

Learn about...

Concurrent Disorders

What is a concurrent disorder?

When a person has both a mental health issue and a substance use problem, we say they have a concurrent disorder. (In the past, this condition was called “dual diagnosis” or “multiple diagnosis.”)

Tobacco and alcohol are the most common drugs used by people with concurrent disorders. Cannabis and cocaine are other drugs often used in this situation.

How does someone get a concurrent disorder?

A person with a mental illness, like depression, schizophrenia, or bipolar disorder, might use alcohol or other drugs to cope with their illness. This is sometimes called self-medication, and it is one way a person can develop a concurrent disorder. For example, someone with an anxiety disorder may develop a concurrent disorder by getting addicted to drugs their doctor has prescribed to help them cope with their illness.

It works the other way, too. Alcohol or other drugs may cause or aggravate psychiatric symptoms. For example, studies show that drinking heavily more than once a week is linked to an increased risk of depression.

As well, the social consequences that often come with problematic substance use (broken relationships, money problems, etc.) may cause depression or anxiety. In other words, a person’s mental health—their moods, perceptions and behaviours—can be negatively affected by their use of alcohol or other drugs.



How common are concurrent disorders?

According to a survey done by Canadian Community Health in 2002, about 435,000 adults in Canada had experienced concurrent disorders in the previous year. However, depending on the people being evaluated, the overlap of disorders varied. The results are shown below:

	%
Prevalence of mental disorders	
- Among people with no substance use disorder	8.4
- Among people with a substance use disorder	15.9
Prevalence of substance use disorder	
- Among people with no mental disorder	11.0
- Among people with a mental disorder	20.7



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“Tobacco and alcohol are the most common drugs used by people with concurrent disorders.”

This study showed that the risk of having either a substance use or mental disorder is about twice as high if you also have the other type of disorder.

Certain groups of people have higher rates of concurrent disorders than others. For example, from a representative group of adults being treated for substance use disorders in Ontario, it was found that 69.7 per cent also had a mental disorder. Groups that tend to have high rates of concurrent disorders in Canada include:

- people who are homeless
- people who have experienced early trauma or neglect
- First Nations or Inuit people
- people involved in the criminal justice system

Are some people more likely than others to develop a concurrent disorder?

The link between mental illness and substance use is complex. The likelihood of developing both a mental illness and substance use problem involves biological factors as well as environmental risks. These factors influence a person's resilience (the ability to cope with pressures and bounce back from problems).

Mental health problems may emerge in childhood or during adolescence, and can increase a young person's risk of developing substance use issues. Some people have more risk factors than others and are therefore more likely to develop both a mental illness and substance use problem.

What are some of the risk factors for concurrent disorders?

The risk factors for concurrent disorders are the same as those for mental health problems or substance use problems. These factors include:

- poverty or unstable income
- difficulties at school
- unemployment or problems at work
- isolation or lack of a social network
- lack of decent housing
- family problems
- family history of mental illness, problem substance use or concurrent disorders
- past or ongoing trauma or abuse
- discrimination
- biological or genetic factors

How many risk factors do you need before you develop a concurrent disorder?

The more risk factors a person has, the more likely they are to develop a mental health or substance use problem or a concurrent disorder. But not everyone with several risk factors will develop a problem. Some people may have protective factors that curb or balance the risks and increase resilience. These protective factors may include support from family and friends and meaningful involvement in the community.

How can you know if someone has a concurrent disorder?

In some people it is difficult to diagnose a concurrent disorder because their psychiatric symptoms may be masked by their use of alcohol or other drugs. Also, withdrawal from alcohol or other drugs can mimic or give the appearance of some psychiatric illnesses.

A person could end up receiving treatment only for a mental illness because the health care provider is not told about the substance use problem. Or vice versa. A person could end up receiving help only for their substance use problem.

There are many reasons why a person with a concurrent disorder may fail to disclose information, including:

- **lack of awareness.** They may not know they have the disorder. For example, they may believe their mental health problems are related to drug use only and will therefore go away when they stop using the drug.
- **discrimination.** They may believe that an identity based on drug-use problems will lead to less discrimination than one based on mental illness. Or they may identify more strongly with other people who suffer from mental health issues. They may be worried about being thought of badly by others for having a drug problem.

What happens if a person with a concurrent disorder is not properly diagnosed?

People with concurrent disorders are more likely to relapse after mental health or substance use treatment if the other disorder is not treated. But the treatment system is not well equipped to recognize and respond to concurrent disorders. As a result, people with concurrent disorders face additional barriers to adequate treatment and other needs such as supported housing.

People with concurrent disorders can get caught up in a cycle that involves multiple living problems resulting from:

- poverty
- lack of support systems
- isolation
- physical illness
- housing difficulties
- disrupted relationships with family and friends
- problems related to impairment from alcohol and other drug use
- negative experiences with previous treatment

What to do if you or someone you know is experiencing a problem with concurrent disorders

If you know someone who has concurrent disorders, or if you are concerned about yourself, it's important to first see a doctor and get a proper assessment of your symptoms. In addition to talking to your family doctor, consult the resources below for more information.

In British Columbia there are several programs and services available to help people with concurrent disorders:

- **The Dual Diagnosis Program of Greater Vancouver** is a service for adults offering access to one-on-one counselling, an addictions specialist, a psychiatrist, and a resource centre. For information call and leave a message at 604-255-9843.
- **Vancouver Community Mental Health Services** offers the Early Psychosis Intervention (EPI) Program, a concurrent disorders program specifically for youth aged 12 to 30 who have not been hospitalized more than once. To find out more, call 604-225-2211.
- Kids (or adults concerned about a young person) can call the **Vancouver Child and Youth Mental Health Services Referral Line** to be referred to the appropriate service at 604-709-4111.
- There are residential treatment programs available in the Lower Mainland including **Berman House** in Vancouver. Call 604-254-6065.
- Support groups like Double Trouble, Dual Diagnosis Anonymous, Dual Recovery Anonymous and others offer support. Call the **Alcohol and Drug Referral Service** at 604-660-9382 or 1-800-663-1441 for groups in your area.
- Some addiction treatment centres accept people with concurrent

disorders, but these services are not geared towards the specific needs of people living with mental illness.

BC Crisis Line

If you are in distress, call 310-6789 (no area code needed in BC) 24 hours a day to connect to a BC crisis line that has received advanced training in mental health referrals, without a wait or busy signal.

If you'd like publications about mental health or substance use, you can contact the BC Partners at 1-800-661-2121.

Alcohol and Drug Information and Referral Service

Call 604-660-9382 (in Greater Vancouver) or 1-800-663-1441 (from anywhere in BC).

Your Local Crisis Line

Despite the name, crisis lines are not only for people who are in crisis. Call for information on local services or if you just need someone to talk to. You can find the number for your local crisis line online at <http://www.crisiscentre.bc.ca/programs-services/distress-phone-services/> or at the front of your local phonebook under Emergency & Important Numbers > Distress Centres > Crisis Line. Many are available 24 hours a day, seven days a week.

BC NurseLine

Call 1-866-215-4700 for 24-hour confidential health information and advice through a registered nurse, or to a pharmacist (after hours).

HealthLink BC

Call 811 or visit www.healthlinkbc.ca to access free, non-emergency health information for anyone in your family, including mental health information. Through 811, you can also speak to a registered nurse about symptoms you're worried about, or to a pharmacist about medication questions.

For more information about concurrent disorders, visit www.heretohelp.bc.ca, www.carbc.ca, or www.cmha.ca.



heretohelp

The BC Partners for Mental Health and Addictions Information are a group of seven leading provincial mental health and addictions nonprofit agencies. The seven partners are Anxiety BC, BC Schizophrenia Society, Centre for Addictions Research of BC, Canadian Mental Health Association's BC Division, F.O.R.C.E. Society for Kids Mental Health, Jessie's Hope Society, and Mood Disorder's Association of BC. Since 2003, we've been working together to help individuals and families better prevent, recognize and manage mental health and substance use problems. BC Partners work is funded by BC Mental Health and Addiction Services, an agency of the Provincial Health Services Authority. We also receive some additional support from the Ministry of Children and Family Development. The BC Partners are behind the acclaimed HeretoHelp website. Visit us at www.heretohelp.bc.ca. Produced by the Centre for Addictions Research of BC