



According to the SAMHSA's 2014 National Survey on Drug use and Health (NSDUH) data, an estimated 43.6 million Americans ages 18 and up had experienced some form Mental Health Disorders (MHDs) and 35.6 million had no MHDs. The same survey found 20.2 million of adults had experienced Substance Use Disorders (SUDs) and 12.3 million had no SUDs. Among those, 7.9 million people had both MHDs and SUDs or co-occurring disorders (CODs).

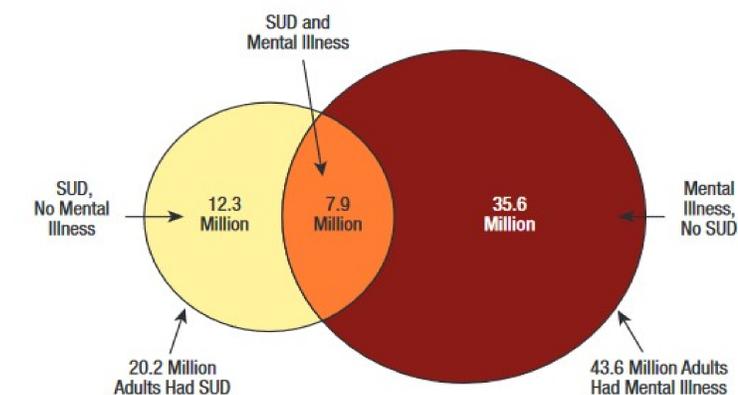
The effects of SUDs and MHDs are cumulative, significantly contributing to costly social, physical, mental, and public health problems. Among the problems that individuals with co-occurring disorders are at increased risk for are: teenage pregnancy, HIV/AIDS, STDs, domestic violence, child abuse, crime, motor vehicle accidents, and suicide.

Management and Treatment of Substance Use Disorders

Co-occurring disorders have complex needs and often struggle more in their process of recovery than individuals who have either MHD or SUD alone.

It is difficult to manage recovery from MHDs like depression, depression, bipolar disorder, or schizophrenia, and it is even more difficult to manage if it is paired with recovery from alcohol, cocaine, or heroin dependence.

Figure 1: Past Year Substance Use Disorders and Mental Illness among Adults Aged 18 or Older in the US: NSDUH, 2014



SUD = substance use disorder.

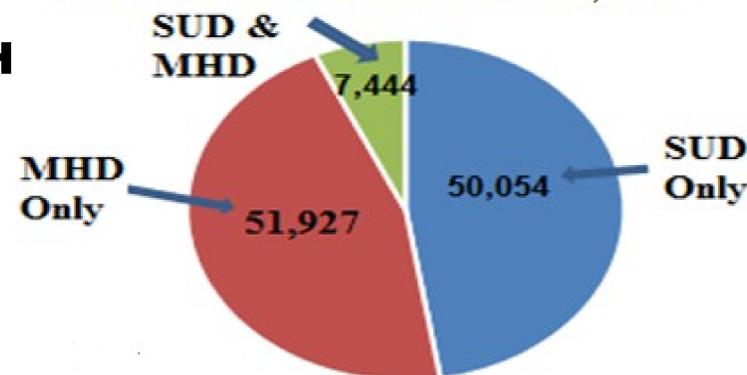
Table 1: NSDUH Past Year Substance Use Disorder among Adults Aged 18 or Older with Any Mental Illness in the Past Year, by Age Group: Percentages, 2008-2014

| | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|-------------|-------|-------|-------|-------|-------|------|------|
| 18 or Older | 18.4 | 19.0 | 19.0 | 16.5* | 19.2 | 17.5 | 18.2 |
| 18 to 25 | 36.9* | 35.1* | 35.5* | 32.4* | 34.5* | 31.1 | 29.3 |
| 26 to 49 | 20.5 | 20.8 | 21.7 | 18.2* | 22.6 | 21.0 | 20.8 |
| 50 or Older | 6.3* | 9.1 | 8.2 | 7.4* | 8.6 | 7.2* | 10.3 |

* Difference between this estimate and the 2014 estimate is statistically significant at the .05 level.

Adults aged 18 or older in 2014 consistently had the highest rate of CODs (29.3 percent), but slightly decreased from 2008 (36.9 percent). Among those 18 or older with any mental illness in 2014 has been increased since 2008 from 6.3 percent to 10.3 percent.

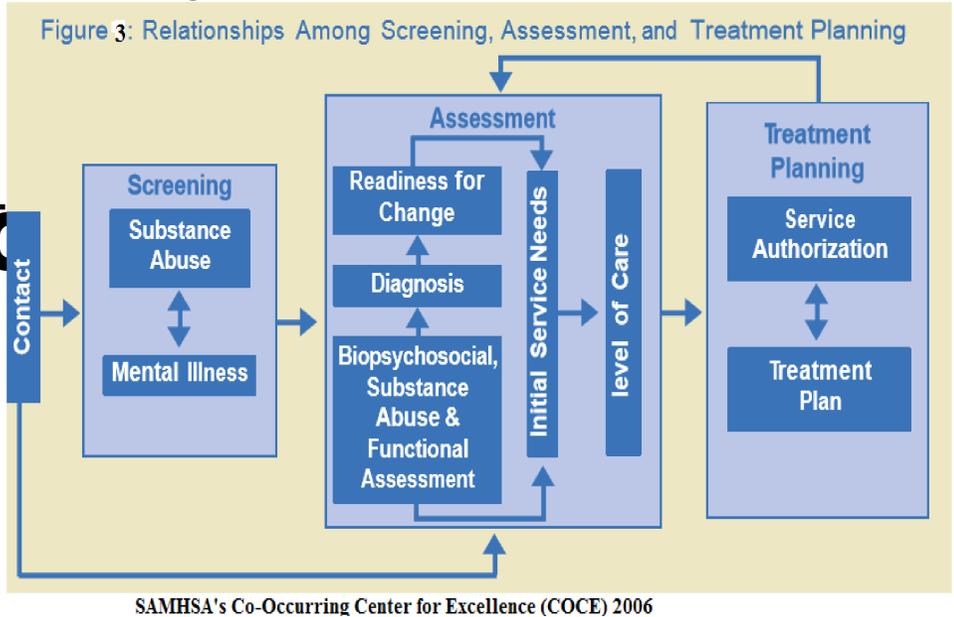
Figure 2: Adult Aged 18 & Older Admitted to Treatment for SUD & MHD: DMHAS, 2014



According to data from the Connecticut Department of Mental Health and Addiction Services (DMHAS), in 2014 there were a total of 109,425 individuals aged 18 or older admitted to mental health and substance abuse treatment services in the state. As shown in the figure below, there were 51,927 with mental health treatment only, 50,054 with substance abuse treatment only and 7,444 admitted for both mental health and substance abuse treatment.

In order to provide effective services to persons with CODs, an enhanced system of care is needed. Three key components include: 1) statewide implementation of standardized screening and integrated assessments; 2) service coordination, network building, and integrated models of treatment; and 3) data-based decision making and data-informed program development for this population.

Screening Data and the Assessment and Treatment



SAMHSA's Co-Occurring Center for Excellence (COCE) 2006

Regardless of the challenges associated with CODs, individuals can benefit from integrated treatment services that address proper screening, assess individuals' readiness for change, offer correct diagnoses, and provide initial services that include level of care and effective treatment approaches.

Successfully implementing these elements would help individuals build their life satisfaction so that they can live independently.

There is still more research needs to be performed on how to expand treatment options for individuals with CODs in order to bridge the service gap and continue to improve care for these individuals.