



INTERNATIONAL
SOCIETY OF
SUBSTANCE USE
PROFESSIONALS

Challenges and Responses: Reaching out to those with Substance Use and Mental Health Problems

Please note that this webinar is provided for informational purposes only and does not constitute medical or treatment advice. The views presented here are those of the speaker and not, necessarily, those of ISSUP.

Welcome



- This webinar is being hosted to celebrate World Mental Health Day 2022 ‘Make mental health and wellbeing for all a global priority’.
- Facilitated by ISSUP UK (which is hosted by Middlesex University, London), this webinar will explore three perspectives on this subject through the lens of ISSUP Indonesia, ISSUP Pakistan and ISSUP UK
- We hope this webinar will highlight a range of challenges and responses from each country and invite attendees to take part in the Q&A and welcome your questions and perspectives to enrich the discussion.



A little about ISSUP....

- ISSUP is a membership organisation with over 27,000 members worldwide, working in the fields of substance use prevention, treatment and recovery care.
- Our aim is to connect professionals through networking, knowledge exchange and training, sharing the very best in evidence-based, ethical, approaches and promoting quality in all areas of prevention, treatment and recovery care practice.
- Check ISSUP out at <https://www.issup.net/> where you will find information on how to sign-up for free membership. The website also has a wealth of resources and publications for you to enjoy.

Some housekeeping...

- You will have the opportunity to submit text questions to our presenters by typing your questions into the Questions pane of the webinar interface on your screen.
- You may send in your questions at any time during the presentation; we will collect these and address them during the Q&A session at the end of today's presentation
- A recording of the webinar will be made available for you to watch on demand after the event – and we hope that you will disseminate this webinar to your colleagues and networks

A little about me...

- I will be your facilitator for the session
- I am currently the Dean of Faculty of Health, Social Care and Education at Middlesex University, London UK
- My professional background is nursing, and I am also a Professor of Mental Health and Addictions.
- I was the course developer for a MSc in Dual Diagnosis in Middlesex University some 20 years ago – which remains an active programme of study and is open to national and international students, including a online mode.



PhD, RGN, RMN, PGCertHE, FPH, ICAPIII

So, what are we talking about.....

- Dual diagnosis was first identified in the 1980s among individuals with coexisting severe mental illness and substance use disorders.
- Today, the term describing or defining this presentation varies depending on which country you reside/work in; or which literature you are reading and you may hear some of the following terms.

A range of terms have been used to describe co-occurring mental health and substance use disorders and concerns:

- Dual diagnosis
- Co-morbidity - coexisting mental health and substance use disorders' or 'coinciding mental illness and substance abuse'.
- Co-existing problems
- Co-occurring disorders
- Concurrent disorders
- Abbreviations now not in common parlance include:
 - **'CAMI'** -*'Chemically affected Mental Illness'*
 - **'MICA'** -*'Mental Illness Chemically Affected'*
 - **'SAMI'** -*'Substance Affected Mentally Ill'*
 - **'MISA'** -*'Mental Illness Substance Affected'*
 - **'MISUD'** -*'Mental Illness Substance Use Disorder'*
 - **'ICOPSD'** -*'Individuals with Co-occurring Psychiatric and Substance Use Disorders'*

How big is the challenge

It is estimated that

- 75% of patients with severe mental illness (SMI) also have substance use disorder (SUD)
- 60% of adults with SUD have at least one type of SMI
- SMI or SUD is either the cause or consequence of the other or various social issues leading to both at the same time.
- Genetic factors for such co-morbidity including variations in how people respond to treatments have also been suggested.

What do we know about impact...

- Coexisting disorders can result in greater incidence of adverse health outcomes, suicide, unplanned hospital admissions and early mortality.
- Social consequences include violence, homelessness, involvement with criminal justice system, and relationship breakdowns.

Response/Intervention Frameworks...



PARTIAL TREATMENT

Only treats the disorder identified as primary



SEQUENTIAL TREATMENT

Treats the primary disorder FIRST, and then treats the secondary disorder



PARALLEL TREATMENT

Addiction rehab services and mental health treatment are handled by two different providers



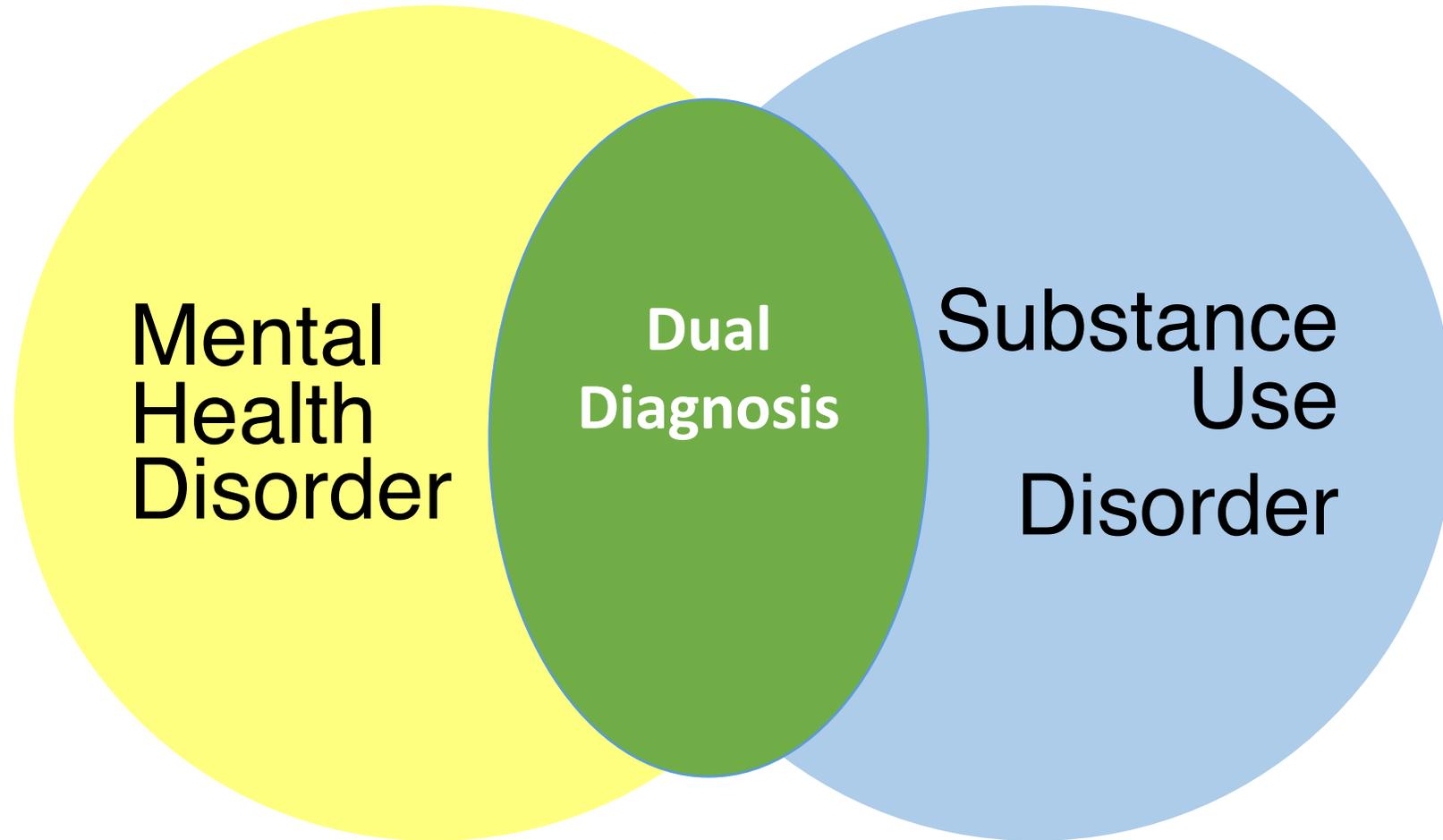
INTEGRATED TREATMENT

The addiction and the psychiatric disorder are both treated as the primary condition

Evidence reinforces...

- **The integrated and inclusive care model** – leads to significant reductions in substance use, improvement in psychiatric symptoms, quality of life as well as social outcomes
- Traditional culture where treatment centres focus on a single condition, lack expertise and resources – leads to poorer outcomes, and more over treatment failure

How to view Dual Diagnosis



If you are a 'right brain thinker' or creative type

How to view Dual Diagnosis

$$x^2 = A x B \sqrt{C}$$

Dual Diagnosis = Mental Health Disorder X Substance Use Disorder
Social Consequences

If you are a 'left brain thinker' or logical type

**So hopefully having set the context... lets
now hear from our presenters**