

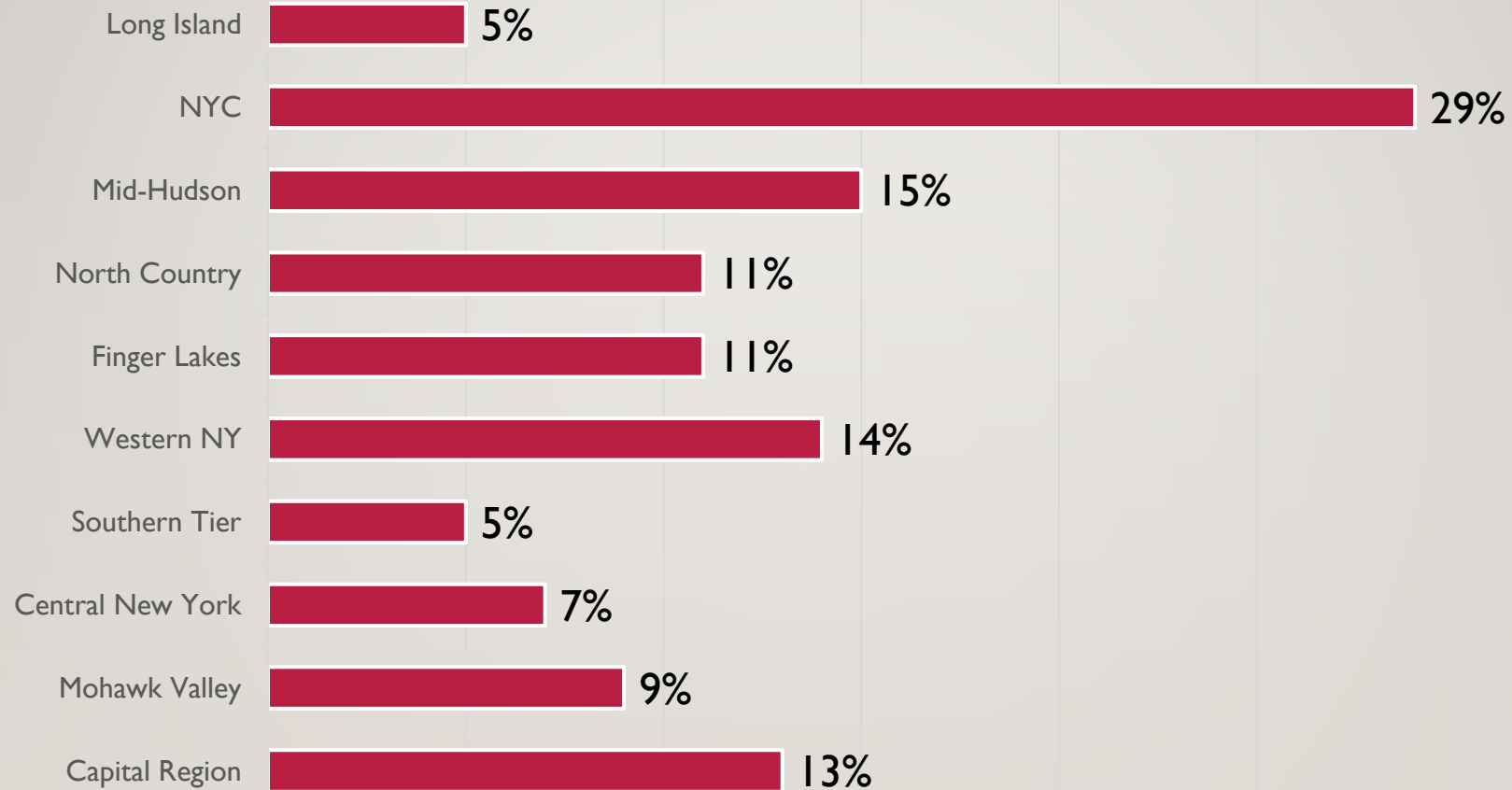
# RCO SURVEY:

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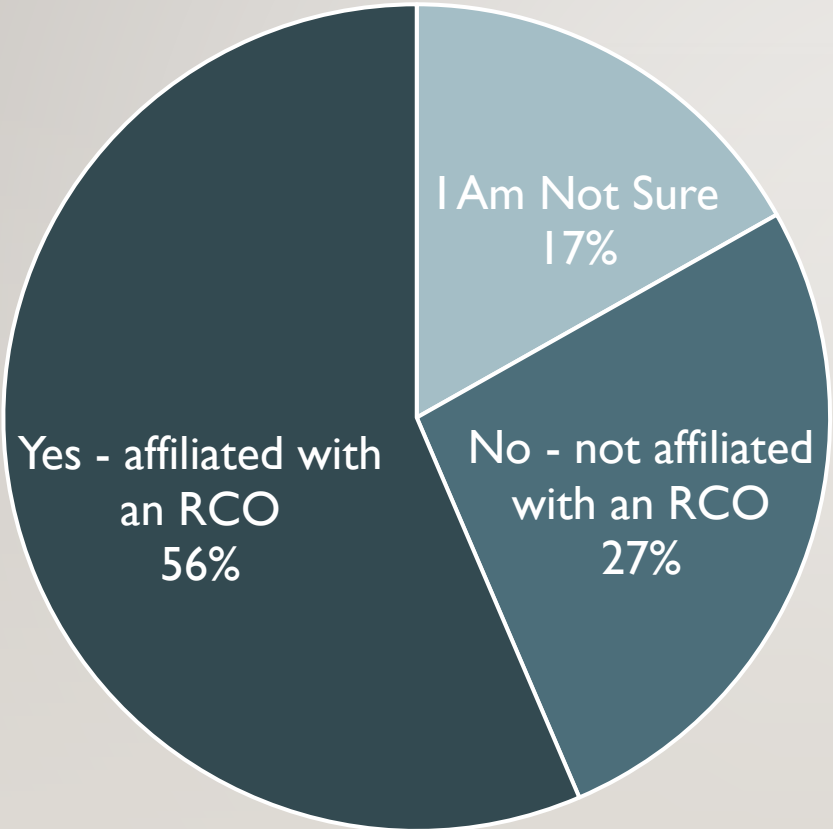
HOW NYS RECOVERY COMMUNITY ORGANIZATIONS ARE  
IMPACTED BY COVID-19 (PRELIMINARY RESULTS)



# SURVEY RESULTS - REGIONS



# SURVEY RESULTS – RCO AFFILIATION & COMMUNITY

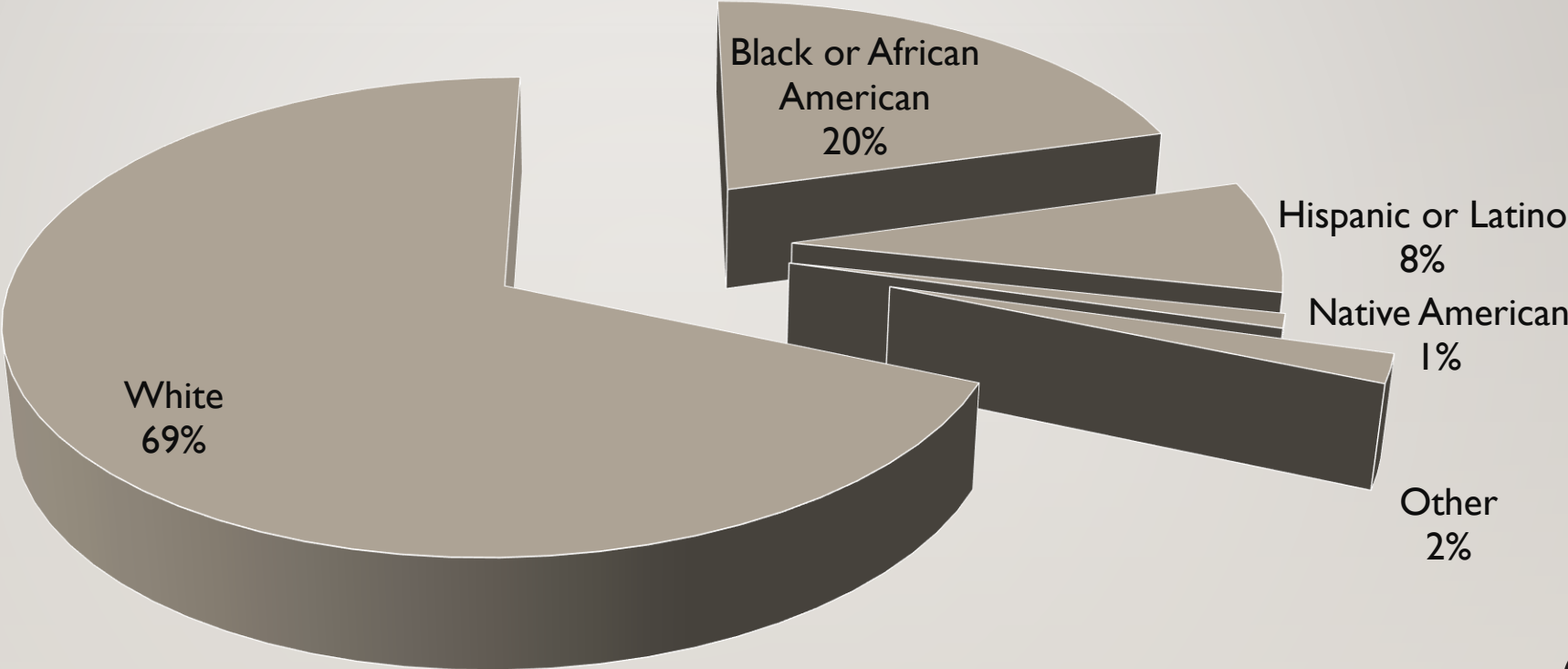


COMMUNITY	Count	Percentage
Suburban	35	31%
Rural	38	34%
Urban	43	38%



# SURVEY RESULTS – RACE / ETHNICITY

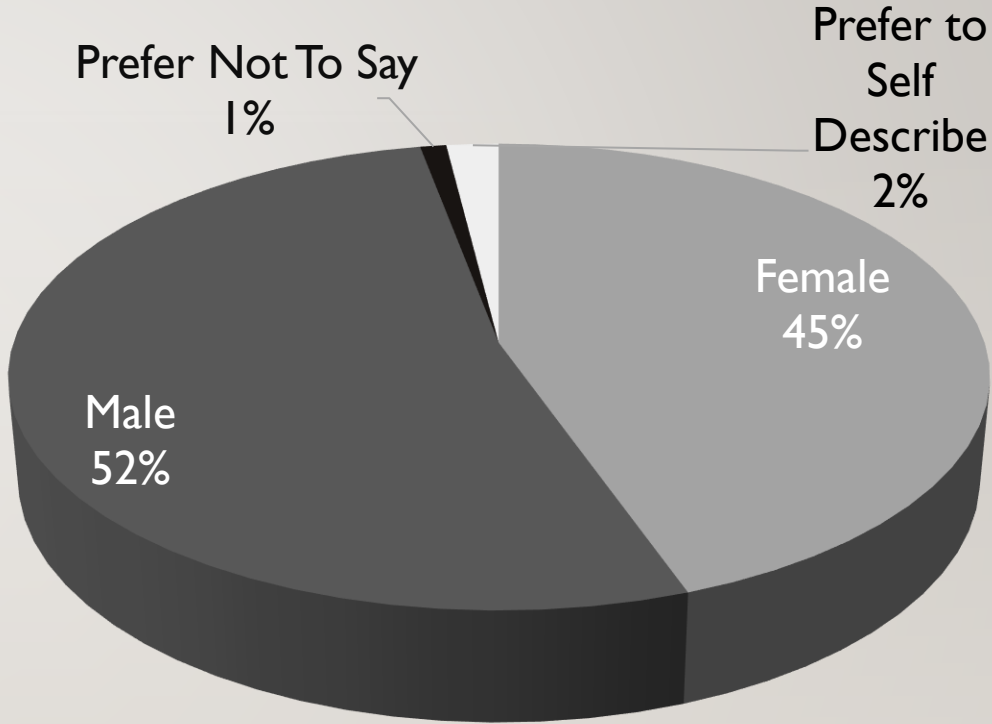
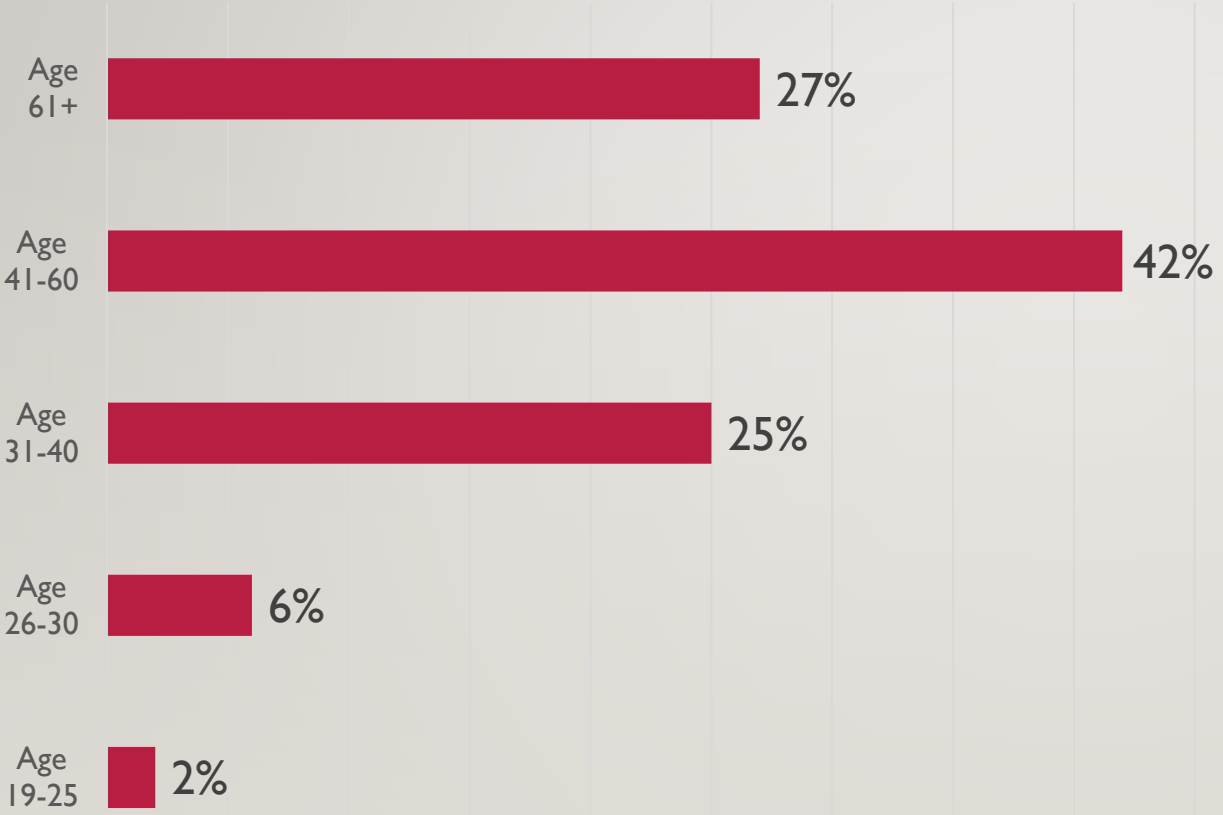
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Survey of COVID-19 Impact on NYS RCOs - April 2020



# SURVEY RESULTS – AGE & GENDER IDENTITY

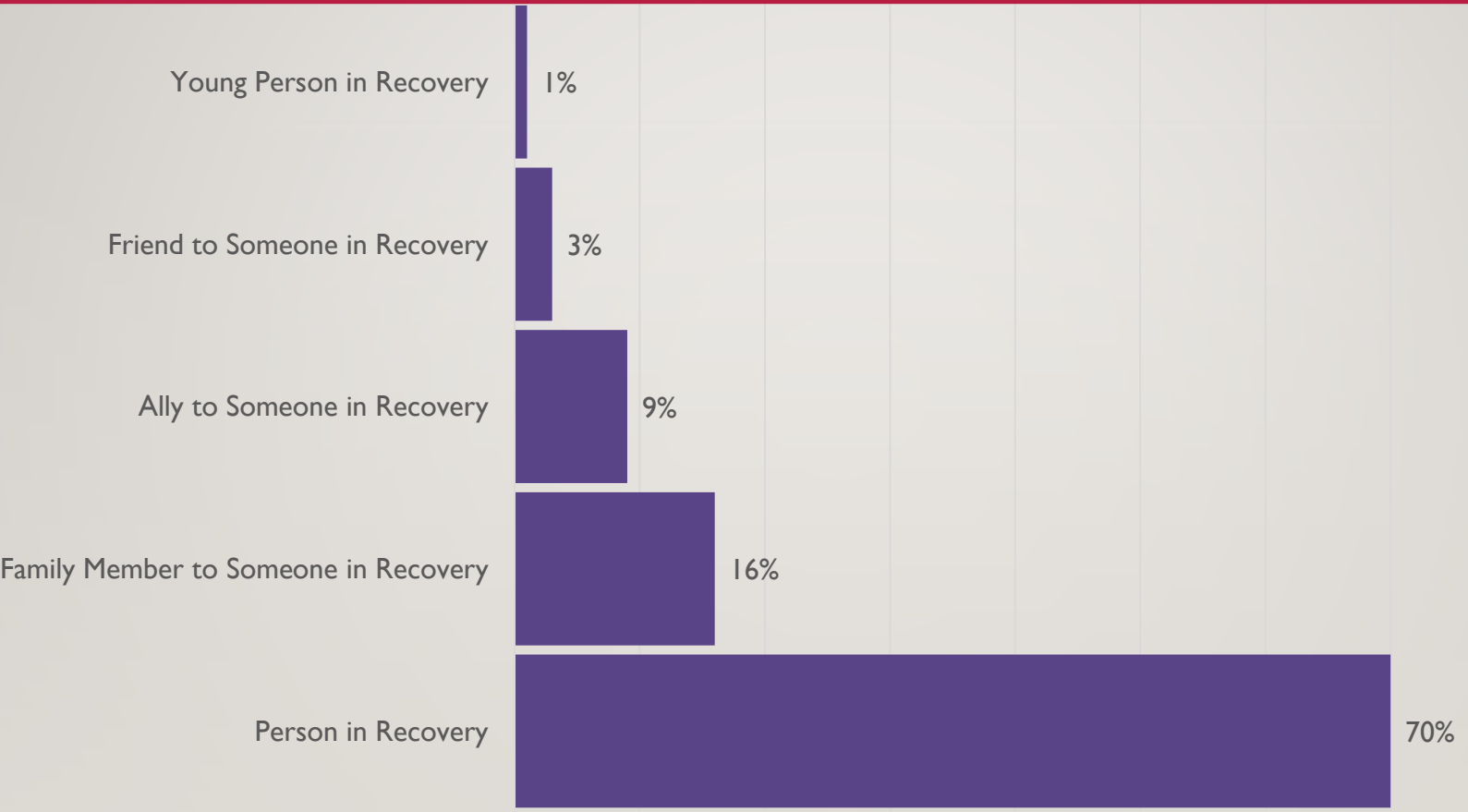


Survey of COVID-19 Impact on NYS RCOs - April 2020





# SURVEY RESULTS – RELATIONSHIP TO RECOVERY



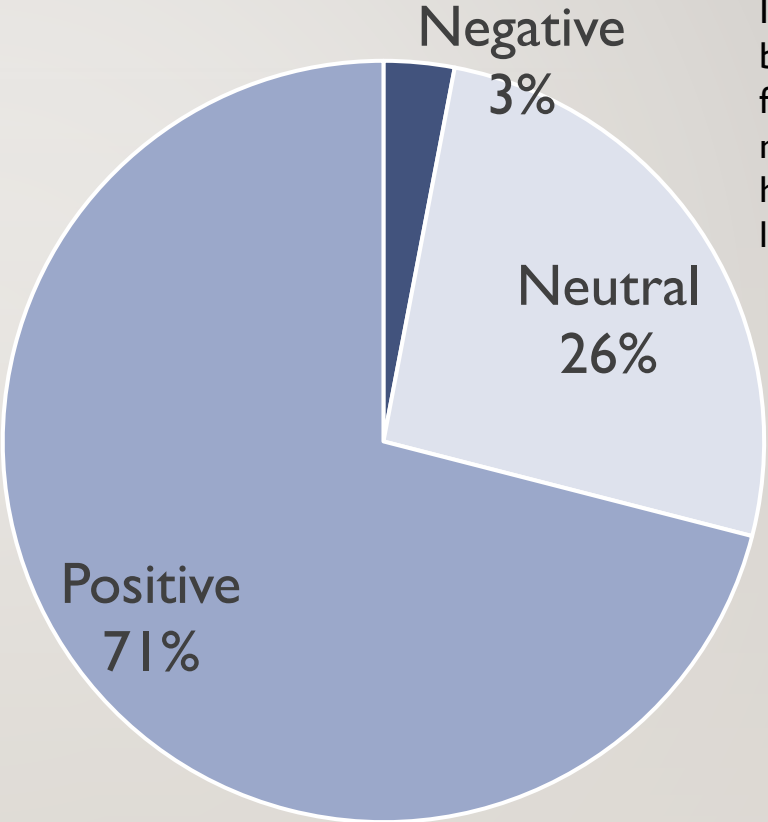
Survey of COVID-19 Impact on NYS RCOs - April 2020



# SURVEY RESULTS – ONLINE FORMAT EXPERIENCE

USE OF ONLINE MEETING SPACE UTILIZATION	Count	Percentage
No	12	11%
Yes	102	90%

Since Governor Cuomo issued guidance for all businesses deemed “non-essential” to work from home, has your organization been able to utilize online meeting space (Zoom, GoToMeetings, Google Hangout, etc) to have meetings and/or trainings?



If your organization has been able to use an online format to create events, meetings & trainings, what has your experience been like?



# IF YOUR ORGANIZATION HAS BEEN ABLE TO USE AN ONLINE FORMAT TO CREATE EVENTS, MEETINGS, TRAININGS, WHAT HAS YOUR EXPERIENCE BEEN LIKE?

---

**Services Used:** Zoom, Skype, Facetime, Google Hangout, Messenger, Facebook Live

- **Positive Comments**

- Still providing peer support (4)
- Happy to still have connection, comforting to see people over video conferencing (3)
- Daily Staff meetings, board meetings (4)
- Increase in daily numbers (1)





# IF YOUR ORGANIZATION HAS BEEN ABLE TO USE AN ONLINE FORMAT TO CREATE EVENTS, MEETINGS, TRAININGS, WHAT HAS YOUR EXPERIENCE BEEN LIKE?

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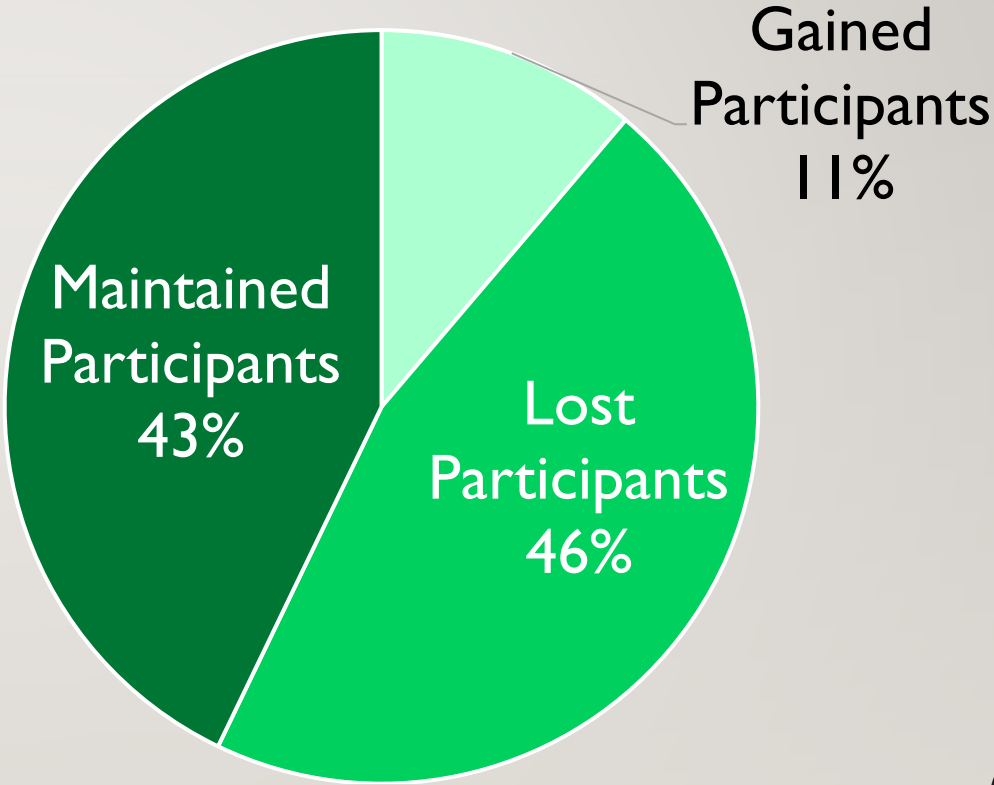
- **Neutral/Negative Comments**

- Need help conducting virtual meetings, fear for seniors, confusing, still learning/learning curve (7)
- Low attendance (2)
- Fear for security, unstable platform (2)
- Not as effective as in person (2)
- Difficult to maintain workload, stressful (2)
- Lack of technology means (indigenous population) (1)
- Inability to take public action (1)

# SURVEY RESULTS – PARTICIPATION

---

Since Governor Cuomo issued guidance for all non-essential businesses to allow employees to work from home, do you feel like your organization has....



Survey of COVID-19 Impact on NYS RCOs - April 2020





# COMMENTS FROM THOSE WHO GAINED PARTICIPANTS/ MAINTAINED PARTICIPANTS/LOST PARTICIPANTS

---

- **Gained Participants**

- Phone sessions, Zoom Sessions (2)
- Increased Outreach
- Once Closed individuals, now reconnecting

- **Maintained Participants**

- Some new people, people able to attend who before could not make appointments (4)
- Harder to get new people, greater challenge

to serve, monitor, and assist all of our current and incoming clients, stay in touch (4)

- Keeping in-touch via email and Zoom
- Planning to do Outdoor meetings in parking lot
- Lack of technology

# COMMENTS FROM THOSE WHO GAINED PARTICIPANTS/ MAINTAINED PARTICIPANTS/LOST PARTICIPANTS

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- **Lost Participants**

- While we offer FaceTime, Skype, and Zoom we still have seen a loss of participation for various reasons (home life is now too hectic to be seen, don't prefer the virtual option, too senior to understand how to use the virtual option; Use of technology is a barrier (access or ability) (5)
- Job is to go into the community and cannot do that at-the-moment, treatment court, lost community connection, lack of physical space (5)
- Did not have contact information (2)
- Recurrences, Overdoses
- Recent new members not able to engage
- Staff refusing to work
- Work considered not a priority
- Lost momentum
- Rigid system



# WHAT ARE YOUR MAIN CONCERNS AT THE CURRENT MOMENT (IF ANY) AS A RECOVERY PROGRAM?

---

## ❖ Concerns for Recovery Population (28)

- Concerns people will have a Recurrence/Overdose
- Concern for participants still struggling with addiction
- Concern over access to Narcan
- Concern for those in early recovery
- Concern for those in crisis not being able to access services
- Concern people will be denied treatment
- Loss of hope/depression
- Support for young people/support for people with family members with addiction
- Problem gambling should be addressed during this time
- Concerns for recovery population physical health
- Heighted risk of contracting COVID-19 (using drugs with others; keeping youth home and engaged)
- Lack of 12 step groups available
- Recovery population financial struggles/unemployed



# WHAT ARE YOUR MAIN CONCERNS AT THE CURRENT MOMENT (IF ANY) AS A RECOVERY PROGRAM?

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- **Technology (25)**

- Lack of trust in online meetings
- Can't adjust to online meeting format
- Overwhelmed by technology
- Lack of access
- Online formats are missing people
- Cannot access local resources
- Concerns for those who are homeless
- Telehealth less effective

- **Isolation (24)**

- Fear of isolation
- Cannot physically meet- social situations keeps people from using
- Inability to connect
- Inconsistent attendance with virtual meeting space
- Most vulnerable in community hard to reach/feel a lack of support
- Cancelled in person events
- Cannot come and go to meetings/events/physical space as normal

# WHAT ARE YOUR MAIN CONCERNS AT THE CURRENT MOMENT (IF ANY) AS A RECOVERY PROGRAM?

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- **Recovery Center Specific Concerns (16)**

- Loss of volunteers, participants
- How do we evaluate our services
- How do we supervise our staff
- How do we continue to get the word out about our services
- Concerns that centers/youth clubhouses will close permanently
- Providing Protective Equipment for staff/keeping staff safe from contracting COVID-19

- Product is less effective than in person
- Agency does not allow for use of zoom
- Lack of funding to recruit staff

- **Post Pandemic (3)**

- Addressing trauma after this period/post pandemic
- Stigma around COVID-19 Survivors

# WHAT ARE YOUR LONG-TERM CONCERNS (IF ANY) AS A RECOVERY PROGRAM?

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- **Positive outcomes** with virtual platforms, particularly for young people (telehealth, online support groups) (4)

# WHAT ARE YOUR LONG-TERM CONCERNS (IF ANY) AS A RECOVERY PROGRAM?

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## ❖ Returning to Normal (25)

- Getting our members, volunteers and our support groups back up and relevant
- Will people come back? Will we maintain relationships?
- Will young people come back?
- Training new Coaches; will people come back?
- How long will this last? The longer this goes on, the more people we may lose in our programming
- Re-opening physical space



# WHAT ARE YOUR LONG-TERM CONCERNS (IF ANY) AS A RECOVERY PROGRAM?

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- **Finances (17)**
  - Financial problems for community
  - Seeking funding
  - Ability to fundraise
  - Will OASAS continue to fund us?
  - Will funders understand our limitations?
  - Will we be sustainable?
  - Resources for Problem Gambling



# WHAT ARE YOUR LONG-TERM CONCERNS (IF ANY) AS A RECOVERY PROGRAM?

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- **RCO Operations (14)**

- Keeping staff safe and well
- Getting RCO up and running
- More people in crisis due to COVID-19 but the same number of staff
- Planning for future events
- Outreach to those who need us, current recoveries
- Can we meet our mission with a virtual platform
- How will we collect data?
- Maintenance is a win, but will funders agree? We cannot do services at the level we did before lockdown

# WHAT ARE YOUR LONG-TERM CONCERNS (IF ANY) AS A RECOVERY PROGRAM?

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- **Recovery Population (10)**

- Concern about Recurrence/Overdoses
- How do we bring those back in who have recurrence
- If focus is on overdoses, will the recovery focus be lost?
- COVID may delay personal goals
- The longer this lasts, the more risk of isolation

- Will we be able to link people to treatment
- Concern about physical well-being
- Create a toolbox for peers

- **COVID-19 Specific**

- Will we learn from this to make sure COVID-19 situation doesn't happen again

# WHAT PROGRAMS AND SERVICES – MEETINGS, PEER SUPPORTS, REFERRALS, ARE YOU STILL OFFERING RIGHT NOW AND HOW?

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- Same Services as before (4)
- ❖ **Peer Recovery Support including group work with peers and recovery coaching, family supports via Zoom, Phone, Facebook, Skype (36)**
- Referrals- to Treatment; Mental and Physical Health Providers; housing, food, assurance wireless program (24)
- Mutual Aid meetings including but not limited to 12 Step/Mutual Aid/One Recovery/Harm Reduction/SMART Recovery, Support/Loss Group; Bible Study via Zoom (17)
- Recreational activities including but not limited to; "Zoom Chats"; Facebook Live check-ins; coffee and chat; Jackbox and Zoom; movie night; visual art, meditation, book discussions, wellness activities, yoga; Zoom, Snapchat and Whatsap with youth; and more (14)
- Peer Network/Support Group (6)
- Physical Activities including Walking in the streets; food and essential delivery; meetings in parks; food pantry (4)

# WHAT PROGRAMS AND SERVICES – MEETINGS, PEER SUPPORTS, REFERRALS, ARE YOU STILL OFFERING RIGHT NOW AND HOW?

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- Residential (4)
- Staff meetings, training (3)
- RCO Meeting via Zoom (2)
- Helpline (2)
- Narcan Training
- Additional online supports: Social media to promote activities; Virtual calendar; Whats Ap; Microsoft Teams; Creation of Online resources guides





# IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO SAFE AND AFFORDABLE HOUSING, AND SPECIFICALLY "RECOVERY HOUSING" AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY

---

- **Positive**

- Continuing to make plans for recovery housing; recovery task force (2)
- Funding for the first time may be put into housing so that people can actually shelter in place (2)





# IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO SAFE AND AFFORDABLE HOUSING, AND SPECIFICALLY "RECOVERY HOUSING" AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY

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## ❖ Lost Access

- Discouraged communal housing; fear someone in residence may have COVID-19; hard to get into structured living environment at this time; not allowing new residents (16)
- Limited Access to temporary housing (2)
- "Stuck" in residential because can't get job or rent new apartment; want to stay in treatment - not move on because fear of contracting COVID-19; unsafe transition plans; discharged with no where to go (8)
- Documents needed to get into housing may not be accessible due to places closed
- Prison populations moving into housing



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- **Funding**

- Funding moving from housing to "more important" areas of concern; housing projects put on hold (11)

- **Housing Crisis**

- Landlords and tenants suffering financially - surge in housing crisis; increased demand for housing; compounding on a problem that was already a problem (7)

- **Residences**

- Staffing issues (3)
- Heightened NIMBY - increased stigma- recovery population viewed as more likely to be infected

- **Increased Risk of Contracting COVID-19**

- Cases of COVID-19 in shelters will be high (2)



# IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO SAFE AND AFFORDABLE HOUSING, AND SPECIFICALLY "RECOVERY HOUSING" AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY

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- **Solution**

- Should be renting hotels out to provide housing and support during this time
- Landline for landlords to communicate available units



# IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ADDICTION TREATMENT WITH RECOVERY WRAP AROUND SERVICES AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT ACCESS TO TREATMENT IN NEW YORK STATE?

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- **Possible Positive Outcomes**

- Make us more conscious of self-care (1)
- Good time to keep advocating; Advocacy for policy change will be stronger than before COVID (2)
- COVID could help us all unite (1)





## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ADDICTION TREATMENT WITH RECOVERY WRAP AROUND SERVICES AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT ACCESS TO TREATMENT IN NEW YORK STATE?

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### ❖ Treatment Less Available/Less Effective (28)

- Treatment facilities not accepting new patients/treatment centers closing/reducing number of patients/beds and limited access to treatment
- Social distancing makes treatment harder
- Treatment taking extra precautions; Tests for COVID-19 before admitted to treatment (takes more time) access to treatment more selective; treatment centers close
- People in fear; slow comeback due to health phobias
- Greater need for services
- More focus on harm reduction
- Running out of needed medication
- Lower quality of treatment
- Gaps in wraparound connection





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- **Issues with Telemedicine (11)**

- Telephone services/ TeleHealth; limited face to face support; hesitation to utilize face to face support
- Many people not being reached, don't have means to communicate virtually/tech issues

- **Facility Specific (6)**

- Some organizations struggling to stay afloat - expanding programming likely won't happen
- Outpatient services offering referral and treatment remotely, inpatient continuing to accept referrals
- Challenges with funding
- Staffing issues; staff scared

- **Not a Priority**

- Focus on COVID equipment and services rather than recovery services/make recovery services not important



**IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ADDICTION TREATMENT WITH RECOVERY WRAP AROUND SERVICES AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT ACCESS TO TREATMENT IN NEW YORK STATE?**

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- **Possible Solution**
  - Start a peer taskforce!



## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED RECOVERY RESOURCES SUCH AS PEER AND FAMILY SERVICES, RECOVERY CENTERS AND YOUTH CLUBHOUSES AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT THESE SERVICES IN NEW YORK STATE?

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### ❖ Normal/New Normal Recovery Services

- Normal' recovery services are not as available to support clients. 'Normal' services that are closed may unintentionally deter people from accessing virtual services or help at all. Contact with the most at-risk individuals and families may be lost. Limited access to 'normal' services due to COVID-19. (10)
- Working remotely is challenging. Understanding and utilizing online platforms to provide 'normal' services can be difficult. Hard to replicate physical services virtually. Only being able to provide services virtually, means larger gaps in services. (4)
- Long-term community growth by connecting with more people virtually and providing more offerings and programs to reach more people. Support is still provided and given to people during COVID-19. The recovery community is committed to providing whatever services possible during this time. Recovery support services whether in-person or virtual will always be needed. (4)





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- **Recovery Not Priority (8)**

- Focus not on recovery but on other "life saving services."
- Gatherings limited therefore a stop placed on recovery support services being a top priority.
- Focus is on healthcare and reducing the risk therefore, all other services are being put on the back-burner.
- Our services are not considered as essential.

- **Social Distancing (9)**

- Recovery Centers and Youth Clubhouses would violate the "social distancing" policies. People not visiting centers in fear of contracting COVID-19. Hard to reengage after COVID-19. It is difficult not providing services face-to-face. New membership will decrease due to closed doors. A decrease in membership engagement since virtual supports were put in place.





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- **Funding (6)**

- Less tax revenue to fund services. Fear of losing funding for recovery services. Anticipating funding opportunities much more limited. The need for funding for our services has been pushed to the side.

- **Age Differentials (5)**

- Virtual supports are different for generations. Young people utilize social media more than adults. The types of platforms being used are difficult to use. Virtual supports make it more difficult to keep young people connected. Young people are experienced in using social media platforms to support each other and so social media can be a to provide services.

- **Not enough knowledge or answers about the pandemic to begin answering the impact of it all**



## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO TRANSPORTATION AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT TRANSPORTATION FOR THE RECOVERY COMMUNITY IN NEW YORK STATE?

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### ❖ Social Distancing (20)

- Social distancing may impact transportation services. Local transportation is no longer offered to everyone. Transportation limitations due to risk of COVID-19. Lack of transportation needed for treatment and jobs. Less access to MediCab services. Challenging to find drivers who will drive people during the health crisis.
- Transportation and systems of delivery are more important now than ever. COVID-19 restrictions takes away many affordable options. There will be a huge increase of need in transportation once this pandemic is over. Higher demand, Lower availability.



## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO TRANSPORTATION AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT TRANSPORTATION FOR THE RECOVERY COMMUNITY IN NEW YORK STATE?

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- **Decreased Need for Transportation/Increased Need for Internet Service**
  - The need for transportation has decreased due to the transition of online services. The need for transportation has decreased, but the need for high speed internet has increased now. (3)
  - Virtual services will impact in-person groups in a positive way. Virtual services

can alleviate the need for transportation being provided by RCOCs. Being able to access services for any medical virtually is positive for the people who lacked transportation prior to COVID-19. Less transportation needed due to virtual services. Advancing available telehealth options may replace transportation as a primary means of service delivery. (5)





## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO TRANSPORTATION AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT TRANSPORTATION FOR THE RECOVERY COMMUNITY IN NEW YORK STATE?

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- **Priority of Recovery Community**

- Focus is more on 'life saving' transportation related services. Emergency transportation is still offered with 24-hour notice. Still transportation access for medical services. Public transportation is still accessible in some areas free of cost, but people are afraid to use it. Until there are Federal plan levels in place to address to resolve this pandemic,, all other issues must be addressed afterwards. (6)

- **Loss of Connection to Other Services**

- Lack of transportation for people prohibits the attainment of essential services (MAT). Still issues with transportation services needed to access essential services such as food. (3)

- **Limited Peer Support**

- Peer deployments and transportation assistance has been reduced to protect staff. Because we don't have access to preventive health masks/gloves we cannot transport our youth. (3)





## IN A SURVEY CONDUCTED IN OCTOBER 2019, THE RECOVERY COMMUNITY SELECTED ACCESS TO TRANSPORTATION AS A TOP PRIORITY TO ADVOCATE FOR AS A STATEWIDE RECOVERY MOVEMENT. HOW DO YOU BELIEVE COVID-19 MAY IMPACT TRANSPORTATION FOR THE RECOVERY COMMUNITY IN NEW YORK STATE?

---

- **Finances**

- Lack of funds for transportation needs. Ramifications of financial losses and recession has the potential in loss of services. Providing internet access and financial support for low-income community members to have access to phones and internet will be critical. (4)

- **Transportation Still Occurring**

- Services offered for transportation such as 'volunteer driving' and circulation transportation during this time.
- Highway construction and infrastructure repairs have been happening more. (3)

- **We don't know enough about this pandemic to even begin answering the impact of it at all**

# SURVEY RESULTS – OFFERING ONLINE GUIDANCE

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Would you be willing to offer any support or guidance in an online forum to other programs around the state? For example, if you are having a lot of success leading all recovery meetings via Zoom, would you share the “how to” in an online forum?

**42% said YES!**

# PLEASE LET US KNOW HOW FRIENDS OF RECOVERY - NEWYORK CAN BEST SUPPORT YOUR ORGANIZATION DURING THIS TIME

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- Doing a good job; people are happy that we are still available (8)
- Providing Resources
- ❖ **Provide grant information, provide additional resources, online trainings and resources for consumers and professionals, supervisors, zoom meetings and services, journals (20)**
- "Best practice advice on Zoom for everything from RCA to support groups" (1)
- Engaging members virtually, CBRS meetings, continue providing a recovery support network (5)

# PLEASE LET US KNOW HOW FRIENDS OF RECOVERY - NEW YORK CAN BEST SUPPORT YOUR ORGANIZATION DURING THIS TIME

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- **Organizing and Advocacy**

- “Continued advocacy for funds for recovery centers, funds in general, systems change, 12 step meetings, Access to MAT, Support clubhouses, after-hours programs, counselors and organization; advocate for opioid settlement money to be given to housing, transportation technology and new and emerging RCOs (11)

- How to Build and grow RCO, Peer Run RCOC (2)
- Continue to collect this type of information/data directly from recovery community" (3)