

Downtown Brockton

Health Services Snapshot



Learn more about just *some* of the services our organizations provide:

BAMSI COPE Center

- **55,000+** people receive BAMSI services each year
- **170,600 syringes collected** since July 2022, and...
- **5,607** service encounters provided to **1,617** unique individuals
- **543** tests and confidential counseling for sexually transmitted infections (STIs)
- **2700** doses of Narcan provided, along with overdose prevention training and education
- **73 referrals** to substance use treatment by full-time Case Manager
- Street outreach, wound care, referrals to medical care, including HIV and Hepatitis C treatment
- Syringe services include disposal and education
- Provide items such as socks, coats, hygiene products, blankets, which can be life and limb saving

Brockton Neighborhood Health Center

- **37,000+ patients** provided clinical care each year
- Medical and behavioral health services offered, including **MainSpring shelter & mobile** medical unit
- **304+ people treated** for walk-in medical care, substance use treatment, wound care, and clinical services by mobile unit since 2021
- **400+ patients** receiving substance use treatment at 63 Main St. each year
- **9,104** doses of Narcan provided since 2021
- Harm reduction education and supplies including syringe distribution and collection, Narcan, condoms, and other supplies for basic needs provided
- Treatment for HIV, Hepatitis C, tuberculosis, and other infectious diseases provided

What would happen without these services?

- **Increases in infectious diseases.**
 - Programs like BAMSI's and BNHC's are shown to reduce new cases of HIV and Hepatitis C by about half. This means without these services, new cases could as much as double in Brockton. Health programs like these are cost saving to the community, for example preventing 1 new HIV infection can save \$326,000 in lifetime medical costs.
- **Fewer people getting treatment for mental health and substance use.**
 - People who go to harm reduction programs are 5x more likely to enter treatment and 3x more likely to stop using drugs than people who do not.
- **More improperly discarded syringes in the community.**
 - A city *without* a syringe services program was found to have 8x more improperly discarded needles than a city *with* one.
- **Increased volume of Emergency Department visits.**
 - Our local Emergency Departments are already overwhelmed. Services like these prevent infections, wounds/skin issues, and serious intoxication that can keep people out of the ED.

These recommendations are drafted based upon practices that are evidence-based and demonstrate ability to: save lives, improve quality of life, promote public safety, and reduce costs to society.

1

Housing First. Create more low-threshold, emergency housing.

Offering people a safe place to sleep helps save lives. We caution against forced displacement or “sweeps” as they increase risk of death, illnesses, and decrease medication access. Best practice would build a Housing First model to meet the unique needs of Brockton’s diverse population.

2

Establish a syringe buy-back program instead of restricting distribution.

Boston, New York, and other cities have incentivized syringe return (20¢ per syringe, up to \$10 per day). This type of policy promotes continued reduction of HIV and Hepatitis C in our city, while discouraging improper disposal of syringes. This should be coupled with increased access to syringe return kiosks in our community.

3

Open public restrooms downtown.

Other communities have used Community Development Block Grants to install public restrooms and address open defecation in their cities. There are currently no public restrooms in Downtown Brockton. Installing them can help reduce open defecation.

4

Provide somewhere for people to go during the day.

There is currently no funded, comprehensive drop-in center or other place for unhoused folks to go during the day. Creating a space that people could access regardless of sobriety can help provide linkage to services and improve community safety.

5

Consider a street-based psychiatry program.

Street psychiatry programs are a promising practice that can promote engagement in clinical mental health care and start to stabilize those least likely to have access to psychiatric care.

6

Look at policies and programs that address the built environment.

Ensuring adequate trash, dog waste, and recycling receptacles can help reduce litter. Policies banning plastic bags or other single-use plastics may help reduce litter.