

# “A Qualitative Study of People With Opioid Use Disorders’ Experiences During the COVID-19 Pandemic”

## Research Objective

How are individuals with opioid use disorder understanding, experiencing, and navigating this unprecedented time?

## Methods and Sample

Interviewed 25 individuals in Chicago, using a convenience sample.

24 identified as Black and 1 identified as Hispanic/Latino. The majority had low education, high rates of unemployment, and low income; half were not independently housed. Majority (19) were receiving methadone treatment.

## Key Themes Identified

COVID considered dangerous though some misinformation existed	“I know it’s killing people. I know it’s a very bad virus, and it’s rough. It’s got people scared” (53-year-old man).
Pandemic increased treatment motivation for some	“Because [there are] not many people on the street no more [to panhandle from]” (53-year-old man).
The changing nature of interactions with recovery and supports (both good and bad)	“I prefer twice a week personally because I have other things [to do].” (49-year-old man) “It’s just really hectic, you can’t communicate with people. ...it’s just made things terrible” (67-year-old man).
Reduced social support	“Well, actually, it’s made me lazy. Not getting up and making meetings begins to make you become more idle. And then you become complacent and then it’s easier for you to pick up again...without the fellowship, you know, it’s hard to stay focused and stay clean” (57-year-old woman).
Inability to find financial support	“Well, actually, I was doing warehouse work...I was only doing it two more years [before I could] sit down and retire...They laid people off because, actually, the plant was shut down for a while. It was because of the COVID” (57-year-old male).

## TAKEAWAYS

Focus on two key areas of recovery capital, social support and employment, both of which were negatively impacted by the pandemic. Peer support specialists may play an increased role. In addition to providing social support, they could assist people with employment issues. Employment is key to recovery in that it provides meaning to people’s lives, as well as insurance and income that can help cover treatment costs and improve retention. Perhaps the greatest takeaway is that the true measure of a society is how we treat our most vulnerable.