

Co-Occurring Disorders: from prevention to integrated treatment to sustainable recovery



according to the National Institute for Drug Abuse (NIDA) one in two individuals with substance use issues also struggle with mental health challenges



according to the National Survey for Drug Use and Health (NSDUH) more than 20 million individuals in the US meet criteria for a diagnosis of co-occurring disorders



the harris project is the **only** nonprofit in the nation committed to COD

Developing Co-Occurring Disorders



- Mental health disorders exist or are emerging – using substances to “self-medicate”
- Mental health and substance use disorders can happen together within the same person
- Substance use can bring on mental health disorders
 - brain isn’t fully developed until 25
 - use can cause changes – vaping, marijuana, nicotine, alcohol, misuse medication
 - concern about “legal prescriptions” - sports injury, wisdom tooth removal
- Impact of Genetics/Family History/Trauma

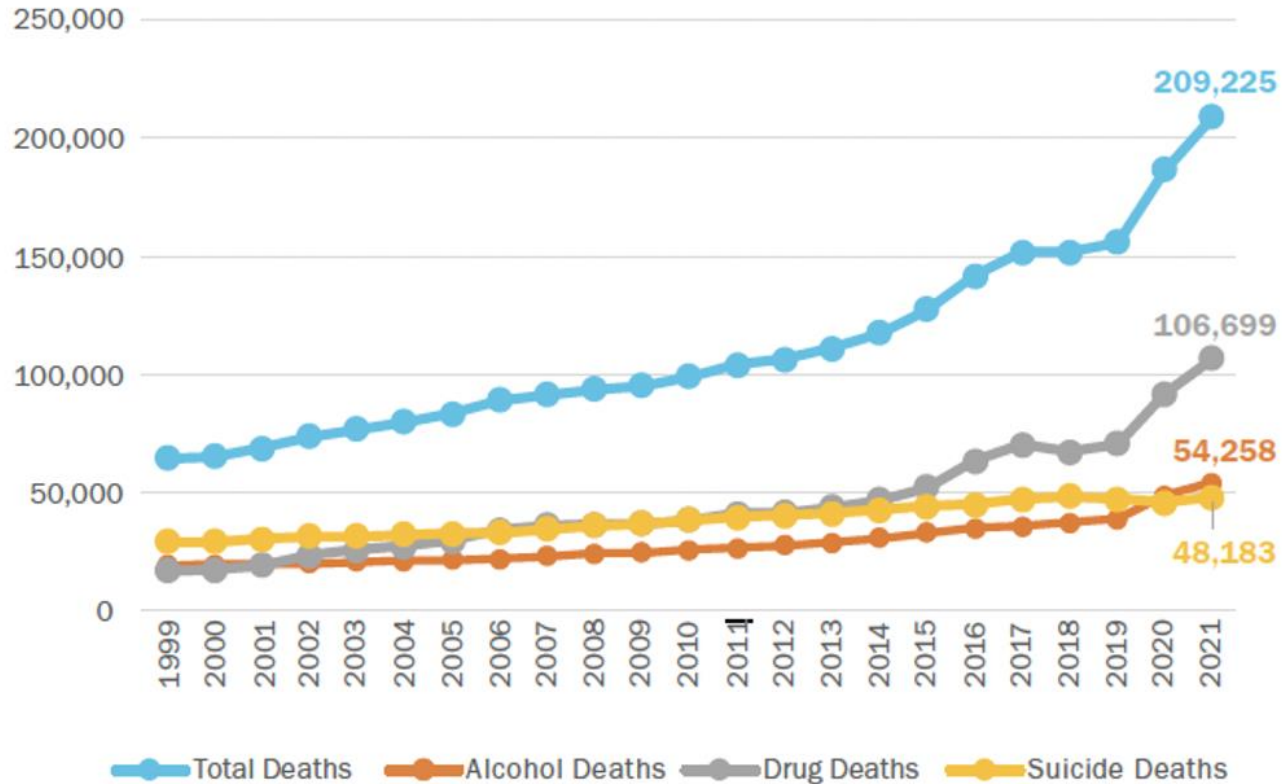
Co-Occurring Disorders: the largest public health crisis most have never heard of

- Fentanyl/Xylazine
- Alcohol – binge drinking
- Suicide rates in youth
- Marijuana – THC – smoking, vaping, edibles

Adolescent drug overdose deaths rose exponentially for the first time in history during the COVID pandemic

nearly doubling in 2020, and rising another 20% in 2021

Figure 1: Annual Deaths from Alcohol, Drugs, and Suicide in the United States, 1999–2021



Source: TFAH analysis of National Center for Health Statistics data

Substance Use Disorder Treatment for People With Co-Occurring Disorders

UPDATED 2020

TREATMENT IMPROVEMENT PROTOCOL

TIP 42

SAMHSA
Substance Abuse and Mental Health
Services Administration

Effective COD Assessment and Treatment

- How this went wrong
 - silos
 - separate funding
- Coordination of mental health and addiction professionals to create an integrated comprehensive treatment plan to address the whole person:
 - meets the needs of the individual
 - medication for mental health and/or addiction when appropriate
 - positive and supportive social interactions
 - healthy recreational activities
 - family involvement when beneficial
 - NO “WRONG DOOR”
- Impact of education and advocacy

The COSOCC model is based on the following eight clinical consensus best practice principles (Minkoff and Cline, 2004, 2005) that promote an integrated recovery philosophy that makes sense from the perspective of both the mental health system and the substance disorder treatment system.

- Co-occurring issues and conditions are the expectation, not an exception.
- The foundation of a recovery partnership is an empathic, hopeful, integrated, strength-based relationship.
- All people with co-occurring conditions are not the same, so different parts of the system have responsibility to provide co-occurring capable services for different populations.
- When co-occurring issues and conditions co-exist, each issue or condition is considered.
- Recovery involves moving through stages of change and phases of recovery for each co-occurring condition or issue.
- Progress occurs through adequately supported, adequately rewarded skill-based learning for each co-occurring condition or issue.
- Recovery plans, interventions, and outcomes must be individualized.
- A Comprehensive, Continuous, Integrated System of Care Model is designed so that all policies, procedures, practices, programs, and clinicians become welcoming, recovery- or resiliency-oriented, and co-occurring capable.

Westchester COSOCC (Co-Occurring System of Care Committee)

The **Westchester County COSOCC** was formed in 2017 to lead a countywide effort to coordinate co-occurring strategies. COSOCC includes a diverse group of stakeholders including county departments, behavioral health providers, school districts, advocacy organizations, peers, and other human service organizations.

Key Areas of Focus

- ❖ Awareness, Education & Prevention
- ❖ Harm Reduction Strategies
- ❖ Quality Improvement & Timely Access to Effective Evidence-Based/Best Practice Treatment, Supportive & Recovery Services.
- ❖ Systems Reform to Strengthen Integrated & Co-Occurring Care



Westchester DCMH COD Forum
May 2018 with Dr. Marc Fishman



Co-Occurring Disorders Integrated Treatment
Roundtable April 2016 Westchester, Putnam,
Orange – SAMHSA, OASAS



First Westchester COSOCC meeting
January 2018

Finding the right support

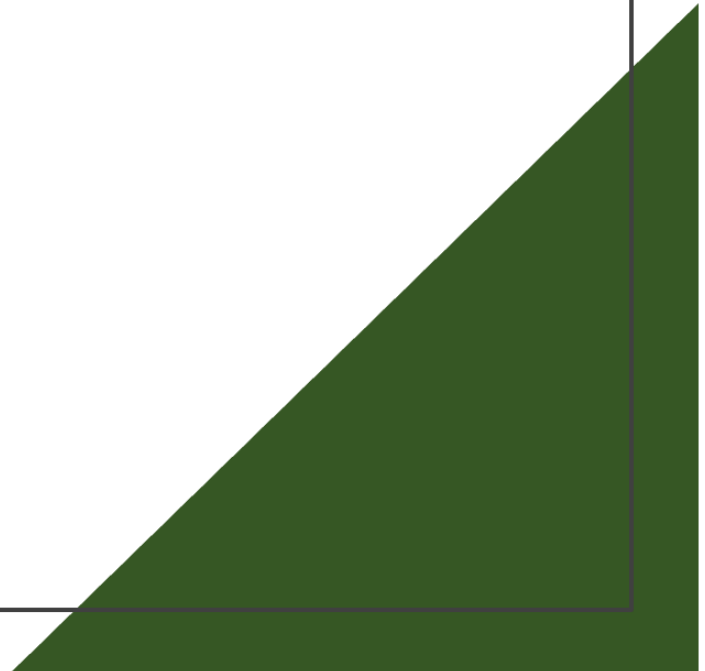
Grant funding - Encompass,
Wraparound Coordinator
SAMHSA Award

- Clinician's understanding of co-occurring disorders – there are evidence-based, integrated treatment opportunities
 - Motivational Enhancement Therapy + Cognitive Behavioral Therapy
 - Encompass adds Contingency Management
- Support for the caregiver – Community Reinforcement and Family Training (CRAFT), Invitation to Change
 - Move from focusing on the negative to celebrating small victories
 - Move away from black and white thinking to a more harm reduction view
 - Ensure self-care for parent/caregiver
- Pro-social activities – what to do with free time/down time that is healthy and safe

NYS Opioid Settlement Fund Advisory Board

Co-Occurring Disorders as an overarching theme:

- Successes
- Challenges
- Opportunities
- Advocacy/Education
- Planning for the future



Westchester's Opioid Response & Overdose Prevention Initiative (ORI)

Membership:

- Co-Chairs: Department of Community Mental Health, Health, Core Partners: Public Safety, Social Services, DA Office, Medical Examiner's Office, Youth Bureau, Corrections, Probation, & invited key stakeholders

Overarching Objectives:

- Provide **effective** Awareness & Prevention efforts to address Opioid/Substance Use.
- Use of **Timely & Useful** Data to Drive Planning.
- Provide **Effective** Harm Reduction Strategies.
- Increase **Timely Access to effective** addiction, mental health, and co-occurring treatment, recovery, and family support services.
- Address Community **Safety**.
- Identification, Allocation, Support/TA & Monitoring of Resources.



Westchester's Opioid Settlement Plan Highlights

- ❖ County Charge
- ❖ COSOC Framework
- ❖ Settlement Funding Source(s)
- ❖ Mapping of Existing County Services
- ❖ Stakeholder Meetings
- ❖ Plan Development
- ❖ DCMH/ORI Clearinghouse
- ❖ On-Going Evaluation of Plan
- ❖ Quarterly & Annual Reporting



CODA – integrated prevention Co-Occurring Disorders Awareness

Opportunity Created by
Westchester County
Settlement Funds



- **Students – highly motivated**
- **School Administrators, teachers, staff, coaches, PTA**
- **Coalitions – increase collaboration, messaging**
- **Community organizations**
- **Parents/Caregivers – meet them where they are –
Community Conversations, Parent Universities,
Athletic Events, information at Open Houses,
Drama and Arts Events**
- **Local Government Partners – Youth
Council/Bureau, Departments of Community
Mental Health/Substance Use Services**
- **Grow athletic presence**
- **As roots deepen, expand to middle and elementary
schools**



#CODAconnects

#BeTheLink

