



SAN FRANCISCO METHAMPHETAMINE TASK FORCE

OVERVIEW & UPDATES

HEALTH COMMISSION ■ FINANCE & PLANNING COMMITTEE

FEBRUARY 18, 2020



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OFFICE OF POLICY & PLANNING



PRESENTATION OVERVIEW

- Methamphetamine Use in SF
- Task Force Background & Components
- Task Force & Focus Group Findings & Themes
- Recommendations & Updates
- Questions & Comments



METHAMPHETAMINE USE IN SF



Increase in **USE** across populations



Increase in **DEATHS** associated with use



Increase in **Tx ADMISSIONS** for methamphetamine use disorder



Increase in **RACIAL DISPARITIES** in harmful outcomes



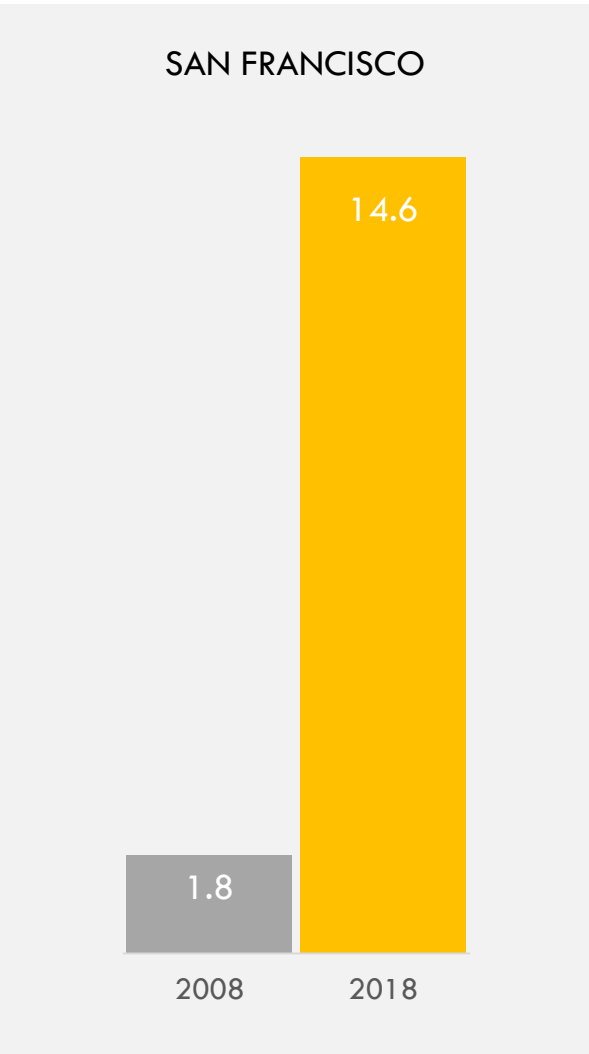
Prevalent in **PES VISITS** and people under **PSYCHIATRIC HOLDS**



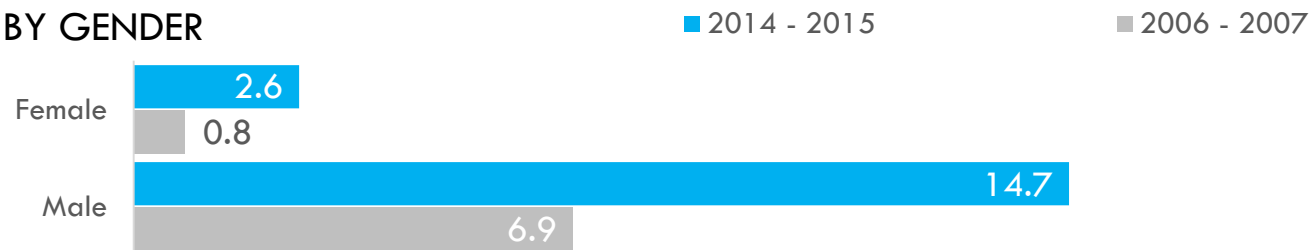
Most common illicit substance involved in **DRUG ARRESTS** and **SELF-REPORTED USE** by Jail Health Services



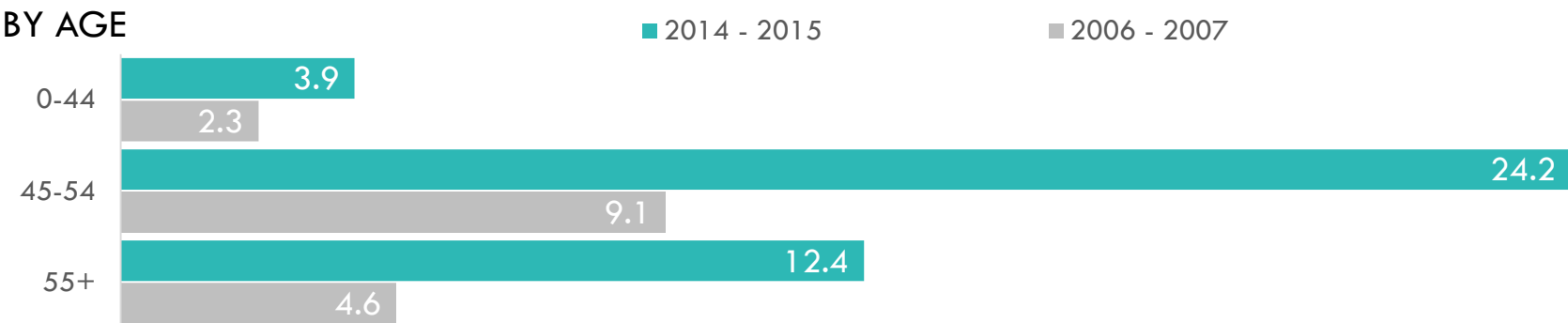
METHAMPHETAMINE USE IN SF: MORTALITY RATE PER 100K



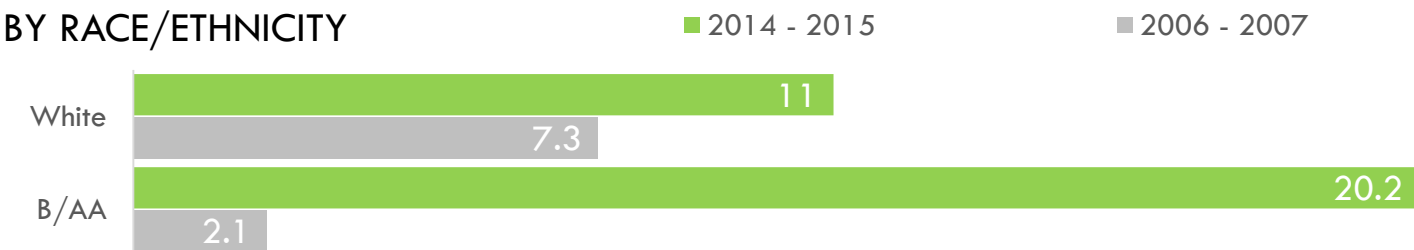
BY GENDER



BY AGE



BY RACE/ETHNICITY





TASK FORCE BACKGROUND & COMPONENTS (2019)

Task Force meetings chaired by
Supervisor Mandelman & Director Colfax

Process coordinated by DPH

**Final Report &
Recommendations** released

APR^{to}
SEP



4 Task Force Meetings



22 Members



5 Focus Groups



Key Stakeholder
Interviews



3 Research Briefs



Public Comment

OCT



17 Recommendations



4 Thematic Categories



TASK FORCE & FOCUS GROUP THEMES & FINDINGS



DRIVERS OF USE

- Methamphetamine use **can be a coping strategy** for trauma and safety, among other reasons
- **Lack of stable housing** is a key driver of problematic use and relapse



IMPACTS OF USE

- **Racial disparities** for adverse outcomes
- **General public is unaware of how to respond** to someone under the influence of methamphetamine



TASK FORCE & FOCUS GROUP THEMES & FINDINGS (CONTINUED)



SYSTEM OF CARE

- **Difficulty matching existing services** to the complex needs of people who use methamphetamine
- **Provider stigma** can discourage people who use from seeking services
- **Service providers need training and support** on how to constructively engage people under the influence of the drug



TREATMENT OPTIONS

- **No FDA-approved medications** to treat methamphetamine use disorder, but some **promise in combining behavioral therapies and some types of medications**



TASK FORCE RECOMMENDATIONS & THEMES

Invest in Care Models to **Reduce Harm & Promote Recovery & Wellness**

Improve Access to Treatment & Housing

Build Capacity & Training for Staff & Service Providers

Strengthen Coordination Among City Services & Systems



PRIORITY RECOMMENDATIONS

- Create a trauma-informed **sobering site** with integrated harm reduction services for individuals who are under the influence of methamphetamine.
- Strengthen the city's **interdisciplinary behavioral health crisis response**.
- Prioritize and protect **housing for people seeking treatment**.



DPH HIGHLIGHTS & NEXT STEPS

RECOMMENDATION	EXAMPLE EFFORTS & HIGHLIGHTS
1. Create a trauma-informed sobering site with integrated harm reduction services for individuals who are under the influence of methamphetamine.	<ul style="list-style-type: none">■ Drug Sobering Center to open Spring 2020■ Mental Health SF
2. Strengthen the city's interdisciplinary behavioral health crisis response.	<ul style="list-style-type: none">■ Mental Health SF
3. Increase the availability of safe indoor spaces that provide low-threshold, harm reduction, and basic services.	<ul style="list-style-type: none">■ Integration of Shelter Health & Street Medicine at Navigation Centers and shelters■ Expansion of Hummingbird
4. Expand low-threshold case management and wrap-around.	<ul style="list-style-type: none">■ Mental Health SF



DPH HIGHLIGHTS & NEXT STEPS

RECOMMENDATION	EXAMPLE EFFORTS & HIGHLIGHTS
5. Expand availability and duration of treatment models across the continuum of harm reduction services.	<ul style="list-style-type: none">Findtreatmentsf.orgExpansion of BH bed capacity
6. Expand the use of proven intervention and treatment approaches for stimulant use disorder, including contingency management and medication support.	<ul style="list-style-type: none">6th St Harm Reduction Center has expanded contingency management to all populations
14. Advocate for state and federal policies that expand access to low-threshold and long-term treatment options.	<ul style="list-style-type: none">DPH submitted a support letter for <i>Medi-Cal Healthier California for All</i> related proposals
15. Ensure provider training is trauma-informed, and rooted in harm reduction principles.	<ul style="list-style-type: none">DPH & HSH collaborating on developing an online-training platform on harm reduction; curriculum developed by Harm Reduction Coalition



THANK YOU

QUESTIONS & COMMENTS

