



Harm Reduction Case Study

Bernalillo County, New Mexico

Overview

Bernalillo County, in Central New Mexico, is among the state's smallest counties, but it is also the most populated, with 679,121 residents, of whom more than 50 percent are Hispanic or Latino.¹ New Mexico's drug overdose death rate has been one of the highest in the nation for nearly two decades; over that same period, Bernalillo County has had the largest number of total drug overdose deaths in the state. In 2017, there were 169 drug overdose deaths in the county, which represented 35 percent of the state's total, with the highest death rates occurring among individuals between the ages of 24 and 64.²

Rising drug use and other recent developments, including a settlement agreement with the U.S. Department of Justice to reform the Albuquerque Police Department (APD), served as a catalyst for action and collaboration. Because no single group can solve this issue alone, public safety and public health agencies in Bernalillo County

resolved to work together to reduce opioid use and the number of overdose-related fatalities. Collectively, they identified opportunities to build programs that foster safety solutions that would lay the foundation for healthier communities. Part of this process included sequential intercept mapping, which allowed for multiple stakeholder discussions and opened the door to new and/ or strengthened partnerships.

Harm Reduction Activities

By strengthening comprehensive, collaborative initiatives undertaken by the Bernalillo County Department of Behavioral Health Services (DBHS), COSSAP funding is supporting efforts to reduce drug use and overdose deaths in Bernalillo County, as well as to mitigate impacts on crime victims. DBHS is expanding its harm reduction services to address addiction and the adverse effects









Members of a Bernalillo County (NM) mobile needle pick up team, supported by the county's Department of Behavioral Health Services.

of injection drug use, including overdose, HIV and hepatitis C infections, incarceration, and drug-related crime. These initiatives address service accessibility gaps throughout Bernalillo County for people who have been disproportionately impacted by drug abuse, including people experiencing homelessness and urban Native Americans.

DBHS is unique in that it is a service provider, as well as a funder of community services through grants. DBHS staff members are therefore able to build harm reduction strategies into their work at the individual, system, and policy levels. Harm reduction is viewed as a principle by which to help clients navigate their own behavioral health journeys to meet goals and objectives for sustaining daily life. Because there is no "cookie cutter" solution for every client, DBHS meets its clients where they are along the stages of the change continuum. For DBHS, targeted harm reduction strategies not only reduce the negative consequences associated with drug use and offer diversion alternatives but provide a tangible way to measure success. Program decisions and strategies are data-driven and thus, strategic. For example, a

partnership among DBHS; the New Mexico Department of Health Public Health Division, Bureau of Infectious Diseases; the U.S. Drug Enforcement Administration's 360 Strategy; and public health and safety community stakeholders in Albuquerque is developing a mobile harm reduction delivery system to deploy units into neighborhoods of greatest need, based on data obtained through intelligence and overdose mapping.

Such partnerships have made significant progress toward achieving program goals, and there has been a gradual shift in mindset toward collaboration over time. At the same time, there has been a grassroots advocacy movement within Bernalillo County to hold all stakeholders accountable, and a heightened level of engagement has resulted from the implementation of grants which specifically required collaboration among criminal justice and behavioral health agencies. Consequently, DBHS can reinforce partnerships through regular meetings of various stakeholder groups and take advantage of opportunities to educate stakeholders about behavioral health-related issues. For example, DBHS representatives now have a seat at the table at Criminal

Justice Coordination Council activities meetings and are working with stakeholders within the criminal justice system, such as the Bernalillo County Sheriff's Office; the APD; district and metro courts; pre-trial, probation, and parole services; and the U.S. Attorney's Office, to achieve DBHS goals. Current leadership understands the issues around public safety and public health and embraces measures to improve community outcomes.

Outcomes

In implementing harm reduction activities in Bernalillo County, DBHS staff members have found their greatest challenge to be the navigation of county, city, and state government systems. Yet, they have learned that to be successful, all involved stakeholders need to be on the same page and jurisdictions need to work side-by-side. The conclusion of memoranda of understanding and standard operating procedures between the police department and the sheriff's office has proven particularly helpful in this regard.

Endnotes

- 1 United States Census Bureau. (2019). QuickFacts: Bernalillo County, New Mexico. Retrieved from https://www.census.gov/quickfacts/bernalillocountynewmexico.
- 2 New Mexico's Indicator-Based Information Systems Program. (2012–2017). Retrieved from https://ibis.health.state.nm.us/.

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