

How did AODS survive during COVID-19 pandemic (2020-2022)?

Trends of service utilization of Alcohol and Other Drugs Services (AODS) during COVID-19: A Scoping Review

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Introduction: COVID-19 affected service delivery and utilization of AODS worldwide and a negative impact on service users was predicted.

Objectives: Understand the trends of service utilization of AODS worldwide, identify common contributors and knowledge gaps, and provide directions for future disaster preparedness planning.

Method: Medline, Embase, CINAHL, PubMed and PsycINFO were searched for original articles published in English, focused on quantitative analysis of substance use disorder (SUD) treatment services during COVID-19 (Dec 2019 – Dec 2022). After de-duplication of 1546 search results, 938 - screened and 43 - reviewed in full text. Final data extraction performed on 30 studies.

Main characteristics of included studies

Study Population

General service users (23)

Targeted service user populations (07)

-National Veteran Health Administration (VHA) (02)

-Commercially insured (05)

Study design

Retrospective longitudinal studies (21)

Cross-sectional studies (04)

Cohort studies (03)

Surveys of service providers (02)

Period of study

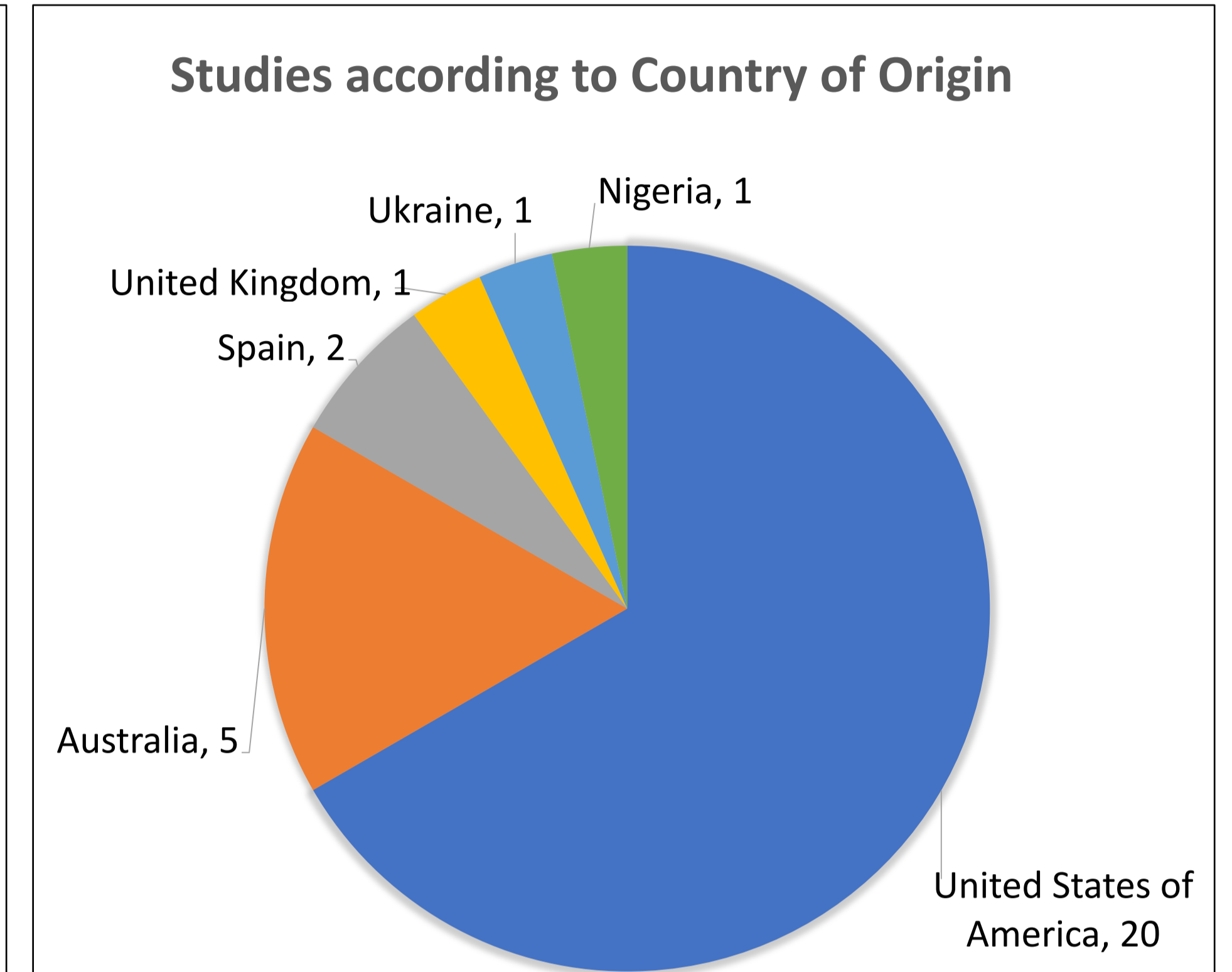
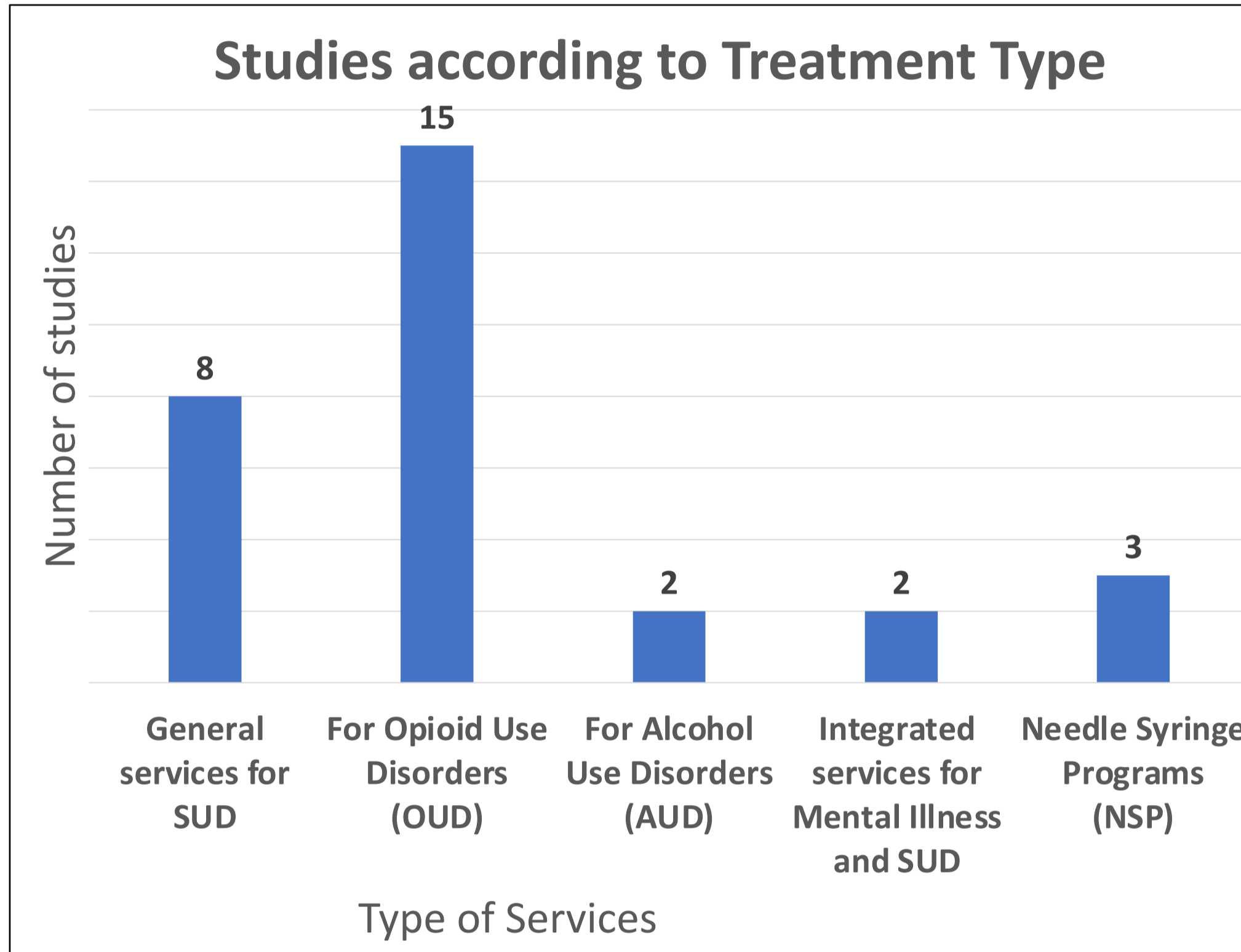
Within **January - June 2020** only (13)

+ **July - December 2020** (10)

+ **January - June 2021** (11)

+ July - December 2021 - none

+ Year 2022 - none



Discussion

- The impact of COVID-19 on AODS changed over time & according to,
 - ✓ The drug/ treatment type
 - ✓ Geographical remoteness
- Main contributors to minimizing disruptions in service utilization included,
 - ✓ Treatment-related policy changes
 - ✓ Telehealth
 - ✓ Newer treatment modalities
- Longitudinal studies beyond 2021, and studies on regional/ rural AODS and AOD workforce recommended.

Key Findings

During COVID-19 (2020 to mid-2021):

- A decreasing trend of service utilization during the initial COVID outbreak was followed by improved use in most treatment types.
- Higher disruption observed in,**
 - Residential programs
 - Outreach services
 - Home visits
 - Group therapy
 - Needle Syringe Programs
- Better service utilization seen in,**
 - Medication provision for opioid use disorder (OUD)
 - Individual counselling
- Geographical differences in service use noted:**
 - ↑ Use (compared to pre-COVID period) found in Australia,
 - Detoxification services - Rural areas
 - Counselling - Metropolitan areas
 - ↓ Treatment initiations, especially for OUD
 - ↑ Retention and treatment adherence
 - ↑ Use of opioid long-acting injections reported from Australia
- Improved service utilization** - associated with telehealth & policy changes
- Telehealth** - associated with expansion of rural catchment & broadening of service-user profiles



What can be expected in future? What can be done?

Implications for Practice or Policy

- Demand for AODS may increase in the post-acute COVID-19 period.
- For effective service delivery in post-acute phase, interventions need to be adapted according to,
 - The SUD & treatment type
 - Characteristics of the service users
- Highlight need of contingency plans for infectious outbreaks in guidelines, policies and procedures.
- Understanding impact on staff well-being is important to face the post-acute phase and plan for future outbreaks.

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