



# Elevating the voices of overdose survivors living on the street

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<https://bphc.org/healthdata/other-reports/Pages/Other-Reports.aspx>

## BACKGROUND AND METHODS

- Addiction and homelessness are intertwined public health issues that have become concentrated in the Mass. and Cass area of Boston.
- Successful policy solutions must be based on deep understanding of the unique needs and priorities of the people experiencing these co-occurring conditions and their perspectives about the existing systems of care.
- Boston Overdose Linkage to Treatment Study (BOLTS): qualitative research study examining equity in access to care following an opioid overdose.
- Data collection and analysis:
  - Survey and qualitative interview (Jan-Sept 2021) with people who were living in Boston, had survived an opioid overdose within the past 3 months, identified as Black, Latinx, or White
  - Sub-analysis focusing on 29 overdose survivors who were living on the street and recruited in the Mass. and Cass area.
  - Interview transcripts were coded and analyzed to extract themes.

## PERSPECTIVES ON THE MASS. AND CASS AREA

- The Engagement Center (EC) is perceived as a safe and supportive place with resources for people experiencing homelessness and people who use drugs.
- Most participants think highly of the staff at the EC.
- Participants had mixed feelings about the concentration of open drug use in the Mass. and Cass area.
- Some expressed feeling safe in the Mass. and Cass area (and specifically the EC) knowing that an overdose can be reversed there.
- Many participants stated that there are plenty of programs and services available in the Mass. and Cass area.

*"...this place really is – it's amazing. People think it's like – people that don't know anything about it, they look at it from the outside and they think it's like, a negative – negative thing, but these people are amazing. They help you get to detox. They support with food, places – a safe place for you to go. For instance, they – there's been zero people who have died out here. And you imagine how many people that would have died if these nurses weren't running around and Narcanning people and people weren't using in a safe environment and watching each other's backs? I could only imagine how crazy spike in numbers there would be, you know? [...] So if there were more places like this around it'd be – it'd be a good thing."*

- Overdose survivor

*"And it takes a little while, but once you've been out here long enough, you know that there's a lot worse places to be homeless. And Boston, in particular has so many resources that it is ridiculous."*

- Overdose survivor

*"I wouldn't want them to come to Mass Ave man, because once they come to the Ave, whatever you've done to be sober, it's going to be a harder fight to maintain sober over the year."*

- Overdose survivor

## PARTICIPANT CHARACTERISTICS AND DRUG USE

- In addition to living on the street, most of the 29 participants had other demographic characteristics that contribute to marginalization or social vulnerability: History of incarceration (79%), Unemployment (94% out of work or unable to work), Black (35%) or Latinx (35%) racial/ethnic identities
- Almost all participants reported polysubstance use.
- About one-third of participants had experienced 3-5 opioid overdoses in the last year, and about a quarter had experienced 6-9 overdoses.
- Reasons participants started and continued to use drugs: exposure to drugs through friends or family members; to cope with stress, trauma, or mental health issues; physical injury or pain

*"I was in jail locked up. I did three years, a sensitive three years. All my life, basically I've been alone; I never grow up with mom and dad or nothing. I grew up with my grandma to certain age and I went to foster homes, going to foster homes, jumping around house and house and things. And I end up doing a three-year sentence and that's where I chose to do drugs."*

- Overdose survivor

*"But I'm not going to sit here and give you an excuse. I don't think it's – I get sad because people be like, "you just do it to get high". I don't do it to get high. [...] I really be feeling like shit."*

- Overdose survivor

## PERSPECTIVES ON HOUSING

- Many participants expressed that they need stable housing and want to get off the streets, and that housing security is critical to being able to stop using and prioritize SUD recovery.
- Many spoke of local shelters negatively and preferred to stay on the street.

*"I think that's the most important thing to recovery is knowing you have a safe place to go every night."*

- Overdose survivor

*"I know how to stay clean, I need to, I need to put the things in place to allow me to stay clean, being on the street is not going to make me or help me to stay clean like that's for real"*

- Overdose survivor

*"I'd rather be out here than in the shelter dealing with the staff members any day. [...] Very rude, like name calling, you know, like junkie, like, it's bad enough for homeless and we're addicts, we don't need somebody that's supposed to be helping us have a safe, warm place to sleep and have something to eat, put us down"*

- Overdose survivor

## RECOMMENDATIONS

- Long-term sustainable solutions will require different sectors to work together to create multiple accessible pathways to recovery that address complex and intertwined challenges.
- While there is no one-size-fits-all solution, overdose survivors shared many suggestions that could make a difference for them: More outreach to connect with people who use drugs; Expand capacity and availability of existing programs; More safe places to use drugs; Expand resources and supports for social needs (housing, employment, education, clothing, transportation, etc.)

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