

# COVID-19 and Mental Health Initiative **Virtual Learning Series**

**EVENT SUMMARY:**  
IMPACTS OF COVID-19 ON  
SUBSTANCE USE AND  
PEOPLE WHO  
USE SUBSTANCES



Date: June 8, 2021  
Time: 12:30 p.m. to 2:30 p.m. ET

# Event Summary

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## Background

Since the COVID-19 pandemic was declared in March 2020, the impact of the pandemic on the mental health and substance use needs of Canadians has been unprecedented — exacerbating existing issues and inequities across the country.

As part of the Government of Canada’s rapid response to address the public health challenges of the COVID-19 pandemic, the *Canadian Institutes of Health Research’s Institute of Neurosciences, Mental Health and Addiction* (CIHR-INMHA), in collaboration with *Health Canada*, the *Public Health Agency of Canada* and institute partners, launched the *COVID-19 and Mental Health (CMH) Initiative*.

This initiative funds the generation of urgent evidence for decision makers and practitioners to support mental health and substance use responses in the context of COVID-19. Three funding opportunities were launched under this initiative, supporting more than 100 projects with a total investment of \$13.5 million from CIHR and partners.

## Event Description

On June 8, 2021, CIHR-INMHA hosted the second event of the COVID-19 and Mental Health (CMH) Initiative Virtual Learning Series: *Impacts of COVID-19 on substance use and people who use substances*, bringing together researchers, policy makers, community members, people with lived and living expertise, partners and other *knowledge users*.

The subject of this learning event was a topic that emerged from the analysis of 45 projects funded through the *Knowledge Synthesis: COVID-19 in Mental Health and Substance Use* funding opportunity. COVID-19 and the associated pandemic response has disproportionately affected people who use substances. The “twin pandemics”, COVID-19 and the opioid and overdose crisis, are resulting in unparalleled harms to individuals and families across the country, while the Canadian health care system is under immense pressure.

The event synthesized available evidence related to mental health and substance use in the context of medical disruptions due to the COVID-19 pandemic. Additionally, knowledge gaps where more research is urgently needed were highlighted.

The objectives of the *Impacts of COVID-19 on substance use and people who use substances* event were to:

- maximize the rapid sharing and uptake of knowledge generated through CMH funded projects in the area of research on the impact of the COVID-19 pandemic on substance use and people who use substances;
- support collaborative discourse between researchers and knowledge users to translate research findings into programs, practices and policies; and
- raise awareness of the impact of the research generated on health outcomes.

The event included the following presentations from researchers, knowledge users and people with lived and living expertise:

*Digital health solutions to support women with addiction during COVID-19: Applying a gender- and trauma-informed lens*

Lena Quilty (Centre for Addiction and Mental Health), Michelle Coombs (Jean Tweed Centre)

*Rapid review of the impacts of “Big Events” on people who use drugs and delivery of harm reduction and drug treatment services: Implications for strengthening systems in response to COVID-19*

Camille Zolopa (University of Montreal Hospital Research Centre)

*A rapid review of Opioid Substitution Therapy during major disruptions to medical care*

Abhimanyu Sud (University of Toronto), Darren Cheng (Lunenfeld-Tanenbaum Research Institute – Bridgepoint)

*A COVID-19 rapid evidence synthesis service to support Ontario’s Mental Health and Addictions Centre of Excellence*

Heather Bullock (McMaster University), Michelle Rossi (Mental Health and Addictions Centre of Excellence, Ontario Health (Clinical Institutes & Quality Programs))

Following the presentations, meeting participants were invited to ask questions. The discussion was moderated by Julie Bruneau, Professor, Department of Family and Emergency Medicine at the University of Montreal and scientific director of the Quebec-Atlantic node of the *Canadian Research Initiative in Substance Misuse*.

## Summary of Key Findings and Recommendations

Teams highlighted that the opioid and overdose crisis — already one of the most significant public health crises in recent Canadian history — is worsened by the COVID-19 pandemic and public health measures implemented to stop the spread of the virus (e.g., isolation and stay-at-home measures).

**People who use substances are often affected by intersecting factors** including substance use, mental health conditions, low income and social stigma and represent a key population urgently requiring new evidence-based interventions and support during the pandemic.

**Digital health services for substance use disorder are effective for adults** but more research is required on their effectiveness for females or women due to a lack of sex- or gender-based analysis in research. Providers of substance use treatment should consider which apps and web-based tools for substance use concerns may be considered gender- and trauma-informed when determining which digital health resources may benefit clients.

It is **essential that diverse communities of people who use drugs (PWUD) are more heavily engaged in research**, research design and implementation, as well as developing relevant and sustainable drug policies and public health guidelines. Engaging in community health research partnerships is also beneficial, providing expertise in identifying gaps and digital options.

**The COVID-19 pandemic is not only a health crisis but also an economic crisis.** Economic stressors (e.g., reduced funding for community-based organizations, including harm reduction services) contribute to increased drug use, increased equipment sharing and larger drug use networks among people who inject drugs.

It is critical **that service providers are aware of the potential trauma (e.g., psychological distress and grief) that can result from big events**, such as pandemics or other major disruptions impacting care.

The **stigma of substance use remains a major barrier** to treatment for many people.

Within the population of PWUD, **women, Indigenous Peoples, visible minorities, and people experiencing homelessness or mental illness may be at particular risk of harm**. There is a lack of research regarding these specific subpopulations of PWUD; this is an important area of investigation as the field moves forward to better support all PWUD.

**Treatment uptake in response to a drug shortage only occurs if services are widely available**. In contexts without widespread service coverage, big events such as pandemics may increase the risk of a range of harmful outcomes for PWUD, whereby shortages may potentiate riskier injecting behaviours. Disrupting opioid substitution therapy can have severe consequences for PWUD, such as relapse, withdrawal and restart of risky injection behaviours.

Strict regulation of opioid substitution therapy (OST) programs in response to disruptions in care and poor coordination and communication between OST sites and with patients create vulnerability for PWUD. **Vulnerability is a consequence of how service systems have been set up, not a characteristic of PWUD**.

**Flexibility, preparation, and communication are key** to ensuring the provision of health care, harm reduction and drug treatment services in the period of destabilization resulting from the current pandemic. Important steps have been taken, including the expansion of telemedicine for opioid agonist treatment, and increased flexibility of clinical guidance around take-home medications. Standardized but flexible emergency preparedness guidelines are needed to allow adequate and efficient health system responses to disruptions in care.

The **growing number of opioid-related overdoses and deaths across Canada underscores the importance of research** committed to protecting the health and safety of all people in Canada through a comprehensive, collaborative, compassionate and evidence-based approach to preventing and reducing substance-related harms.

## For More Information

The program for this event is available to the public upon request. Requests can be directed to: [COVID19MH-COVID19SM@cihr-irsc.gc.ca](mailto:COVID19MH-COVID19SM@cihr-irsc.gc.ca)

A searchable repository of the funded knowledge syntheses, as well as other projects funded through the CMH Initiative, can be found [online](#).

To stay up to date on the latest brain and mental health research, including new knowledge on COVID-19 and Mental Health and Substance Use, [subscribe to the CIHR-INMHA newsletter](#).



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