

# Santa Cruz County Syringe Services Program Advisory Commission

1060 Emeline Avenue, Santa Cruz, CA 95060 P: (831) 454-4623 F: (831) 454-4488 TTY/TDD 711

<a href="mailto:hsaphadmin@santacruzcounty.us">hsaphadmin@santacruzcounty.us</a>
<a href="https://bit.ly/SSP-Program">https://bit.ly/SSP-Program</a>

# Notice of Public Meeting and Agenda In Person Meeting

Date: Tuesday, April 11, 2023 Time: 6:00 PM - 7:30 PM

**Join Microsoft Teams Meeting** 

Meeting ID: 226 807 668 601 Passcode: pXkJux

Or Call in (audio only): +1 831-454-2222,30724602# United States, Salinas

Phone Conference ID: 307 246 02#

Physical Location\*\*

1400 Emeline Avenue, Rm #206/207 Santa Cruz, CA 95060

- 1. Roll Call & Introductions
- 2. Review & Corrections of the Agenda
- 3. Review & Approval of March 14, 2023 Meeting Minutes
- 4. Written Correspondence:
- 4. Oral Communications: Any person may address the Commission on additional matters that are not on today's agenda, for a period not to exceed 3 minutes, within the jurisdiction of the Commission.
- 5. Administration of Oaths of Office for existing members of the Syringe Services Advisory Committee
- 6. Program Updates- Program Staff
- 7. New Business/Action Item
  - 7.1 Monterey County Mobile Unit Visit: Commissioner King to share
  - 7.2 Harm Reduction Coalition of Santa Cruz County, Syringe Services Program Annual Report
  - 7.3 The future of the Community Engagement Ad-Hoc Subcommittee
  - 7.4 Discuss alternate site/locations for SSPAC meetings
- 8. Topics for Future Meetings/Action Items
- 9. Adjournment

#### Next Meeting to be held on May 9, 2023, at 6:00 PM

The County of Santa Cruz does not discriminate based on disability, and no person shall, by reason of a disability, be denied the benefits of its services, programs, or activities. If you wish to attend this meeting and require special assistance to participate, please call 831-454-4623 (TTY/TDD: 711) at least 72 hours in advance to make arrangements.

Summarized from Santa Cruz County Code, Chapter 2.125, Commission objectives include: increase coordination between agencies, departments, jurisdictions, and other stakeholders and policies related to delivery of services provided by SSP; review pending State and Federal legislation that may impact SSP, consumers and/or providers; stay informed and educated on SSP and related public health strategies; provide a forum for consumers and other partis interested in syringe services to contribute ideas to policy and program development and make recommendations to the Board of Supervisors regarding any proposed changes.

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# **Action Item: 3 Approval of Meeting Minutes**

Action Required

# Recommendation

Approve the March 14, 2023 Syringe Services Advisory Committee meeting minutes

# **Suggested Motion**

I move to approve the March 14, 2023 Syringe Services Advisory Committee meeting minutes



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## **Meeting Minutes**

DATE: Tuesday, March 14, 2023

TIME: 6:00 PM

LOCATION: 1400 Emeline Ave, Bldg. K, Rm 206

PRESENT: Damon Bruder (3<sup>rd</sup> District), Eric Sturm (4<sup>th</sup> District), Steve Plumb (1<sup>st</sup> District),

Sarina King (5<sup>th</sup> District)

EXCUSED: None

ABSENT: Joe Hernanez (2<sup>nd</sup> District)

STAFF: Rahshan Williams (Program Coordinator), Socorro Gutierrez (Health Services

Manager), Nicky Meza (Administrative Aide), Lucero Cosio-Santos (Administrative

Aide) Laurel Gazza (Administrative Aide)

GUESTS: Darcelle Pruitt (Resource Planner)

#### 1. Call to Order/Roll Call/Introductions:

Meeting convened at 6:01 PM.

Chair Bruder Confirmed attendance.

#### 2. Review and approve February 14, 2023:

**Motion to approve Meeting Minutes** 

Motion/Second: King/Sturm Motion passed unanimously.

## 3. Written Correspondence: none

#### 4. Oral Communications:

Laurel Gazza spoke about being prepared in advance for the Commission meetings. By providing and posting materials to the public and to post prior to the meeting, allowing public and County staff to view the agenda items and to attend the meetings. Commission Liaison should be setting up a meeting in advance prior to the upcoming meeting with Commission member, program staff and any individual who will be presenting to discuss the preparation and collecting of Agenda items and meeting materials to submit for posting 72 hours prior to the meeting. This allows being transparent in the way business is conducted.

#### 5. Presentation:

5.1 Darcelle Pruitt, Resource Planner III, from Community Development and Infrastructure/Recycling and Solid Waste is a guest today to present about the Sharps and Pham program and the Syringe Services Program. The primary goals of the programs are to prevent the spread of infectious disease associated with injection drug use but to also address community concerns regarding improperly discarded syringes. The idea of the stewardship program is to make sure the manufactures who are producing the products that end up as waste are taking responsibility for the end of life so the cost of disposal does not fall on the jurisdiction. Pruitt works on the waste side of the program and her predecessors worked on setting up the county codes sections that define the stewardship plans. All the drug companies that sell into CA are responsible to put a products stewardship plan and get it approved both at county level and by Power Cycle, a branch of California EPA that oversees waste management issues. Power Cycle is primarily responsibility at the State level for overseeing that the plans are in place, funded properly and managing the waste. County Program Drawbacks include, varied legal requirements, different code sections, varied County Jurisdiction authority and varied County funding. Program compliance oversight for SSP is under State of Public Health and Board of Supervisors. CalRecycle provides sharps and pharm stewardship program compliance oversight. Commissioner asked how long has the sharps and pharm program been in the County and if other cities have similar programs where Pruitt responded the program may be in its 10th year and Watsonville and Santa Cruz do have areas where they collect syringes and have their own programs. Commissioner asked if the Sharps an Pharm has a committee or commission. Pruitt stated that this falls under the purview of this commission.

#### 6. Program Updates:

6.1 Williams presented program updates. The MAT Access Point Grant was awarded on March 13<sup>th</sup>. This 16-month grant is to provide low barrier opioid treatment at SSPs, fund extra staff to work with participants, collaborate with local partners and improve tracking of substance use disorder treatment referrals. Commissioner asked how much the grant is for and Williams indicated it is for \$350,000. Funding is also for a nurse, MAT provider and supplies. On 3/2/23 staff were notified that the NASTAD grant was not awarded. Harm reduction supplies were distributed at fixed sites and at outreach/engagement between September 2022-December 2022. Distribution of harm reduction supplies include local community partners. Williams presented key points from Commission meetings and program staff regarding the Directive from the Board of Supervisors to look into the possibility of moving the North County Syringe Services program out of Emeline. A comparison of service delivery models was presented for a mobile unit vs. a hybrid model. Commissioner asking if there is a timeline for the initiation of the hybrid model and if the recommendation will go to the Board to approve a change to the hours and to the location. Gutierrez indicated that the recommendation is to implement it for longer than six months to bring back information to identify if this model is reaching more participants and in different areas. Emily Chung, Public Health Director clarified that April 25th program staff will report to the Board the recommendations from the Commission based on the directives.

#### 7. New Business/Action Items:

7.1 Advisory Commission Recommendation and vote on potential Emeline Exchange move. Commission recommends piloting a hybrid model maintaining exchange services at Emeline and Watsonville, while providing exchange services at outreach in collaboration with HPHP's Street Medicine. Commissioner Sturm recommends the 18-month hybrid model as this will allow time to get things moving and to collect data for a full year and allow communication to community partners and clients. Commission discuss recommending Board of Supervisors remove directive on providing services at fixed location and to move forward with pilot program for 18 months. Commission to consider recommending removal of Board of Supervisors directive on fixed hours to allow flexibility and ability to adjust to community need.

Motion to approve recommendations submitted by SSP staff as listed adding 18 months

Motion/Second: King/Sturm **Motion passed unanimously.** 

- 7.2 Monterey County Mobile Unit Visit: Commissioner King to share
- 7.3 The future of the Community Engagement Ad-Hoc Subcommittee
- 7.4 Discuss alternate site/locations for SSPAC meetings

Motion to move these items to March Meeting

Motion/Second: King/Sturm Motion passed unanimously.

## 8. <u>Topics for Future Meetings/Action Items:</u>

## 9. Adjournment:

Meeting adjourned at 7:39PM Submitted by Lucero Cosio-Santos (Administrative Aide)





**Public Health** 

# County of Santa Cruz Syringe Services Program (SSP) Advisory Commission Program Updates

April 11, 2023

# **Current Activities**

- 1) Distribution and Collection
- 2) Safe Disposal
- 3) Enhanced Referrals

# Distribution and Collection (Syringe Exchange)

- No longer collecting data on participant use of HRCSCC
- Public Health staff has been working diligently on Board of Supervisors preparation for the April 25, 2023 meeting, to include the SSP Biennial Report and providing recommendations on the County Syringe Exchange service delivery model

# Safe Disposal

- City of Santa Cruz has approved installation of additional syringe disposal kiosk
- Location on the westside of the levee adjacent to the Kaiser Arena





# **Enhanced Referrals**

# Fentanyl test kit QR codes

- Adding QR code sticker to fentanyl test strips
  linking persons to videos with instructions on
  use of the strips and overdose prevention information
- <u>Fentanyl Test Strips YouTube</u>
- Extends reach of education beyond the exchange encounter

# Xylazine

- Xylazine, also known as "tranq", is a non-opioid agent used as a veterinary tranquilizer
- Educational material on Xylazine added in our exchanges

# Drug Checking for Fentanyl!



Scan QR Code

to watch a YouTube video on how the test your drugs for fentanyl using the test strips.

# Thank You



# 7.1 Attachment

Monterey County Mobile Unit Visit

# Access Support Network

12.21.22 Site Visit Notes from SSP Commissioner Sarina King

# Services

# Testing

There was testing equipment in the mobile unit as well as at a pop-up tent they set up

# Treatment

• There was a volunteer physician on-site who could prescribe and give treatment to clients at the time of visit. Medication was stored in the van.

# Supplies

The mobile unit was well stocked with a variety of harm-reduction supplies

# **Mobile Unit**

- All needed materials on-board to give supplies, do testing, and provide prescriptions on-site
- Set days and locations that the mobile unit traveled to
- Mobile unit was in use part-time and sat parked part-time

# **Community Engagement**

- ~ 20 unique individuals went by the unit in the 2.5 hours I was there. Many were regulars, according to ASN staff
- They were accessing care, socializing with each other and hanging out in the area
- There were other community-based organizations that came during the time I was there to provide food.
- ASN is run by community volunteers

# Additional Observations/Notes

- Not a gov't backed org
  - Didn't have funding but did have flexibility
- The physician volunteer started during residency and stayed with them
- The pop-up tent allowed for private discussions between the client and physician
- There is potential for the mobile unit to be rented/used more than it is currently.
- The broader community was accepting of the services being provided in a high traffic area

# Questions?

# California Department of Public Health Syringe Services Program Annual Report

Name of Program:	Harm Reduction Coalition of Santa Cruz County
Address:	P.O. Box 3415 Santa Cruz, CA 95063
Primary Contact Name and Title:	Dani Drysdale ; Syringe Services Program Coordinator
Primary Contact Phone Number and Email:	831-769-4700; hrcofscc@gmail.com
Secondary Contact Name and Title:	Kate Garrett; Managing Member / Fiscal Director
Secondary Contact Phone Number and Email:	N/A
Date of Report:	8/6/2021
Date Range of Report (should cover a 12-month period):	8/8/2020 - 7/20/2021

Required - All questions in this section are required for all CDPH-authorized programs.

- 1. Number of people served: ~650 primary participants, unable to calculate secondary participants
- 2. Number of syringes dispensed: 796,060
- 3. Number of syringes collected and disposed: 432,705

- 4. Number of referrals to substance use disorder treatment programs: 27
- 5. Number of other referrals (feel free to break out by type HIV testing, hepatitis C virus testing, hepatitis A/B vaccinations, case management, PrEP providers etc.): **39**
- 6. Describe your interactions with the community (other agencies, neighbors, city/county government, etc.) and law enforcement, both positive and challenging:

#### **Positive Interactions:**

- 1. HRCSCC has provided numerous trainings to other service providers since authorization. Names of providers will be left out from this report, but training on harm reduction principles, overdose prevention, syringe disposal, syringe waste prevention, noncoercive referral practices, and more were provided to at least six agencies since August 7th, 2020.
- 2. Upon being served with a lawsuit in December 2020, HRCSCC circulated a statement of support for our mission and work (attached to this report) and received exactly 299 digital signatures from individuals, including prominent public health professionals, elected officials, and valued community leaders. Furthermore, this document was signed by the following organizations: SafeRx Santa Cruz County, Santa Cruz County Mutual Aid, Santa Cruz for Bernie, DSA Santa Cruz, ACLU of Northern California, Santa Cruz County Chapter of the ACLU of Northern California, Sanctuary Santa Cruz, The Santa Cruz Hub for Sustainable Living Board of Directors, Subrosa: A Community Space, Santa Cruz Tenant Power, National Harm Reduction Coalition, Sierra Harm Reduction Coalition, Any Positive Change Inc., West Oakland Punks with Lunch, County of Ventura Needle Replacement Program, and SLO Bangers Syringe Exchange and Overdose Prevention Program.
- 3. Before and after the beginning of the lawsuit, HRCSCC has received dozens of supportive comments via text, email, and Facebook from community members and other service providers sharing extremely positive and supportive messaging, thanking us for our work and encouraging us to continue our efforts. Multiple community members have reached out to thank HRCSCC for playing a role in saving the life of a loved one or themselves, and these messages are always cherished among our volunteers and staff.
- 4. Staff at various service providers have called upon HRCSCC in urgent times of need to deliver wound care supplies, naloxone, sharps containers, and PPE, and have shared

- appreciation for our responsiveness and reliability when it comes to delivering a broad range of supplies and services besides syringes.
- 5. Community members and other service providers routinely stop by HRCSCC's public service location at Coral & Limekiln St to drop off food, water, clothing, hygiene supplies, and even to just say hello to our staff, volunteers, and participants.
- 6. Denise Elerick, founder and staff member with HRCSCC, received the 2020 Advocacy Award from the local organization, Community Prevention Partners. CPP included this quote with the award, "Denise is an above and beyond human being with unimaginable levels of dedication, tenacity, and humanity. She leads with compassion and inspiration for those in our community whose voices have been silenced due to ignorance, Stigma, or apathy. And despite navigating challenges and negativity, she remains steadfast in her pursuit of effective substance use prevention. Denise is an exemplary advocate for health, safety, and well-being for all."
- 7. HRCSCC itself also received an award from CPP, this one being the "Well Being Award" and including the message, "For integrity and passion in serving individuals with lived experience, willingness to engage in best practices and promote healthy choices on behalf of others while a public voice ardently expressed opposition, literally walking their talk everyday without most vulnerable community members and engagement as part of the SafeRX core leadership team. Their courage, leadership, and community commitment is commendable."
- 8. In February 2021, The Democratic Central Committee of Santa Cruz County, the governing body of the local Democratic Party, passed a resolution in support of HRCSCC's mission and work with an overwhelming majority of 23 "yes" votes vs only 2 "no" votes.
- 9. In the spring of 2021, HRCSCC hosted the Homeless Persons Health Project at its public service location at Coral & Limekiln St in order to facilitate a weekly COVID-19 Vaccine clinic in which any person experiencing homelessness could receive the vaccine. HRCSCC received many warm appreciations for this from people who received the vaccine, some who expressed that they never would have gotten the vaccine through another avenue.
- 10. On May 2nd, 2021, HRCSCC collaborated with Liberty Tax and the Subrosa Community Space to host a free clinic for people experiencing poverty and/or homelessness to receive free, in-person assistance filing their 2020 tax returns or filing a non-filer return in order to receive any COVID-19 stimulus payments they had been unable to get by that time. 38 people received services from accountants from Liberty Tax who generously

- donated their time that day to make the clinic possible. HRCSCC received many warm appreciations for this event as well.
- 11. HRCSCC has experienced an uncountable number of positive interactions with our participants. From in-person comments and conversations to text messages, phone calls, emails, and social media comments and posts, we have been overwhelmed with love and support from the people whose words, needs, feelings, and opinions we value above all else.
- 12. HRCSCC has partnered with the Homeless Person's Health Project to begin providing low-barrier buprenorphine access and medical care at our exchange site. In our first weekend providing these services, multiple participants received initial MAT services and started buprenorphine. We recently surveyed our participants about this project and the results indicate that many of our participants want these services and that our program will remove the largest barriers that they identified.
- 13. Multiple HRCSCC members are active parts of SafeRx Santa Cruz, the local opioid safety network. Members of HRCSCC are a part of SafeRx working groups, and one of our staff members sits on their Core Leadership Team. We regularly consult and collaborate with the healthcare providers that make up this group.
- 14. HRCSCC has had discussions with multiple business owners located near our public service location. We have a good relationship with multiple owners and have permission from some property owners to enter their property and conduct syringe sweeps, which we do regularly.

## **Challenging Interactions:**

- 1. HRCSCC is being sued by a group of plaintiffs made up of a former chief of Santa Cruz Police Department, a sitting Santa Cruz City Councilmember, and three community members, one of whom is representing an organization with a similar name (Grant Park Neighborhood Association Advocates) to an existing neighborhood association (Grant Park Neighbors) but the former is a different entity of unknown status and origin. The lawsuit focused its complaints on perceived environmental and health impacts from our operations.
- 2. HRCSCC staff and volunteers have experienced online and in-person harassment, scolding, doxxing, and general negative interactions from members of the community,

- frequently the same members who oppose other services that focus on the homeless community and people who use drugs.
- 3. For some individuals, this harassment takes the form of transphobia and homophobia focused on the individual's identity and not just their work with HRCSCC.
- 4. HRCSCC staff, volunteers, and participants have been directly harassed at our public service location. Vehicles have driven by honking and shouting profanities and have parked nearby in order to film staff, volunteers, and participants without consent. Before we were authorized, one of these photographs was posted online and a social media commenter stated that one of our staff members should be killed. On another occasion, somebody in a passing vehicle threw a large glass bottle, striking one of our participants.
- 5. Some of HRCSCC's harassment and opposition has taken the form of outright lies about what our organization does and does not do, but specifically, some of the most common ones seen online are that HRCSCC does not provide syringe disposal services or encourage syringe disposal, that we do not pick up used syringes regularly in the community, that we do not provide referrals to other services, that we do not have any sort of wrap-around services for our participants, or that we do not record various types of data required by state regulations. None of these listed claims are true.
- 6. Two members of the Santa Cruz County Board of Supervisors and the current mayor of Santa Cruz wrote letters against CA AB1344 that appeared to be related to HRCSCC's work in the community.
- 7. HRCSCC's participants have continually had negative interactions with law enforcement, and this takes the form of regular searching of their persons, homes, and vehicles, arrests for all sorts of perceived offenses, and general rudeness and dehumanization that people who use drugs and homeless individuals frequently experience. No such interactions have taken place at HRCSCC's service location or during deliveries. We have begun providing basic literature for our participants to carry that informs any police officer of the specifics of AB 2077 and the resulting legalities of carrying paraphernalia, in order to provide support for our participants during these negative interactions.

Optional – While these questions are not required, if you have this information / data, it is helpful for presenting all the excellent work being accomplished.

1. Please provide a few sentences that describe your program, your services and the people you serve:

HRCSCC is a community-based organization dedicated to providing services to People Who Use Drugs and people experiencing homelessness in order to directly improve their health, dignity, and overall well-being. HRCSCC provides all the core services of any SSP and more: these services currently include syringe access, syringe disposal, naloxone access and training, safe sex supplies, wound care supplies, PPE, hygiene supplies, education on overdose prevention, safer drug use, preventing disease transmission, and referrals to a wide array other services. HRCSCC has also recently launched its MAT Access Points project, which gives all of its participants extremely low-barrier access to MAT and other medical services through collaboration with the Homeless Persons Health Project.

2. Describe your overdose services such as the number of overdose trainings, number of naloxone kits provided, and overdose reversals reported.

• Overdose trainings to other organizations: 10

• Naloxone kits provided: **8192** 

• Overdose Reversals Reported: 69

3. If you do HIV testing, provide the number of HIV tests conducted: N/A

Note: One of our staff members recently received training to become a CDPH-certified rapid HCV & HIV tester, and we have been working hard on implementing onsite HIV/HCV rapid testing, counseling and effective connections to treatment. We hope to implement such a project in the near future.

4. If you collect this information, tell us about the people you serve. Examples - age, gender, ethnicity, housing status, drug of choice, etc.

HRCSCC serves mostly individuals experiencing poverty and/or homelessness, but also people with other housing statuses and people at a variety of income levels. HRCSCC serves mostly injection drug users but also a growing number of people who use but do not inject drugs, and people who do not use drugs at all. The latter two groups make use of HRCSCC's many services that have no syringe component.

We collect demographic data on our participants only to the extent that it doesn't interfere with services, and what we can share at this time is that the majority of our participants are white, with the second-largest ethnicity being people who identify as Latinx and/or Hispanic, and the third most common being Black. This distribution skews from the average demographic breakdown of the entire population of our county, with significantly larger representation from the latter two groups listed.

#### 5. Please provide a feel-good story about your program:

For months, we had a participant who was always waiting for us, week after week, on Sunday nights as we arrived to set up for outreach. She would arrive with her ex-husband, both of them coming together to pick up supplies and keep each other safe. She was shy, reserved, and generally nervous. Week after week she and her husband would arrive. Gradually she seemed to gain more confidence and self-assuredness. Before too long, she would bring her nephew who was also embarrassed but she took charge and made sure he was safe and had condoms in addition to safe supplies for his drug use.

At some point, she was hospitalized. Afterward, nurses from Homeless Persons Health Project were caring for her, setting her up with recuperative care post-release. At the outset of COVID, she was living in a hotel provided via Project Roomkey. She kept arriving on Sunday nights, walking across town now instead of being driven by her ex-husband. She did not want any supplies as she did not need them any longer, she came just to help us with outreach. She would assist with collecting and distributing supplies and picking up syringes and other litter in the area. She has always had the warmest and kindest presence, and it was a true pleasure to have her around with us. She hasn't been out to volunteer very recently, but just last week she informed us that she has acquired permanent housing in the Live Oak area and for the first time in a long time had some friends over for dinner!

## 6. If there is other information about the incredible work you do, please share it with us.:

HRCSCC has recorded a total of 194 "syringe sweeps" completed since being authorized on August 7th, 2020. These sweeps consist of one or more staff or volunteers walking through a specific place and picking up syringes and parts of syringes -- including barrels, plungers, and syringes with no needle -- found littered on the ground. We are required per our authorization to conduct weekly syringe sweeps, but in order to combat syringe litter in the community, we have taken it upon ourselves to go far above and beyond this requirement and consistently pick up syringe waste.

HRCSCC provides a huge amount of sharps containers to our participants to assist them in safely disposing of their syringes. We estimate we distribute an average of **100 containers per week**, a

total of approximately **5100 sharps containers distributed since authorization**. Along with our syringe sweeps, our consistent education on sharps disposal, and our practices of collecting used syringes through our delivery program and our public service location, we believe that our efforts constitute an extremely robust collection and disposal operation.

The Santa Cruz County 2019 study on Syringe Access and Disposal revealed that 66% of people did not have a clean syringe in the last 30 days and needed one, 75% of people surveyed reused their syringes and 29% of people shared syringes with others. We strive to reverse this trend by eliminating scarcity of supplies, and by demonstrating that we will continue services.

We also strive to gain the trust of our participants through providing reliable, non judgemental, noncoercive services that center the agency of PWUD and produce a clear positive benefit for people's health and dignity. Gaining this kind of trust is how we have built such a large base of participants, including many who do not trust or access any other service providers in the entire county.

When educating our participants on proper syringe disposal, we encourage them to dispose of syringes in the **most convenient way possible for them**, which for many people is not actually bringing their used syringes back to us. Many of our participants make use of the County's various sharps kiosks and/or bring their used syringes back to the County SSP. The City of Santa Cruz has recently placed two kiosks in proximity or within a large encampment, thus creating an easy process for disposal. We encourage this behavior because it increases the chances of proper disposal, whereas demanding participants bring syringes back to us would, in our opinion, increase the chances of improper disposal.

Encouraging people to dispose of their syringes through whatever option is most convenient likely has a large impact on the number of syringes we ourselves collect for disposal, but our concerns are with reducing syringe litter and encouraging proper disposal above all else.