

The DASIS Report

April 4, 2003

Admissions of Persons with Co-Occurring Disorders: 2000

In Brief

- Admissions of persons with co-occurring disorders (co-occurring disorders admissions) were more likely to be female than substance abuse only admissions, 40 vs. 28 percent
- Co-occurring disorders admissions were more likely to be White than substance abuse only admissions, 68 vs. 54 percent
- Co-occurring disorders admissions were less likely to be in the labor force than substance abuse only admissions, 47 vs. 58 percent

For this report, co-occurring disorders refer to the co-occurrence of a substance abuse problem and a psychiatric disorder. Co-occurring disorders admissions were compared with substance abuse only admissions using the Treatment Episode Data Set (TEDS).

TEDS is an annual compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

TEDS includes a Minimum Data Set collected by all States and a Supplemental Data Set collected by some States. Psychiatric problem is a Supplemental Data Set item. Only data on admissions from the 27 States or jurisdictions with a response rate of 75 percent or higher on this data element in 2000 were used for this report.¹ These States accounted for approximately 63 percent of all substance abuse treatment admissions in 2000, but

Figure 1. Primary Substance of Abuse for Treatment Admissions, by Psychiatric Diagnosis Status: 2000

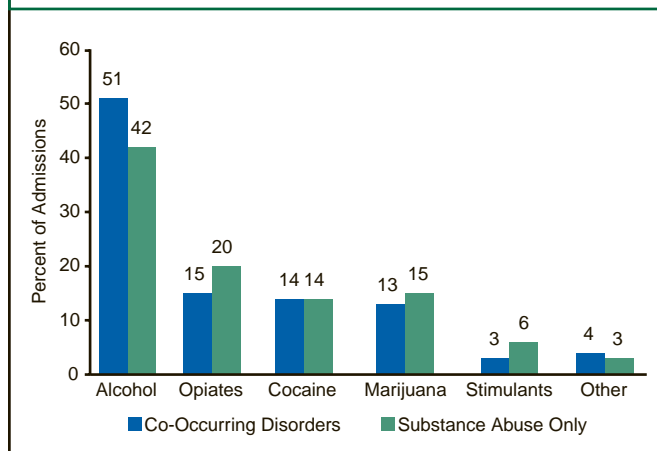
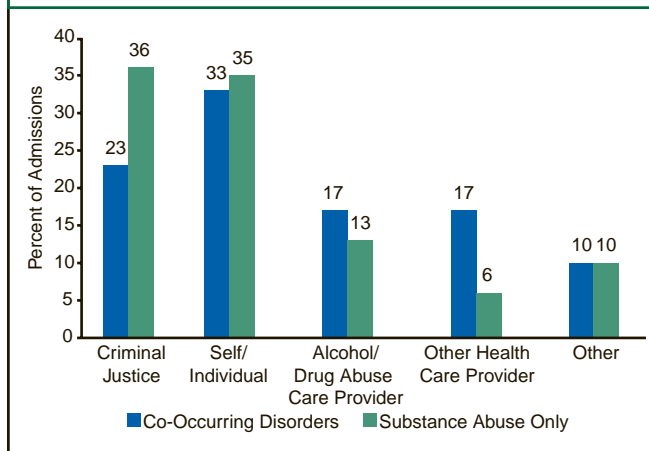


Figure 2. Referral Source for Treatment Admissions, by Psychiatric Diagnosis Status: 2000



Source: 2000 SAMHSA Treatment Episode Data Set (TEDS).

they accounted for 85 percent of the substance abuse admissions for which the psychiatric problem data element was reported. About 17 percent (173,000) of the approximately 992,000 admissions included in this report were of persons diagnosed with co-occurring disorders in 2000.

Primary Substance of Abuse

Alcohol was more likely to be the primary substance of abuse for co-occurring disorders admissions than for substance abuse only admissions (51 vs. 42 percent) (Figure 1). Opiates were less likely to be the primary substance of abuse for co-occurring disorders admissions than for substance abuse only admissions (15 vs. 20 percent). Cocaine and marijuana were equally likely to be the primary substance of abuse for co-occurring disorders admissions and for substance abuse only admissions.

Age at Admission, Sex, and Marital Status

The average age for both co-occurring disorders admissions and substance abuse only admissions was 34. One-third of each group of admissions (34 percent for co-occurring disorders and 32 percent for substance abuse only) was between 35 and 44 years old. Co-occurring disorders admissions were more likely to be female than substance abuse only admissions (40 vs. 28 percent).² Co-occurring disorders admissions were more likely to be separated or divorced (28 percent) than substance abuse only admissions (23 percent). Female co-occurring disorders admissions were more likely to be separated or divorced than male co-occurring disorders admissions (30 vs. 24 percent).

Race/Ethnicity

The racial/ethnic distribution of co-occurring disorders admissions was 68 percent White, 20 percent Black, 8 percent Hispanic, and 2 percent Other. In contrast, the racial/ethnic distribution of substance abuse only admissions was 54 percent White, 25 percent Black, 14 percent Hispanic, and 5 percent Other.

Referral Source

Co-occurring disorders admissions were more likely than substance abuse only admissions to have been referred through alcohol and drug abuse care providers (17 vs. 13 percent) and other health care providers (17 vs. 6 percent) (Figure 2).³ In contrast, substance abuse only admissions were more likely than co-occurring disorders admissions to have been referred by the criminal justice system (36 vs. 23 percent).

Figure 3. Number of Prior Treatment Episodes for Treatment Admissions, by Psychiatric Diagnosis Status: 2000

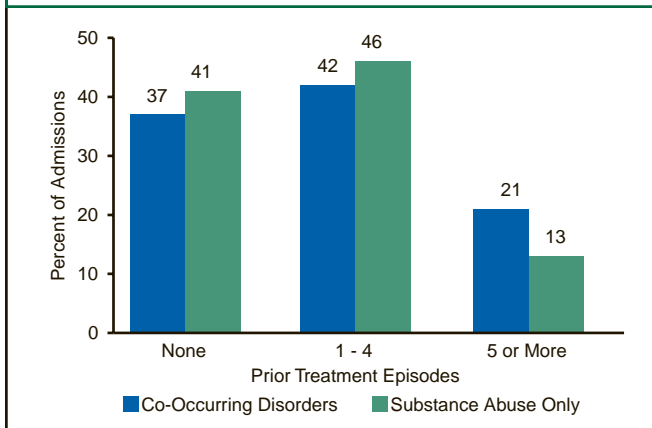


Table 1. Employment Characteristics, by Psychiatric Diagnosis Status: 2000

	<i>Co-Occurring Disorders</i>	<i>Substance Abuse Only</i>
Number of Admissions	169,400*	779,100*
<i>Percent</i>		
Employed Full- or Part-Time	25.1	34.2
Unemployed	22.1	23.9
Not in Labor Force	52.8	41.9

*Number of Admissions for which employment status was reported.

Number of Prior Treatment Episodes

Co-occurring disorders admissions were more likely to have been in treatment before than substance abuse only admissions (63 vs. 59 percent), and they were more likely to have been in treatment 5 or more times (21 vs. 13 percent) (Figure 3).

Employment Status

Co-occurring disorders admissions were less likely than substance abuse only admissions to be in the labor force (47 vs. 58 percent) (Table 1). One-quarter (25 percent) of co-occurring disorders admissions were employed either full- or part-time, compared with one-third (34 percent) of substance abuse only admissions.

End Notes

¹ These 27 States were: Alabama, California, Colorado, Delaware, Georgia, Idaho, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Mississippi, Missouri, Nevada, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Ohio, Oklahoma, Rhode Island, South Carolina, and Tennessee.

² For more on female co-occurring disorders admissions (previously referred to as dually diagnosed admissions), see Substance Abuse and Mental Health Services Administration (2002, October 25). *The DASIS Report. Dually Diagnosed Female Substance Abuse Treatment Admissions: 1999*. Rockville, MD: Author.

³ Such providers include physicians, psychiatrists, or other licensed health care professionals; or a general hospital, psychiatric hospital, mental health program, or nursing home.

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 Treatment Episode Data Set (TEDS). TEDS is a compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. Information on treatment admissions is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. Approximately 1.6 million records are included in TEDS each year. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

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 issue are based on data reported to TEDS through April 1, 2002.

Access the latest TEDS reports at: <http://www.samhsa.gov/oas/dasis.htm>

Access the latest TEDS 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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