



COVID 19

Recovery Community Perceptions & Vaccine Readiness



**FACES & VOICES
OF RECOVERY**

ADVOCATE. ACT. ADVANCE.





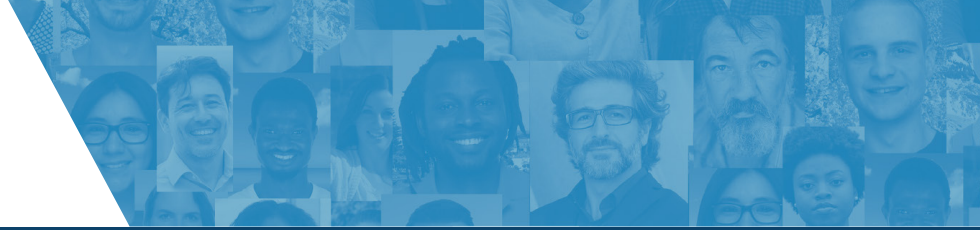
EXECUTIVE SUMMARY

The Recovery community has mixed feelings about the current state of the healthcare system, COVID, and the general plight of those with Substance Use Disorder during the pandemic. Given the rapid turnaround required on this project, recruitment started immediately upon receipt of the initial agreement. Faces &Voices of Recovery used a variety of platforms to communicate a need for participants including social media platforms and previously curated email lists. This resulted in a universe of thirty-five participants. These participants were vetted for connection to organized recovery communities as it was determined that they would be representative of the broader population.

Participants were evaluated for ability to communicate and contribute to group dialogue as well as their strategic positioning within community. It became apparent that it would be important to work with organizations that represented urban, suburban, and rural environments. The selection process also sought to include racial and socioeconomic diversity if possible. We were able to sample African American participants at approximately the rate of COVID occurrence in the community, but perhaps due to a structural deficiency, or as a commentary on our cohort of recovery community organizations, our data slice was under representative of the Hispanic community. Gender was also somewhat over representative of females.

Once selected, participants were scheduled for one of the three two-hour sessions. These sessions were conducted via zoom meeting, recorded, and transcribed. While the groups came from all segments of society and had some measure of diversity, the group was strikingly aligned on the increase of risk to recovery posed by COVID. All participants indicated either experiencing or knowing of someone who had experienced difficulty with maintaining recovery during the pandemic. The groups had great discussion regarding both the challenges and resiliency of the community around COVID and other crises at large. Most participants had similar responses until we reached the area of vaccine readiness. Here there was a plethora of opinion running from absolute willingness to absolute resistance. Many participants identified a measure of distrust of the healthcare system. The current politicization of this pandemic was easily apparent. There was polarization around and a mild linkage to urban and suburban participants having more trust in systems and possible mass production of the vaccine, while rural participants seemed less eager to adopt a vaccine quickly. One outlier in the groups occurred where, as a coincidence, two members were previous employees in the pharmaceutical industry, and their internal negative experience in the field contributed to the group having a more negative outlook.

All groups did, however, express some measure of willingness to adopt the vaccine and participate with health care in the process of vaccine dissemination. It is also clear that some care and patience will be necessary to avoid confusion.



COVID-19 in the Recovery Community

I. INTRODUCTION

Background:

In an initial discussion with Jack Stein and Jennifer Hobin on 7/17/2020, NIDA requested a brief synopsis of a project for a rapid data collection effort and survey of the effects of COVID-19 on the recovery community. As Faces & Voices is connected with many constituents in both the Peer to Peer recovery space and the recovery community at large, an opportunity exists to quickly collect data.

Need:

COVID-19 presents multi-dimensional difficulties for people suffering from Substance Use Disorder. At the emergent level, access to services and medication has been impacted by stay at home orders and already tenuous access to healthcare resources. For those in more stable situations access to peer support resources have been diminished, and in some cases completely lost. As with other mental health conditions, sudden interruptions to care can be destabilizing. In addition, stressors associated with the pandemic, economic instability, and general malaise contribute to difficulty. To address this, we first need to understand the depth and breadth of the effects.

Response:

Faces & Voices of Recovery led three focus groups, with 10-16 recovery community organization representatives per group via virtual zoom meetings. The focus groups were held on September 16th, September 22nd, and September 23rd. Data was collected utilizing polls, chat survey questions, and open discussion during each focus group. Participant demographic data and all poll, survey, and open discussion responses were compiled and are presented in their entirety in this report.

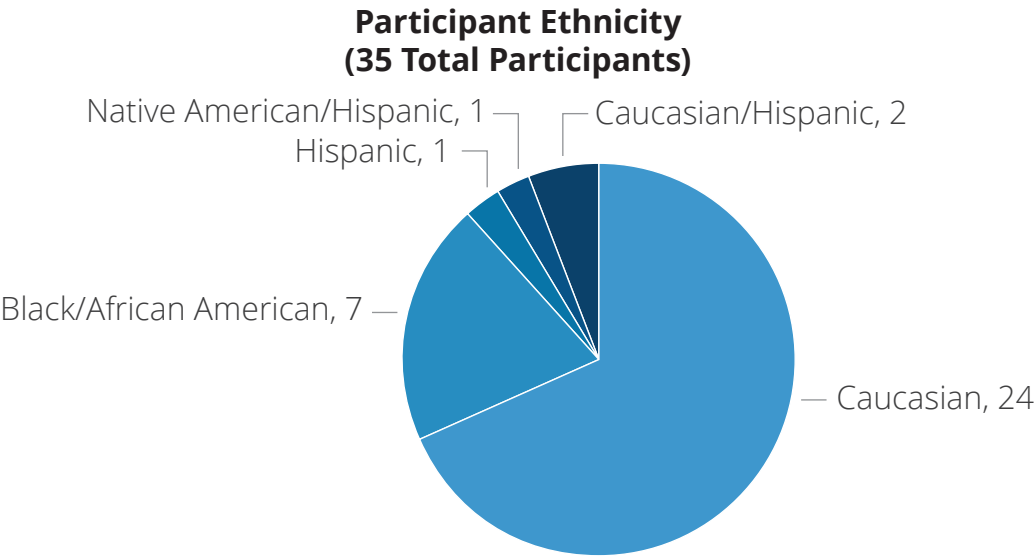
Guiding prompts used during the data collection process were:

1. Please tell us about your experience with the healthcare system and healthcare providers in the year prior to the pandemic.
2. Tell us about your experiences with the healthcare system and healthcare providers during the pandemic.
3. Discuss your general experiences with the COVID-19 pandemic.
4. Discuss any impacts the COVID-19 pandemic has had on your SUD and/or recovery.
5. How willing would you be to take a vaccine for COVID-19?
6. Discuss any concerns you may have about being able to get the vaccine if it were offered.
7. Discuss the sources of information you trust for making decisions about your health.

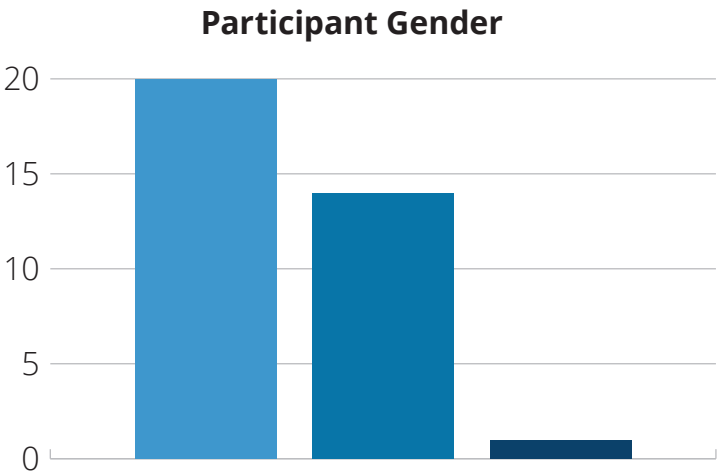
II. BODY

Focus Group Demographics: 35 Total Participants

Ethnicity



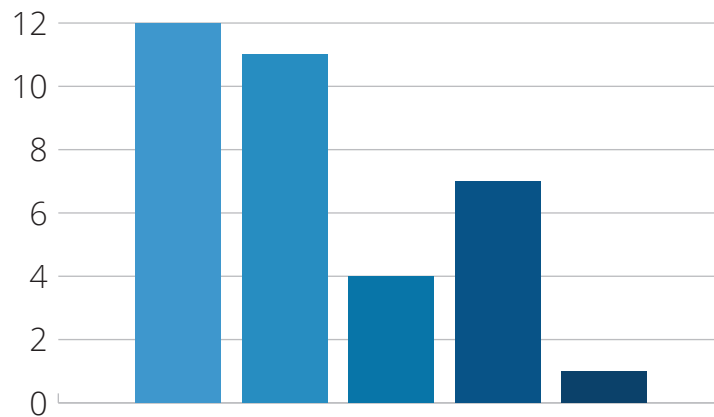
Gender



PARTICIPANT GENDER		TOTAL
Female		20
Male		14
Non-Binary		1

Age

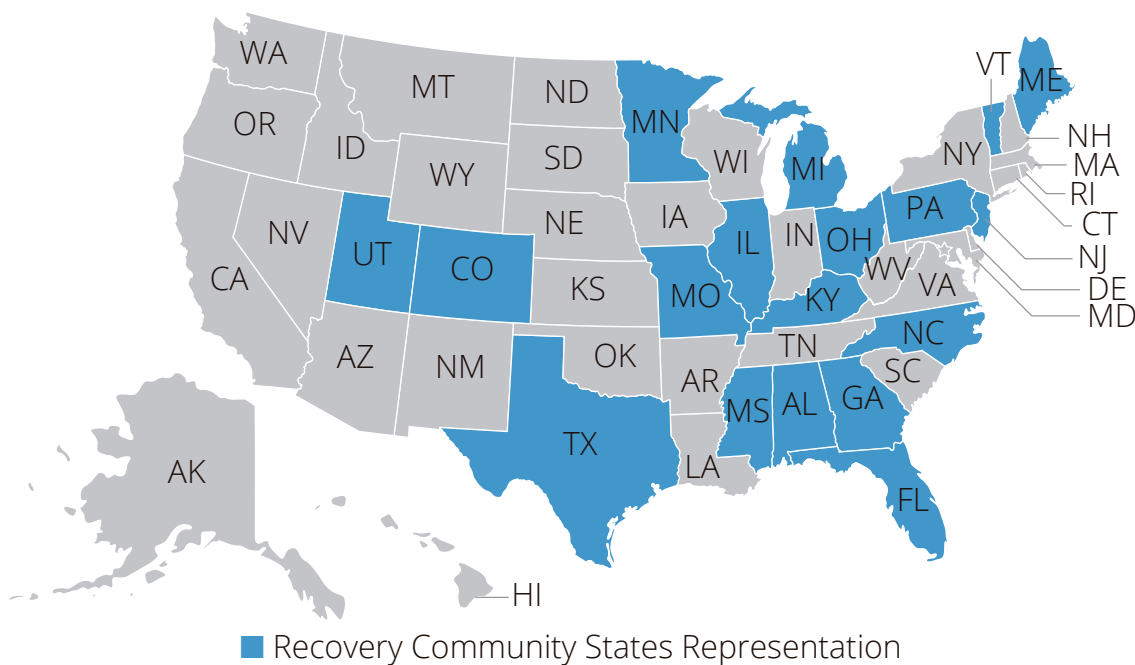
Participant Age



AGE	TOTAL
25-34	12
35-44	11
45-54	4
55-64	7
65-over	1

State Representation

Recovery Community Organizations across 18 of the United States participated in the three focus groups, with a broad scope of job titles represented. Executive Directors, Peer Recovery Coaches & Supervisors, Program Development Coordinators & Managers, and Quality Managers, are just a few of the participant organization representatives.



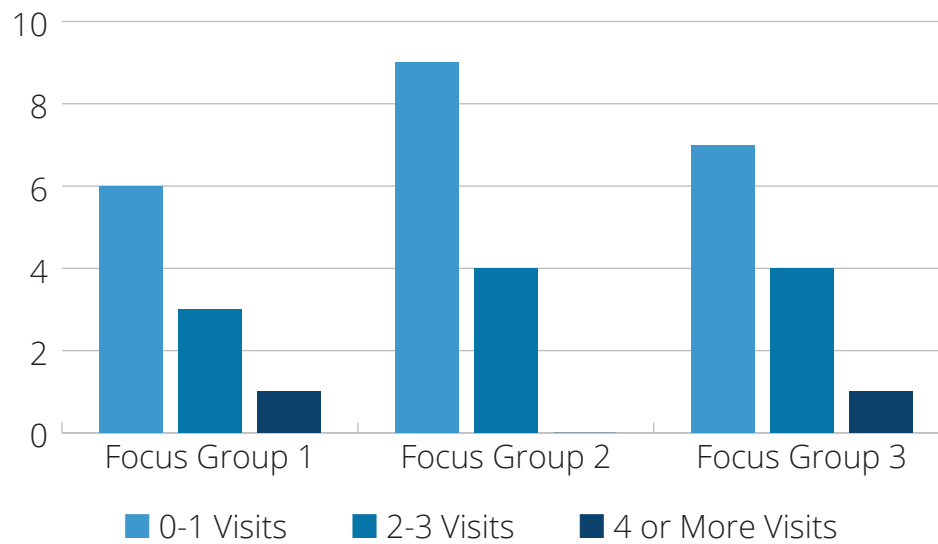
Analysis – Poll 1

1.1 How many times did you visit your healthcare provider in the year prior to March 2020? (pre-COVID-19 pandemic)

A. Method: Poll Question

B. Conclusion: In the year prior to the COVID-19 Pandemic, defined within this study as the period dating prior to March 2020, 63% of the participants visited their healthcare provider 0-1 times; 31% visited their healthcare provider 2-3 times; and 6% visited their healthcare provider 4 or more times.

Poll 1.1: Pre-COVID-19 Pandemic Healthcare Provider Visits

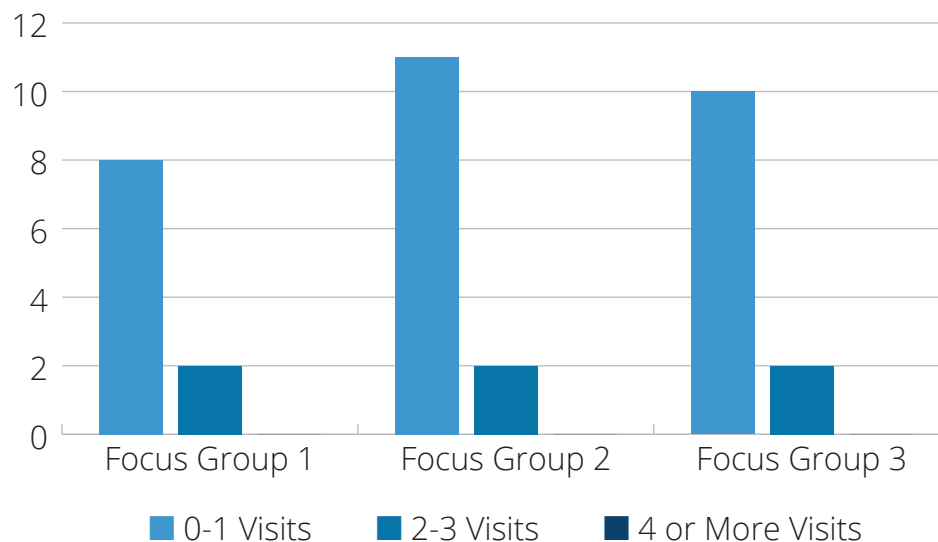


1.2 How many times have you visited your healthcare provider since March 2020?

A. Method: Poll Question

B. Conclusion: Since the COVID-19 Pandemic, defined within this study as the period dating from March 2020 forward, 83% of the participants have visited their healthcare provider 0-1 times; 17% have visited their healthcare provider 2-3 times; and 0% have visited their healthcare provider 4 or more times.

Poll 1.2: How many times have you visited your healthcare provider since March 2020?

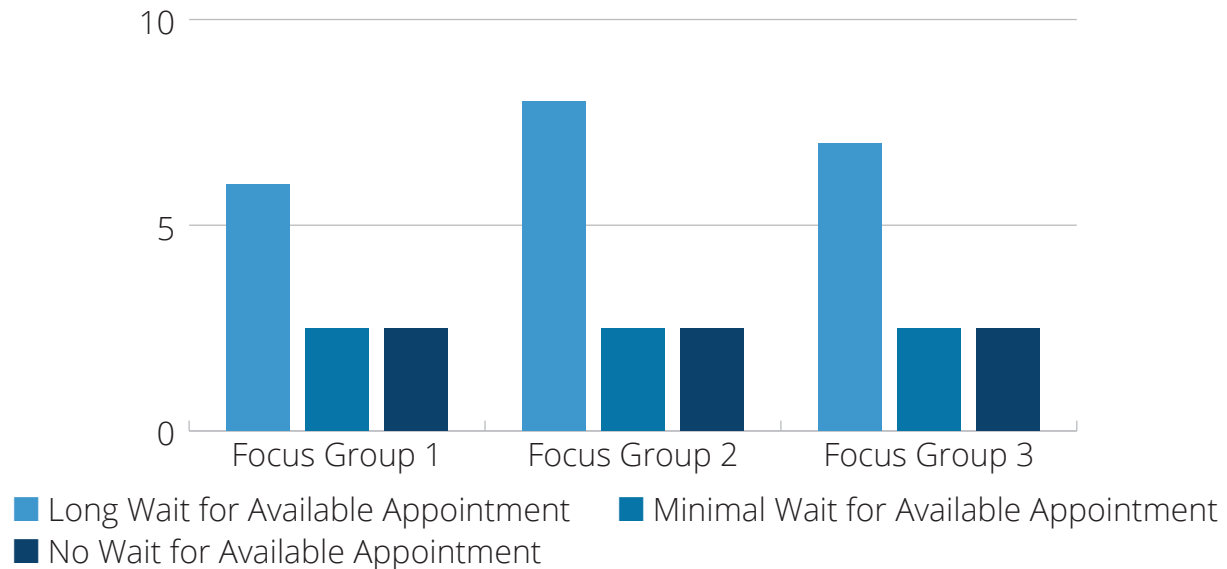


1.3 How would you rate your ability to see your healthcare provider prior to March 2020?

A. Method: Poll Question

B. Conclusion: In the year prior to the COVID-19 Pandemic, 66% of the participants reported a long wait period for an available appointment with their healthcare provider; 17% of the participants reported a minimal wait for an available appointment; and 17% of the participants reported experiencing no wait for an available appointment.

Poll 1.3: How would you rate your ability to see your healthcare provider prior to March 2020?

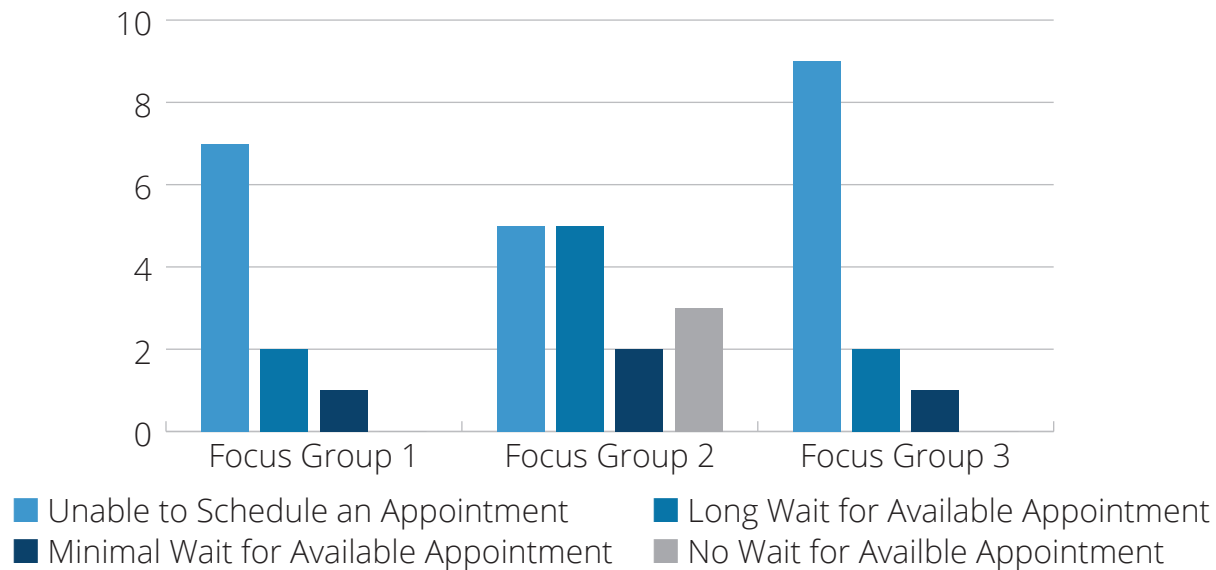


1.4 How would you rate your ability to see your healthcare provider since March 2020?

A. Method: Poll Question

B. Conclusion: Since the COVID-19 Pandemic, 60% of the participants reported they were unable to schedule an appointment with their healthcare provider; 26% reported a long wait for an available appointment; 8% reported a minimal wait for an available appointment; and 6% reported they experienced no wait for an available appointment.

Poll 1.4: How would you rate your ability to see your healthcare provider since March 2020?

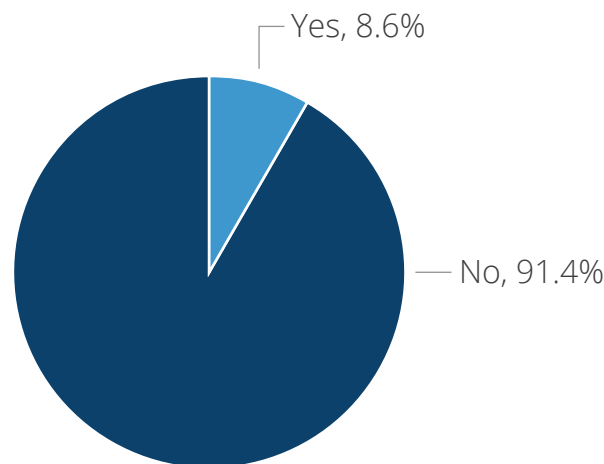


1.5 Did you utilize telehealth services pre-COVID-19 pandemic?

A. Method: Poll Question

B. Conclusion: 91% of participants had not utilized telehealth services prior to the COVID-19 pandemic.

Poll 1.5: Telehealth Service Utilization pre-COVID-19 Pandemic

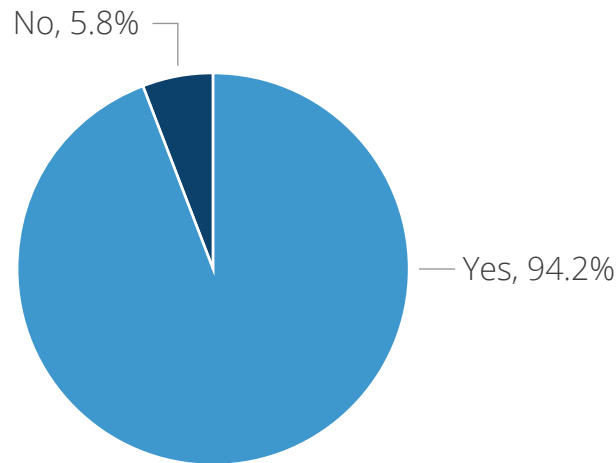


1.6 Have you used telehealth services since COVID-19 pandemic?

A. Method: Poll Question

B. Conclusion: 94% of participants have utilized telehealth services since the COVID-19 pandemic.

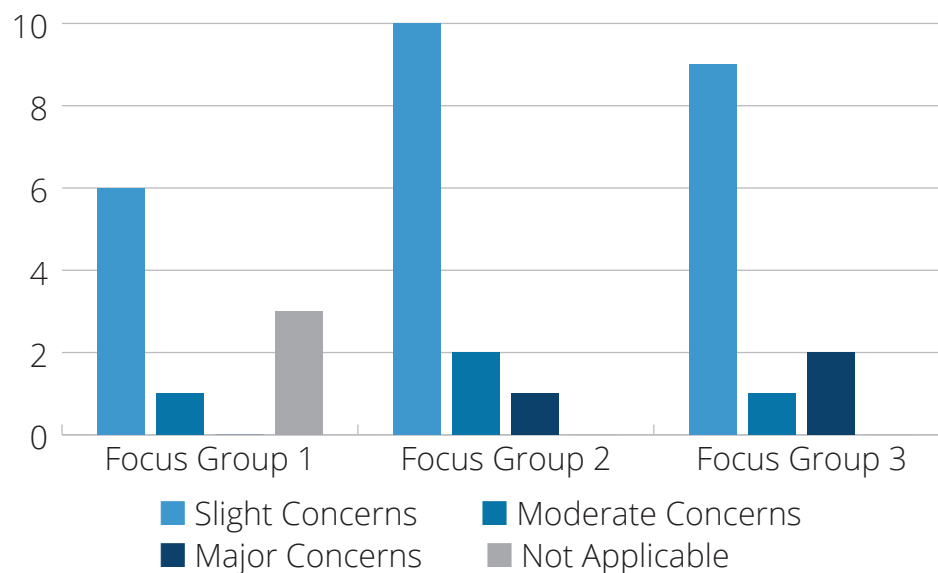
Poll 1.6: Telehealth Service Utilization During COVID-19 Pandemic



1.7. If you have utilized telehealth services since March 2020, how safe did you feel from a privacy standpoint?

A. Method: Poll Question

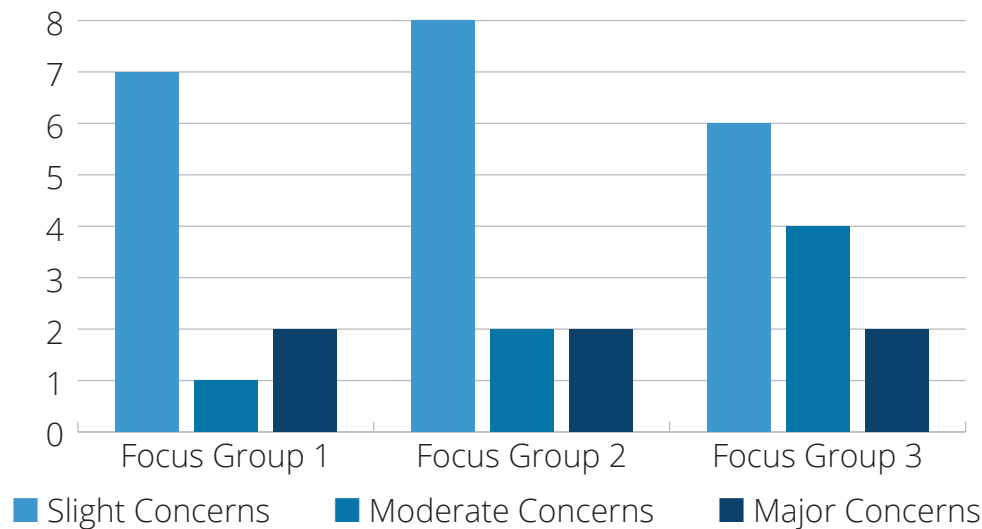
Poll 1.7: If you have utilized telehealth services since March 2020, how safe did you feel from a privacy standpoint?



1.8. If you visited your healthcare provider in-person since March 2020, how safe did you feel as it relates to potential COVID-19 exposure?

A. Method: Poll Question

Poll 1.8: If you visited your healthcare provider inperson since March 2020, how safe did you feel as it relates to potential COVID-19 exposure?



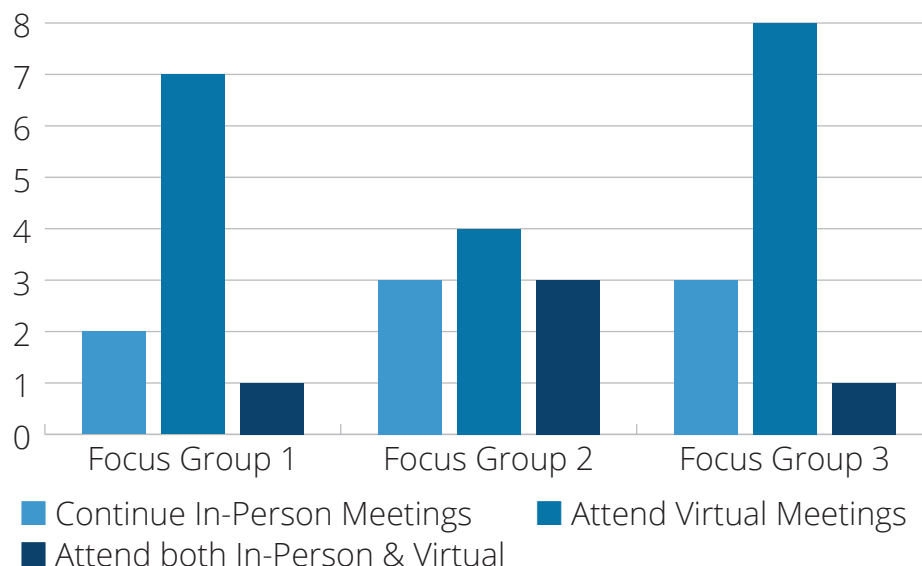
Analysis – Poll 2

2.1 After the COVID-19 pandemic was declared, did you stop attending recovery meetings, continue in-person recovery meetings, start attending virtual recovery meetings, do a combination of virtual/in-person recovery meetings, or is this question not applicable?

A. Method: Poll Question

B. Conclusion: During the COVID-19 Pandemic, 23% of participants continued in-person recovery meetings; 54% began attending virtual recovery meetings; and 23% have attended both in-person & virtual recovery meetings.

Poll 2.1 Recovery Meeting Attendance During the COVID-19 Pandemic

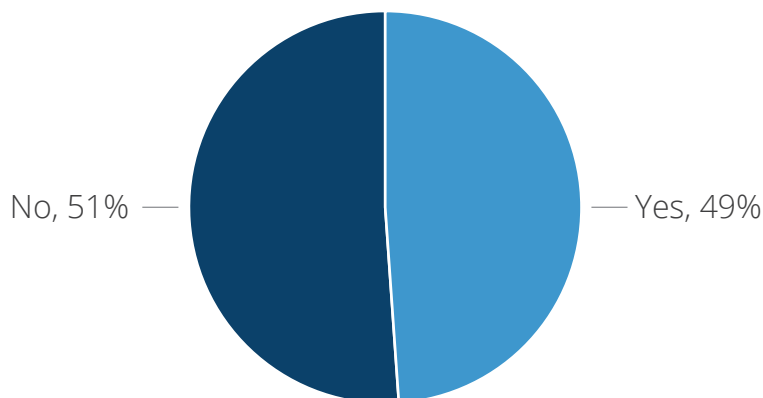


2.2 If you have attended virtual meetings during the COVID-19 pandemic, do you feel they are as effective as in-person meetings?

A. Method: Poll Question

B. Conclusion: During the COVID-19 Pandemic, 49% of participants responded they felt virtual meetings were as effective as in-person meetings & 51% responded they were not as effective.

Poll 2.2: Are Virtual Recovery Meetings Effective?

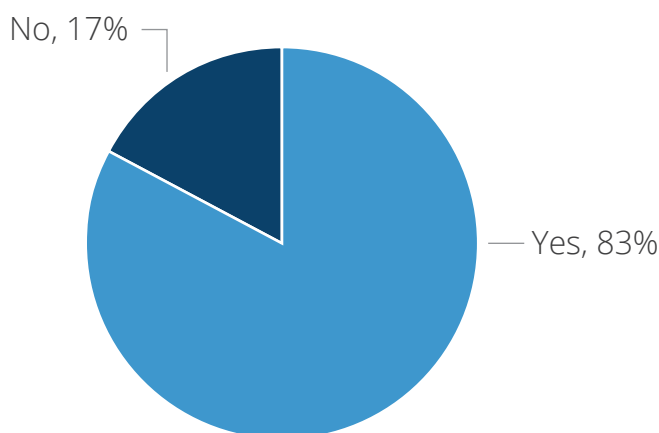


2.3 If you have attended virtual meetings during the COVID-19 pandemic, do you feel comfortable sharing private information from a technology security standpoint?

A. Method: Poll Question

B. Conclusion: During the COVID-19 Pandemic, 83% of participants responded they felt comfortable sharing private information virtually & 17% reported they were uncomfortable sharing using online technology.

Poll 2.3: Virtual Meetings & Technology Security



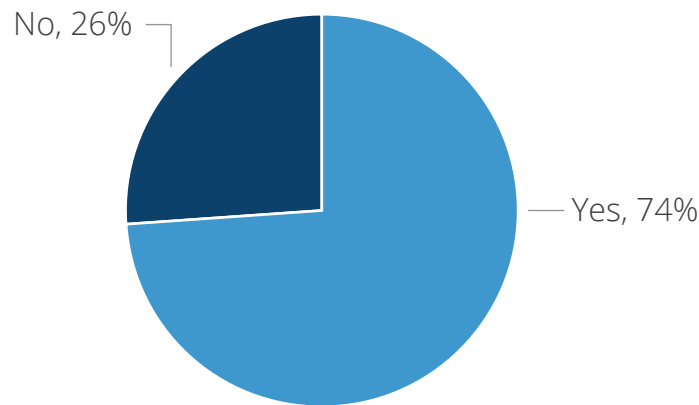
Analysis – Poll 3

3.1 Do you know anyone personally who has tested positive for COVID-19?

A. Method: Poll Question

B. Conclusion: When asked if they personally knew someone who had tested positive for COVID-19, 74% of participants responded yes & 26% responded no.

Poll 3.1: Do you know anyone personally who has tested positive for COVID-19?

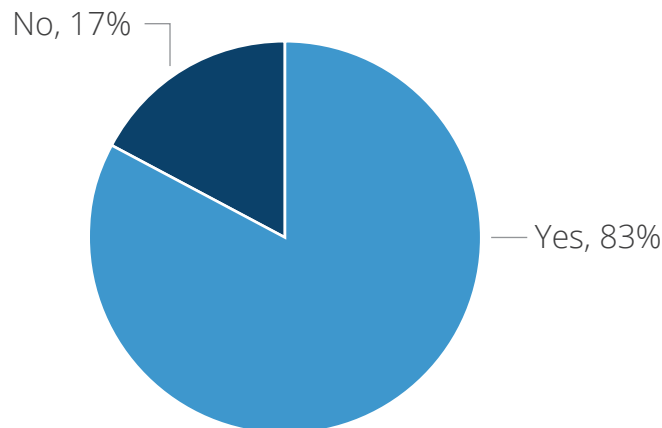


3.2 Do you feel safe under the current measures being taken by your State in controlling the spread of COVID-19?

A. Method: Poll Question

B. Conclusion: When polled about confidence in their individual State's safety measures during the COVID-19 Pandemic, 63% of the participants responded yes & 37% responded no.

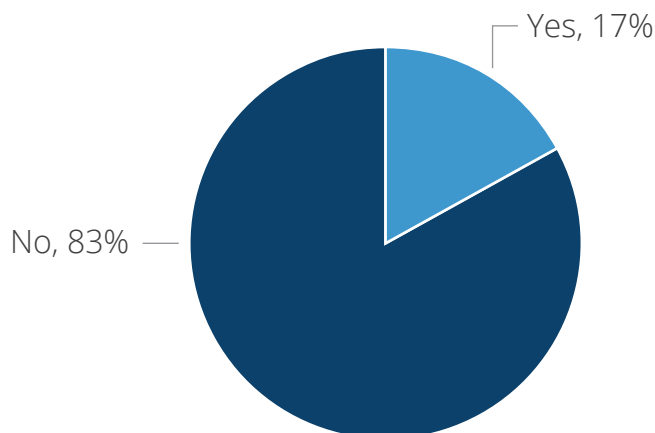
Poll 3.2: Confidence in State Mandated COVID-19 Safety Measures



3.3 Would you feel comfortable taking the vaccine for COVID-19 when it is released?

- A. Method: Poll Question
- B. Conclusion: When polled and asked if they would take a COVID-19 vaccine when one is released, 83% of participants responded they would not feel confident in the released vaccine & 17% responded they would take it if they had sufficient research upon its safety and efficacy.

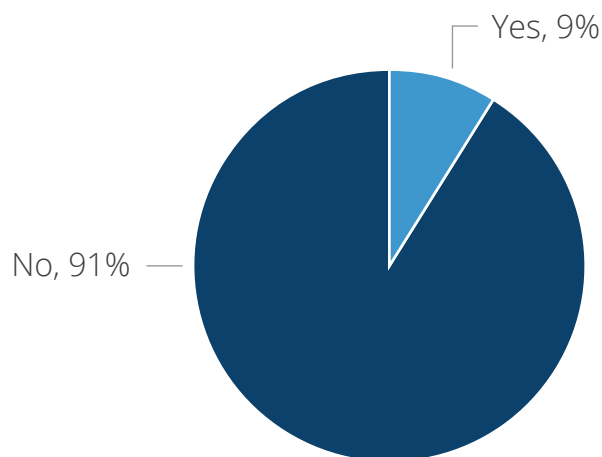
Poll 3.3: Confidence in COVID-19 Vaccine Upon Release



3.4 Would you feel comfortable encouraging others within your organization to take the COVID-19 vaccine upon release?

- A. Method: Poll Question
- B. Conclusion: When polled and asked if they would feel comfortable encouraging others within their organization to take COVID-19 vaccine when one is released, 91% of participants responded they would not feel confident in promoting the vaccine & 9% responded they would if they had sufficient research upon its safety and efficacy.

Poll 3.4: Confidence in Encouraging Others to take the COVID-19 Vaccine Upon Release

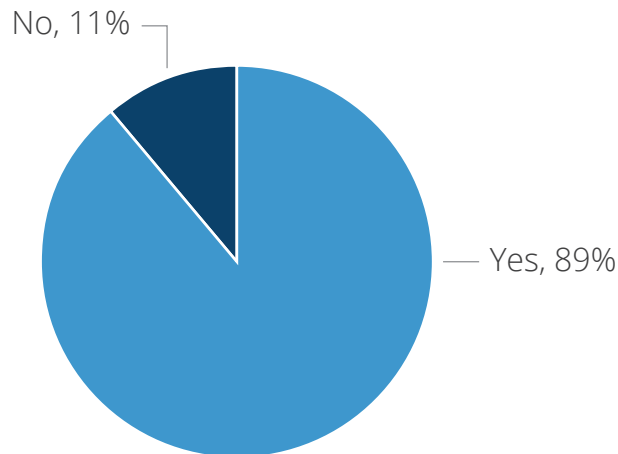


3.5 Do you feel your organization has the tools available to continue your operations effectively during the COVID-19 pandemic?

A. Method: Poll Question

B. Conclusion: When polled about their ability to continue operations effectively during the COVID-19 pandemic, 89% responded yes, they felt they had the tools necessary to continue effectively & 11% responded no.

Poll 3.5: Access to Tools for Continued Operation during the COVID-19 Pandemic



III. CONCLUSION(S)/ DISCUSSION

Chat Data: Focus Group 1

- More urban representation
- 90% of the group expressed extreme anxiety during this pandemic
- 40% said they knew someone who had relapsed since the pandemic
- 20% said they knew someone who had overdosed since the pandemic

Chat Data: Focus Group 2

- Even mix of rural and urban areas representation
- 75% of the group expressed extreme anxiety during this pandemic
- 75% said they knew someone who had relapsed since the pandemic
- 25% said they knew someone who had overdosed since the pandemic
 - Isolation was the suggested cause for most all the reported instances

Chat Data: Focus Group 3

- Amount of time in Recovery Work ranged from 9 months to 6 years
- Even mix of rural and urban areas representation
- Even mix of States in phase 2 and phase 3
- All participants are in Recovery
- Sources trusted for information
 - CDC most trusted / although some voted no to them as well
 - Family Physician seemed to be the most trusted
 - Those who did not trust family physician were participants who had prior work in the medical field or with Pharmaceutical companies
 - Felt too much money exchanged hands to trust Doctor advice

