

Overdose Prevention, Harm Reduction & Homelessness Advocacy in Philadelphia During the COVID-19 Pandemic

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Background

- The city's response to addressing the effects of COVID on this population has been problematic
 - Curfews
 - Deployment of police on encampments
- Environments once considered safe for people who use drugs(PWUDs) and those experiencing homelessness now pose a new risk of spreading COVID
- Human rights vs. personal well being debate
 - Are people caring about PWUD and the homeless population now because of the health risk posed to others?
 - Where has the city's response been lacking in the past and even now

Significance

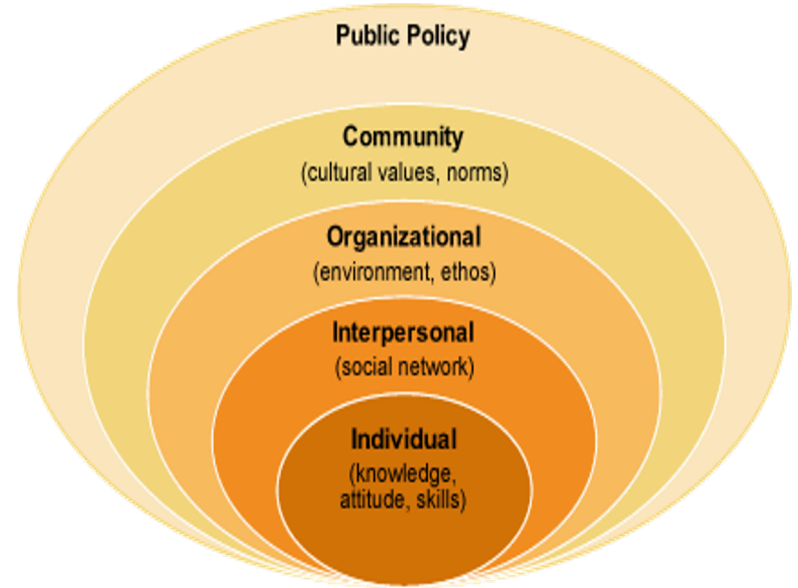
- COVID-19 has created a new barrier to promoting the health of people who use drugs(PWUDs) and those that are homeless
 - Decreased community outreach due to safety
 - Inability to follow CDC guidelines

Aims

- How are Philadelphia's harm reduction advocates, community organizers, and addiction clinicians responding to the overdose and homelessness crises during the pandemic?
 - What are the facilitators and barriers to promoting the health of PWUD and people experiencing homelessness during the pandemic?
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Methods

- Sample used: Harm reduction advocates, community organizers and addiction clinicians in Philadelphia area
 - Recruitment through social media and outreach to organizations like Prevention Point and SOL Collective
 - About 40 participants will be interviewed
- Interview guide based on the social-ecological model
 - model acknowledges that health is determined by influences at multiple levels (McLeroy, Bibeau, Steckler & Glanz, 1988, p. 355)



Social-Ecological Model

Methods cont.

- Thematic analysis using NVIVO
 - Was able to track emerging themes in the transcripts
 - Codes used described changes in operation, policy intervention, community response, and telehealth among others.

Nodes			
Name	Files	References	
Action Taken by the City and Impact on patients		2	3
Barriers to Promoting Health		3	14
Community Response and Outreach		1	2
Decreased		2	3
Increased		2	3
Deteriorating Patient Health		0	0
Employee Reception to Operational Changes Becasue o		0	0
Negative		1	2
Positive		0	0
Operational Changes due to COVID		0	0
Patient Reception of Effects of COVID from Provider's P		0	0
Permanent Operational Changes because of COVID		2	2
Policy Intervention		1	2
Reception of Telehealth		2	5

Preliminary Findings

- Philly's public health COVID initiatives for the homeless and PWUD have not been helpful

“

People need to have a safe place where they can have some hope of trying to stay healthy. And that needs to happen on a policy level.

”

Finding #2

- Lack of resources
 - Leaders in Philly harm reduction mentioning a severe lack of supplies, especially food and masks

“ I know that it has been limited (supplies). **People are hungrier.** People need supplies more than they used to ”

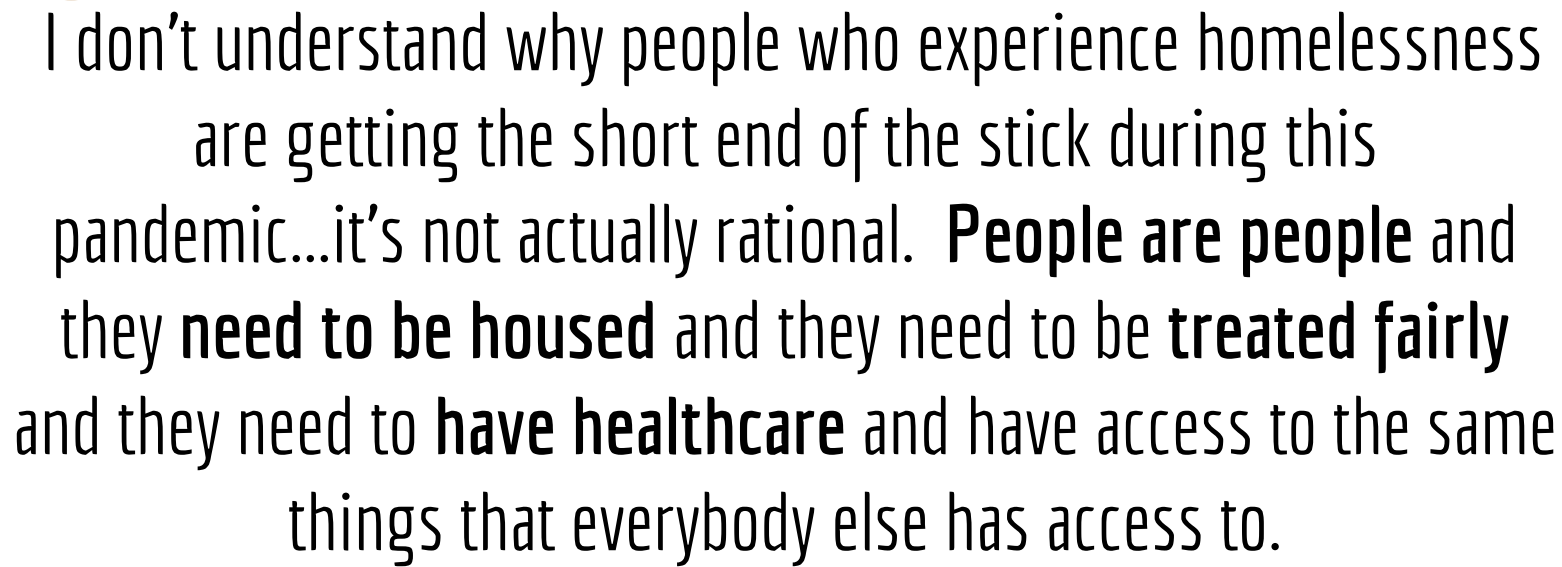

Finding #3

- Community support/physical presence has decreased
 - Less on the ground support and more monetary donations


“ I think that there are a lot less people that are going out and doing various kinds of outreach. ”

Lessons Learned

- The city needs to be more in tune with the needs of the people they are attempting to serve
- There is a lack of understanding of the situations faced by people that are homeless and PWUD



I don't understand why people who experience homelessness are getting the short end of the stick during this pandemic...it's not actually rational. **People are people** and they **need to be housed** and they need to be **treated fairly** and they need to **have healthcare** and have access to the same things that everybody else has access to.



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