Schizophrenia & Substance Use

A Reason to Hope. The Means to Cope.
Schizophrenia Society of Canada
Société canadienne de la schizophrénie
Une source d’espoir, de soutien et d’entraide.
Schizophrenia and Substance Use

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The combination of mental illness and substance use disorder is often called “concurrent disorders” or “co-occurring disorders” and in the United States, “dual diagnosis”.

Substance abuse is a common concern of the family and friends of people with schizophrenia or psychotic disorders. Substance abuse refers to the misuse and abuse of street drugs, over the counter drugs and/or alcohol.

About 50% of people diagnosed with schizophrenia will also have problems with substance abuse and/or dependence. People living with schizophrenia and other psychotic disorders tend to use substances that are affordable, easily accessible and readily available, such as alcohol, cannabis and nicotine. Prescription drugs like tranquilizers and sleep medication can also be misused. Most people with schizophrenia are dependent on nicotine (70-90 %).1

Even though it is so common, many people with schizophrenia and substance use issues have fallen through the cracks of the health care system. Mental health services may refuse treatment to a person with an active drug or alcohol dependency, and addiction professionals often believe that a person cannot recover from problem substance use until their mental disorder is treated.10 This has resulted in people with schizophrenia and substance use problems being bounced back and forth between mental health and addictions services, sometimes being refused treatment by either system.

Substance abuse is a common concern of the family and friends of people with schizophrenia or psychotic disorders.
People often wonder “Which came first: the mental health problem or the substance use problem?” This is a hard question to answer. Often it is more useful to think of them as independent problems that interact with each other. Both must be seen and treated as “primary disorders”.

Schizophrenia and substance use interact to make each condition (or disorder) worse, with serious and negative effects on many areas of people’s lives, including work, relationships, health and safety.

Why do people with schizophrenia use drugs and alcohol?

Research has shown that people with schizophrenia and other mental disorders often use drugs and alcohol for the same reasons as everyone else – to feel better or different, to relax and have fun, and to be part of a group. Other reasons for drug use include curiosity or experimentation, to relieve stress, to overcome boredom, and to cope with symptoms of mental illness.

Substance use complicates the course of illness and the treatment of people with schizophrenia, even when relatively small amounts of substances are used.

Substance use complicates the course of illness and the treatment of people with schizophrenia, even when relatively small amounts of substances are used. People with a serious brain disorder like psychosis or schizophrenia who take illegal drugs and/or abuse alcohol are more likely to have relapses, are less likely to respond well to treatment, and are more likely to require hospitalization.

A relapse occurs when a person in recovery re-experiences problems or symptoms associated with his or her disorders. With substance use disorders, a relapse means a return to problem substance use after a period of abstinence or controlled use. A relapse of a mental illness like schizophrenia means a return or flare-up of the symptoms of psychosis. A relapse of one disorder can sometimes trigger relapse with the other.

While most researchers do not believe that substance abuse causes schizophrenia, people who have schizophrenia often abuse alcohol or drugs, and may have particularly bad reactions to certain drugs.

There is increasing evidence that having schizophrenia or other psychotic disorders may make individuals “supersensitive” to the effects of alcohol and other drugs. This means that they will experience more of the negative consequences from even fairly small amounts of alcohol and other drugs.
When a member of the family has schizophrenia and uses substances, everyone is affected, and life will often change quite dramatically for the whole family. Families are often the main support network for a person who is struggling with psychosis, schizophrenia and substance use problems. The stigma and shame that are sometimes and unfortunately attached to mental illness and substance use can isolate the family from its community and social support networks.

Having a relative with schizophrenia and substance use problems can put an enormous strain on the family – emotionally and financially. The financial strain can come from direct costs, such as specialized treatment services, and indirect costs, such as having to leave employment to help take care of the ill family member. vi

Joining a support group can be a huge help for families and friends struggling with a relative with schizophrenia and substance use problems. By joining a support group, family members and friends can find practical advice and information about different kinds of services and supports available, and gain access to the wisdom and experience of others who have successfully dealt with similar situations. To find out about family support groups dealing with co-occurring disorders in your area, contact your local chapter of the Schizophrenia Society or Canadian Mental Health Association.

Families are often the main support network for a person who is struggling with psychosis, schizophrenia and substance use problems.

Substance use can reduce the effectiveness of treatment for schizophrenia in a number of ways. It can interfere with the effectiveness of medications used to treat psychosis, and can also contribute to people discontinuing their medication.

Stimulants such as amphetamines or cocaine may cause major problems for people with schizophrenia, as can marijuana. In fact, some people experience a worsening of their schizophrenia symptoms when they are taking such drugs.

Substance use also reduces the likelihood that people will follow through with the management of their illness as counseled by their service providers.

Substance use reduces the likelihood that people will follow through with the management of their illness as counseled by their service providers.
Since early intervention is the best treatment, family members and friends can help by recognizing early warning signs of psychosis and/or substance abuse. These include changes in eating or sleeping patterns, increased hostility or suspicion, apathy, withdrawal from others, major changes in personality, intoxication, unclear thinking, and nervousness.

Family members and friends should encourage their loved one or friend to seek the help of a professional if they show any of the symptoms mentioned above. Often families will have to act as advocates, accompanying their relative and ensuring that they get the professional care that they need.

Families can provide practical assistance by encouraging that prescriptions are filled regularly, helping the ill family member to develop a routine for taking their medication, and by working with their family member to develop an action plan for dealing with relapses.

Research has shown that by taking part in family education programs, family members can help their relative avoid relapsing, and can increase their relative’s chance of full-time employment by almost half.\(^{vii}\)

The most important thing family members and friends can do to help is to focus on treating the family member with love, respect and compassion.

Because people with schizophrenia and substance abuse issues have a complex set of interlinked problems and treatment needs, an approach that combines both mental health and addiction services in one program is the most effective.

**Common features of integrated treatment programs include:**

- Assertive outreach to engage people who are often reluctant to come forward for help, support and treatment
- Motivational interviewing-based approaches to therapy which help people progress toward goals they define for themselves;
- A focus on a range of areas that go beyond eliminating symptoms of schizophrenia and substance use, including social, work and housing support
- A long-term perspective based upon improving people’s quality of life and a belief in the possibility for recovery

A growing body of evidence shows that when people receive integrated treatment for schizophrenia and substance abuse, they are more likely to remain engaged in treatment, and their substance abuse and schizophrenia symptoms can improve significantly as they progress in their recovery.

The most important thing family members and friends can do to help is to focus on treating the family member with love, respect and compassion.
Recovery from schizophrenia and other psychotic disorders is more challenging for people who also abuse substances. Similarly, the issues faced by families of people with both disorders are often more complex and confusing than for those who are dealing just with mental illness alone.

But recovery is possible! New research is showing that, with access to integrated treatment and psychological services, along with community supports and services, most people with schizophrenia and substance abuse can and do recover over time. Recovery is defined differently for each individual, but is generally thought to include: hopefulness, renewed meaning and purpose, managing the symptoms of schizophrenia, remission from substance abuse, living independently, having a job, having friends and social support, and quality of life.

People move toward recovery on different paths, so the supports that are needed are different for each individual. Most consumers report that recovery involves reaching their personal goals in life. People need a range of options to promote recovery. These include self-help groups, access to integrated treatment of mental health and substance use problems, vocational and housing support.

Family members and friends need to know that recovery can be a long road, full of ups and downs. Families are on their own journey of recovery as they deal with the personal “chaos” and losses that they experience. Families can help by engaging in their own recovery process, while being as supportive, understanding and as patient as possible as their loved one finds their way.

Can people recover?

Get informed. Find out as much as you can about schizophrenia and substance use. Knowledge is power and gives you a much better chance of developing good coping strategies.

Be patient. People who are struggling with schizophrenia and substance use need to come to their own insights about their illness. This is not easy and often takes time.

Find support. Find out about community organizations, like the Schizophrenia Society and Canadian Mental Health Association, that can assist you in your recovery process with supports and services that go beyond clinical care. They can often connect you with educational programs, counselling and local support groups.

Be an advocate. Help your ill relative to find treatment. Be prepared to be assertive in demanding appropriate care.

What can you do?

Since early intervention is the best treatment, family members and friends can help by recognizing early warning signs of psychosis and/or substance abuse.
Where can you find help?

- Your local mental health centre
- Your local addictions treatment facility
- Your local Schizophrenia Society Chapter
- CMHA branches across Canada
- For a more complete listing of resources, please refer to the SSC website at www.schizophrenia.ca

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Notes

- National Institute of Mental Health, 2006
- BC Partners for Mental health and Addictions Information. Concurrent Disorders: Addictions and Mental Disorders. 2006 www.heretohelp.bc.ca
- Concurrent Substance use and Mental Health Disorders: An Information Guide, CAMH, 2004
- Mental Illness Fellowship of Australia: Understanding dual diagnosis: Mental illness and substance use
Our Mission
To improve the quality of life of those affected by schizophrenia and psychosis through education, support programs, public policy and research.