



Implementation of the evidence-based substance use screening, brief intervention and referral in the prenatal healthcare system

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Background

- ▶ Approximately 40,000–50,000 women receive prenatal healthcare services annually
- ▶ Services are managed through the EHR system “Mother’s and Neonate’s Health Surveillance System”
 - ▶ Substance use screening is conducted using a “Substance Use Standard Questionnaire”
 - ▶ The tool lacks standardization and validation, limiting its effectiveness
- ▶ Women are significantly underrepresented in drug treatment and harm reduction services (National Drug Reports 2019 – 2023)
- ▶ Mother to child HIV transmission 1.1% (AIDS and Clinical Immunology Center, 2025)

- ▶ A national guideline on screening, identification, and brief intervention for alcohol, tobacco, and other substance use in primary health care has been approved by the MoH and is currently in place



Problem Statement

- ▶ Implementation Challenge

Integration of evidence-based substance use screening and brief intervention into the prenatal care system instead of the “Substance Use Standard Questionnaire”

- ▶ Goal

To enhance early identification of psychoactive substance use and intervention through ASSIST implementation

- ▶ Why?

Improved maternal/child health

Reducing HIV transmission

Because it is an EBP vs an Unvalidated Tool



Implementation Framework

- ▶ **EPIS Framework**

Hybrid Type 2 Implementation-Effectiveness Study – Simultaneously evaluates implementation outcomes (feasibility, acceptability, adoption) and effectiveness outcomes (substance use reduction, HIV prevention)

- ▶ Study Phases:

- ▶ Phase 1: Exploration (3 months)

- ▶ Phase 2: Preparation (3 months)

- ▶ Phase 3: Implementation (12 months)

- ▶ Phase 4: Sustainment (6 months)

- ▶ What is the evidence-based practice you intend to implement better?

Targeted EBP is the ASSIST tool, for its validated efficacy in screening and intervention related to substance use across diverse populations, including pregnant women.



Barriers and Facilitators to Implementation

- ▶ Changes in national drug policy increase rigidity and stigma:
 - ▶ Increased enforcement of punishing regulations
 - ▶ Prohibition of private Opioid Agonist Therapy (Buprenorphine) services
 - ▶ Regulation changes on the import of psychotropic medications necessary for treatment
- ▶ Training materials and online infrastructure already exist to support training sessions for medical doctors during the Preparation Phase; comparison of online self-directed learning VS F2F training formats
- ▶ Implementation strategies will be selected following the Exploration Phase



Other pre-implementation work

- ▶ Established a legal and ethical framework ensuring compliance with national data privacy regulations and standards
- ▶ Concept inspired by HIPAA¹ and GDPR²
- ▶ Developed a Python-based hashing script to ensure secure and anonymized data linkage across multiple healthcare databases
- ▶ Conducted a successful code audit and IT security review by the LEPL Levan Samkharauli National Forensic Bureau
- ▶ Integrated the script into Privacy-Preserving Record Linkage procedures, enabling secure merging of datasets (Prenatal care, HIV, HCV, OAT treatment records)

1. Health Insurance Portability and Accountability Act. <https://www.hhs.gov/hipaa>
2. General Data Protection Regulation. <https://gdpr-info.eu>



[github.com/welwala206/
georgian-id-hasher](https://github.com/welwala206/georgian-id-hasher)



Anticipated Challenges and Questions

- ▶ Define clinic sampling frame, identify key stratification variables (region, demographics), and determine per-site sample size to ensure representativeness and statistical power.



Conclusions and Next Steps

- ▶ Receive IRB Approval!!!
- ▶ Start Phase 1. Exploration – Landscape analysis:
 - ▶ Qualitative part: In-depth Interviews, vNGT, Open board analysis
 - ▶ Quantitative part: create screening/treatment cascades on HIV, HCV, OAT (linkage MNHSS with HIV, OAT, HCV DBs)



Thank you for your attention!

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Georgian Implementation Fellowship Training Summer Bootcamp

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