Evaluation of a community-based mobile withdrawal management service

Category: Poster Presentation (in person)

Abstract Body

As with many jurisdictions across Canada, Winnipeg continues to experience significant problematic substance use. An ongoing methamphetamine epidemic, compounded by a growing opioid crisis and endemic alcohol use, function to strain addiction treatment services, including withdrawal management resources.

In this study, we present results from a novel community-based outreach detoxification service. The Mobile Withdrawal Management Service (MWMS) was formed in 2019 to provide an alternative to facility-based detox services. The program targets individuals voluntarily seeking support to withdraw from substance(s) while remaining in the community. MWMS operates 365 days a year and is deliberately interdisciplinary, staffed by health and social support workers, psychiatric nurses, a program coordinator/addiction counsellor, and a physician. Additional resources available to clients include peer support, Indigenous cultural support, group therapy, and trauma counselling. Access to harm reduction supplies is readily available to all participants.

The program offers up to 30 days of detox management and stabilization. Interventions include psychosocial support and medical management such as opioid agonist treatment (OAT) initiation and benzodiazepine taper for alcohol withdrawal. Targeted outcomes are centred on participant objectives, ranging from stand-alone detox to bridging towards long-term treatment and recovery. Individuals are offered aftercare options such as ongoing peer support, linkages (if needed) to primary care, ongoing OAT, and group programming.

MWMS is committed to continuous quality improvement, through regular program evaluation. In our analyses, we adopt a combination of quantitative and qualitative methodology. The results are presented here, revealing strong uptake reaching program capacity. Demographic characteristics of participants are somewhat different than those seen in conventional withdrawal programs. Reasons behind these differences are examined through analysis of qualitative data in the form of survey responses. Likewise, data reflects strong participant satisfaction with the comprehensive, interdisciplinary approach to home-based withdrawal management. Safety and outcomes are also evaluated, and results are favourable when compared to other interventions.

Future directions for research include direct comparison of both cost-effectiveness and outcomes of the MWMS model versus with facility-based services.

Key Words

- Caring in Crisis
- Opiate Agonist Therapy
- Substance Use Disorder (general)
- Treatment Models/Programs
- Withdrawal Management

Learning Objective # 1

Describe the components and principles of the interdisciplinary mobile withdrawal management model.

Learning Objective # 2

Evaluate the differences between the mobile/outreach community-based approach to withdrawal management and the conventional facility-based model.

Reference #1

Lodge A, Partyka C, Surbey K. A novel home-and community-based mobile outreach detoxification service for individuals identifying problematic substance use: implementation and program evaluation. Canadian Journal of Public Health. 2022 Aug;113(4):562-8.

Reference # 2

Rush B, Furlong AP. Review of Withdrawal Management Services: Models and Practices. Virgo Planning and Evaluation Consultants Inc. 2019 Jan 15;154.

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