to address people with substance use disorder who are not considered disabled.</li> <li>Develop revised metrics and associated targets related to housing that incorporates a harm reduction approach.</li> </ul>	<ul style="list-style-type: none"> <li>Develop a peer policy which includes an emphasis on harm reduction.</li> </ul>	<ul style="list-style-type: none"> <li>Identify solutions to address parity in the provision/siting of substance use disorder versus mental health services.</li> <li>Identify policy opportunities to integrate FQHC and substance use disorder care delivery, including enhanced integration/coordination around Drug Medi-Cal Organized Delivery System (DMC-ODS), and collaboration around CalAIM.</li> <li>Promote buprenorphine access across all sectors; establish centralized quantitative metric for services.</li> </ul>

(1) Cross-Sectoral Convening	(2) Housing	(3) Workforce	(4) Healthcare Integration and Access
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<b>Long-term Tactics</b>			
<ul style="list-style-type: none"> <li>Develop an integrated, unified, cross-sectoral regional governance structure for harm reduction.</li> </ul>	<ul style="list-style-type: none"> <li>Pursue policy solutions to establish parity in funding for substance use housing resources.</li> </ul>	<ul style="list-style-type: none"> <li>Development of a harm reduction training program for workforce working within the continuum of care for PWUD.</li> </ul>	<ul style="list-style-type: none"> <li>Pursue policy solutions to integrate mental health (mild/moderate) with substance use disorder programs.</li> </ul>