



The Intersectionality of Factors Predicting Co-occurring Disorders A Decision Tree Model

Betty Walton, Saahoon Hong, Hea-Won Kim, Hyejean Kwon, & Stephanie Moynihan

PURPOSE

Individuals with co-occurring psychiatric and substance use disorders (COD) face challenges accessing care, accurate diagnoses, and effective treatment. To better understand factors other than substance use, which differentiate COD from psychiatric disorders (PD), this study examined the combined effects of age, gender identity, race/ethnicity, pandemic, behavioral health needs, useful strengths, and COD.

METHODS

Administrative behavioral health data for 22,629 adults who participated in publicly funded behavioral health services in 2019 -2020, including the Adult Needs and Strengths Assessment (ANSA), were examined by chi-square automatic interaction detection (CHAID) decision tree analysis to identify patterns of factors that increased the likelihood of having COD.

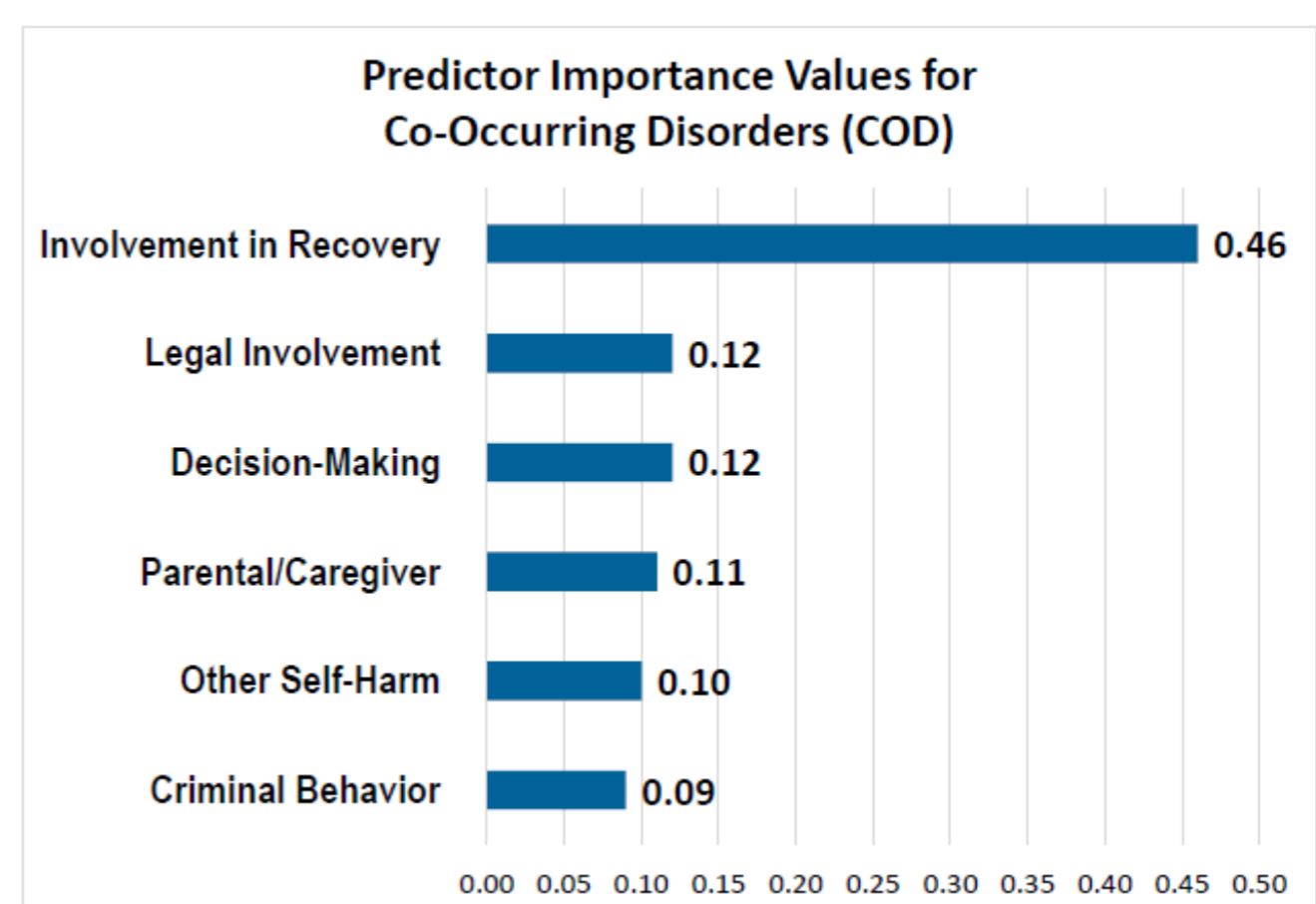
RESULTS

Involvement in recovery, active participation in treatment and self-health management needs, emerged as the most critical factor predicting COD. Other significant included Legal Involvement, Decision-Making, Parent/Caregiver Functioning, Other Self-Harm (recklessness), and Criminal Behavior. Meaningful pattern associations emerged.

Individuals with COD who were involved in the legal system were more likely to struggle with active involvement in recovery (78%) compared to adults with PD (22%). This group reporting challenges related to criminal behavior also reported a higher prevalence of self-harm challenges (91%). Overall, individuals with PD were less likely to have legal issues or engage in reckless or criminal behavior compared to those with COD.

KEY TAKEAWAYS

- **Accessible and effective services**
Addressing COD by one team with integrated services supports engagement and active involvement in recovery.
- **Building life functioning skills**
Focusing on existing decision-making or parental challenges helps develop essential skills and provides meaningful support.
- **Identifying risky behavior**
Identifying self-harm or criminal behavior can inform the intervention plan and monitor progress.
- **Person-centered planning**
A person-centered approach can reduce risks and improve an individual's and family's functioning.



CITATION

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