## Integrated Dual Diagnosis Treatment

### Stagewise Treatment

#### Interventions and Activities

<table>
<thead>
<tr>
<th>Dartmouth Dual Diagnosis Treatment Scale</th>
<th>Evidenced Based Interventions</th>
<th>Stage-Wise Activities for Case Managers</th>
<th>Activities to Avoid base on Stages of Treatment</th>
</tr>
</thead>
</table>
| **1. Pre-engagement** The person does not have contact with case manager and meets criteria for substance abuse or dependence. | - Assertive outreach  
- Practical assistance  
- Crisis interventions  
- Build alliance  
- Assessment  
- Develop regular contact and a helpful relationship with client  
- Meet client where they are  
- Understand client’s world and goal  
- Acceptance and empathy  
- Active and reflective listening  
- Offer honest hope  
- Create openings to discuss substance abuse and mental illness  
- Ask permission to discuss substance abuse or mental health issues, respect any “no” or “don’t want to talk about it” responses  
- Create recognition that things could be different | - Regular meetings with consumer in the community (at least weekly)  
- Help consumer apply for benefits, obtain or improve housing, food, address legal needs  
- Facilitate admission to hospital and/detox if needed  
- Explore family relationships, engage them in treatment process if consumer desires  
- Review chart to understand history | - Require abstinence  
- Start active-stage treatment  
- Confront substance use or symptoms of mental illness  
- Ignore substance use and/or mental illness  
- Punishing substance use or mental illness symptoms  
- Don’t start group work at this point |
| **2. Engagement** The client has only irregular contact with assigned case manager, and meets criteria for substance abuse or dependence. | **GOAL:** To establish a trusting working alliance with a mental health professional | **TOOLS:**  
- Complete Strengths Assessment  
- If client allows begin Longitudinal Assessment | |

* indicates tool in “Integrated Treatment for Dual Disorders” by Kim T. Mueser, Douglas L. Noordsy, Robert Drake & Lindy Fox
### Dartmouth Dual Diagnosis Treatment Scale

<table>
<thead>
<tr>
<th>Evidenced Based Interventions</th>
<th>Stage-Wise Activities for Case Managers</th>
<th>Activities to Avoid base on Stages of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Early Persuasion The client has regular contact with case manager, continues to use the same amount of substances or has reduced substance use for less than 2 weeks, and meets criteria for substance abuse or dependence.</td>
<td><strong>TASKS:</strong>&lt;br&gt;✓ Ask permission to discuss substance use and illness symptoms&lt;br&gt;✓ Education about illness and substances&lt;br&gt;✓ Set goals&lt;br&gt;✓ Build awareness of problems&lt;br&gt;✓ Assist in envisioning life without substances&lt;br&gt;✓ Develop motivation to change using motivational interviewing techniques&lt;br&gt;✓ Family support&lt;br&gt;✓ Peer support&lt;br&gt;✓ Interventions can be individual and/or and group&lt;br&gt;✓ Help establish meaningful activities (work, school, etc) in client’s life&lt;br&gt;✓ Work collaboratively with client in reducing use and setting reduction goals</td>
<td><strong>DO NOT:</strong>&lt;br&gt;✓ Require abstinence&lt;br&gt;✓ Offer too much treatment too early (jumping to the action phase at the first mention of changing use)&lt;br&gt;✓ Ignore substance use and/or mental illness&lt;br&gt;✓ Require inpatient substance abuse treatment</td>
</tr>
<tr>
<td>4. Persuasion The client has regular contact with case manager, shows some evidence of reduction in use for the past 2-4 weeks (fewer substances, smaller quantities, or both), but still meets criteria for substance abuse or dependence.</td>
<td><strong>TOOLS:</strong>&lt;br&gt;✓ Complete Longitudinal Assessment&lt;br&gt;✓ Time-line follow back calendar to assess past 7 mos use&lt;br&gt;✓ Develop a list of supportive friends and family and practice reaching out to them&lt;br&gt;✓ Complete/Update a Functional Assessment&lt;br&gt;✓ Complete a Payoff Matrix*&lt;br&gt;✓ Complete Pleasant Activities Worksheet</td>
<td>* indicates tool in “Integrated Treatment for Dual Disorders” by Kim Mueser, Douglas L. Noordsy, Robert Drake &amp; Lindy Fox</td>
</tr>
<tr>
<td>Dartmouth Dual Diagnosis Treatment Scale</td>
<td>Evidenced Based Interventions</td>
<td>Stage-Wise Activities for Case Managers</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>-------------------------------</td>
<td>----------------------------------------</td>
</tr>
</tbody>
</table>
| **5. Early Active Treatment** The client is engaged in treatment and has reduced substance use for more than the past month, but still meets criteria for substance abuse or dependence. | ➢ Integrated dual diagnosis interventions and counseling (individual and/or group)  
➢ Medication treatment  
➢ Skills training  
➢ Community reinforcement: seek out work, school, church, clubs, volunteer opportunities  
➢ Self-help groups  
➢ Cognitive-behavioral therapy  
➢ Begin relapse prevention work  
➢ Offer a menu of treatment options  
➢ Normalize relapse | **TASKS:**  
➢ Join client for new “sober” activities  
➢ Refer for Med eval. to see if meds can help with reduced or no usage, cravings  
➢ Explore employment or education options  
➢ Help family and friends support abstinence  
➢ Help client share plans to stop using  
➢ Learn/practice relaxation techniques  
➢ Teach anger management skills  
➢ Develop list of triggers for substance use and mental illness relapse  
➢ Based on functional analysis, make a plan for each trigger  
➢ Develop/practice a plan for coping with cravings, high-risk situations, boredom, celebrations, etc…  
➢ Practice drink refusal skills | **DO NOT:**  
➢ Punish or ignore a slip or relapse  
➢ Express disappointment or judgment of a relapse or slip  
➢ Premature discharge  
➢ Overload consumer with goals/activities |

**GOAL:** To help the client decrease or stop substance use and increase management of mental illness symptoms so that they are longer problems.

| **6. Late Active Treatment** The client is engaged in treatment and has not met criteria for substance abuse or dependence for the past 1-5 months. |  |  |  |

* indicates tool in “Integrated Treatment for Dual Disorders” by Kim T. Mueser, Douglas L. Noordsy, Robert Drake & Lindy Fox
<table>
<thead>
<tr>
<th>Dartmouth Dual Diagnosis Treatment Scale</th>
<th>Evidenced Based Interventions</th>
<th>Stage-Wise Activities for Case Managers</th>
<th>Activities to Avoid base on Stages of Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7. Relapse Prevention</strong> The client is engaged in treatment and has not met criteria for substance abuse or dependence for the past 6-12 months.</td>
<td>➢ Relapse prevention planning for both diagnoses ➢ Skills training ➢ Self help groups ➢ Expand recovery to other areas of life ➢ Interventions can be both individual and group with an emphasis on graduated disengagement ➢ Be ready to intensive services as needed ➢ Emphasize Recovery as journey ➢ Respond to slips or relapses proactively by revising relapse prevention plan, completing contextual analysis*, etc</td>
<td>➢ Expand/reinforce sober lifestyle ➢ Revise or update relapse prevention plan ➢ Expand development of recovery in other areas of life (i.e. nutrition, exercise, work, relationships, living space, spirituality, living environment) ➢ Self-help groups-find a sponsor ➢ Normalize relapse</td>
<td>➢ View relapse as a treatment or professional failure ➢ Shame the individual for having a slip or relapse</td>
</tr>
<tr>
<td><strong>8. Remission or Recovery</strong> The client has not met criteria for substance abuse or dependence for more than the past year.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**GOAL:** To help the client expand recovery from both illnesses to other areas of life.

* indicates tool in “Integrated Treatment for Dual Disorders” by Kim T. Mueser, Douglas L. Noordsy, Robert Drake & Lindy Fox