Substance Use Outcomes Among Individuals with Severe Mental Illnesses Receiving Assertive Community Treatment: A Systematic Review



Bassema Abufarsakh, PhD candidate, MSN Amani Kappi, PhD candidate, MSN Kylie Pemberton, BS Lovoria B. Williams, PhD, FNP-C, FAANP, FAAN Chizimuzo Okoli, PhD, MPH, PMHNP-BC The speaker has no conflict of interest to disclose



# Learning Outcomes

Upon completion of this presentation, participants will be able to:

- 1. Describe Assertive Community Treatment (ACT) programs
- 2. Discuss the substance use disorder (SUD) outcomes of ACT programs

# Introduction

 Substance use is prevalent among individuals diagnosed with severe mental illnesses (SMI) .<sup>1</sup>



Concurrent substance use is positively associated with:<sup>5</sup>

- Greater mental illness
  symptoms
- Higher treatment resistance
- Poor medication adherence
- Frequent hospitalizations
- Patient mortality

# Cont.

- Individuals with SMI and substance use problems required higher care intensity than those with no comorbid substance use
- One of the community-based interventions available for this group of patients is the "assertive community treatment" (ACT)
- Originally developed by Stein and Test in the 1970s for people with SMI

# **Assertive Community Treatment**





Team-based approach to support people with SMI achieve recovery<sup>1</sup> Described as a "hospital without walls"<sup>1</sup>

It is evidencebased practices ACT team member roles<sup>2</sup>

- Rehabilitation services to individuals with SMI
- Flexible and tailored substance use treatment







Provide services to individuals with SMI 24/7

Cost effective

To ensure that patient with SMI received all service needed 7

Goal

# How do ACT clients compare with those receiving traditional treatment



# Background: ACT Services and Substance Use

- Prior reviews have demonstrated that ACT services may:
  - Enhance patients' engagement in substance use treatment
  - Reduce substance use severity.
  - Decrease hospitalization rates

These reviews were limited:

One review only examined four randomized controlled trials (RCT).<sup>1</sup>

Another had only eleven publications (six of them are sub studies).<sup>2</sup>

Both reviews used strict search strategies, which limit their abilities to include the full spectrum of research in this field.



### Purpose

- Provide an updated review of ACT services contributions to substance use outcomes among those with SMI.
- Address the research gaps regarding the incorporation of substance use treatment within ACT services.

# Method

- Inclusion criteria:
  - English language
  - Enrolled patients diagnosed with SMI and receiving ACT services
  - Measured substance use outcomes over time.
- Exclusion criteria:
  - Literature reviews
  - Qualitative studies
  - Articles addressing practitioners' perspectives on patients' substance use



# Results

- Study Characteristics:
  - 29 articles included:
    - 8 Cohort studies
    - 21 Controlled Studies (including 6 secondary data analyses)



Address substance use outcomes at different time-point n=5 n=5 n=2 n=5

6 months 12 months 18 months 24 months 36 months

# Outcomes from Substance Use Treatment Services among ACT Services recipients



# **Cohort Studies Results**

#### Substance use severity (n=8)

- Decreased rates of alcohol and drug use in the past month
- Reduction in alcohol and drug difficulties
- Reduction in problematic substance use

#### Prevalence of substance use (n=3)

 Inconsistent findings regarding changes in the proportion of alcohol & other drug use

#### Stage of change, hospitalization, and days of intoxication (n=4)

- No significant improvement in the stage of change from pre-engagement to engagement or achievement stage
- Decreased hospitalization days due to substance use problems
- Reduction in the number days of intoxication

# **RCT and CT Studies Results**

#### Substance use severity (n=12)

- Decreased rates of alcohol and drug use in the past month and the past 6 months
- Reduction in alcohol and cocaine dependence scores
- Inconsistent findings regarding changes in problematic substance use

#### Prevalence of substance use (n=2)

 Inconsistent findings regarding changes in the proportion of alcohol and other drug use

#### Stage of change, hospitalization and remission rates (n=6)

- Significant increases in the Substance Abuse Treatment Scale scores
- Decreased hospitalization days due to substance use
- Slight improvements in alcohol and other drug remission rates

# Cont.

- Fidelity to ACT model was not systematically reported
- There were no significant differences in the the substance use outcomes between groups
- Staff often lacked the requisite skills to treat substance use problems and depended on community providers to deliver substance use treatment

**Study Limitations** 

Impact of these limitations

Small sample sizes or non-representative samples

Limits generalizability

Differences in participant characteristics

Extraneous factors affecting outcomes in comparison groups

Variability in the duration of the ACT interventions

Unspecific about type of substance used for main outcome

No studies examined tobacco use outcomes as a result of receiving ACT services

Affects main outcomes

It is unknown how these factors may have affected the outcomes

Increases threats to internal validity

Different substances may require different types of treatment

Tobacco use is a primary disorder among people with SMI.



- Results indicate that enrollment in ACT services can improve substance use outcomes among those with SMI
- Findings may provide a basis for future research on ways to integrate substance use treatment programs within ACT services

# Implication

- We recommend using ACT services as a vehicle to support specialized substance use treatment
- Given the lack of studies addressing tobacco treatment in ACT services, we recommend a focus be given to integrating tobacco treatment within ACT services

# References

- Cuffel, B. J. (1996). Comorbid substance use disorder: Prevalence, patterns of use, and course. New Directions for Mental Health Services, 1996(70), 93-105.
- Fries, H. P., & Rosen, M. I. (2011). The efficacy of assertive community treatment to treat substance use. Journal of the American Psychiatric Nurses Association, 17(1), 45-50
- Parks, J., Svendsen, D., Singer, P., Foti, M. E., & Mauer, B. (2006). Morbidity and mortality in people with serious mental illness. Alexandria, VA: National Association of State Mental Health Program Directors (NASMHPD) Medical Directors Council, 25(4), 1-87.
- Hunt, G. E., Large, M. M., Cleary, M., Lai, H. M. X., & Saunders, J. B. (2018). Prevalence of comorbid substance use in schizophrenia spectrum disorders in community and clinical settings, 1990-2017: Systematic review and meta-analysis. *Drug Alcohol Depend*, 191, 234-258. doi:10.1016/j.drugalcdep.2018.07.011
- Hunt, G. E., Malhi, G. S., Cleary, M., Lai, H. M., & Sitharthan, T. (2016a). Comorbidity of bipolar and substance use disorders in national surveys of general populations, 1990-2015: Systematic review and meta-analysis. *Journal of Affective Disorders, 206*, 321-330. doi:10.1016/j.jad.2016.06.051
- Hunt, G. E., Malhi, G. S., Cleary, M., Lai, H. M., & Sitharthan, T. (2016b). Prevalence of comorbid bipolar and substance use disorders in clinical settings, 1990-2015: Systematic review and meta-analysis. *Journal of Affective Disorders, 206*, 331-349. doi:10.1016/j.jad.2016.07.011
- Hunt, G. E., Malhi, G. S., Lai, H. M. X., & Cleary, M. (2020). Prevalence of comorbid substance use in major depressive disorder in community and clinical settings, 1990-2019: Systematic review and meta-analysis. *Journal of Affective Disorders, 266*, 288-304. doi:10.1016/j.jad.2020.01.141
- Najt, P., Fusar-Poli, P., & Brambilla, P. (2011). Co-occurring mental and substance abuse disorders: a review on the potential predictors and clinical outcomes. *Psychiatry*
- NAMI 2013; Updated March 2017 <a href="https://namimn.org/wp-content/uploads/sites/188/2018/05/Assertive-Community-Treatment TreatmentOptions 2018.pdf">https://namimn.org/wp-content/uploads/sites/188/2018/05/Assertive-Community-Treatment TreatmentOptions 2018.pdf</a>
- Penzenstadler, L., Soares, C., Anci, E., Molodynski, A., & Khazaal, Y. (2019). Effect of assertive community treatment for patients with substance use disorder: A systematic review. *European Addiction Research*, 25(2), 56-67.
- Stein, L. I., & Santos, A. B. (1998). Assertive community treatment of persons with severe mental illness: WW Norton & Co.
- Stein, L. I., & Test, M. A. (1980). Alternative to mental hospital treatment: I. Conceptual model, treatment program, and clinical evaluation. Archives of General Psychiatry, 37(4), 392-397.

# Thank you!

