

COVID-19 QUARANTINE, ISOLATION AND RECOVERY SITES

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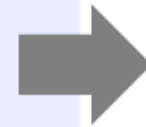
Map of Isolation & Recovery Site locations



Site locations:

- Everett
- Lexington
- Northampton
- Pittsfield
- Taunton





1

Homeless individual tests positive for COVID-19 but does not require medical care. Qualifies for I&R Site.

2

As a guest at an I&R Site, individual is provided their own hotel room along with 3 meals per day. Additional services on-site include nurse oversight, security, behavioral health supports, laundry and cleaning services, and linkages to other state services (e.g., DMH, DDS, MassHealth enrollment support).

3

Once recovered, guest returns to their originating shelter and may be connected to additional social services.

Harm reduction services and orientation but not explicit

Staff and guest communications of tolerance

Symbolic “coded” gestures of harm reduction

Site visits by state staff, harm reduction clinicians

Word of mouth

COVID-19 QUARANTINE, ISOLATION AND RECOVERY SITE RAPID ASSESSMENT EVALUATION AIMS

- Obtain feedback on guests' service utilization and stay experiences at state I&R sites and municipal isolation sites
 - Understand how guests experienced their active drug and/or alcohol use during their isolation and recovery site stay
 - Examine the awareness and experience of having behavioral health and harm reduction services integrated into the I&R site care environment
 - Learn how the stay changed guest substance use, recovery, and housing trajectories, both intentions (for current guests) and experiences (for prior guests)
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- Surveys & interviews with 50 guests: 26 I/R state (all represented), 24 Municipal
 - Municipal sites: Methuen, Cambridge, North Andover, Taunton, Boston HOPE, Boston Best Western

Demographic		I/R state 26 (52)	Municipal 24 (48)	Total n (%)
Age	18-25	2 (8)	0 (0)	2 (4)
	26-30	4 (15)	2 (8)	6 (12)
	31-35	2 (8)	2 (8)	4 (8)
	36-40	6 (23)	2 (8)	8 (16)
	41-45	0 (0)	1 (4)	1 (1)
	46-55	3 (12)	11 (46)	14 (28)
	56+	9 (35)	6 (25)	15 (30)
Male		15 (58)	20 (83)	35 (70)
Female		11 (42)	4 (17)	15 (30)
Race*				
White		18 (69)	14 (58)	32 (64)
Black, African, Haitian, or Cape Verdean		2 (8)	4 (17)	6 (12)
Multi-racial		2 (8)	3 (13)	5 (10)
Other race		4 (15)	7 (29)	11 (22)
Of Hispanic or Latinx Decent		6 (23)	6 (25)	12 (24)
Received stimulus check		16 (61)	15 (62)	31 (62)
Employed (service, trades, etc)		10 (39)	8 (33)	18 (36)
Ever incarcerated		11 (42)	13 (54)	24 (48)

*Participants could select more than one race

Substance Use History: Use in the Past 30 Days

Lifetime history of drug use was high among guests (n=44, 88%) and many (n=12, 24%) were actively using drugs

Substance	I/R state n (%)	Municipal n (%)	Total n (%)
Tobacco	13 (50)	12 (50)	25 (50)
Alcohol	10 (39)	7 (29)	17 (34)
Marijuana	7 (27)	11 (46)	18 (36)
Any illicit drug use other than marijuana	5 (19)	7 (29)	12 (24)
Injection drug use	2 (8)	6 (25)	8 (16)
Used drugs in public place	3 (12)	5 (21)	8 (16)
Currently on medication therapy for opioid use disorder	6 (23)	7 (29)	13 (26)
Experienced Section 35	4 (15)	7 (29)	11 (22)
Ever experienced an overdose	3 (12)	12 (50)	15 (30)
Ever witnessed an overdose	18 (69)	17 (71)	35 (70)

62% any substance use in past 30 days

50% any drug use in past 30 days

HOTELS: PLACES OF HEALING

- Stay at hotels provided a window of opportunity to address social determinants of health
- Guests had their basic and medical needs met
- Guests had a place to sleep, heal, and truly recover, mind, body, and spirit

FEMALE: *I think this here situation is a excellent idea and they should come up with more locations like this. .. I feel good that **I'm in a safe place....** I feel good that **I'm getting medical treatment.** And if I felt sick I feel good that you would, you know, take care of me or do the proper examination and you know send me to where I need proper treatment if I had any problems that exacerbate ..**So I feel good about this place all the way around. I think it's a great idea,** this set-up and what you've got here. – Everett I/R*

MALE: *Well there's the **notion of the teamwork that the staff has for you** and the fact that **if I need something** from the outside, they'll **go out and buy it for me.** You know, everybody's respectful and, you know, and **I have dignity about myself.** ..I stay to myself. I just want to stay cool in this room. As long as I'm healthy and I have a lot of fruit and vegetables to eat. And **so I'm enjoying every second that I can be here....**because I have to make the best of it, you know. So yeah it's what **I can't pinpoint it, but it's a combination of everything. On a hot day, the air conditioner. On a bored day, the TV.** – Northampton I/R*

BEHAVIORAL HEALTH CONSIDERATIONS

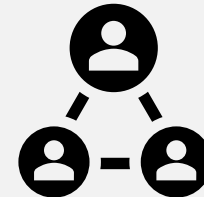
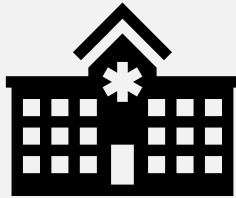
- Several participants struggling with their mental health during COVID, and particularly once infected
 - Participants at state sites reported leaning on nursing staff for emotional support
- Some participants utilized telehealth services (for both chronic and situational poor mental health) that staff facilitated access to
- Participants on MOUD largely reported being able to access their medications while at the hotels

FEMALE: *Just knowing that it was there and somebody was there... Like the nurses are always there ... people need mental health because even though your body might be normalizing,. It's like you've got this mental struggle. **It's like you've got this mental battle you're going through, and it's critical at this point that you get the good mental health.** Somebody to even just talk to. You know, you're in this quarantine and you're fighting this thing on your own. Wouldn't you just love to have somebody to talk to that could really be compassionate and understanding? – Northampton I/R*

FEMALE: *They told me on the phone..that the **Suboxone was [available] if that was something that I wanted.** That they had a nurse practitioner on-site. That I would have no worries in that area if needed it or wanted or desired. - Everett I/R*

CHALLENGES AT SITES

- Hospital and other institutional awareness of I/R site availability and experiences to improve referrals
- Methadone provision at I/R sites
- Transportation to I/R sites
- Stigma from non-medical staff
- Ongoing housing challenges



KEY FINDINGS

- Guests appreciated the time, space, and care to recover, some noted that they felt like they doing their part to help others
- Current alcohol/drug use are common among guests; harm reduction, treatment and behavioral health supports need to be part of I/R state sites *and* municipal locations
- Overall, state I/R sites better balanced the medical and other behavioral health and social service needs of guests
 - High degree of awareness among people using drugs without disrupting those who are not using drugs
 - Succeeded in connecting people to housing, benefits (SSDI, SNAP, MassHealth) during their stay
 - Maintaining MOUD (high telehealth use), continuing previous medical treatment; few started on new medication, care
 - Visitor policy ensured access to drugs for guests who were using, staff tolerance/support for purchases
 - Onsite naloxone known to guests but limited stocking of other harm reduction supplies
- Worry, social isolation and stigma played a large role in study participants' stay and substance use
- Peer supports, informal treatment (e.g. NA, AA), and possible onsite supports were untapped resources
- People who use illicit drugs arrived unprepared with sufficient supply; some shifted to other drugs, treatment, or left

MALE: *I would thank them for having a place like this to help people, especially homeless people who don't have any money. And who don't have any family to look to for help. Thank you for, you know, puttin' me in a comfortable room around good people that seem to mostly care. And where I'm able to be comfortable and to feel a little better. And I mean, this is the happiest me and my wife's been in a long time, so I'm very thankful for that. So, yeah just thankful, and hopefully they will open up more places like this around the country for people. You know, so there is more help, you know? Because this isn't gettin' any better, so... - Everett*

UNEXPECTED, ADDITIONAL FINDINGS

- Demonstrated that harm reduction/consumption spaces with medical supervision by nurses can work
- Pandemic setting and I/RS are opportunity: Safe, private space for healing that opens the door for other opportunities for wellness and life changes

