

## *Dual Diagnosis in Women: Diagnosis, Self-Harm, and Treatment*

Presenter: Amanda Graham

### **Digital Munchausen: How would a clinician know an individual is doing this?**

A: Good question. It is very important for the clinician to stay up to date on social media and ask the client what social media platforms they are using. A person who is has this will be more than willing to share social media with you as they want you to see them as “the victim”. This will be a big hint. Also, interviewing family and friends about their internet activity (excessive use) can also help in this case.

### **Do you have any resources for refugee women?**

A: Unfortunately I do not. However, the presentation covers women in general. For women from diverse cultures and religious beliefs, you would want to apply this to their treatment plan along with what was discussed in the presentation. In some cases, a woman’s religious beliefs state that any mark on the body is a disgrace. In this case, you could possible include an elder from their culture to discuss this aspect with the client. Marks can also include a scar from a C-section; this would also want to be addressed by an elder in the community on “exceptions” as nearly all religions and cultures have “exceptions”.

### **I would like to look at some of the studies that show some of the points given in the webinar. Can you provide a list of references?**

A: Sure, here they are:

LaGuire, T. (April, 2015). Treatment for Cutting and Other Nonsuicidal Self-injury Behaviors. Quantum Units Education. 30 p.

National Strategy for Suicide Prevention: Goals and Objectives for Action, 2012 from <http://www.surgeongeneral.gov/library/reports/national-strategy-suicide-prevention/>

Phillips, P., McKeown, O., Sanford, T., & N, Dip (2009). Dual Diagnosis Practice In Context. Hoboken, NJ: Wiley Publishing

U.S. Department of Health and Human Services' Office on Women's Health; Substance Abuse and Mental Health Services Administration (May, 2009). Action Steps for Improving Women's Mental Health. Quantum Units Education. 64 p.

### **Can the substance use it self be seen as NSSI?**

A: Substance Abuse is an addiction; however, it is not considered a NSSI. This is diagnosed via the DSM. Self-harm behaviors usually accompany a mental disorder such as depression, anxiety, or bipolar disorder.

### **Would you consider a dual diagnosis if a client presents with substance abuse and an eating disorder?**

A: Yes, this would be considered a dual diagnosis. A dual diagnosis has a mental illness, even eating disorder, and a substance abuse disorder.