

**Title:**

Dual Diagnosis of Chemical Dependency and Schizophrenia Among Homeless Adults: An Integrative Approach to Care

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**Session Title:**

Rising Stars of Research and Scholarship Invited Student Posters

**Keywords:**

dual diagnosis, homelessness and schizophrenia

**References:**

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**Abstract Summary:**

Dual diagnosis of chemical dependency and schizophrenia is quite common, and is especially prevalent among homeless adults. Standard treatments for these disorders are typically ineffective, but integrative programs of motivational interviewing, cognitive behavioral therapy, assertive community treatment, and housing support have demonstrated clinical efficacy and improved patient outcomes.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to identify effective treatments for homeless adults dually diagnosed with chemical dependency and schizophrenia.	• I will describe the co-occurring diseases of chemical dependency and schizophrenia, and why standard treatment is ineffective. • I will identify treatments that have been deemed effective based on clinical evidence.

	â€¢ I will describe the aforementioned treatments in detail.
The learner will be able to describe ways of implementing the evidence-based interventions of motivational interviewing, cognitive behavioral therapy, assertive community treatment, and housing support.	â€¢ I will describe implications for evidence-based practice. â€¢ I will explain each treatment in detail, and describe how they can be integrated to tailor the needs of this patient population. â€¢ I will describe the nurse's role in caring for patients receiving these treatments.

**Abstract Text:**

This presentation will outline evidence-based interventions and treatments for homeless adults who are dually diagnosed with chemical dependency and schizophrenia. Patients with schizophrenia often also have pervasive drug and alcohol addictions. Concurrent presentation of positive and negative symptoms of psychosis make it more difficult for schizophrenic patients to reduce their substance use and achieve abstinence. These dually diagnosed patients often also suffer from homelessness as a result of poor coping mechanisms, a lack of resources, and difficulty maintaining jobs. These homeless adults with severe psychiatric disorders and substance use disorders are underserved by public treatment programs, and their physical and mental health greatly suffers as a result. Studies have shown that almost half of homeless men and women with schizophrenia also have pervasive drug and alcohol problems. This patient population faces many disparities in healthcare and is at great risk for harm. These patients are unlikely to seek treatment, and the treatment programs typically available to this population are ineffective and poorly integrated to accommodate both diagnoses. Thus, patients are left untreated or undertreated. Homeless patients have an immediate need for food, shelter, and security, and according to Maslow's hierarchy of needs, these physiological needs take priority over the need for treatment of their mental health and substance use disorders. When these patients do seek treatment, they do not get the correct or necessary treatment. Substance abuse and mental health treatment programs are often unavailable in homeless shelters, and when available, they are not motivation-oriented, thus are ineffective for this population.

Clinical efficacy has been shown in integrative programs of motivational interviewing, cognitive behavioral therapy, housing support, and assertive community treatment. In motivational interviewing, patients take responsibility for their problems, and efforts to change do not start until patients are committed to their own goals. Cognitive behavioral therapy helps patients change the views they have towards substance use, and learn to cope with cravings in a healthy way. Assertive community treatment is an outreach-oriented, integrative approach that includes multidisciplinary teams to provide comprehensive services for patients. Housing support and the provision of residential facilities have also shown positive outcomes. These integrative treatments and their clinical efficacy in treating chemical dependency and schizophrenia among homeless adults will be discussed in further detail. Implications for evidence-based practice in caring for this vulnerable patient population from a nursing perspective include maintaining a therapeutic alliance, assisting patients in obtaining government entitlements and support to meet physiologic needs, and tailoring interventions based on patients' motivation to change. Assessing motivation and using motivational conversational techniques has been proven effective in caring for this patient population. By utilizing these evidence-based interventions and promoting the use of these integrative treatments, nurses can advocate for the wellbeing and safety of a high-risk patient population.