

Mental Health & Substance Use

UNDERSTANDING CO-OCCURRING DISORDERS

Co-occurring disorders — also called dual diagnosis or comorbidity — means having both a mental health condition *and* a substance use disorder at the same time. This guide breaks down what that means, why it matters, and what real help looks like.

What Are Co-Occurring Disorders?

The clinical definition: the presence of two or more diagnosable conditions at the same time — typically a mental health disorder and a substance use disorder.

This is also known as:

Dual Diagnosis

Co-Occurring Disorders

Comorbidity

Common Examples

Depression + alcohol use

Anxiety + marijuana use

PTSD + opioid use

Why This Matters — The Big Picture

1 in 2

About 1 in 2 people with a substance use disorder will also experience a mental health condition at some point in their lives.

2x

More Common Than You Think

Co-occurring disorders are far more common than most people realize — this is not a rare or unusual situation.

If you're struggling with both, **you are not the exception — you are the norm.** Understanding this is the first step toward getting the right kind of help.



Visit us online for more free resources or to learn how we can help.

RECOVERY Health Solutions is a **co-occurring Intensive Outpatient Program (IOP)** in the **Twin Cities** (Brooklyn Park, MN), supporting **Substance Use Disorder** and **Mental Health** together. We offer *8 integrated services* with a harm reduction approach.

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Why Mental Health Matters in Recovery

Recovery is not just about stopping substance use. It is about understanding **why someone uses**, learning how to **handle emotions, stress, and life without substances**, and building a life that actually feels **manageable and worth staying sober for**.

Understand the Why

Explore the root reasons behind substance use

Build New Skills

Learn to handle emotions, stress, and life differently

Create a Life Worth Living

Build stability and meaning that supports lasting sobriety

Mental health is the foundation of all of that.

Recognizing When You Need More Support

Signs Mental Health Needs More Attention in Recovery

Sometimes the signs are subtle. Other times they are hard to ignore. Either way, recognizing them early is a critical step toward getting the right support.

Frequent Mood Swings – Emotional highs and lows that feel unpredictable or hard to control


Ongoing Anxiety or Panic – Persistent worry, racing thoughts, or sudden panic attacks

Feeling Numb or Disconnected – Emotional flatness, dissociation, or feeling detached from life

Trouble Sleeping – Insomnia, nightmares, or disrupted sleep patterns

Low Motivation or Hopelessness – Difficulty finding reasons to keep going or believing things can improve

Using Thoughts Increase – Cravings spike during emotional moments or stressful situations

 Strong emotional reactions to stress – especially ones that feel disproportionate – are often a signal that deeper support is needed.



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The Connection & The Cycle

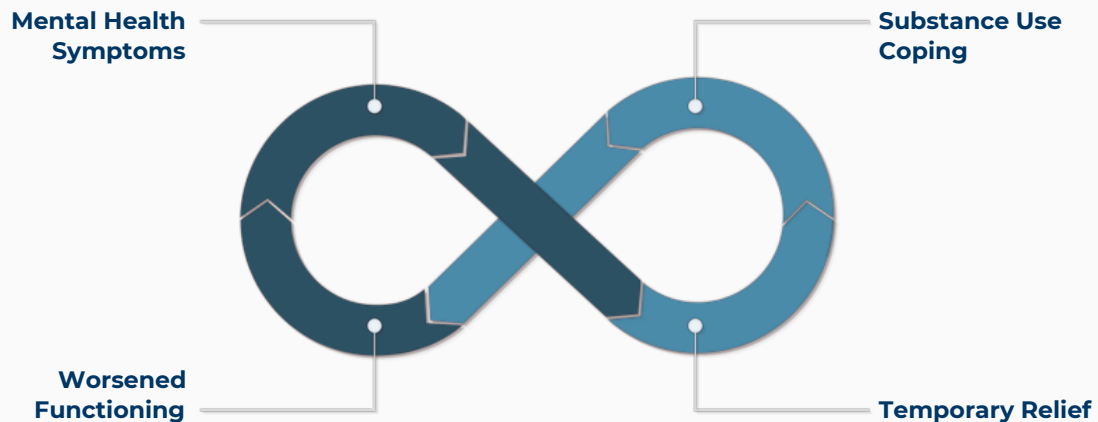
How Mental Health & Substance Use Are Connected

These conditions feed into each other through multiple pathways.

<p>Mental Health → Substance Use</p> <p>I feel anxious, so I drink to calm down.</p> <p>Mental health symptoms drive self-medication.</p>	<p>Substance Use → Mental Health</p> <p>Alcohol worsens depression. Stimulants increase anxiety. Withdrawal causes mood swings.</p> <p>Substance use alters brain chemistry.</p>	<p>Shared Root Causes</p> <ul style="list-style-type: none"> • Trauma • Chronic stress • Genetics • Brain chemistry <p>Both conditions share the same underlying drivers.</p>
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The Cycle — Why It's So Hard to Break

A very common pattern emerges. Understanding this cycle is key to understanding why willpower alone is rarely enough.



⚠ This loop reinforces both conditions simultaneously — each turn of the cycle makes both the mental health symptoms and the substance use harder to address on their own.



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Why Treating Only One Doesn't Work — And What Does What People Are Often Told

"Get sober first, *then* deal with mental health."

"Fix your mental health, *then* the substance use will go away."

⊗ These approaches often fail.

Why Single-Focus Treatment Falls Short

- Each condition triggers the other
- Symptoms overlap and are hard to separate
- One untreated issue can cause relapse in the other

⊕ **Research shows:** Treating both conditions at the same time leads to significantly better outcomes.

INTEGRATED CARE

What Effective Treatment Looks Like

Integrated care means treating both the mental health condition and the substance use disorder at the same time, within a coordinated approach.



Therapy

Addressing thoughts, trauma, and building healthy coping strategies for long-term resilience.



Substance Use Treatment

Intensive Outpatient Programs (IOP), individual counseling, and structured recovery support.



Medication Support

When appropriate, medication can stabilize symptoms and support the recovery process.



Peer Support

Recovery coaching and peer support from people with lived experience in recovery.



Case Management

Life support and coordination to address practical barriers to recovery and stability.

ⓘ Ideally, this happens within one coordinated program or team — not scattered across multiple disconnected providers who don't communicate with each other.



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Where RECOVERY Health Solutions Fits In What This Looks Like in Real Life

Integrated care changes the experience of treatment in a fundamental way.

WITHOUT Integrated Care

Therapist doesn't address substance use — treats only the mental health side

Treatment program ignores mental health — focuses only on sobriety

Providers don't communicate — you fall through the gaps

With Integrated Care

One team understands your **full picture** — both conditions together

Treatment actually makes sense for **your life** and your specific situation

Care is coordinated, consistent, and built around **real outcomes**

Where RECOVERY Health Solutions Fits In

BROOKLYN PARK, MN — TWIN CITIES

At **RECOVERY Health Solutions**, we specialize in co-occurring care — mental health and substance use treated together, the way it should be. Our programs are built around an integrated, real-world approach.

Our Focus

- Meeting clients where they are
- Harm reduction — not one-size-fits-all
- Practical coping + life stabilization
- Connecting clients to additional services when needed

Services That Support Co-Occurring Care

- Intensive Outpatient Program (IOP)
- 1:1 counseling with LADCs
- Mental health therapy
- Medication management support
- ARMHS services
- Recovery coaching
- Treatment coordination



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Signs & Common Misunderstandings

Signs Someone May Have Co-Occurring Disorders

Recognizing the signs is an important first step. These indicators often appear together and reinforce one another.



Using to Cope

Using substances specifically to manage or escape difficult emotions, stress, or mental pain.



Extreme Mood Swings

Mood changes that feel unpredictable, intense, or out of proportion to circumstances.



Symptoms Alongside Use

Anxiety, depression, or trauma symptoms that appear alongside or are worsened by substance use.



Stuck in a Cycle

Difficulty staying sober despite genuine effort, or feeling trapped in a repeating pattern.



Worsening Symptoms

Mental health symptoms that get significantly worse when using substances or when stopping.

Common Misunderstandings

Stigma and misinformation often prevent people from getting the right kind of help. Here's the truth behind three of the most common myths.

1

Myth #1: "They just need to stop using."

Reality: There is often an underlying mental health driver. Stopping use without addressing that driver rarely leads to lasting recovery.

2

Myth #2: "They're just mentally ill."

Reality: Substance use may be actively making mental health symptoms significantly worse – it's not just one or the other.

3

Myth #3: "It's one or the other."

Reality: It is very often both at the same time. Treating them as separate, unrelated issues is a fundamental misunderstanding of how they work.



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When to Seek Help & Key Takeaways

When to Seek Help

You or a loved one should consider reaching out for support if any of the following are true:

- Mental health symptoms **and** substance use are both present at the same time
- One issue seems to **trigger or worsen** the other in a recognizable pattern
- Attempts to **"just stop"** haven't worked despite genuine effort and motivation
- Daily life is being affected – **work, relationships, or basic stability** are suffering

Immediate Support (National)

Call or Text 988

Suicide & Crisis Lifeline – available 24/7 for anyone in emotional distress or crisis.

Call 911

If there is immediate danger to yourself or someone else, call emergency services right away.

FindTreatment.gov

Use this national resource to locate substance use and mental health treatment services near you.

THE SIMPLE VERSION

Key Takeaways

Co-occurring disorders = mental health + substance use together

Having both at the same time is the definition – and it's far more common than most people realize.

They are very common

About 1 in 2 people with a substance use disorder will also experience a mental health condition. You are not alone.

Each condition makes the other worse

They feed into each other in a reinforcing cycle that is very difficult to break without addressing both.

Treating both at the same time = best outcomes

Research consistently shows that integrated, simultaneous treatment leads to significantly better long-term results.

Integrated, real-world care is essential

At RECOVERY Health Solutions, we provide exactly that – coordinated care that treats the whole person, not just one piece of the puzzle.

- Recovery is possible. With the right integrated support, people with co-occurring disorders can and do build stable, fulfilling lives. Help is available – reach out today.



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Common Mental Health Conditions

Condition	What It Feels Like	Makes These Things Difficult
Anxiety	Constant worry, racing thoughts, on edge or overwhelmed	Sleeping, focusing, being around people, relaxing
Depression	Low, numb, or empty; no motivation; hopeless or stuck	Getting out of bed, taking care of yourself, working, feeling joy
PTSD / Trauma	On high alert, easily triggered, reliving past experiences, avoiding certain places or people	Feeling safe, trusting others, sleeping, being present
Panic Attacks	Sudden intense fear, racing heart, trouble breathing, feeling like something is very wrong	Leaving the house, driving, being in public
Social Anxiety	Fear of being judged, overthinking interactions, avoiding people or conversations	Going to work or school, making calls, meeting new people
Bipolar Disorder (Mood Swings)	Extreme highs (lots of energy, impulsive) and extreme lows (depressed, withdrawn)	Keeping routines, managing decisions, maintaining relationships
ADHD (Attention & Focus Difficulties)	Easily distracted, racing thoughts, trouble finishing tasks, restless or overwhelmed	Staying organized, completing responsibilities, managing time
Obsessive Thoughts / OCD	Repeating thoughts that won't stop; feeling like you have to do certain things to feel okay	Relaxing, letting things go, feeling in control
Borderline Personality Traits (Emotional Intensity)	Emotions that feel very intense, fear of abandonment, quick changes in mood	Relationships, handling conflict, feeling stable
Anger / Emotional Regulation Difficulties	Quick to anger, overwhelmed by emotions, hard to calm down once upset	Communication, relationships, decision-making
Grief & Loss	Deep sadness, confusion, anger or guilt after losing someone or something	Moving forward, feeling "normal" again, staying connected

You don't need a label to deserve support. Your experience is valid exactly as it is.



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Common Mental Health Conditions (continued)

Condition	What It Feels Like	Makes These Things Difficult
Chronic Stress / Burnout	Constant pressure, mentally exhausted, overwhelmed by responsibilities	Thinking clearly, taking breaks, managing daily life
Sleep Disorders	Trouble falling asleep, waking up often, never feeling rested	Mood, focus, energy
Eating Disorders / Body Image Struggles	Fixated on food or body, guilt or shame around eating, need for control	Eating normally, feeling comfortable in your body, social situations
Self-Esteem / Identity Struggles	Not good enough, lost or unsure of who you are, constant self-criticism	Confidence, decision-making, relationships
Isolation / Loneliness	Disconnected, alone even around others, like no one understands	Reaching out, building relationships, staying motivated
Paranoia / Distrust	Suspicious of others, unsafe or unsure who to trust	Relationships, asking for help, feeling secure
Hallucinations or Altered Reality	Seeing or hearing things others don't, feeling disconnected from reality	Daily functioning, communication, feeling grounded
Personality Patterns (Long-Term Behavior Patterns)	Stuck in patterns that don't seem to change; reacting in ways that cause problems in life	Relationships, work, stability
Substance-Induced Mental Health Symptoms	Anxiety, depression, or paranoia that worsens with use or withdrawal	Understanding what's really going on, feeling stable
"I Don't Know What's Wrong, I Just Feel Off"	Something isn't right, hard to explain, not fitting into any one category	Asking for help, knowing where to start

Important Reminders

No Label Needed

You do not need a label to deserve support. Your experience is valid exactly as it is.

You're Not Alone

Many people experience a mix of these conditions at the same time. That's more common than you think.

It's Treatable

These struggles are treatable and manageable. Recovery is real and possible for everyone.

Coping Is Human

Using substances to cope is common, but there are other ways to get relief – and help is available.



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Where to Start (Simple Next Step)

If any of this feels familiar, you don't need to have it all figured out. Here's how to begin:

Talk to Someone

Reach out to a therapist, program, doctor, or support line. You don't need the perfect words — just start the conversation.

Look Into Structured Support

Consider outpatient programs or mental health clinics that offer multiple services in one place.

Ask for Help

Even if you're unsure what you need, asking is enough. The right support will help you figure out the rest.

Twin Cities + National Support (Quick Access)

Immediate Support

- Call or text 988 – 24/7 mental health crisis support
- Call 911 for immediate danger

Find Treatment

- findtreatment.gov – SAMHSA treatment locator
- 1-800-950-6264 – NAMI helpline

Minnesota / Twin Cities

NAMI Minnesota

Classes, support groups, and navigation help for individuals and families.

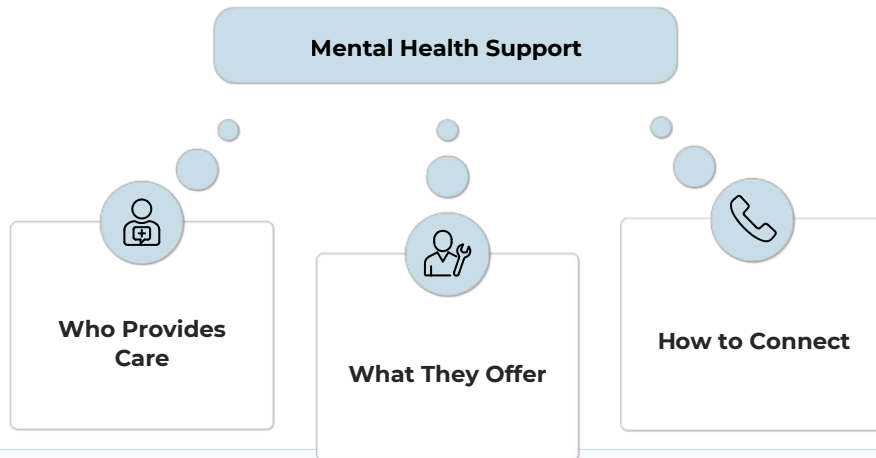
Hennepin County Mental Health Center

Assessment and services for residents in the Twin Cities area.

Understanding Mental Health Providers & Services

Navigating the mental health system can feel overwhelming. This following pages in this guide breaks down who does what—so you can find the right support with confidence.

You don't need to know exactly what you need before reaching out. Understanding your options is the first step.



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Mental Health Providers at a Glance

Provider	Credentials	What They Help With	Can Prescribe Meds?
Psychiatrist	MD or DO	Diagnosing mental health conditions; prescribing & adjusting medications; mental health evaluations; sometimes brief therapy	✓ Yes – full authority
Psychiatric Nurse Practitioner	PMHNP · APRN	Mental health diagnosis; medication prescribing & adjustments; evaluations; sometimes supportive therapy	✓ Yes – full authority
Primary Care Doctor	MD or DO	General health & basic mental health needs; initial symptom conversations; referrals to specialists	✓ Yes – typically basic or short-term
Psychologist	PhD or PsyD	Understanding thoughts, behaviors & patterns; diagnosing conditions; talk therapy; CBT; psychological testing	No
Therapist / Counselor	LPC · LPCC · LMFT · LCSW	Day-to-day emotional support; coping skills; life stressors & relationships; CBT, DBT, trauma-informed therapy	No
Clinical Social Worker	LCSW · LICSW	Mental health & life stability; therapy; case management; resource coordination (housing, insurance, services)	No
Substance Use Counselor	LADC	Understanding substance use patterns; identifying triggers; relapse prevention; group therapy (IOP)	No
Case Manager / Care Coordinator	Credentials Vary	Navigating systems; coordinating care across providers; appointments, insurance & paperwork; ongoing check-ins	No
Peer Support Specialist / Recovery Coach	CPRS or Similar	Support from lived experience; motivation & accountability; goal setting; recovery guidance	No
ARMHS Worker	Adult Rehabilitative Mental Health Services	Daily functioning & life skills; skill-building (routines, organization, coping); hands-on support in real-life settings	No
Medication Management Support	Non-Prescribing	Organizing & tracking prescribed medications; education on purpose & side effects; refill coordination; provider communication	No – supports existing prescriptions only

Most people benefit from multiple supports at the same time. A therapist, a prescriber, and a peer coach can all work together for you.



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Finding the Right Provider

Not Sure Where to Start?

If You Need...	Start With
Medication evaluation or prescribing	Psychiatrist or Psychiatric Nurse Practitioner
Talk therapy and emotional support	Therapist or Psychologist
Help with substance use	Substance Use Counselor (LADC) or IOP Program
Help with daily life and structure	ARMHS Worker or Case Manager
Support from someone with lived experience	Peer Support Specialist / Recovery Coach
Help managing existing medications	Medication Management Support

Important Reminders

Multiple Supports Are Normal

Most people benefit from multiple supports at the same time. A therapist, a prescriber, and a peer coach can all work together for you.

You Don't Have to Figure It Out Perfectly

There's no perfect starting point. The most important thing is to start somewhere — anywhere.

It's Okay to Adjust

It's okay to start anywhere and adjust later. Your support can evolve as your needs change.

You don't have to have it all figured out before you reach out. Starting is enough.



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