

Co-Occurring Mental Illness and Substance Use Disorder Treatment in the Black Community

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Institute to Reduce Disparities LLC

December 16, 2021



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network

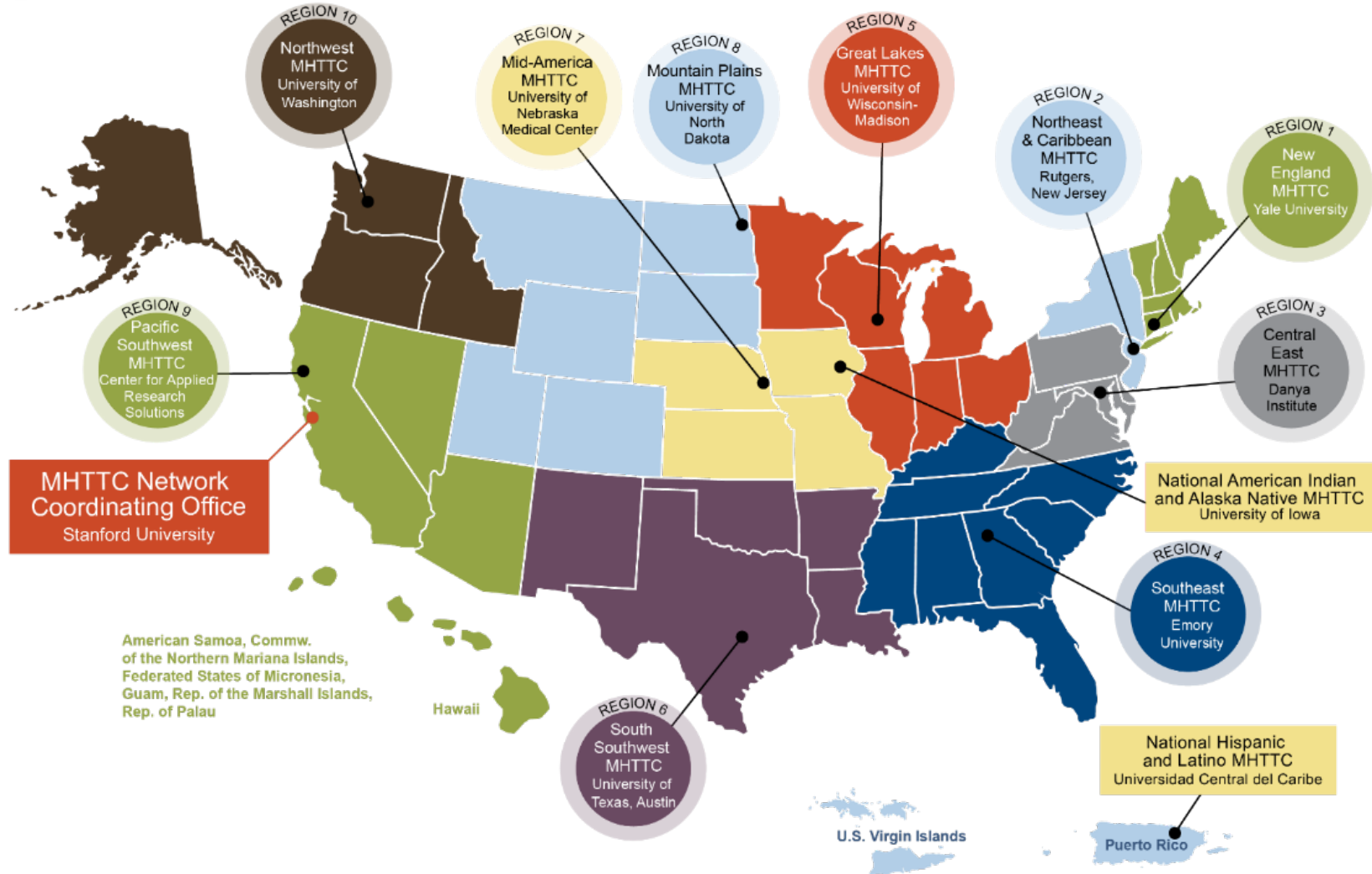


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MHTTC Purpose

The MHTTC Network vision is to unify science, education and service to transform lives through evidence-based and promising treatment and recovery practices in a recovery-oriented system of care.

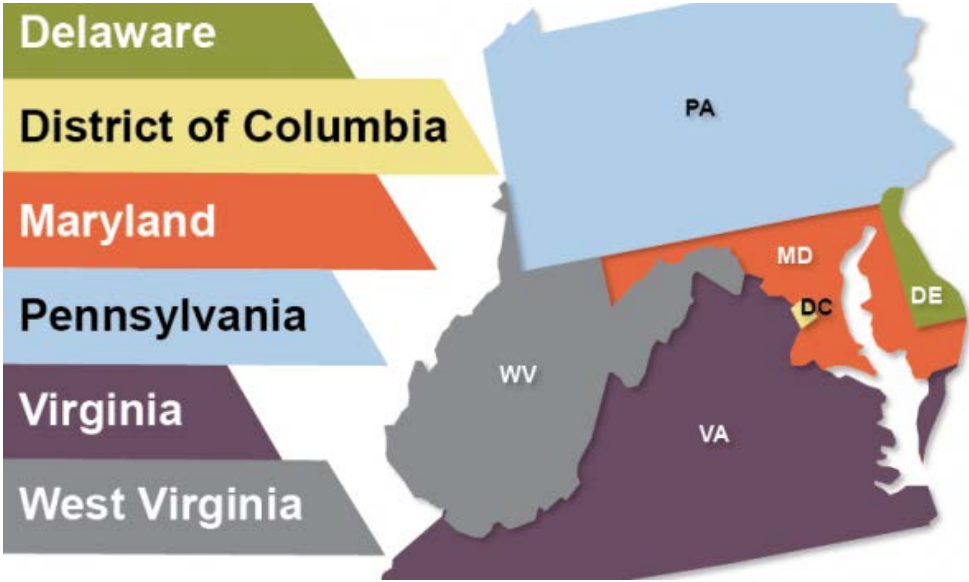


Central East MHTTC Goals

Funded by SAMHSA to:

- **Accelerate** the adoption and implementation of mental health related evidence-based practices
- **Heighten** the awareness, knowledge, and skills of the behavioral health workforce
- **Foster** alliances among culturally diverse practitioners, researchers, policy makers, family members, and consumers
- **Ensure** the availability and delivery of publicly available, free of charge, training and technical assistance

Central East Region 3



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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use and Administrator of SAMHSA. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by SAMHSA/HHS, or the U.S. Government.

Evaluation Information

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Co-Occurring Mental Illness and Substance Use Disorder Treatment in the Black Community

Thursday, December 16, 2021

Presenter: William Lawson, MD, PhD, DLFAPA
Clinical Professor, Department of Psychiatry & Behavioral Sciences
George Washington University

Moderator: Anelle Primm, MD, MPH
Council of Elders, Black Psychiatrists of America

COVID-19: An Unprecedented Disaster

- Disparate levels of death and economic fallout in Black and other historically marginalized communities
- Mental health consequences include anxiety, depression, grief, and substance use
- Co-occurring mental illness and substance use disorder, also known as “dual diagnosis” is common and has been affected by COVID-19
- Not clear on which came first, the chicken or the egg

Today's Program

- Special thanks to the CE-MHTTC for its support of this session of the Black Psychiatrists of America Health Equity Webinar Series
- Focus is regional on DE, MD, PA, VA, DC, and WV, yet information has national relevance
- William Lawson, MD, PhD, DLFAPA, Treasurer, Black Psychiatrists of America, is our featured guest

The Challenge of Comorbidity

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Comorbidity

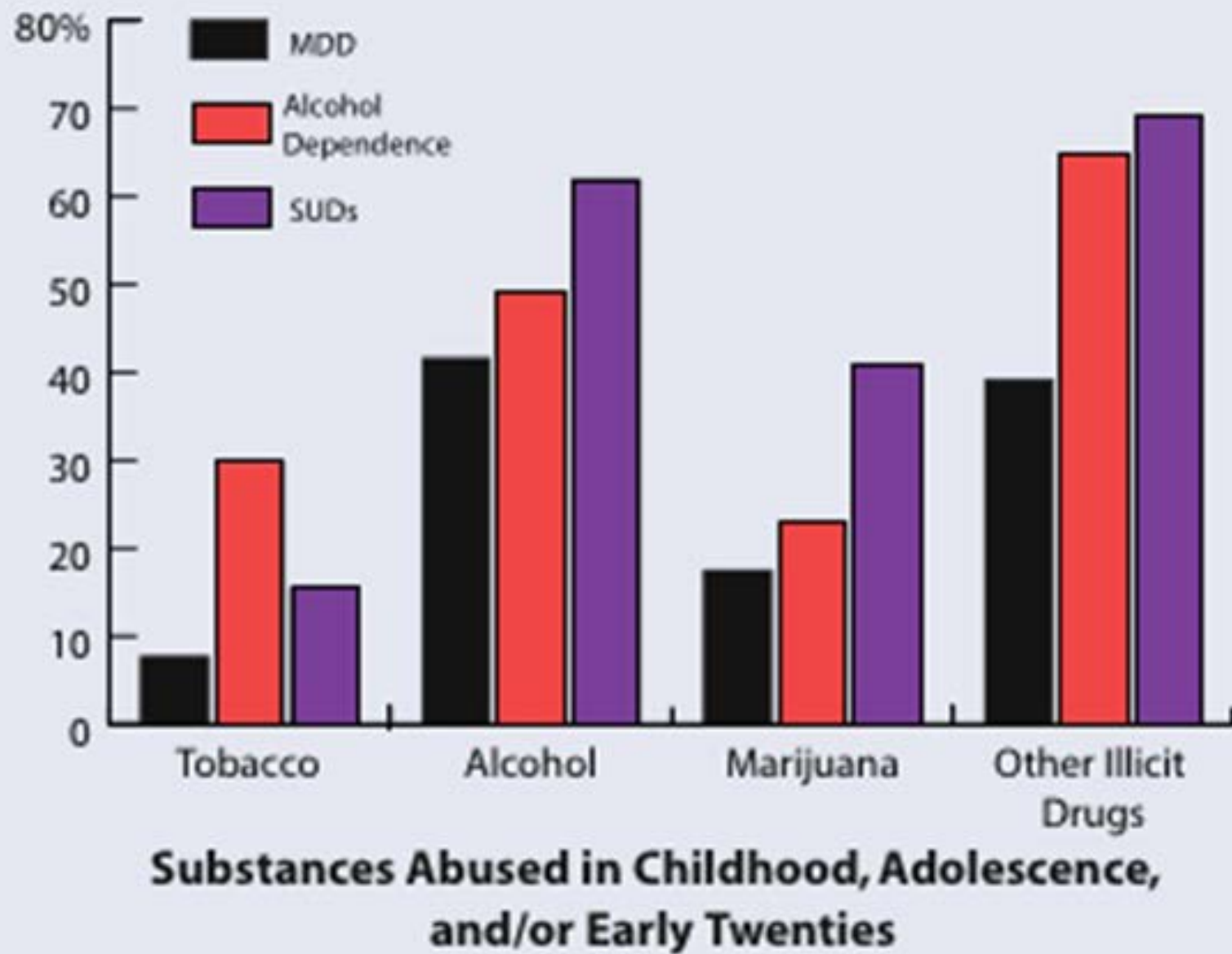
According to the National Survey on Drug Use and Health, [17 million](#) U.S. adults experienced both mental illness and a substance use disorder in 2020.

Comorbidity

A substance use disorder (SUD) is a mental disorder that affects a person's brain and behavior, leading to a person's inability to control their use of substances such as legal or illegal drugs, alcohol, or medications. Symptoms can range from moderate to severe, with addiction being the most severe form of SUDs.

Researchers have found that about half of individuals who experience a SUD during their lives will also experience a co-occurring mental disorder and vice versa. Co-occurring disorders can include anxiety disorders, depression, attention-deficit hyperactivity disorder (ADHD), bipolar disorder, personality disorders, and schizophrenia, among others.

Increased Likelihood of Psychiatric Disorders in Late Twenties



Etiology of Comorbidity

- The high prevalence of these comorbidities does not mean that one condition caused the other, even if one appeared first.
- We should consider:
 - drug abuse can cause a mental illness
 - mental illness can lead to drug abuse
 - drug abuse *and mental disorders are both caused by other common risk factors*
- In reality, all three scenarios can contribute, in varying degrees, to the establishment of specific comorbid mental disorders and addiction.

Impact of Mental Illness and Substance Abuse

- Greater treatment delay
- Poorer response to treatment of any type
- Diversion of treatment resources
- Increased hospitalizations
- Greater risk of treatment termination
- Poorer treatment adherence
- Less likely to be insured
- May not be found acceptable for support groups
- Less access to mental health services with criminal record

Impact of Mental Illness and Substance Abuse (continued)

- More likely to be poly-drug abusers
- Diagnostic problem
- Worsen mental disorder
- Long term or permanent neuropsychiatric complications
- Increased risky or impulsive behavior
- Increased suicide risk
- Increased risk of unintentional injury
- Increased risk of chronic diseases
- Greater stigma
- More homelessness
- Less likely to be or remain employed

Challenges in Diagnosis

- Is it mental illness or substance abuse?
- No objective test
 - No way to prove presence
 - No way to prove absence
- All 'psychiatric' manifestations are medically nonspecific: mania, depression, psychosis
- Not surprising that most patients are initially misdiagnosed

Common Risk Factors Can Contribute to Both SUDs and Other Mental Disorders

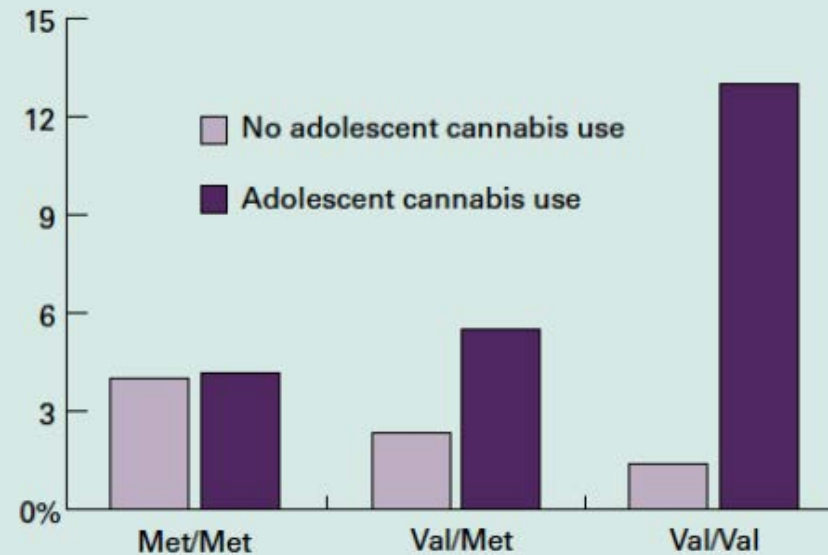
Both SUDs and other mental disorders can run in families, suggesting that certain genes may be a risk factor.

Environmental factors, such as stress or trauma, can cause genetic changes that are passed down through generations and may contribute to the development of a mental disorder or a substance use disorder.

Percentage of Individuals Meeting Diagnostic Criteria for Schizophreniform Disorder at Age 26

The Influence of Adolescent Marijuana Use on Adult Psychosis Is Affected by Genetic Variables

Percentage of Individuals Meeting Diagnostic Criteria for Schizophreniform Disorder at Age 26



Source: Caspi A, Moffitt TE, Cannon M, et al., 2005.

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Why Do Some People Use Drugs

Self-Treatment!

To feel good

To have novel:

- feelings
- sensations
- experiences

AND

- to share them

To feel better

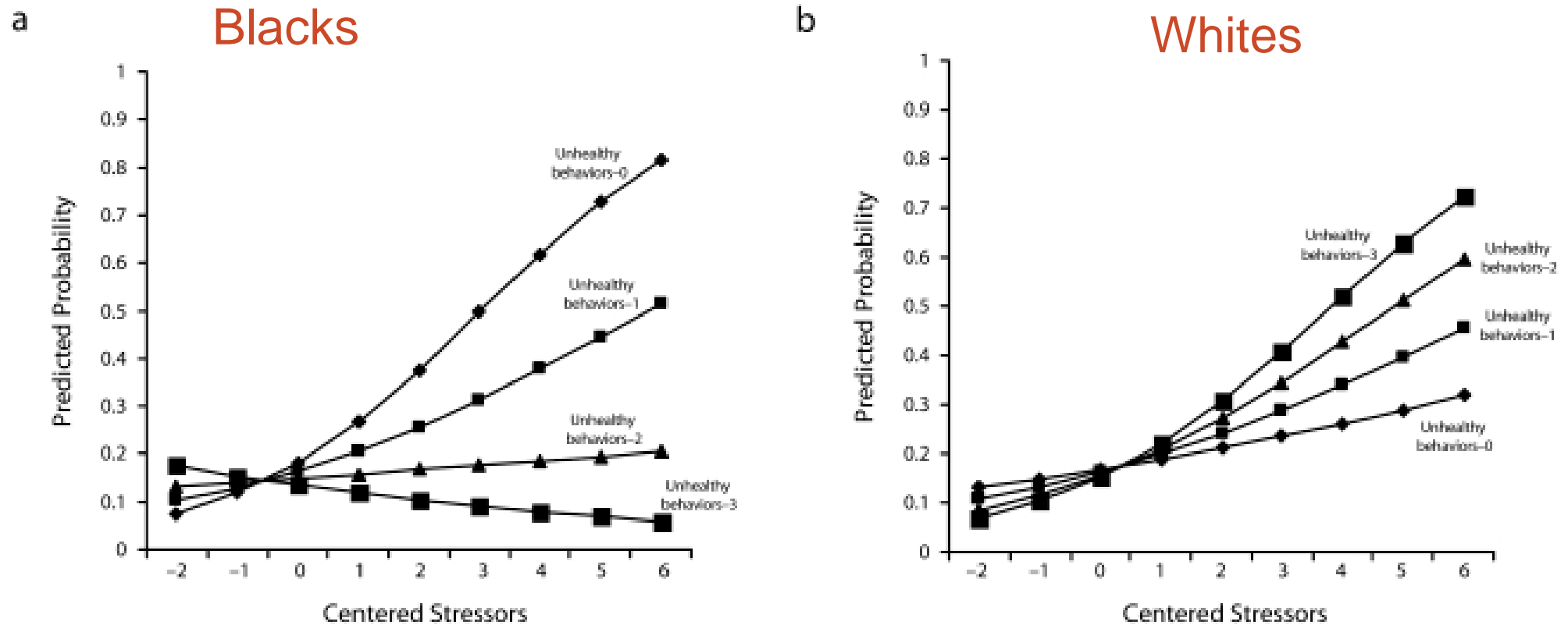
To lessen:

- anxiety
- worries
- fears
- depression
- hopelessness



Jackson Hypothesis to Explain Self Medication

Relationship Between Stress & Unhealthy Behaviors



[Jackson JS, Knight KM, Rafferty JA.](#)

[Am J Public Health.](#) 2010 May;100(5):933-9. Epub 2009 Oct 21.

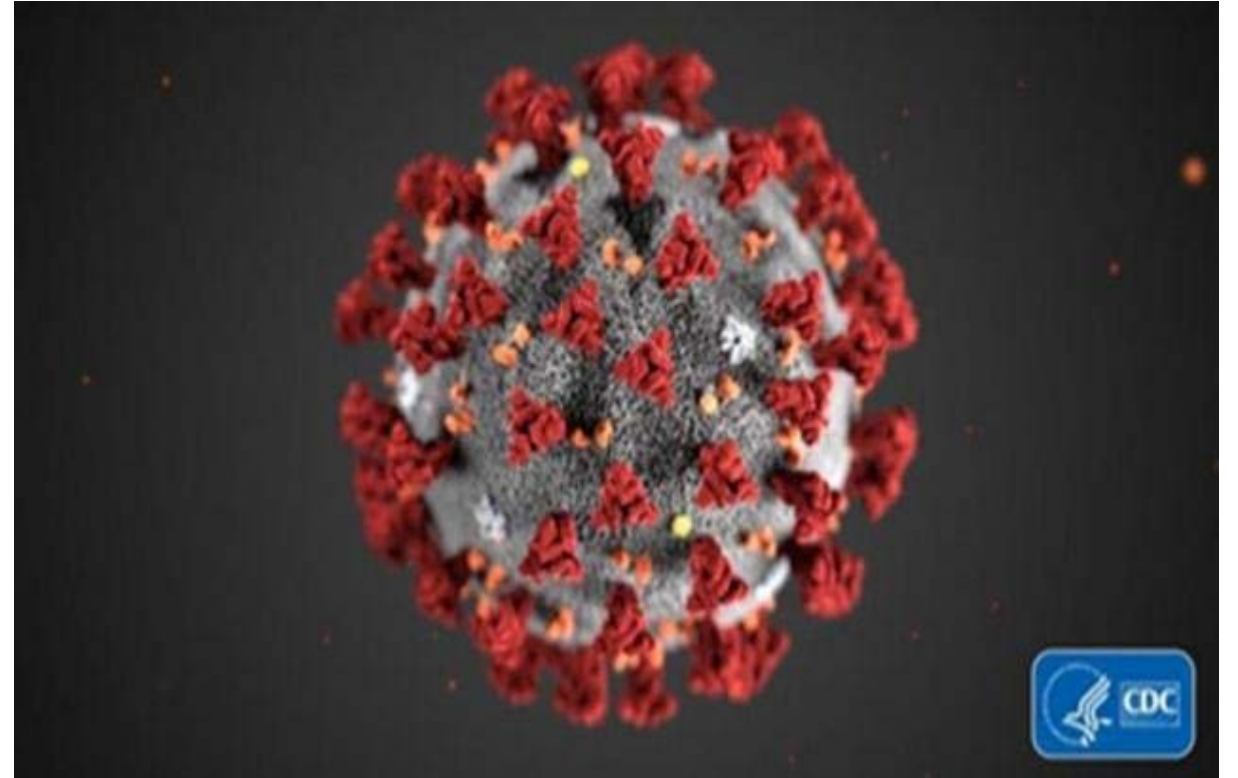
Race and unhealthy behaviors: chronic stress, the HPA axis, and physical and mental health disparities over the life course.

COVID-19 | Biopsychosocial Impact

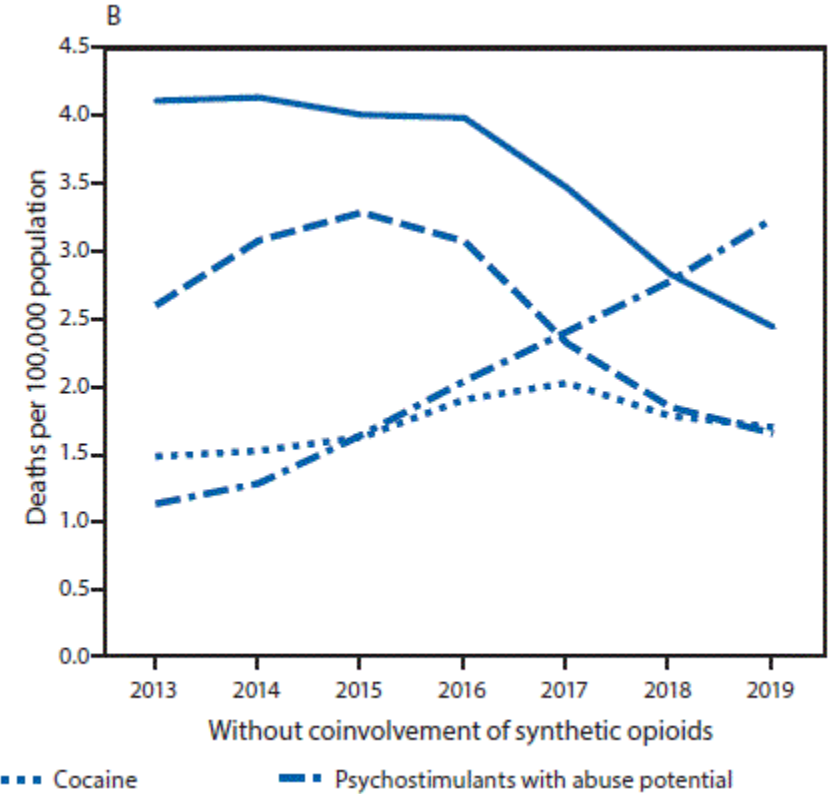
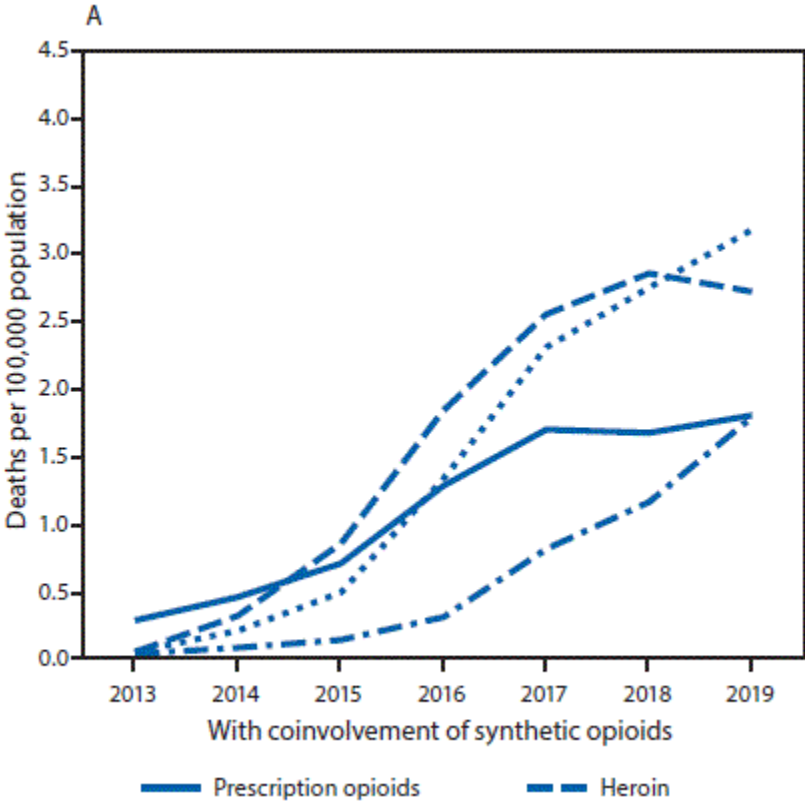
An outbreak of respiratory illness caused by a novel (new) coronavirus (named “coronavirus disease 2019” or “COVID-19”)

- First detected in Wuhan, Hubei Province, China
- Expanded worldwide creating a Pandemic

It is novel so there was no built-in immunity, reliable vaccine, or confirmed treatment.



Overdose Deaths Spiked at the Start of the Pandemic and Stayed High through the End of 2020 for Prescribed and Illicit Drugs



Mental Disorders

Borderline personality disorder

Studies have shown that addiction and borderline personality disorder (BPD) often occur together. Over two-thirds of people with BPD have abused substances at some point in their lives.

Depression

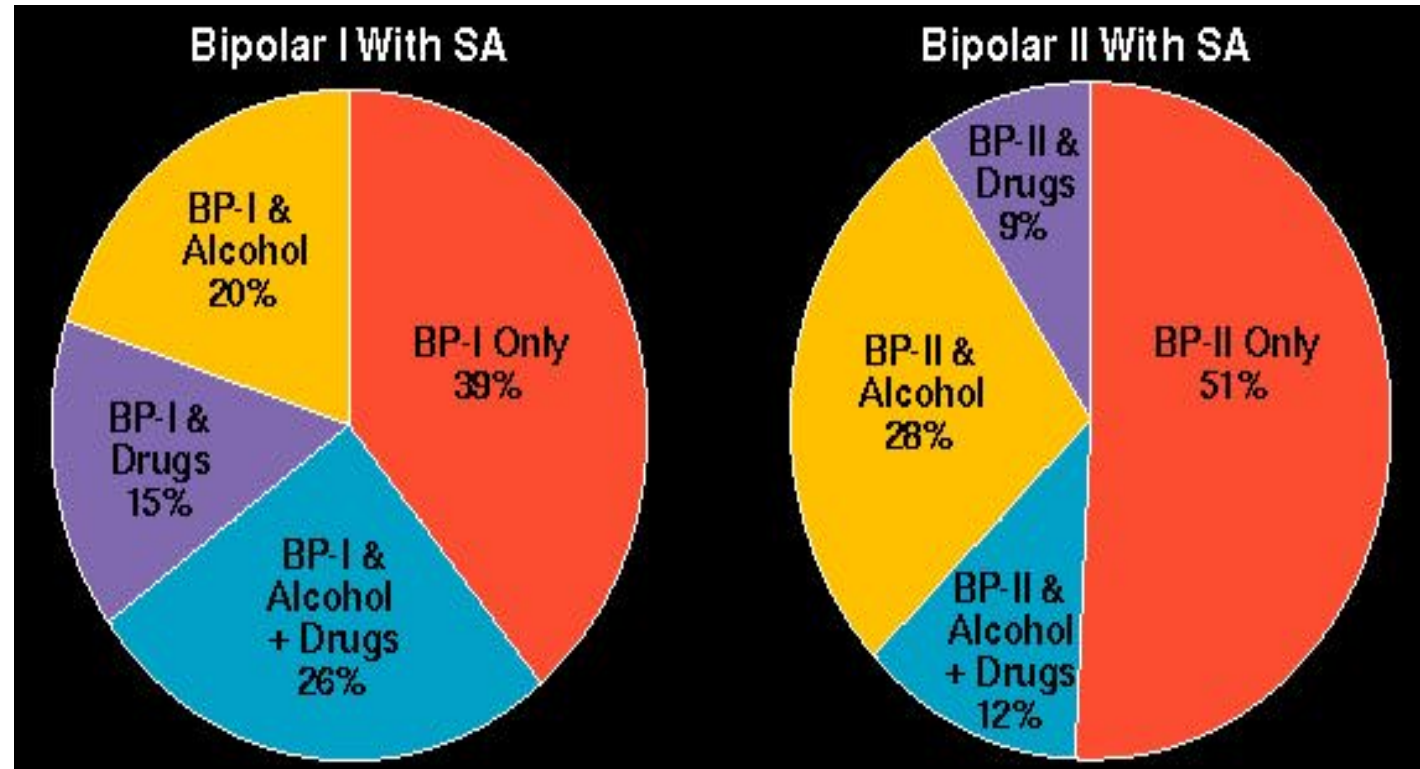
An estimated 1 in 10 adults in the United States has reported suffering from depression. Many people diagnosed with depression try to self-medicate with drugs or alcohol. This often makes the problem worse. The crash after the high can be devastating for those with a pre-existing depressive condition.

Bipolar Disorder and Substance Abuse

- Increased substance abuse in bipolar disorder
- Increased bipolar disorder in substance abuse
- Worsens course of illness and treatment outcome
- Associated with increased suicide, violence
- Both must be treated



Substance Abuse (SA) and Bipolar Disorder: Lifetime Community Prevalence



Weissman et al, 1991.

Other Disorders

Attention-Deficit Hyperactivity Disorder (ADHD)

- People with attention-deficit hyperactivity disorder (ADHD) may be more inclined to abuse substances as a way to cope with their symptoms.
- Many people are prescribed stimulants to treat their ADHD, which can lead to dependency but may also reduce the likelihood of substance abuse.

Anxiety Disorders

Generalized anxiety disorder (GAD)

The most common mental health condition in the US, generalized anxiety disorder (GAD) affects 18% of the adult population. People who suffer from GAD may be more likely to abuse drugs and alcohol to manage their symptoms. People may also abuse Benzodiazepines, are prescription medications that can be addictive to treat anxiety disorders.

Obsessive compulsive disorder (OCD)

Obsessive compulsive disorder (OCD) causes a number of unwanted obsessions and compulsions, such as an irrational fear of germs and the need to constantly clean. There are many variations of this illness. People with OCD often suffer from anxiety and depression as a result of their involuntary behavior, which can lead to substance abuse.

Post-Traumatic Stress Disorder (PTSD)

- When a person develops post-traumatic stress disorder (PTSD), their brain produces less endorphins than a healthy brain; this makes the afflicted person more likely to turn toward alcohol or drugs to feel happy.
- According to the US Department of Veterans Affairs, nearly 75% of soldiers and veterans who experience a traumatic or violent event during combat report repetitive alcohol abuse.
- PTSD is more common in the civilian population and a source of opiate dependency in victims of spousal abuse.

Treatment

- The best treatment for dual diagnosis is integrated intervention, when a person receives care for both their diagnosed mental illness and substance use disorder.
- The idea that “I cannot treat your depression because you are also drinking” is outdated — current thinking requires *both* issues be addressed.

Pharmacotherapy

- Effective medications exist for treating opioid, alcohol, and nicotine addiction and for alleviating the symptoms of many other mental disorders.
- Most of these medications have not been studied in patients with comorbidities, although some may prove effective for treating comorbid conditions.
- Behavioral treatment (alone or in combination with medications) is the cornerstone to successful outcomes for many individuals with drug use disorders or other mental illnesses but again many have not been studied extensively in the dually diagnosed.

Key Elements of Success

- Integrated Treatment of substance abuse and mental disorders
 - One system
 - One locale
 - Comorbid trained staff
- Sequential Treatment
 - Substance abuse first or mental illness first until stabilized **DOES NOT WORK**
- Separate Treatment
 - Mental disorder treated one place or in a separate program from substance abuse **DOES NOT WORK**

Self-Help and Support Groups

- Dealing with a dual diagnosis can feel challenging and isolating. Support groups allow members to share frustrations, celebrate successes, find referrals for specialists, find the best community resources and swap recovery tips. They also provide a space for forming healthy friendships filled with encouragement to stay clean. Here are a few groups to check out:
- [Double Trouble in Recovery](#) is a 12-step fellowship for people managing both a mental illness and substance use disorders.
- [Alcoholics Anonymous](#) and [Narcotics Anonymous](#) are 12-step groups for people recovering from alcohol or drug addiction. Be sure to find a group that understands the role of mental health treatment in recovery.
- [Smart Recovery](#) is a sobriety support group for people with a variety of addictions that is *not* based in faith.

Other Elements

- Cultural overlay
- Psychoeducation for medication adherence
- Vocational rehabilitation
- Receptive support groups by family or peers:
 - Double trouble
 - Club house
 - ETC.

Substance Use & Mental Health

- Of the 8.9 million only 7% of individuals receive treatment for both conditions
 - 56% receive no treatment at all

Vicious Cycle

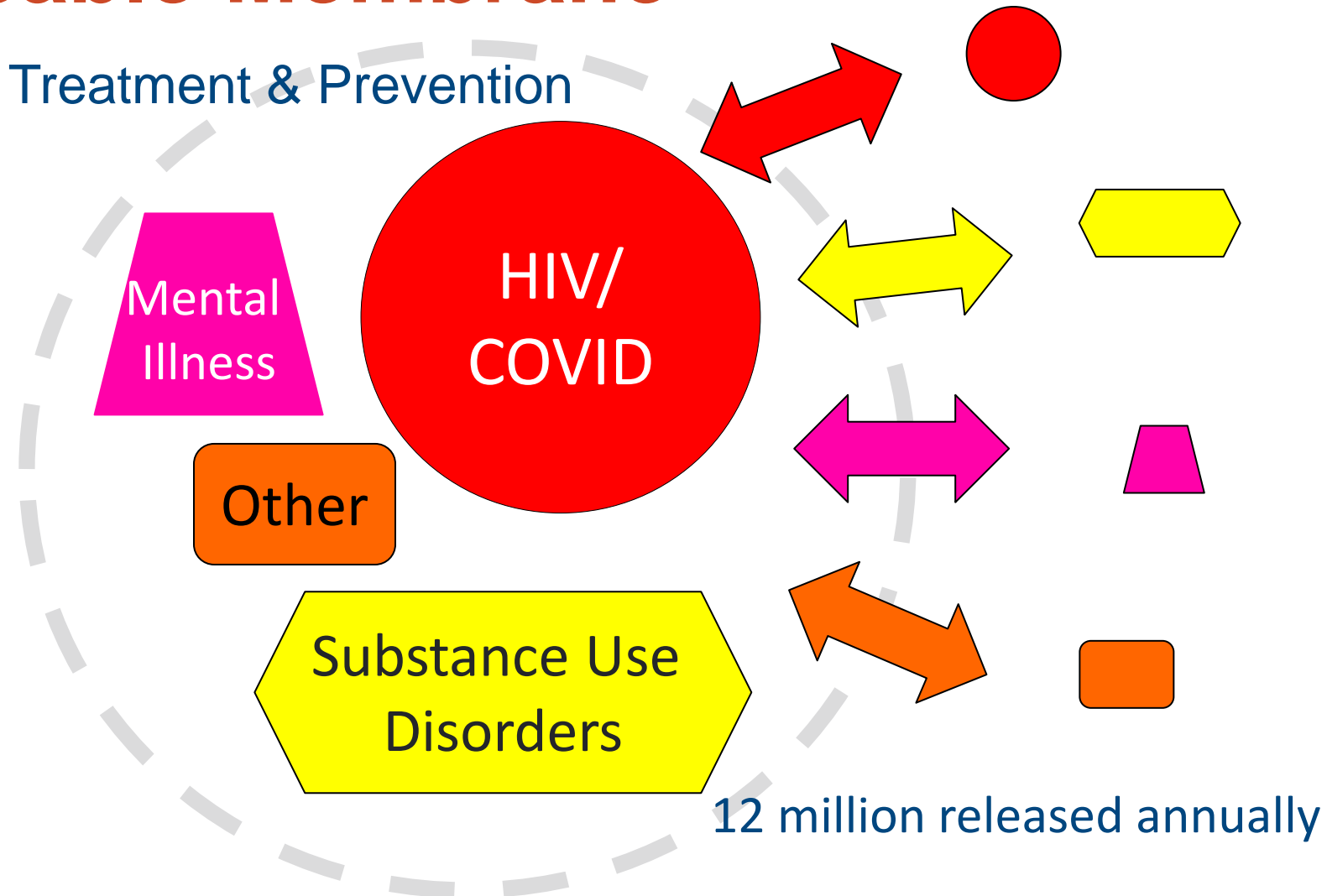
- Self-treatment with drugs
- Drug related violence
- Increased risk of traumatic experiences
- Increased risk of mental problems

CORRECTIONS

- Many of those needing treatment are in the criminal justice system.
- It is estimated that about 75 percent of offenders in State and local prisons and jails have a mental health problem comorbid with substance abuse or addiction.
- However, adequate treatment services for both drug use disorders and other mental illnesses are greatly lacking within these settings.
- While treatment provision may be burdensome for the criminal justice system, it offers an opportunity to positively affect the public's health and safety.

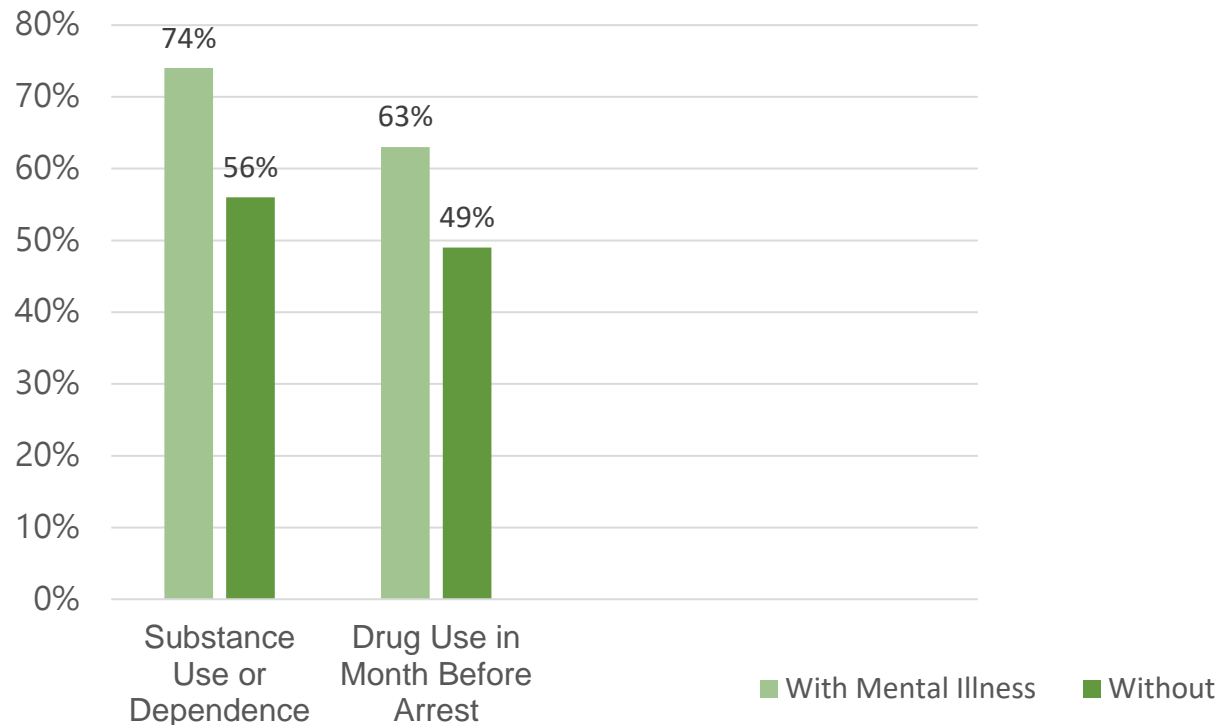
Correctional Settings: Semi-Permeable Membrane

Chronic Treatment & Prevention



Substance Use, Mental Health & Corrections System

Inmates' Substance Use



Interesting Fact: African-Americans comprised 12% of U.S. population, but almost 40% of the prison population, largely due to the severe laws, racial biases and the War on Drugs.

Report: Treating Drug Users to Reduce Crime

- Cuts drug abuse in half
- Reduces criminal activity up to 80 percent
- Reduces arrests up to 64 percent
- Reduces the spread of HIV/AIDS, hepatitis, and other infectious diseases
 - Treatment was greatly enhanced by drug court and buprenorphine programs

Treatment

Members of racial/ethnic minority groups are:

- More likely to be in the correctional system
- Less likely to access mental health services
(Wang et al 2005 Arch Gen Psychiatry)
- More likely to receive lower quality care
(Alegria et al 2008 Psych Services)
- More likely to use inpatient hospitalization and emergency rooms;
less community mental health service use
(Samnaliev et al 2009 J Health Care for Poor and Underserved)

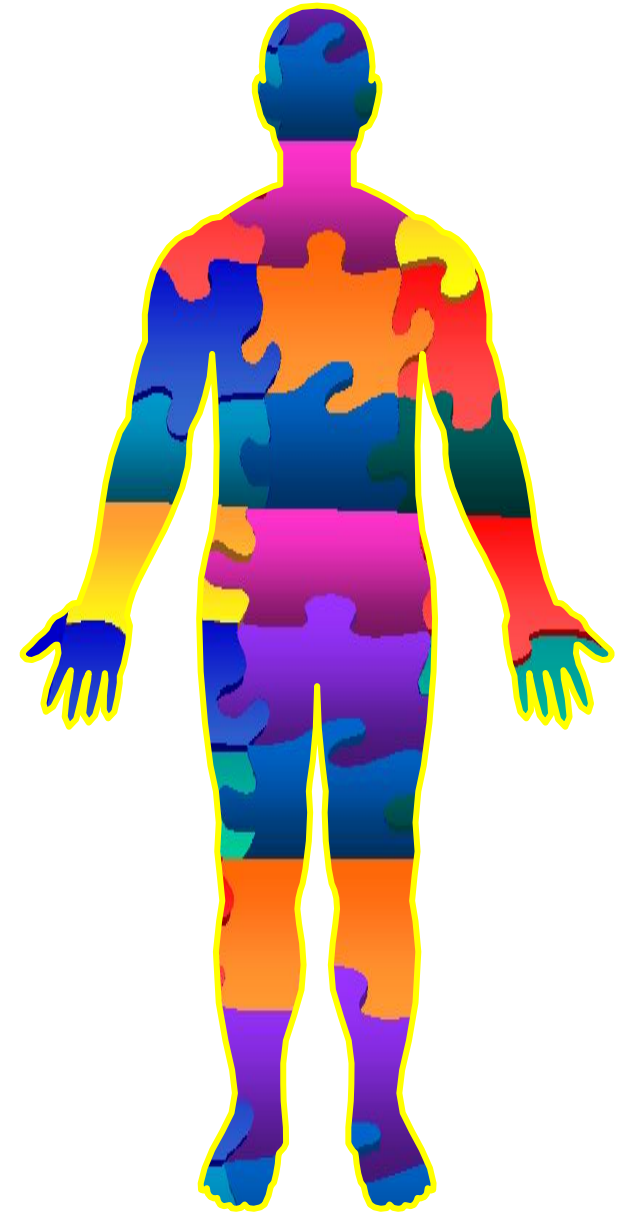
DRUG AND MENTAL ILLNESS DIVERSION PROGRAMS EFFECTIVENESS

- Community-based treatment programs are gaining popularity
- Diversion programs such as drug and courts are effective and should be greatly expanded
- Mental Health Courts have developed and often are dual-diagnosis courts
- Emphasis placed on using coercive power of criminal justice system in a positive way
- Media commentary indicates that new administration will emphasize treatment and prevention programs rather than drug import issue



Treat the Whole Person

- No single Treatment is appropriate for all individual
- Treatment must attend to multiple needs of the individual
- Remaining in treatment for adequate time is vital for success
- Treatment should be readily available no matter race, gender, orientation, or socio-economic status



Questions



Contact Us



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