

Substance Use Treatment: Accessing Services for People with Co-Occurring Disorders

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Objectives

- Explain the substance use treatment model for treatment and recovery for people with co-occurring needs
- Discuss the co-occurring culture of substance use and mental health disorders including the process for screening, assessment and placement
- List and describe ADMH resources that are available to treat individuals with co-occurring needs in Alabama

Co-occurring Disorder

- Mental disorders involve changes in thinking, mood, and/or behavior. These disorders can affect how we relate to others and make choices. Reaching a level that can be formally diagnosed often depends on a reduction in a person's ability to function as a result of the disorder.

Co-occurring Disorder

- Mental health and substance use disorders affect people from all walks of life and all age groups. These illnesses are common, recurrent, and often serious, but they are treatable, and many people do recover.

Co-occurring Disorders - Definition

- The coexistence of both a mental illness and a substance use disorder is known as a co-occurring disorder.
- People with mental illness are more likely to experience a substance use disorder than those not affected by a mental illness.
- Serious mental illness is defined by someone over 18 having (within the past year) a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that substantially interferes with or limits one or more major life activities.
- According to SAMHSA's 2019 National Survey on Drug Use and Health, approximately 9.2 million adults in the United States have a co-occurring disorder.



Definitions

Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.

Common Co-occurring Disorders

No specific combinations of mental and substance use disorders are defined uniquely as co-occurring disorders. Some of the most common mental disorders seen in Substance Use Treatment include:

- Trauma Disorders – Poor Impulse Control
- Anxiety and mood disorders
- Schizophrenia
- Bipolar disorder
- Major depressive disorder
- Conduct disorders
- Post-traumatic stress disorder
- Attention deficit hyperactivity disorder

Examples of Trauma



Violence in the home, personal relationships, workplace, school, systems/institutions, or community.



Maltreatment or abuse: emotional, verbal, physical, sexual, or spiritual.



Exploitation: sexual, financial or psychological.



Change in living situation such as eviction or move to nursing home.



Neglect and deprivation.



War or armed conflict.



Natural or human caused disaster.

Commonly Used Substances

Patients being treated for mental disorders also often misuse the following types of substances:

- Alcohol
- Tobacco
- Opioids
- Stimulants
- Marijuana
- Hallucinogens
- Prescription drugs

Relevance of Co-occurring Disorders

- Substance use may be directly related to mental health issues (e.g., self-medicating)
- They exacerbate one another
- Intoxication/withdrawal symptoms can mimic mental disorders
- Substance use can trigger a mental episode (e.g., Substance Induced Psychosis or Mood Disorder)
- Poor identification results in incomplete/inadequate treatment
- Higher rates of relapse

Co-Occurring Considerations: What do we treat first?

- Initial Presentation OR Presenting Problem
- Orientation to time, place and situation
- Withdrawal Management
- Screening and Assessing for Co-Occurring Needs**
- Referrals and Linkages to SU Treatment Options

Substance Use Treatment Continuum – Alabama Priority Population Groups

1. Pregnant women with intravenous (IV) substance use disorders
2. Pregnant women with substance use disorders
3. All other individuals with IV substance use disorders
4. Women with substance use disorders and dependent children
5. Individuals who are HIV positive
6. All other individuals with substance use disorders

Substance Use Treatment Continuum – Screening and Assessment

- Age-Appropriate Screening Tool (UNCOPE or CRAAFT)
- ADMH Integrated Placement Assessment (*based on ASAM 6 dimension criteria*)

6 Dimensions:

1. Acute Intoxication/Withdrawal Potential
2. Biomedical Conditions and Complications
- 3. Emotional Behavioral Cognitive Conditions and Complications**
4. Readiness to Change
5. Relapse/Continued Use/Problem Potential
6. Recovery/Living Environment

Substance Use Treatment Continuum – Screening and Assessment

- Levels of Care (LOC) and *Service Intensity*
 - Level 0.5 – Early Intervention
 - Level 1.0 – Outpatient Treatment
 - Level 2.01 – Intensive Outpatient
 - Level 3.0 – Residential/Inpatient Treatment (Low, Medium and High)
 - *Level 4.0 – Medically Managed Intensive Inpatient Treatment*

Substance Use Treatment Continuum – Assessing for Co-Occurring Disorders

ADMH Integrated Placement Assessment Dimension 3: *Emotional Behavioral Cognitive Conditions and Complications*

Co-Occurring Capable – Capacity to Assess for MH Issues alongside SU issues

Co-Occurring Enhanced – Capacity to Provide Direct MH and SU treatment services

- Levels of Care (LOC) and *Service Intensity*
 - Level 0.5 – Early Intervention
 - Level 1.0 – Outpatient Treatment
 - Level 2.0 – Intensive Outpatient
 - Level 3.0 – Residential/Inpatient Treatment (Low, Medium and High)
 - Level 4.0 – Medically Managed Intensive Inpatient Treatment

Substance Use Treatment Continuum – Core Treatment Services

- Individual, Group and/or Family Therapy
- Psychoeducation
- Peer Support Services
- Mental Health Consultation
- HIV Early Intervention Services
- Medication Management
- Smoking Cessation
- Alcohol and Drug Testing
- Case Management (Case Planning, Linkages, Advocacy and Monitoring)
- Sign Language Services

Co-occurring Enhanced Residential Treatment

- The Co-Occurring Enhanced program must ensure timely access for clients to psychiatric and addiction pharma-cotherapy by utilizing a partnership model, codified through a formalized agreement, such as a memorandum of understanding (MOU), between partner organizations who are providing outpatient services.



Co-occurring Enhanced Residential Treatment

- Co-Occurring Enhanced programs provide clinical services delivered by an integrated team involving staff trained in substance use disorders, mental health, and psychiatry/medication management. The clients' mental health and addiction pharmacotherapy needs must be addressed along with clinical and psychosocial needs.



Co-occurring Enhanced Residential Treatment

- Clients must have access to psychiatrists and/or mid-level practitioners under the direction of a psychiatrist within 48 hours of admission to perform diagnostic and medication evaluations, provide refills if necessary, and to begin the process of medication reconciliation, adjustments.



Co-occurring Enhanced Residential Treatment

- better understanding of relationships between addiction and mental health,
- overcoming fears and insecurities,
- coping with stress,
- making sense of past trauma,
- identifying triggers,
- improving relationships with family and friends
- establishing a stable, dependable routine,
- developing interpersonal and other recovery skills, necessary for success in the community.



Co-occurring Capable and Enhanced Treatment – Collaborating with Community Linkages

- Medication-Assisted Treatment, including Opiate Treatment Programs and Office-Based Opioid Treatment Services
- Emergency Shelters, Temporary, Transitional or Permanent supportive housing programs
- Recovery based housing opportunities
- Licensed community mental health centers
- Substance use disorder treatment programs
- Recovery support centers
- Specialized housing programs for people with disabilities
- Adult and juvenile justice systems
- Child and Adult Welfare Agencies
- Primary Medical & Health Care Providers
- Miscellaneous Social Service Providers



Alabama Department
of Mental Health

Call for Services

ADVOCACY

1-800-367-0955

MENTAL ILLNESS

1-800-367-0955

AUTISM

1-800-499-1816

PEER SUPPORT

1-800-832-0952

DEVELOPMENTAL DISABILITY

1-800-361-4491

SUBSTANCE USE

1-844-307-1760



Substance Use Treatment Model for Getting Help

24/7 Helpline
844-307-1760

Alabama Crisis System of Care

Crisis Centers are now open in:
Birmingham, Huntsville, Mobile,
Montgomery, and Tuscaloosa

Alabama's Crisis System of Care

- 988
- Mobile Crisis Teams
- Crisis Centers

**“SOMEONE TO
CALL.

SOMEONE TO
COME TO YOU.

AND, IF NEEDED,
SOME PLACE TO
GO.”**

Dr. Anita Everett, SAMHSA

NEED SUPPORT ? LET'S TALK.

988
SUICIDE
& CRISIS
LIFELINE



Alabama Department
of Mental Health
connecting mind and wellness



Crisis Centers are open 24/7, 365 a year, and utilize the "No Wrong Door" approach, offering evaluation, admission, or referral to anyone with a mental health, substance use or suicidal crisis.

The centers are designated places for families, communities, law enforcement, first responders, and hospitals to assist an individual who is in mental health or substance use crisis. At the center, the individual could receive stabilization, evaluation, psychiatric, substance use treatment services and/or referral.

Governor Kay Ivey has prioritized establishing a mental health crisis continuum of care, with support from the Alabama Legislature. This continuum of care, called the Alabama Crisis System of Care, includes Crisis Centers.



AltaPointe Behavioral Health Crisis Center

251-450-2211

2401 Gordon Smith Drive, Mobile 36617

Baldwin, Clark, Conecuh, Escambia, Monroe, & Washington counties

Carastar Crisis Center

800-408-4197

5915 Carmichael Road, Montgomery 36116

Autauga, Bullock, Chambers, Elmore, Lee, Lowndes, Macon,
Montgomery, Pike, Russell, & Tallapoosa counties

Hope Pointe Behavioral Health Crisis Care

205-391-4000

1401 Greensboro Avenue, Tuscaloosa 35401

Bibb, Choctaw, Dallas, Greene, Hale, Marengo, Perry, Pickens, Sumter,
Wilcox, & Tuscaloosa counties

JBS Craig Crisis Care Center

205-263-1701

401 Beacon Parkway W, Birmingham 35209

Blount, Calhoun, Chilton, Clay, Cleburne, Coosa, Jefferson, Randolph,
St. Clair, Shelby, & Talladega counties

SpectraCare Health Systems

334-778-7188

2740 Headland Avenue, Dothan 36303

Barbour, Dale, Geneva, Henry, & Houston counties

WellStone Emergency Services

256-705-6444

4020 Memorial Parkway SW, Huntsville 35802

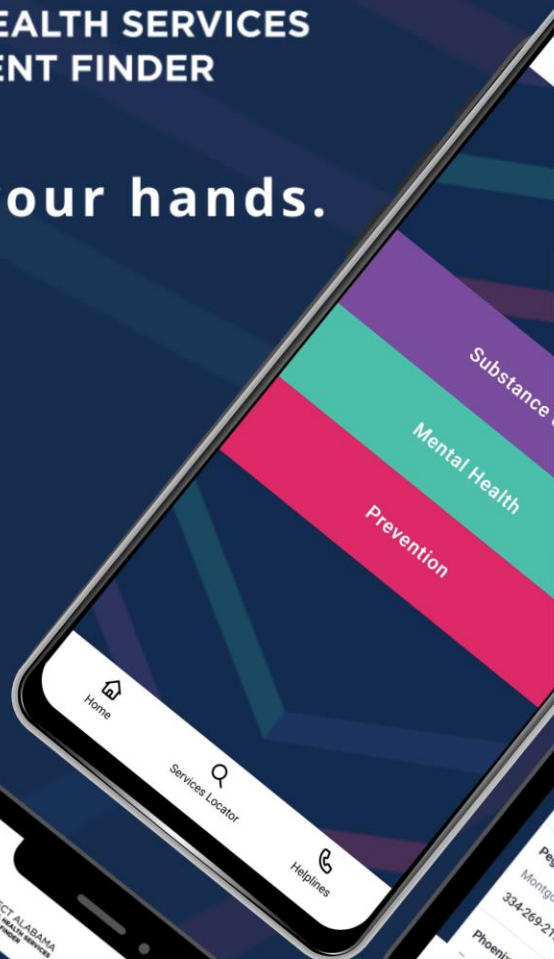
Cherokee, Cullman, Dekalb, Etowah, Fayette, Jackson, Lamar,
Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, &
Winston counties



CONNECT ALABAMA BEHAVIORAL HEALTH SERVICES & TREATMENT FINDER

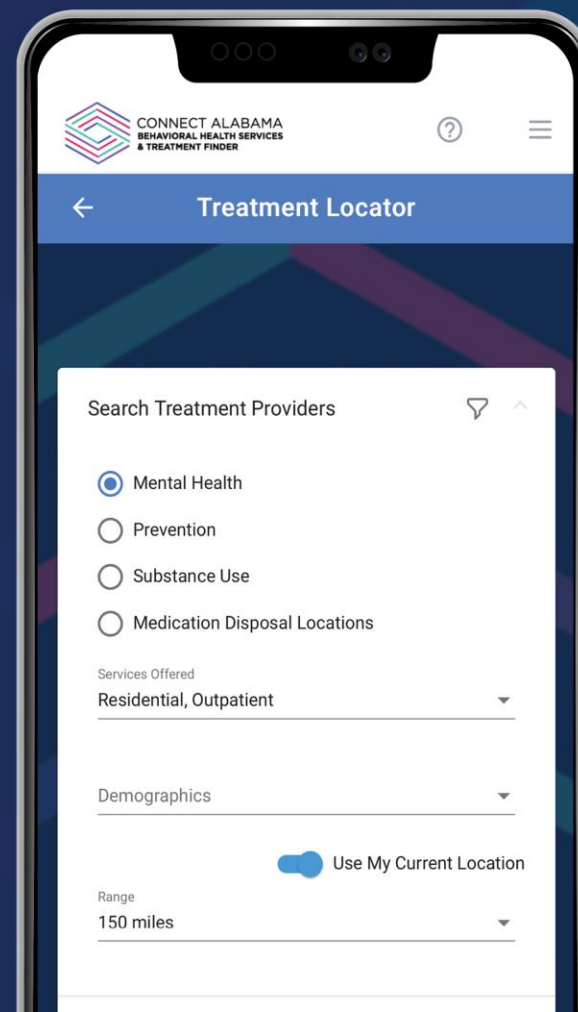
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Connect Alabama
app today!



THE ONLY TREATMENT APP

You'll ever need



KEY FEATURES



Substance Use



Mental Health



Prevention



Treatment Locator

"SEE ME—
BEYOND
THE LABEL."



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<http://almentalhealthmatters.org/>



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References

- www.samhsa.gov-Tip 42
- www.asam.org
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