

MHPN WEBINAR

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Tuesday, 4 October 2022

Complexities in working with co-occurring mental health and alcohol and other drug presentations

Tonight's panel



Bill Buckley
AOD Mental Health
Educator and Lived
experience



Dr. Hester Wilson
General Practitioner



Dr. Mary Emeleus
Psychiatrist



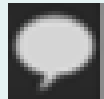
Facilitator:
Prof. Stephen Trumble
General Practitioner

The webinar platform

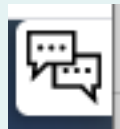
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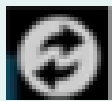
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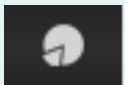
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Survey: To access the survey before the webinar ends click on this icon, which is in the lower right corner of your screen.

Learning outcomes

Through an exploration of co-occurring mental health and alcohol and other drug presentations the webinar will provide participants with the opportunity to:

- Discuss the difference between harm reduction and abstinence and how these approaches relate to mental health.
- Outline how to work with people experiencing mental health challenges, who are currently using or have used AOD in the past.
- Discuss stigma and the importance of language and communication when providing care to people seeking assistance for AOD use.
- Identify strategies to engage specialist services when supporting people who are experiencing mental health challenges due to their current or past use of AOD.

AOD Mental Health Educator and lived experience perspective

Mike's scenario

As it seems that Mike has already embraced the concept of abstinence, I would strongly encourage him to:

- have a full mental health assessment
- attend weekly counselling appointments
- explore and explain the potential benefits of a life skills program, e.g. emotional literacy, assertiveness
- explore options to develop new social circles
- explain the difference between a lapse and a relapse.



Bill Buckley



AOD Mental Health Educator and lived experience perspective

I would strongly encourage Mike to:

- Explore the option of attending weekly meetings of a community-based peer support network, at least in the initial stages of recovery.
(Smart recovery – Harm Min or 12 Step - Abstinence based)
- Explore options for new or historical recreational pursuits (not associated with drinking).
- Explore presenting and/or potential obstacles/barriers to continued abstinence, if that is his predetermined goal.
- Develop strategies to overcome each identified obstacle.



Bill Buckley



AOD Mental Health Educator and lived experience perspective

Working with clients struggling with AOD and/or mental health issues

- Encourage ownership and responsibility for their recovery and treatment outcomes.
- Explain the difference between abstinence vs harm minimisation (problematic vs disorder).
- Let the client choose which fits for them.
- Thorough assessment of other life domains e.g.: accommodation, relationships, employment, legal.
- Utilise a strength based, recovery focused approach
- Treat people as individuals and avoid labels e.g.:
 - Jack is struggling with/or in recovery from problematic alcohol/substance use.
 - Alice is struggling with schizophrenia, rather than Alice is schizophrenic.
- Do not use the term addict or alcoholic unless the client identifies themselves as one.



Bill Buckley



AOD Mental Health Educator and lived experience perspective

Working with clients struggling with AOD and/or mental health issues cont'd....

- Many clients will not have a formal diagnosis of substance use disorder.
- Generally, clients attempting to make significant changes to their historical use of substances will experience some depression and/or anxiety ongoing post detox.
- For a variety of reasons, it can take 3-5 years to achieve sustainable emotional stability in recovery.

Recovery is a lifelong journey.



Bill Buckley



General Practitioner's perspective

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Hester Wilson



General Practitioner's perspective

Harm reduction and abstinence

- What is harm reduction?
- NSP, treatment, reducing use, reducing risky use, access to overdose management, safe consumption rooms.
- Not everyone wants abstinence.
- Offer options and choice.
- Build self efficacy.



Hester Wilson



General Practitioner's perspective

AOD and mental health

- Chicken and egg.
- Chemical coping.
- Substance use relieving distress.
- Exacerbating illness.
- Is dependency/addiction a mental health issue?



Hester Wilson



General Practitioner's perspective

Stigma

Stigma causes harm, leads to rejection, exclusion and discrimination, decreases access, decreases engagement, leads to poorer outcomes, causes illness itself.

- Language Matters
 - slang and idioms – ‘clean’
 - person-first language – ‘addict’ person with alcohol use disorder
 - specific medical language – ‘drug seeking’ ‘doctor shopper’ ‘abuse’ ‘misuse’ chronic relapsing medical condition not a moral failing
 - recovery-promoting language – ‘resistant’ non ‘compliant’.
- Language matters
- How do we ensure we do not discriminate or stigmatise?



Hester Wilson

General Practitioner's perspective

Working with specialist services

- Be aware of what is available in your area.
- Health pathways.
- Online options.



Hester Wilson

Psychiatrist's perspective

Substance Use Disorder DSM5. Four categories of symptoms:

- Dependence (cravings, tolerance, withdrawal symptoms etc)
 - Risky use (taking more than you intend to, continuing even when you realise the harms etc)
 - Social problems (continuing to use despite impacts on relationships, work, recreation etc)
 - Impaired control (trying to stop but unable to).
- SUD can be a serious medical problem both acutely and chronically, and diagnosis may therefore be very important.



Mary Emeleus

Psychiatrist's perspective

Mike's symptoms through the DSM5-TR lens:

- He couldn't quit ten years ago despite trying, now he is drinking more including to cope with his day and to stop feeling shaky in the morning.
- Slow sperm count, escalating use, pancreatitis.
- Impacting his relationship, his work, there is no mention of anything that he does for fun.
- Always a heavy user (probably has a distorted perception of what "normal" drinking is, always drank in big sessions, has had years of being unable to stop it).



Mary Emeleus



Psychiatrist's perspective

Things I note in his story:

- Father's drinking: genetic risks, impacts of developmental trauma
- Multiple stressors (which also elevate MH risks): physical health, money, relationship breakdown, psychological (guilt and shame)
- Response of health professionals: shaming or empathic.



Mary Emeleus

Psychiatrist's perspective

My favourite tools for therapy with “Mikes” I meet:

- PERMA: Positive emotions, Engagement, Positive Relationships, Meaning, Accomplishment
- Healthy Mind Platter



Mary Emeleus

Rock and Siegel: *Healthy mind platter*. (2011).



Psychiatrist's perspective

Quitting is a marathon, not a sprint

- Harm reduction or abstinence?
- Medical assistance may be necessary, helpful or both for:
 - Prevention and early intervention opportunities
 - Initial detox
 - Relapse prevention strategies including medications.
- Addiction causes disconnection: having a supportive network and community seems from my chair to be the most important thing.



Mary Emeleus



Ask a question

To ask the speakers a question, click on the speech bubble icon in the lower right corner of your screen.

Q&A Session



Bill Buckley
AOD Mental Health
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Facilitator:
Prof. Stephen Trumble
General Practitioner

Thank you for your participation

- Please ensure you complete the exit survey before you log out; either click the "Pie Chart" icon in the lower right corner of your screen (beside the speech bubble) or wait for a message to pop up on your screen after this webinar ends.
- A Statement of Attendance for this webinar will be issued within four weeks.
- Each participant will be sent a link to the online resources associated with this webinar within two weeks.

MHPN Online programs

Podcasts:

- Episodes released fortnightly on MHPN Presents.
- NOW LIVE: *In Conversation With... Mary O'Hagan and Dr Ruth Vine – Part 4*. Listen on Spotify, Apple Podcasts, or MHPN's website.

Upcoming webinars:

Sign up through our portal on the MHPN website to be notified of upcoming webinars, podcasts and network activity.

- Navigating mental health challenges when living with physical disability, Monday 17th October
- Breaking the Silence: Improving inclusive practice for Aboriginal and Torres Strait Islander LGBTIQ+SB people (Black Rainbow Queeroboree Series), Thursday 3rd November 1pm
- It's never too late to diagnose ADHD, Monday 7th November
- Emerging Minds: Supporting social and emotional wellbeing of children with higher weight, Thursday 17th November
- PHN Series: Non-medical supports and programs for older Australians, Tuesday 6th December

MHPN networks

MHPN supports over 350 networks across the country where mental health practitioners meet either in person or online to discuss issues of local importance.

Visit www.mhpn.org.au to join your local network.

Interested in starting a new network? Email: networks@mhpn.org.au and we will step you through the process, including explaining how we can provide advice, administration and other support.



Thank you for your contribution and participation.

Good evening.