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“A Literature Review, using a systematic approach, on Effective Interventions and Approaches in the Delivery of Integrated Alcohol Services in Community Settings”

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No conflict of interest to declare

Background and Aim of Review

Literature Review with a systematic approach

Background: There has been a rise in alcohol use worldwide with increases in defined levels of harmful and binge drinking recorded across Ireland.

The role of integrated community care has been identified by the World Health Organisation (WHO) with health authority policy in Ireland prioritising community care.

Aim: This review aims to provide evidence-based best practice and proven interventions.

Methods

Literature Review with a systematic approach

A literature review, with a systematic approach was used to synthesise the evidence

Time: articles published from 2010-2021

Four main concepts (with relevant keywords) agreed prior to the Search:

1. Integration, Implementation, Delivery
2. Alcohol Treatments/Services
3. Setting
4. Alcoholism

Methods 2

Databases Searched: 6

1. EMBASE (Excerpta Medica database)
2. Medline (National Library of Medicine)
3. CINAHL (Cumulative Index to Nursing and Allied Health Literature)
4. ASSIA (Applied Social Sciences Index and Abstracts)
5. Web of Science
6. GIM (Global Index Medicus) – WHO repository

Inclusion Criteria

- **Population:** Adults aged over 18 years and people attending alcohol addiction services in the community
- **Interventions:** All intervention types within community setting
- **Comparison:** No comparison group
- **Outcomes:** Risk of relapse, physical and mental health, family relationships, work status, harm reduction, implementation and integration strategies

Review Process	N=
Search - initial	13677
Final Number of Articles (De-dup)	6663
Final number after De-duplication	4890
Animal studies removed	4682
Title and Abstract Screening (Primary Reviewer EMc)	4682
Full-text articles remaining	167
Full-text articles screened (Primary Reviewer EMcC)	167
Full-text articles screened independently (CC, SB, KT)	167
Full-text articles remaining for extraction	29

**29 articles
extracted**

Categories

29 articles, 6 categories

1. Brief Interventions: Nurse practitioner effective, gender differences = females had little change, delivered in addition with motivational therapy and by healthcare professionals

2. Harm Reduction programmes: Staff training, intervention length/scope, and patient driven goals

3. Implementation: Staff training, electronic health records and systems, time/timeframe, and mental health

Categories

29 articles, 6 categories

- 4. Integration:** Housing, team approach, implementation and integration approaches, one-stop shop and harm reduction philosophy
- 5. Technology (phone, online, MI):** limited evidence for use of mobile phone/smartphone for interventions, specific to populations
- 6. Therapy interventions:** Group psychotherapy, Integrated Cognitive Behaviour Therapy, technology interventions and staff training

Recommendations

Main points to consider

1. Staff and Team composition
2. Training priorities – stigma, inclusivity
3. Leadership capacity development
4. Sustainability
5. Pilot interventions – suggested
6. Timing and duration of interventions
7. Measurement instruments – design, listing
8. Monitoring and Evaluation



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Go raibh maith agaibh!

Thank You

BRIEF INTERVENTION	Title	Authors	Year
Brief Intervention, Implementation <u>effective</u>	<p>Brief interventions are effective in reducing alcohol consumption in opiate-dependent methadone-maintained patients: Results from an implementation study</p> <p>Discussion and Conclusions. It is feasible for a range of clinicians to screen for problem alcohol use and deliver BI within community methadone clinics. Opiate-dependent patients significantly reduced their alcohol consumption as a result of receiving a BI. Brief interventions are effective in reducing alcohol consumption in opiate-dependent methadone-maintained patients:</p>	Darker, Catherine D.; Sweeney, Brion P.; El Hassan, Haytham O.; Smyth, Bobby P.; Ivers, Jo-Hanna H.; Barry, Joe M.	2012 Ireland
Brief intervention, community <u>mixed</u>	<p>Evaluation of alcohol screening and community-based brief interventions in rural western Kenya: A quasi-experimental study</p> <p>Short summary: Community-based alcohol brief interventions implemented by community-health workers accompanied by motivational talks by former drinkers were associated with reduced hazardous and harmful alcohol consumption in a rural setting in western Kenya.</p>	Takahashi, R.; Wilunda, C.; Magutah, K.; Mwaura-Tenambergen, W.; Atwoli, L.; Pongpan, U.	2018 Kenya
Brief intervention, group <u>effective</u>	<p>Effectiveness of brief group intervention in the harmful alcohol use in primary health care</p> <p>Conclusion: It was evidenced that GBI was effective in increasing the motivation to change harmful alcohol intake.</p>	Soares, Janaina; Vargas, Divane de	2018 Brazil
Brief intervention, primary care <u>mixed</u>	<p>"We improved our life because I cut my drinking": Qualitative analysis of a brief intervention for people with alcohol use disorder in Ethiopian primary health care</p> <p>Conclusion: The brief intervention that non-specialist health workers in PHC delivered was acceptable, feasible, and perceived to have positive benefits. To extend the impact of the intervention, the community needs to be involved to address low awareness and to tackle stigma.</p>	Zewdu, Selamawit; Hanlon, Charlotte; Fekadu, Abebaw; Medhin, Girmay; Teferra, Solomon	2021 Ethiopia

HARM REDUCTION	Title	Authors	Year
Harm reduction homeless <u>effective</u>	<p>Randomized controlled trial of harm reduction treatment for alcohol (HaRT-A) for people experiencing homelessness and alcohol use disorder</p> <p>Conclusion: A low-barrier, low-intensity, patient-driven, harm-reduction approach has at least short-term efficacy in improving AUD outcomes in this population. Future studies are needed to establish its longer-term efficacy</p>	Collins, S. E.; Clifasefi, S. L.; Nelson, L. A.; Stanton, J.; Goldstein, S. C.; Taylor, E. M.; Hoffmann, G.; King, V. L.; Hatsukami, A. S.; Cunningham, Z. L.; Taylor, E.; Mayberry, N.; Malone, D. K.; Jackson, T. R.	2019 US
Harm reduction, homeless goal setting <u>effective</u>	<p>Dual study describing patient-driven harm reduction goal-setting among people experiencing homelessness and alcohol use disorder</p> <p>Public Health Significance Patient-driven harm-reduction goal-setting is feasible and helps people generate personalized and clinically relevant goals. Some aspects of harm-reduction goal-setting are associated with improved treatment outcomes over time; however, further study is needed to more fully understand how harm reduction goal-setting is associated with treatment outcomes.</p>	Fentress, Taurmini S. P.; Wald, Sazi; Brah, Aaron; Leemon, Griffin; Reyes, Rosemary; Alkhamees, Fatma; Kramer, Madeline; Taylor, Emily M.; Wildhood, Megan; Frohe, Tessa; Duncan, Mark H.; Clifasefi, Seema L.; Collins, Susan E.	2021 US
Harm reduction, homeless MAP <u>effective</u>	<p>Do managed alcohol programs change patterns of alcohol consumption and reduce related harm? A pilot study</p> <p>Conclusions: The quantitative and qualitative findings of this pilot study suggest that MAP participation was associated with a number of positive outcomes including fewer hospital admissions, detox episodes, and police contacts leading to custody, reduced NBA consumption, and decreases in some alcohol-related harms. These encouraging trends are being investigated in a larger national study.</p>	Vallance, Kate; Stockwell, Tim; Pauly, Bernie; Chow, Clifton; Gray, Erin; Kryswaty, Bonnie; Perkin, Kathleen; Zhao, Jinhui	2016 Canada
Harm reduction, MAP, homeless <u>effective</u>	<p>Finding safety: a pilot study of managed alcohol program participants' perceptions of housing and quality of life</p> <p>Conclusions: The MAP was, as described by participants, a safer environment and a home with feelings of family and a sense of community that countered stigma, loss, and dislocation with potential for healing and recovery. The MAP environment characterized by caring, respect, trust, a sense of home, “feeling like family”, and the opportunities for family and cultural reconnections is consistent with First Nations principles for healing and recovery and principles of harm reduction.</p>	Pauly, Bernadette Bernie; Gray, Erin; Perkin, Kathleen; Chow, Clifton; Vallance, Kate; Kryswaty, Bonnie; Stockwell, Timothy	2016 Canada

IMPLEMENTATION	Title	Authors	Year
<p>Implementation</p> <p>Evaluation</p> <p><u>Mixed</u></p>	<p>Evaluation of a Pilot Implementation to Integrate Alcohol-Related Care within Primary Care</p> <p>Conclusion: The approach implemented by KP Washington to integrate alcohol-related care as part of behavioral health integration increased alcohol screening and assessment rates for AUD, and appeared to increase rates of new AUD diagnosis and treatment. The full pragmatic trial will evaluate this approach across sites that were not selected as “early adopters” by clinical leaders. Furthermore, randomization of implementation start dates will provide stronger evidence as to a causal link between the SPARC implementation and changes in alcohol-related care.</p>	<p>Bobb, Jennifer F.; Lee, Amy K.; Lapham, Gwen T.; Oliver, Malia; Ludman, Evette; Achtmeyer, Carol; Parrish, Rebecca; Caldeiro, Ryan M.; Lozano, Paula; Richards, Julie E.; Bradley, Katharine A.</p>	<p>2017</p> <p>US</p>
<p>Implementation</p> <p>homeless, integration, community</p> <p><u>Effective</u></p>	<p>Improving outcomes for homeless people with alcohol disorders: a multi-program community-based approach</p> <p>Conclusions: Community-based programs that coordinate with mobile outreach teams and then provide CRA and ACT/IDDT appear to be promising approaches for helping individuals with alcohol disorders out of homelessness and into recovery.</p>	<p>Morse, Gary A.; York, Mary M.; Dell, Nathaniel; Blanco, Julie; Birchmier, Chelsea</p>	<p>2020</p> <p>US</p>
<p>Implementation</p> <p>Training Skills GP, primary</p> <p><u>Mixed</u></p>	<p>Treating alcohol use disorders in primary care - a qualitative evaluation of a new innovation: the 15-method</p> <p>Conclusions: The 15-method provides structure for treatment of alcohol use disorders and is described by general practitioners and heads as a promising approach. Being able to offer treatment for alcohol dependence may increase the uptake of alcohol interventions in primary care.</p>	<p>Finn, Sara Wallhed; Hammarberg, Anders; Andreasson, Sven; Jirwe, Maria</p>	<p>2021</p> <p>Sweden</p>

INTEGRATION	Title	Authors	Year
Integration <u>Effective</u>	Make Mission Impossible Feasible: The Experience of a Multidisciplinary Team Providing Treatment for Alcohol Use Disorder to Homeless Individuals Conclusion: Patients experiencing homelessness may benefit from a multidisciplinary treatment program for AUD. Strategies able to facilitate and support their social reintegration and housing can improve treatment outcomes.	Dionisi, T.; Mosoni, C.; Di Sario, G.; Tarli, C.; Antonelli, M.; Sestito, L.; D'Addio, S.; Tosoni, A.; Ferrarese, D.; Iasilli, G.; Vassallo, G. A.; Mirijello, A.; Gialloreti, L. E.; Di Giuda, D.; Gasbarrini, A.; Addolorato, G.	2020 Italy
Integration <u>Effective</u>	One-Stop Shopping for Recovery: An Investigation of Participant Characteristics and Benefits Derived From U.S. Recovery Community Centers Conclusions: RCCs are utilized by an array of individuals with few resources and primary opioid or alcohol histories. Whereas strong social supportive elements were common and highly rated, RCCs appear to play a more unique role not provided either by formal treatment or by MHOs in facilitating the acquisition of recovery capital and thereby enhancing functioning and quality of life.	Kelly, John F.; Stout, Robert L.; Jason, Leonard A.; Fallah-Sohy, Nilofar; Hoffman, Lauren A.; Hoepfner, Bettina B.	2020 US
Integration <u>Effective</u>	Home visits in the outpatient treatment of individuals dependent on alcohol: Randomized clinical trial Conclusions: The HV treatment provided better results than CT in many important outcomes, not only regarding the success of the treatment, but also for the improvement of the quality of life of the patients and their relatives.	Moraes, E.; De Campos, G. M.; Figlie, N. B.; Ferraz, M. B.; Laranjeira, R.	2010 Brazil
Integration, community, co-morbidity <u>Mixed</u>	Development and Initial Pilot Testing of a fully integrated treatment for comorbid social anxiety disorder and alcohol use disorder in a community-based SUD clinic setting Conclusions: Targeting social anxiety in the context of AUD treatment is a promising approach to improving the treatment of this common comorbidity.	Wolitzky-Taylor, Kate; Sewart, Amy; Karno, Mitchell; Ries, Richard; Stimson, Janice	2021 US
Integration co-morbidity <u>Effective</u>	Change in Alcohol Use and Association with Positive and Negative Emotions: Results from an Alcohol Treatment Study with Hepatitis C Patients Conclusion: This study provides empirical evidence that reducing alcohol intake relates to significant decreases in negative emotions as early as three months and across twelve months, whereas increases in positive emotions do not occur until twelve months. These findings suggest a powerful relationship between reductions in alcohol use and negative emotions. They may help patients and therapists alike know what to expect over the course of alcohol treatment, and allow therapists to work with patients to manage their emotions. In addition, the findings suggest the need for augmenting positive emotions during the course of alcohol treatment.	Sohail, Malik Muhammad; Yao, Jia; Evon, Donna M.; Muir, Andrew J.; Proeschold-Bell, Rae Jean	2021 US
Integration therapy co-morbidity <u>Mixed</u>	Psycho-education for substance use and antisocial personality disorder: A randomized trial Conclusions: Moderate short-term improvements in substance use were associated with randomization to Impulsive Lifestyle Counselling. The findings support the usefulness of providing psycho-education to outpatients with antisocial personality disorder.	Thylstrup, B.; SchrÅ,der, S.; Hesse, M.	2015 Denmark

TECHNOLOGY	Title	Authors	Year
Technology MI	<p>A randomized clinical trial of mobile phone motivational interviewing for alcohol use problems in Kenya</p> <p>Conclusion: Mobile phone-based motivational interviewing may be an effective treatment for alcohol use problems among adults visiting primary care in Kenya. Providing mobile motivational interviewing may help clinicians in rural areas to reach patients needing treatment for alcohol use problems.</p>	Harder, V. S.; Musau, A. M.; Musyimi, C. W.; Ndeti, D. M.; Mutiso, V. N.	2020
Technology phone remote	<p>Efficacy and Comparative Effectiveness of Telephone and Smartphone Remote Continuing Care Interventions for Alcohol Use Disorder: A Randomized Controlled Trial</p> <p>Conclusions: A telephone-delivered intervention and a smartphone-delivered intervention, alone and in combination, provided effective remote continuing care for alcohol use disorder. The combination of both interventions was not superior to either alone and effects did not persist post-treatment.</p>	McKay, James R.; Gustafson, David H.; Ivey, Megan; P-Romashko, Klaren; Curtis, Brenda; Thomas, Tyrone; Oslin, David A.; Polsky, Daniel; Quanbeck, Andrew; Lynch, Kevin G.	2021
Technology phone remote	<p>The effect of telephone-based intervention (TBI) in alcohol abusers: a pilot study</p> <p>Conclusion: Telephone motivational interviews showed promise in being effective in reducing the frequency and amount of drinking for non-treatment-seeking primary care patients who abuse alcohol. Moreover, the effect of the intervention lasted for at least three months. Limitations of the present study are discussed.</p>	Wongpakaran, Tinakon; Petcharaj, Kachanun; Wongpakaran, Nahathai; Sombatmai, Sangworn; Boripuntakul, Theerarat; Intarakamhaeng, Danai; Wannarit, Kamonporn	2011
Technology, telemedicine, therapy	<p>METelemedicine: a pilot study with rural alcohol users on community supervision</p> <p>Conclusions: Findings demonstrate that telemedicine may be a promising approach to deliver interventions with alcohol users who may not utilize formal treatment services. This method has potential to decrease some of the barriers to access and use of evidence-based treatment for populations in need of services.</p>	Staton-Tindall, M.; Havens, J. R.; Webster, J. M.; Leukefeld, C.	2014
Technology web, CBT, HPs	<p>Are we making Inroads? A randomized controlled trial of a psychologist-supported, web-based, cognitive behavioral therapy intervention to reduce anxiety and hazardous alcohol use among emerging adults</p> <p>Interpretation: The Inroads program demonstrated beneficial effects on alcohol consumption, hazardous alcohol use, and anxiety symptoms. The web-based format is aligned with youth treatment preferences and can be delivered at scale to achieve wide dissemination and reduce the significant burden associated with these chronic, mutually reinforcing conditions</p>	Stapinski, Lexine A.; Prior, Katrina; Newton, Nicola C.; Biswas, Raaj Kishore; Kelly, Erin; Deady, Mark; Lees, Briana; Teesson, Maree; Baillie, Andrew J.	2021
Technology, web, HP, Daybreak	<p>A Digital Intervention Addressing Alcohol Use Problems (the "Daybreak" Program): Quasi-Experimental Randomized Controlled Trial</p> <p>Conclusions: Clinically significant reductions in alcohol use were found, as well as reduced alcohol risk (AUDIT-C) and days out of role. Importantly, improved alcohol-related outcomes were found for both hazardous or harmful and probably dependent drinkers. Since October 2016, Daybreak has reached more than 50,000 participants. Therefore, there is the potential for the program to have an impact on alcohol-related problems at a population health level, importantly including an effect on probably dependent drinkers.</p>	Tait, R. J.; Paz Castro, R.; Kirkman, J. J. L.; Moore, J. C.; Schaub, M. P.	2019

Therapy integration	<p>Alcohol-Adapted Anger Management Treatment: A Randomized Controlled Trial of an Innovative Therapy for Alcohol Dependence</p> <p>Summary: outcomes for outpatient alcohol dependent clients receiving alcohol-adapted anger management treatment were generally similar to, and not significantly different from, those for clients who received an established efficacious therapy, i.e., AA Facilitation treatment. Two interventions, one new and provisional and one established and empirically supported, were both associated with improved alcohol outcomes and reduced anger and cognitions. Clinically, these findings suggest that anger-related treatment content is a worthy therapeutic focus.</p>	Walitzer, Kimberly S.; Deffenbacher, Jerry L.; Shyhalla, Kathleen	2015
Therapy, ART CBT	<p>Affect regulation training (ART) for alcohol use disorders: development of a novel intervention for negative affect drinkers</p> <p>Summary: Contrary to expectations, individuals receiving the ART supplement demonstrated limited gains on measures of emotion regulation when compared to those receiving the HLS control treatment supplement. However, findings do support a significantly greater reduction in negative affect. Overall, results from this study support further investigation of ART with a Stage II randomized clinical trial to evaluate the efficacy of this treatment supplement in a larger sample where the mediating and moderating effects of multiple variables can be assessed.</p>	Stasiewicz, Paul R.; Bradizza, Clara M.; Schlauch, Robert C.; Coffey, Scott F.; Gulliver, Suzy B.; Gudleski, Gregory D.; Bole, Christopher W.	2013
Therapy, CBT, , intervention, co-morbidity	<p>Randomized controlled trial of cognitive behaviour therapy for comorbid post-traumatic stress disorder and alcohol use disorders</p> <p>Conclusions: Individuals with severe and complex presentations of coexisting post-traumatic stress disorder (PTSD) and alcohol use disorders (AUD) can derive substantial benefit from cognitive behaviour therapy targeting AUD, with greater benefits associated with exposure for PTSD. Among individuals with dual disorders, these therapies can generate significant, well-maintained treatment effects on PTSD, AUD and psychopathology.</p>	Sannibale, Claudia; Teesson, Maree; Creamer, Mark; Sitharthan, Thiagarajan; Bryant, Richard A.; Sutherland, Kylie; Taylor, Kirsten; Bostock-Matusko, Delphine; Visser, Alicia; Peek-O'Leary, Marie	2013
Therapy, group, mi	<p>Randomized controlled trial of group motivational interviewing for veterans with substance use disorders</p> <p>Conclusions: GMI delivered at SUD treatment program entry enhanced treatment session and 12-step group attendance and lowered alcohol consumption among outpatient Veterans. Future research should study how GMI works and its effectiveness in SUD treatment settings.</p>	Santa Ana, E. J.; LaRowe, S. D.; Gebregziabher, M.; Morgan-Lopez, A. A.; Lamb, K.; Beavis, K. A.; Bishu, K.; Martino, S.	2021
Therapy, intervention, CBT, Alcohol outcome expectancies,	<p>Alcohol expectancies pre-and post-alcohol use disorder treatment: Clinical implications</p> <p>Conclusions: Individuals who completed CBT treatment for AUD showed significant AOE (Alcohol Outcome Expectancies) change. Tension reduction and affective change expectancies may be particularly important for abstinence and useful markers of lapse risk.</p>	Coates, Jason M.; Gullo, Matthew J.; Feeney, Gerald F. X.; Young, Ross McD; Dingle, Genevieve A.; Connor, Jason P.	2018
Therapy, intervention, group	<p>The effectiveness of continuing group psychotherapy for outpatients with alcohol dependence: 77-month outcomes</p> <p>Conclusions: Our findings indicate that for AD patients who had completed an inpatient 10-week alcohol treatment, outpatient group PT appears to be an effective form of continuing care or aftercare within the context of an outpatient service delivery system.</p>	Kim, Jee Wook; Choi, Yong Sung; Shin, Kyung Chul; Kim, Ok Hwa; Lee, Dong Young; Jung, Myung Hun; Lee, Boung Chul; Kang, Tae-Cheon; Choi, Ihn-Geun	2012