

Treatment of substance abuse can lessen risk of future violence in mentally ill, study finds

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Treating the substance abuse problems of those with severe mental illness can reduce their risk of future violence, according to research by Clara Bradizza.

If a person is dually diagnosed with a severe mental illness and a substance abuse problem, are improvements in their mental health or in their substance abuse most likely to reduce the risk of future violence?

Although some may believe that improving symptoms of mental illness is more likely to lessen the risk for future episodes of violence, a new study from the University at Buffalo Research Institute on Addictions



(RIA) suggests that reducing <u>substance abuse</u> has a greater influence in reducing violent acts by <u>patients</u> with severe mental illness.

"We were surprised to find that the severity of the patient's psychiatric symptoms was not the primary factor in predicting later aggression," says Clara Bradizza, senior research scientist at RIA and co-author of the study. "Rather, the patient's substance abuse was the factor most closely associated with future aggression."

Although the vast majority of people with mental illness do not engage in violent acts, the risk of violence is greater among the severely mentally ill than among the general population, and the connection between severe mental illness, substance abuse and aggression is a significant concern for community safety, <u>treatment programs</u> and public policy.

"Our findings suggest that treatment attendance is very important for these individuals and treatment programs should include interventions that are likely to decrease substance abuse, as this may provide the additional benefit of reducing the risk of later aggression among dualdiagnosis patients," Bradizza says. "This not only improves the lives of affected individuals and their families, but also provides a safer environment for society as a whole."

The study, funded by a grant from the National Institute on Alcohol Abuse and Alcoholism, followed nearly 300 patients over a six-month period following admission to an outpatient dual-diagnosis treatment program that provided both substance abuse and <u>mental illness</u> treatment.

Provided by University at Buffalo



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