

# MULTNOMAH COUNTY

## FY 2025 Budget Work Session Follow Up

### Public Health

May 21, 2024



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#### Commissioner Beason (District 2)

1. How does the Harm Reduction team connect to day services?

#### Response

While some of the Harm Reduction Program's outreach has taken place in the evenings, they also work closely with partner organizations and systems that operate during the day. The outreach teams connect clients to local services that they may not otherwise be aware of or trust. During the 90 Day Emergency, in addition to distributing thousands of doses of injectable and nasal naloxone, test strips, and syringes, the street outreach team in downtown Portland had approximately 1,100 encounters and made appropriate referrals to wound/abscess care, behavioral health services, housing, and shelter referrals.

Beyond connecting clients to day service providers, the Harm Reduction Program has built partnerships with many of these providers. The program hosts weekly calls with regional partners and quarterly calls with Community Based Organization (CBO) partners. External partners include: Blanchet House, William Temple House, Night Strike, Everly Project, Rahab's Sisters, other community spaces, and our counterparts in other jurisdictions.

The Behavioral Health PATH team is on site at the Harm Reduction Clinic weekly, and makes referrals to the Behavioral Health Resource Center (BHRC). Many of our clients utilize the libraries and we are working closely with the Central Library to provide technical assistance for harm reduction services.

### **Commissioner Brim-Edwards (District 3)**

2. What is the City investment for Gas Leaf Blower education and enforcement?

#### **Response**

The City of Portland has invested \$1.77 million in this project:

- The PCEF City Climate Projects allocation of \$1.6 million covers: backpack blower replacements, upgrades to maintenance facilities, and a Project Manager position at Portland Parks and Recreation to manage the transition for a total 5-year allocation through the City Climate Projects.
- An additional, for the fiscal year, \$150,000 to cover the project management position in the Bureau of Planning and Sustainability that will develop programmatic rules, intergovernmental agreements, and other relevant programmatic details.
- The Bureau of Planning and Sustainability also estimates an additional \$19,272 for the fiscal year for coordination with the Noise Office and Hearings Office as needed.

## **Commissioner Brim-Edwards (District 3)**

3. Please provide more detail on harm reduction outcomes, strategies, and why these are the focus.

### **Response**

The Harm Reduction Street Outreach Team uses evidence-based strategies, such as prevention, risk reduction, and health promotion, to support the health and wellbeing of individuals who use substances. The following are some specific outcomes and accompanying strategies for achieving those outcomes:

An important desired outcome for harm reduction programs is to prevent the spread of communicable disease and to reduce potential harms associated with substance use and misuse, such as incidence of lethal overdose. We work towards this by conducting effective outreach (foot-based, van-based, and hybrid models) to best reach community members where they are and providing Syringe Services Programs (SSPs). This helps ensure that people have access to safe supplies and HIV/STI testing.

Another outcome for the program is to help connect clients with resources, including treatment, which is again achieved through effective outreach and building trust with clients through non-judgemental and non-coercive services. By providing culturally specific services in this community, we can start relationships that lead to seeking treatment and provide connections to treatment services. Harm reduction staff are highly knowledgeable and able to dispel myths about access to treatment and provide space for people to feel comfortable asking questions. Studies have shown that people who interact with Syringe Services Programs are approximately five times more likely to enter treatment, likely in part

due to their ability to provide trusting relationships ([Krawczyk, et. al. 2022](#)).

The Harm Reduction Clinic works to reduce additional negative health impacts of drug use by providing wound and abscess care services. Many people who experience soft tissue damage associated with injection may delay their care at traditional settings like urgent care or EDs due to past trauma, perceived stigma, or payment concerns. Our clients trust our clinic to provide wound care before the situation becomes more severe, which may reduce the risk of complications including sepsis, amputations, or death.

The program additionally strives to connect clients to outreach workers with expertise in housing navigation. Using a housing-first approach ensures clients have access to basic needs to facilitate their health journey. The outreach team works with internal and external partners to identify available long-term housing options for clients including supportive housing, housing-based treatment programs, recovery houses, and short-term housing options as needed. While this has not been the only focus of the pilot program, the newly funded street outreach team will be able to deepen these relationships and provide more housing-related referrals.

Our diverse Harm Reduction team works tirelessly to establish trusting relationships with people who often experience barriers to accessing services. By providing trauma-informed and person-centered care, the Harm Reduction program effectively builds trusting relationships with community members so that they can access safe supplies, receive needed services and referrals, and know how to get treatment when ready.

These strategies are informed by decades of evidence and research and have shown significant benefits both to individuals and the general public ([National Institute of Health, n.d.](#)). Further, people who use drugs represent every race, ethnicity, sexual orientation, gender identity, and culture that we enjoy in Multnomah County. Apart from specific behaviors, their shared identity is informed by a collection of traumatic and stigmatizing experiences. The Harm Reduction program understands that basic health priorities, such as communicable disease risk and skin hygiene, are not limited by drug use. Our clients care about their health, and we aim to provide them the opportunity to pursue their health goals with agency.

#### **Commissioner Stegmann (District 4)**

4. What is the threshold for communicable diseases for the SHS program, i.e., the flu?

#### **Response**

Communicable Disease Service's SHS program will provide temporary housing to people experiencing homelessness who test positive for specific communicable diseases.

Eligibility criteria for this program include:

- They have tested positive for a [reportable disease](#) in Oregon that can be spread person to person
- They are medically stable
- They can live independently and do not require support for activities of daily living (ADLs)
- They are experiencing homelessness or unstable housing, **or**

- They live in a congregate setting with vulnerable people (immunocompromised, etc) and have no other safe place to isolate and recover.

This program will not include influenza, as it is not an individually reportable disease. If an outbreak of a non-reportable infectious disease was identified in a vulnerable population and people did not have safe places to isolate and recover, they would be considered for this program with program manager approval.