

# Queensland Health Fact sheet 4

## Dual diagnosis

### Mental illness and alcohol and/or other substance use

#### Definitions as used in this fact sheet

**Dual Diagnosis** is used to describe someone with two or more disorders or problems, one of which is a mental health problem and one of which relates to the use of alcohol and/or other drugs.

**Consumer** is used to describe the person for whom you care. He or she may be a family member, spouse, friend or 'significant other'.

As a carer you may feel anxious and afraid for the consumer, if you suspect that he or she is using or abusing alcohol or illicit drugs. You may be distressed about what other people will say, including other family members. It is likely that you will worry that he or she may be harmed, may harm themselves, or may do something illegal and you will no doubt be concerned that their mental illness will worsen.

Alcohol or drug use is a cause for concern, especially since you may also have discovered that you are not able to make the person stop using alcohol or drugs, even though they may know the risks. But whilst you may not be able to stop someone from using alcohol or drugs, you are able to minimise harm, and help them through this very difficult part of their life, by using some well-known and well-tested strategies.

#### Where do I begin?

Talk to the consumer's doctor and treating team as soon as you can. You have a wealth of information they will find useful to identify the best treatment options. They can help you understand how you can best support the consumer on their journey towards recovery.

You can expect to be given the information you need to support the consumer, although there may be some specifics which are confidential.

The starting point and underlying principle of treatment and support is known as harm minimisation, which focuses on safety and reducing other negative impacts on the consumer, their family and the community.

The aims of harm minimisation are:

- to keep the consumer as safe as possible
- to provide clear, reliable information about options
- to keep the lines of communication open

- to respect the consumer's capacity to make decisions about how and when to accept treatment.

Putting harm minimisation into practice can be challenging at first, but is very worthwhile. Calm, respectful discussions are necessary if you and the consumer are to maintain or regain meaningful communication.

Some conversations with the consumer may be extremely challenging. Ask someone from the Mental Health Service for advice on what to say if you are unsure.

#### Stages of change

People go through many different stages throughout their lives, including whenever they need to make changes. You will find you go through these stages too, as you continue learning to support the consumer.

The various stages of change are:

- Pre-contemplation - not yet acknowledging that there is a problem behaviour that needs to be changed: 'Ignorance is bliss'.
- Contemplation - acknowledging that there is a problem but not yet ready, or sure of wanting, to make a change: 'Sitting on the fence'.
- Preparation/Determination - getting ready to change: 'Testing the waters'.
- Maintenance - maintaining the behaviour change.
- Relapse - returning to older behaviours and abandoning the new changes: 'Fall from grace'.

Behaviour change does not happen in one step. People tend to progress through different stages on their way to change. We all progress at our own rate, and sometimes we relapse, often many times, before we 'get it right'. For example, ask anyone who's given up smoking about how many times he or she tried to quit the habit before succeeding.

Expecting behaviour change simply by telling someone who is still in the 'pre-contemplation' stage, that he or she should or ought to do certain things can be counterproductive if they are not ready to change. Each person must decide for themselves when a stage is completed and when it is time to move onto the next stage. This decision must come from the individual, as stable, long term change cannot be imposed by others.

In each of the stages, a consumer has to deal with a different set of issues and tasks that relate to changing behaviour. The challenge for carers is to keep themselves well, and to keep the communication open, so that they can provide some stability in the life of the consumer during this difficult time. This way, when he or she is ready to take the next step, it is easier to support them.

### **Ask for help for yourself**

Some carers have learnt some behaviours and habits that are not helpful when coping with someone who has a dual diagnosis. You will need to learn some new skills and behaviours if you are to support the consumer towards recovery. Whilst you are likely to find this challenging, your perseverance will be worthwhile.

You may feel angry, hurt and disappointed by the behaviour of the consumer. However, the mental health service will be able to help you find a support group and information. Through these you can learn the skills you need to help the consumer, as well as the rest of your family, during this very challenging time.

Find someone you trust who understands the implications of dual diagnosis, or is willing to learn with you. Avoid those people who are critical, judgmental, or make you feel uncomfortable, until you have discovered how best to deal with them. Sometimes outside professional or non-professional help for you can be very effective. For further information and useful contacts, refer to [www.health.qld.gov.au/mhcarer](http://www.health.qld.gov.au/mhcarer)

Don't feel guilty; it's not your fault. There are many reasons why people use alcohol or other substances. Some people do it to boost their confidence, some want to experiment to see what happens, some find it hard to resist peer pressure, and some use substances in a desperate attempt to escape from the awful feelings and thoughts they are experiencing as a direct result of their mental illness.

Don't be judgmental of the consumer, yourself, or of others. It is not uncommon for people to say, "Gosh, I need a drink!" after a difficult day. It may annoy you when you hear this from the consumer or you may feel anxious, uncomfortable, worried, distressed, or threatened. However, there are ways of dealing with the behaviour of others, which

- are not confrontational
- can be learned
- do help.

Accept that your life has changed and you will need to change with it. You may want to learn everything you can about the consumer's illness, about the drugs or alcohol he or she may be using and about the short and long-term effects.

Maintain contact with the consumer. Rather than lecturing or arguing about their substance use, try to focus on the qualities you admire most about them. Do not have unreasonable expectations, as progress is sometimes made in very small steps.

When relapses occur, be kind. Praise the consumer for having tried and encourage them to get back on track. Regardless of how hurtful you find their actions, treat them with respect and do not belittle them, use sarcasm or harsh, abusive language. Always keep yourself safe and do not be afraid to set clear, reasonable boundaries around their behaviour. It is difficult to keep on doing these things, but your perseverance will be worthwhile.

Some people with dual diagnosis see their mental health issue as being secondary to their drug or alcohol issue and vice versa. The Queensland Health Policy on Dual Diagnosis, released in 2008, promotes a 'no wrong door' approach. This means that if someone goes to the Alcohol and Drug Service, they should also be assessed and treated for any mental health issues, and if they go to the Mental Health Service, their drug or alcohol use should also be assessed and treated. For further information refer to the Queensland Health Policy on Dual Diagnosis [http://www.health.qld.gov.au/mentalhealth/docs/ddpolicy\\_final.pdf](http://www.health.qld.gov.au/mentalhealth/docs/ddpolicy_final.pdf)

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**Additional information for carers can be found on the Queensland Health Carers Matter website at [www.health.qld.gov.au/mhcarer](http://www.health.qld.gov.au/mhcarer)**

*Endorsed by Dr Aaron Groves  
Executive Director  
Mental Health Alcohol and Other Drugs Directorate*