

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

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Introduction: COVID-19 has affected service delivery and utilization of Alcohol and Other Drugs Services (AODS) worldwide and this can be associated with negative outcomes for service users. The aims of this review include understanding the trends of service utilization of AODS worldwide, identifying common contributors and knowledge gaps, and providing directions for future disaster preparation.

Method: Medline, PubMed, Embase, CINAHL and PsycINFO were searched for original articles published in English, focused on quantitative analysis of trends of service utilisation in AODS during COVID-19 since 2019. Of the 1546 search results, 938 were screened after de-duplication and 43 were reviewed in full text. Final data extraction was performed on 30 studies fulfilling the criteria.

Key Findings: Twenty-nine studies were from high-income countries and 15 were focused on medications for opioid use disorders (MOUD). An initial reduction of service utilization followed by gradual improvement was seen in most treatment areas, with most disruptions in residential programs, outreach services, home visits, group therapy and needle syringe exchange programs and the least disruptions in MOUD. Treatment initiations for substance use disorders (SUD) decreased, while treatment adherence among service users improved during COVID-19. Use of telehealth and treatment-related policy changes were associated with improved service utilization. Telehealth was associated with expansion of catchment area and broadening of the service-user profile. An increased tendency to use the newer treatment modality of opioid long-acting injection was reported in Australia.

Conclusions: Treatment-related policy changes and telehealth have substantially contributed to maintaining service utilization of AODS during COVID-19. Further studies beyond 2021, and on rural services, are needed.

Implications for Practice or Policy: Continuation of interventions such as telehealth and policy changes, require effective application, considering multiple factors such as the type of SUD, treatment modality and characteristics of the service users.

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