Special Population: Co-Occurring Disorders
1980s

Early studies focused on providing integrated treatment for individuals who have dual diagnosis *(adding SA counseling to community MH treatment)*

Early studies also showed that clients did not readily fit into residential SA programs and that inpatient dual diagnosis treatment did not confer benefits after hospital discharge
Early Clinical and Research Approaches (Cont.)

1990s

- Dual diagnosis programs began to integrate MH and SA interventions and to individualize the intervention based on the person’s stage of motivation.
- Several open clinical trials demonstrated that integrated interventions were effective in engaging people in treatment helping them to reduce and eliminate their substance abuse, and helping to stabilize their mental illness.

2000s
Recent Clinical Approaches

- Individual Therapies
- Group Therapies
- Family Interventions
- Structural Interventions
- Contingency Management
- Housing Interventions
- Rehabilitation Interventions
- Pharmacological Interventions
- Mandated Treatment
Individual Therapies

Individual counseling intervention is usually combined with other interventions as part of a comprehensive program.

*Motivational Counseling followed by Cognitive-Behavioral Counseling*

Eight studies show inconsistent results for motivational counseling and cognitive-behavioral counseling on reducing substance use and improving other outcomes.
Part of most dual disorders programs and nearly all self-help approaches

Group interventions, whether directed by professionals or within the self-help tradition, attempt to take advantage of several consistent findings:

- People with dual diagnosis are social beings
- People with dual diagnosis express social motivations for using substances
- People with dual diagnosis express the need for new social connections in the process of information, discussing, feedback and support
Family Interventions

Addresses education, support, and skills

The focus is to:

- Help family members understand the illness and treatments relatives are experiencing
- Acknowledge the pain of family members
- Provide opportunities for them to support one another

Although the research on family interventions for severe mental illness or substance abuse along is robust, little research has examined the effects of family interventions for persons with dual-diagnosis. (Clark, 2001)
Structural Interventions

- Involve changes in the organization of the healthcare system on how services (MH/SA) are delivered
- Most common approaches to delivering services include initiating assertive or intensive case management
- Previous studies of assertive community treatment indicate that people with dual diagnosis can benefit from assertive community treatment in terms of improving their residential stability and avoiding crises that lead to hospitalization and homelessness
Contingency Management

- Involves the systematic provision of incentives and/or disincentives for specific behaviors
- Have recently been used successfully to reduce illicit drug use among people with severe mental illness
- Contingent incentives have shown to reduce cigarette smoking among people with schizophrenia (Tidey, O’Neill, & Higgins (2002))
Because substance abuse adversely impacts stable housing for person with dual disorders and is strongly associated with homelessness, integrated programs for people with dual disorders are increasingly common.

Highly supportive housing appears to be an important consideration, not only in achieving remissions but also in maintaining them (Drake, Wahach, & McGovern, 2005b)
Many studies, as well as, self-reports, suggest that people with dual diagnosis have difficulty in attaining and sustaining substance abuse remissions without changing their lives considerably in terms of developing new relationships and meaningful activities that do not involve substance use.

Rehabilitation interventions that address social and vocational functioning are therefore often incorporated into dual diagnosis programs, but there have been no controlled studies of stand-alone rehabilitation interventions.
Experimental studies of medications for people with dual diagnosis have been rare, largely because these individuals have been systematically excluded from medication trials. People with co-occurring schizophrenia and substance use disorders who are prescribed conventional antipsychotic medications tend to continue to use substances and to experience higher levels of uncomfortable side effects than do those with single diagnosis.
Are commonly used with people who have dual disorders, in part because many are involved with the criminal justice system and under some sort of legal control or supervision.

Legal directives include *incarcerations, conditions of probation, conditions of parole, involuntary hospitalization, outpatient commitments, coercive medication and guardianships for finances or other functions*.

Given the frequency with which mandatory interventions are used for this population, remarkably few studies have addressed them.
Principles of Dual-Diagnosis Treatment

- Integrated Treatment
- Stagewise Treatments
  - Engagement Interventions
  - Motivational Interventions
  - Active Treatment Interventions
  - Relapse Prevention Interventions
- Long-Term Retention
- Comprehensive Services
- Interventions for Treatment Nonresponders
Principles of Dual-Diagnosis Treatment (Cont.)

**Integrated Treatment**
- Combine and individually tailor the mental health and substance abuse interventions

**Stagewise Treatments**
- Match treatments to the client’s level of motivation and stage of recovery

**Long-term Retention**
- Keep treatment, rehabilitation, and support available and easily accessible for as long as they need.
Principles of Dual-Diagnosis Treatment (Cont.)

**Comprehensive Services**
- Address all areas of the individual’s personal recovery

**Interventions for treatment nonresponders**
- Provide different approaches to intervention for clients who are not making progress toward recovery
RESOURCES

Book:

http://www.bu.edu/cpr/products/books/titles/integrated.html

Video:

http://cpr.bu.edu/resources/webcast/dual-disorders
QUESTIONS?
COMMENTS!