

DRAFT STATEMENT OF PURPOSE

To protect San Diegans from the 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.

DRAFT 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 towards PWUD.

Diversity and Social Inclusivity

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 & Well-Being Promotion

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

Partnerships & Collaborations

Substance Use and 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.

DRAFT STRATEGIC APPROACH & PRIORITIES

Leveraging the expertise of behavioral health and public health professionals, clinical experts, housing experts, and other subject matter experts, the Comprehensive 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

DRAFT 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, representing the key focus areas of our efforts. 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 the county requires integrated, cross-sector approaches. Convening and collaboration between County 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 any serious harm reduction strategy.

III. Workforce

To carry out the mission and realize the vision of the County of San Diego's Substance Use and 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 & 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. Healthcare Integration also includes ensuring that harm reduction services are seamless with existing substance use disorder treatment services. Treating the whole person and ensuring access to best practices in harm reduction guide this pillar.

DRAFT TACTICAL FOCUS AREAS

(1) Cross-Sectoral Convening

(2) Housing

(3) Workforce

(4) Healthcare Integration and Access

Draft Immediate-term Tactics

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| <ul style="list-style-type: none"> • Public Health leadership, support, and guidance in convenings • Recommendations and review of data reports by Public Health and Behavioral Health Epidemiologists | <ul style="list-style-type: none"> • Collaborate with the housing subject matter expert(s) for review and comparison of needs and/or investments | <ul style="list-style-type: none"> • Ensure that harm reduction is a core component of peer service delivery • Identify workforce development recommendations as part of County-level efforts | <ul style="list-style-type: none"> • Local naloxone distribution efforts <ul style="list-style-type: none"> ○ Local standing order ○ County distribution ○ Contractor distribution • Syringe Service Action Plan development • Care management coordination with FQHCs for mental health (mild/moderate) and physical health • Strategy for reducing barriers and expanding access to buprenorphine • Fentanyl-specific testing |
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(1) Cross-Sectoral Convening

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(3) Workforce

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Draft Intermediate-term Tactics

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| <ul style="list-style-type: none"> • Ensure that BHS strategic planning efforts include harm reduction • Collaboration with law enforcement for opportunities to incorporate harm reduction approaches | <ul style="list-style-type: none"> • Develop housing recommendations • Develop revised metrics and associated targets related to housing | <ul style="list-style-type: none"> • Development of a peer policy for harm reduction services | <ul style="list-style-type: none"> • Identify solutions to address parity in the provision/siting of substance use disorder versus mental health services • 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), particularly around buprenorphine service delivery • Promote buprenorphine access across all sectors; establish centralized quantitative metric for services |
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(1) Cross-Sectoral Convening

(2) Housing

(3) Workforce

(4) Healthcare Integration and Access

Draft Long-term Tactics

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| <ul style="list-style-type: none"> • TBD | <ul style="list-style-type: none"> • TBD | <ul style="list-style-type: none"> • Development of a harm reduction training program for workforce working within the continuum of care for PWUD | <ul style="list-style-type: none"> • Identify policy solutions to address funding and privacy concerns to integrate mental health (mild/moderate) with substance use disorder programs |
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