

The DASIS Report

June 6, 2003

Variations in Substance Abuse Treatment Facilities by Number of Clients

This report looks at facility size, as measured by the number of clients enrolled in treatment on a typical day, and reported to the National Survey of Substance Abuse Treatment Services (N-SSATS).¹ N-SSATS is an annual survey of all facilities in the United States, both public and private, that provide substance abuse treatment.

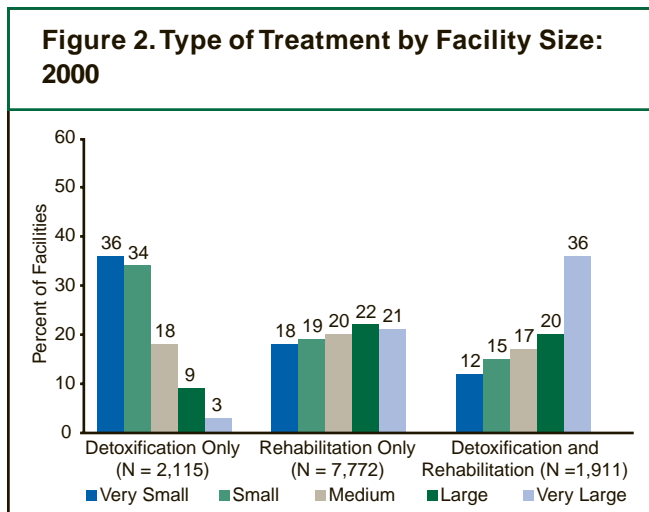
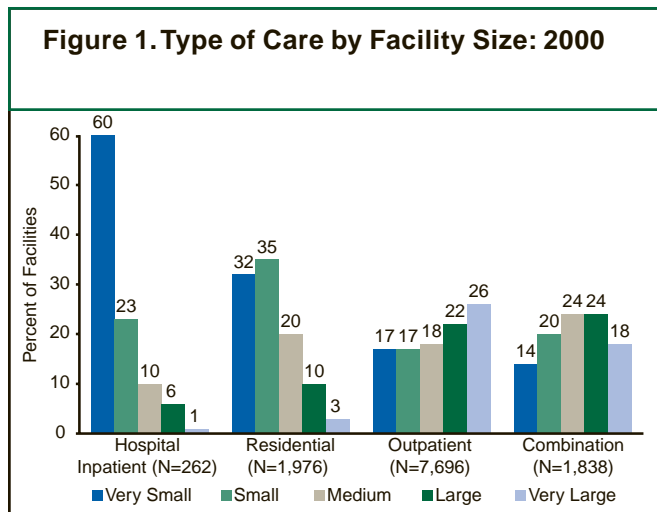
In Brief

- Facilities providing only detoxification were mostly small or very small
- Larger facilities reported providing more types of services than smaller facilities
- Very large facilities provided methadone/LAAM treatment five times more frequently than very small, small, or medium facilities

Facilities and Clients

In all, 13,428 facilities responded to the N-SSATS in 2000. Most facilities answered for themselves alone, but some combined their data with data for other facilities in their administrative networks. This report is based on information from the 11,808 facilities that reported for themselves alone. These facilities were ranked by the number of clients treated on a typical day in hospital and residential facilities and enrolled in treatment on a typical day in outpatient facilities. Facilities were then divided into five groups of approximately 2,360 facilities each:

- **Very small**—average 7 clients; range 1 to 12 clients
- **Small**—average 19 clients; range 13 to 25 clients
- **Medium**—average 36 clients; range 26 to 48 clients
- **Large**—average 71 clients; range 49 to 104 clients
- **Very large**—average 242 clients; range 105 to 3,000 clients



Source: 2000 SAMHSA National Survey of Substance Abuse Treatment Services (N-SSATS).

Type of Care

Hospital inpatient facilities, typically substance abuse treatment units within a general or psychiatric hospital, were mostly very small (60 percent) or small (23 percent); only 1 percent were very large (Figure 1). Two-thirds of residential facilities were very small or small facilities (32 and 35 percent, respectively). Outpatient facilities had lower proportions of very small and small facilities (both 17 percent).

Ownership

Facilities owned by private organizations, whether non-profit or for-profit, were approximately evenly distributed by size, as were facilities owned by States. Facilities operated by local governments tended to be larger, with 17 percent very small, 15 percent small, 19 percent medium, 22 percent large, and 27 percent very large. Facilities owned by tribal governments were mostly very small or small (47 percent); only 13 percent were very large. Facilities operated by the Department of Defense were primarily very small (39 percent) or small (19 percent), while those operated by the Department of Veterans Affairs were mostly large (22 percent) or very large

(50 percent). Trends were less apparent in other ownership categories.

Type of Treatment

Most of the facilities providing only detoxification services were very small or small (36 and 34 percent, respectively) (Figure 2). Facilities providing only rehabilitation services were distributed almost equally among facilities of each size. More than a third of the facilities providing both detoxification and rehabilitation were very large (36 percent).

Managed Care

About half of small and very small facilities (49 percent) had a contract or other arrangement with a managed care entity. The proportion of facilities reporting managed care contracts among medium and large facilities was 56 percent, and among very large facilities 54 percent.

Public Funds

Fifty-one percent of very small, 62 percent of small, 63 percent of medium, 70 percent of large, and 74 percent of very large facilities reported receiving public funds.

Services Provided

Facilities were asked about the provision of 26 services, 12 of which were offered by at least 50 percent of the facilities (Table 1). In general, very small facilities provided on average 12 services, small facilities 13, medium facilities 14, large facilities 14, and very large facilities 15.

Programs for Special Populations

Facilities were also asked about the provision of treatment groups and programs for nine special populations (Table 2). Larger facilities reported providing more programs for adolescents, persons with co-occurring disorders, persons with HIV/AIDS, pregnant/postpartum women, other groups of women only, and groups of men only.

Methadone/LAAM Treatment

Five percent of small and very small facilities, 4 percent of medium, and 7 percent of large facilities offered methadone/LAAM treatment, while 27 percent of very large facilities

offered methadone/LAAM treatment. In general, the larger facilities offered methadone/LAAM maintenance, while the smaller facilities that offered methadone/LAAM treatment were most likely using it for detoxification purposes.

Treatment in Languages Other than English

The proportion of very small facilities that reported providing treatment in languages other than English was 19 percent, of small facilities 25 percent, medium 27 percent, large 33 percent, and very large facilities 44 percent.

Very Large Facilities

Fifty percent of very large facilities reported on average 137 clients, with a range of 105 to 184 clients; the other 50 percent reported on average 346 clients, with a range of 185 to 3,000 clients. Very large facilities with the smaller client counts differed substantially from those with the higher client numbers in several areas: providing treatment in languages other than English (35 vs. 53 percent); methadone/LAAM treatment (15 vs. 38 percent); testing for HIV (38 vs. 51 percent); testing for hepatitis (27 vs. 43 percent); testing for STDs (27 vs. 40 percent); pharmacotherapy (49 vs. 59 percent); transitional housing assistance (28 vs. 35 percent); programs for persons with AIDS/HIV (23 vs. 37 percent); and programs for pregnant/postpartum women (24 vs. 34 percent).

End Note

¹ Based on the survey response reference date, October 1, 2000.

Table 1. Services Offered by at Least 50 Percent of Facilities by Facility Size: 2000

Service	Very Small	Small	Medium	Large	Very Large
	Percent of Facilities				
Individual Therapy	91	94	95	96	96
Comprehensive Substance Abuse Assessment	87	90	93	95	95
Group Therapy	76	89	93	93	92
Referral to Other Transitional Services	78	84	83	84	87
Discharge Planning	75	81	82	82	81
Drug/Alcohol Urine Screening	69	76	80	84	88
Relapse Prevention Groups	62	75	81	83	83
Family Counseling	72	74	79	81	77
Aftercare Counseling	68	73	79	83	80
Case Management Services	56	66	66	68	70
HIV/AIDS Education	43	52	55	57	65
Assistance with Obtaining Social Services	45	51	50	51	54

Table 2. Facilities Providing Programs for Special Populations by Facility Size: 2000

Special Population	Very Small	Small	Medium	Large	Very Large
	Percent of Facilities				
Adolescents	29	31	37	42	42
Persons with Co-Occurring Disorders	45	47	50	50	55
Persons with HIV/AIDS	17	21	21	21	30
Gays/Lesbians	15	16	14	15	16
Seniors	18	18	16	17	19
Pregnant/Postpartum Women	17	18	18	20	29
Other Groups of Women Only	23	31	35	44	55
Groups of Men Only	21	30	33	38	41
Other	9	13	14	17	21

The Drug and Alcohol Services Information System (DASIS) is an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). One component of DASIS is the National Survey of Substance Abuse Treatment Services (N-SSATS), an annual survey of all facilities in the United States, both public and private, that provide substance abuse treatment. N-SSATS was formerly known as the Uniform Facility Data Set (UFDS).

The DASIS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and RTI, Research Triangle Park, North Carolina.

Information and data for this report are based on data reported to N-SSATS for the survey reference date October 1, 2000.

Access the latest N-SSATS/UFDS reports at: <http://www.samhsa.gov/oas/dasis.htm>

Access the latest N-SSATS/UFDS public use files at: <http://www.samhsa.gov/oas/SAMHDA.htm>

Other substance abuse reports are available at: <http://www.DrugAbuseStatistics.samhsa.gov>



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