Mental illness and addiction can be two sides of the same coin. If you don’t treat them together you can’t beat either.
Agenda

• Introductions
• Understanding Dual Diagnosis
• How families can advocate
• The big picture
• What needs to change
Dual Diagnosis Ireland

• Raise awareness of need to treat mental health and addiction together
• Founded February 2008
• Run by volunteers, Angela Moore, Eoin Stephens, Carol Moore
• Set up website (www.dualdiagnosis.ie)
• Mailing List
• Produced A to Z of Irish mental health services
• Registered Charity & members of Mental Health Reform
A simple aim....

We want people with a mental health and addiction problem to get the right kind of treatment at the first time of asking
Irish Background-services

- MH & SA treatment services deficient
- Increasing awareness of dual diagnosis issues
- Proposed dual diagnosis clinical programme
- Head of service user engagement & peer support workers
- Peer Support Groups
- Proposed supervised injection centres
- New substance abuse strategy being developed
Irish Background-services

- Commitment to legal regulation of counsellors 2017
- Mental Health Director’s office?
- Alcohol Public Health Bill under threat
- Services not “evidence based”
- Many services not regulated
- Success rates not measured
- Corporate governance issues
- Lack of priority despite €6 billion economic cost
Irish gap in treatments

Alcohol abuse
1.5 million people

Recorded Treatments

Mental Health
650,000 people

Recorded Treatments
What is Dual Diagnosis?

Dual diagnosis exists where alcohol or drug problem and an emotional/psychiatric problem also known as Co-morbidity or co-occurring disorder.

Confusing term- multiple meanings.
How Common Is Dual Diagnosis?

74% of users of drug services experienced mental health problems.

85% of users of alcohol services

44% of mental health service users reported drug use.

UK Dept. of Health
Dual Diagnosis in Ireland

• “76% of services failing to offer a specific service for people with dual diagnosis” (NACD)

• Must be “dry” to access most addiction rehab services

• Can’t get dry because of mental health issue e.g. social anxiety issue - drink to reduce anxiety

• Addiction Treatment services usually don’t assess for other mental health problems

• Reduces chances of long term recovery

• Increases risk of suicide attempts
WHAT IS INTEGRATED TREATMENT?
We plan services to treat conditions not people

Diabetes
Psychiatry
Addiction
Acquired brain injury
“To put it in the simplest terms if someone has multiple problems you make treatment more difficult by treating each problem in isolation”
Do

Document, document, document!
Do use sample templates

- Asking who has overall clinical responsibility
- Samples of agreement to share information
- Letter to raise issues at appointment
- Letters requesting review - individual issues and overall case management
- Letter requesting case conference
- Letter requesting provision of services
- Letter making complaint

- A to Z guide

Quia Timet Injunctions

Prevent anticipated infringement of a legal right occurring. Plaintiff must have a well grounded apprehension of injury, “almost amounting to a moral certainty”

Rabone case

Irish Mental Health Lawyers Association
A Vision for Change: 2006 Policy Framework

The mental health service pyramid

MH Services

Primary Care

Community Support

Excellent policy but flawed on substance abuse
Progress ?

“I think although we no longer practise in asylums our thinking is firmly in the grip of this approach.”

Psychiatrist Pat Bracken, July 2012
Kuhn’s knowledge paradigm
The medical reductionist paradigm
Paradigm does not work with people

It’s a Fan!

It’s a Spear!

It’s a Wall!

It’s a Rope!

It’s a Snake!

It’s a Tree!
Emmm.....
The DSM: Psychiatrist Bible

Mental health

Substance abuse
TREATMENT OF DRUG AND ALCOHOL PROBLEMS: NOT THE FUNCTION OF MENTAL HEALTH SERVICES
The hidden iceberg

Visible

- Legal
- Policies
- Structures
- Core processes
- Funding
- Facilities
- Measurements
- Skills
- HR systems etc

Invisible

- Values
- Belief
- Attitudes
- Identity
- Prejudices
- Mindset
- Etc.

Technical Challenges

‘Cultural’ Challenges
A paradigm shift is needed

Services planned to treat people not conditions

Accept SA with MH problem is the norm
What’s needed- No wrong door principle

Measure DD capability
What’s needed

• Introduce Alcohol Public Health Bill
• Mental health environment screening
• Independent regulation
• Person centred principle
• Family count principle
• Service user feedback
Key Takeaway’s

• Do not create a super specialism
• Do not argue about what is primary problem
• Do not use a “No motivation, no service argument”
• Tailor support to client’s stage of readiness.
• Do not assume abstinence is the only goal
Do not create an environment where staff refuse to accept responsibility for complex cases and are risk adverse.
Thank you

Dual Diagnosis Network Conference

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Dual Diagnosis Ireland