

DOUBLE TROUBLE: SUBSTANCE USE AND MENTAL HEALTH

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Substance use disorder (SUD), which is the clinical term for “drug addiction,” is a chronic relapsing brain disorder in which the repeated use of substances causes impairment in a person’s life. Of the U.S. population 12 and older, approximately 5.3% (14.5 million people) have an alcohol use disorder and 3% (8.3 million people) have an illicit drug use disorder (SAMHSA, 2020). Unfortunately, SUD does not typically occur by itself. Instead, addiction is most often related to trauma and/or mental disorders. Disorders such as depression, anxiety, and bipolar disorder increase a person’s risk for addiction. As many as 1 in 4 U.S. adults has a mental disorder (SAMHSA, 2020). Approximately 40% to 50% of people with an SUD also have a co-occurring mental disorder.

Chicken and Egg

Although SUD is itself classified as a mental disorder, it often co-occurs with other mental disorders. When a person is diagnosed with two disorders at the same time, the disorders are referred to as “comorbid.” Research shows SUD has high comorbidity with numerous other mental disorders such as anxiety disorders, attention-deficit hyperactivity disorder (ADHD), depression, eating disorders, and more. It is clear that some sort of relationship exists between SUD and mental disorders. But the nature of that relationship is very complicated.

The association between SUD and other mental disorders is often referred to as a “chicken and an egg” problem. When SUD and mental disorders co-occur, they can be difficult to disentangle. Which came first? Which is causing the problems in this person’s life? And perhaps most importantly, which



should we try to treat first, the substance use or the mental health disruption?

Relationship Between SUD and Mental Illness

In order to answer these questions, we should begin by exploring the relationship between SUD and mental disorders. Research shows there is a bidirectional relationship between the two. In other words, using substances increases a person’s risk for mental illness and having a mental illness increases a person’s risk for having an SUD. For example, many people use substances to cope with untreated or undertreated mental illness. In such a case, it may be clear that symptoms of a mental disorder pre-existed substance use. On the other hand, it could also be the case that using certain types of drugs can trigger the onset of mental disorders.

However, the fact that SUD and other mental disorders have a high rate of comorbidity does not mean that one caused the other. It can be hard, sometimes impossible, for patients to recall whether symptoms of mental illness or substance use came first. The stage of the life cycle when symptoms of both SUD and mental disorders most commonly arise is adolescence. They often first appear at the same time as one another.

It could also be the case that there is a third variable which increases the odds of having both SUD and comorbid mental illness, such as trauma. Trauma is a major risk factor for most forms of mental illness. It may lead to post-traumatic stress disorder (PTSD). The link between trauma and addiction is stronger than the link between obesity and diabetes.

Simply put, substance use and mental illness often co-occur. Sometimes one causes the other; sometimes vice versa. Sometimes both are caused by something else. Regardless of the case, what is most important to know is that people with comorbid SUD and mental illness face unique barriers to accessing treatment and support.

Dual Diagnosis Treatment

Because SUD and mental illness are interconnected, diagnosis and treatment can be challenging. People who have co-occurring disorders are less likely to be kept in treatment and more likely to drop out of treatment. Some therapists suggest that a person's mental state cannot be accurately diagnosed until they are free of drugs and alcohol. Other therapists will point out that most people will not want to stop self-medicating with drugs until something can be done to address the symptoms of their mental illness. Nevertheless, research shows that the best approach is treatment that can address SUD and mental illness at the same time.

"Dual Diagnosis Programs" as they are sometimes called are specially designed treatment programs to address the needs of people with SUD and other conditions. Some therapists and clinicians

in your community may also promote their services as dual diagnosis. These are important sources of help for people who struggle with multiple disorders. Treatment at dual diagnosis programs typically includes behavioral therapies, medications, or both. Find help for SUD, mental health, or dual-diagnosis treatment in Kentucky at <https://findhelpnowky.org/ky>.

Long-Term Recovery

Remember that SUD and most forms of mental illness are chronic disorders. In other words, there is no known cure for these disorders. Instead, we can only effectively manage chronic disorders over the long-term. Because recovery is a long-term process and not an event, it may take multiple attempts at treatment and may require the accrual of resources such as housing and employment. People may experience a recurrence in their SUD or mental disorder along the way. Relapse is often a normal part of recovery. Just because someone experiences a recurrence in symptoms does not mean they are "failing" or not actively trying to recover. Managing these kinds of expectations about your or your loved one's dual diagnoses can be a helpful strategy to reduce stress.

Family Support

Approximately 46% of Americans say they have a family member or close friend who struggles with SUD (Pew Research Center, 2017). Moreover, SUD is commonly referred to as a "family disease" because it affects each member of a family system. Just as addiction affects family members, family members can also affect addiction. (Given the diversity of family systems, the term "family" includes "loved ones" and "concerned others.") Research shows that SUD and mental disorder treatment is more effective when family supports the person struggling. So how can families support their loved ones with dual diagnoses?

- Talk to your loved one: Share your concerns about their substance use and/or mental health but don't judge. Remember your loved one is suffering. SUD and mental illness are not a choice.

- Practice self-care: Take a walk outside. Read a book. Do whatever may help you to relieve stress. SUD and mental illness can take a stressful toll on family members. In order to be a source of support for your loved one, you must first be healthy and well-balanced.
- Find support: Call a friend. Meet with a therapist. Attend a family support group. There are support groups full of people experiencing the same thing you are. Each of these sources of support can help you set up boundaries that protect your own mental health as you are helping your loved one. You didn't cause it, you can't control it, and you can't cure it.
- Learn about your loved one's condition. When families increase their understanding of their loved one's disorders, they are less likely to assign blame. They can also offer more meaningful support. The Substance Abuse and Mental Health Services Administration (SAMHSA) has a host of resources at <https://www.samhsa.gov/families>.

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