

The N-SSATS Report

July 30, 2009

Characteristics of Substance Abuse Treatment Facilities Offering Acupuncture

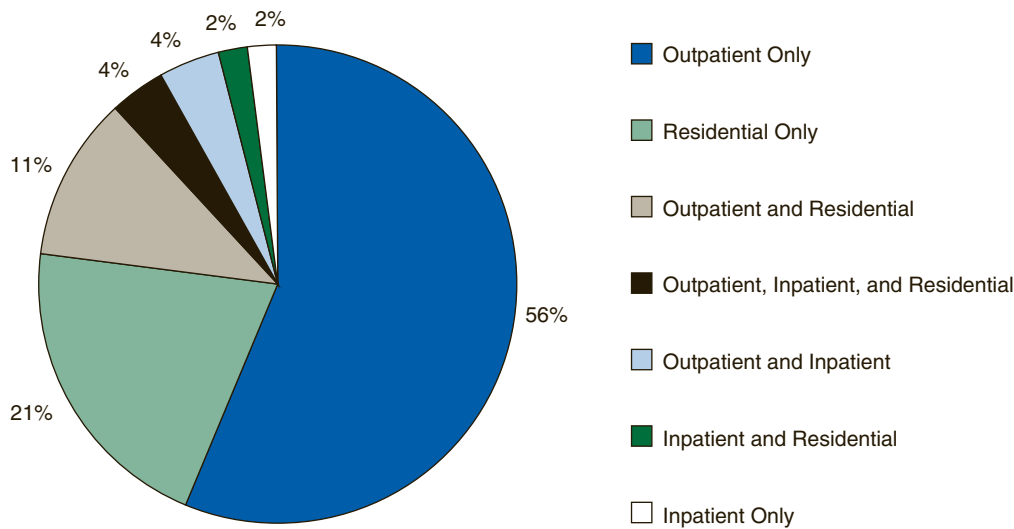
In Brief

- Facilities offering acupuncture services most commonly accepted cash or self-payments (85 percent), private health insurance (63 percent), or Medicaid payments (56 percent)
- Overall, most facilities that offered acupuncture also offered other ancillary services to support the needs of clients, such as substance abuse education, discharge planning, case management, and aftercare
- Facilities that offered acupuncture were twice as likely as all substance abuse treatment facilities to offer special programs or groups for adolescents (64 vs. 31 percent) and persons with HIV/AIDS (20 vs. 10 percent)

Acupuncture is one of the oldest healing practices in the world, and it has been used to treat a wide spectrum of medical conditions and diseases. Recently, acupuncture was identified as one of the fastest growing complementary or alternative therapies covered by private insurance companies in the United States.^{1,2}

Acupuncture was introduced into alcohol and drug abuse treatment in the 1970s. Clinical trials of acupuncture to treat chemical dependency have been conducted and focused on different substances of abuse (e.g., opiates and cocaine), within different therapeutic settings, and among different populations.^{3,4} The results of these clinical trials are mixed and often hindered by small sample sizes, lack of study controls, and inability to control for placebo effects.⁵ Anecdotal evidence suggests that

Figure 1. Percentage of Substance Abuse Treatment Facilities that Offer Acupuncture Services, by Type of Care: 2007



Source: 2007 SAMHSA National Survey of Substance Abuse Treatment Services (N-SSATS).

acupuncture can relieve the physical symptoms of withdrawal during detoxification, increase feelings of relaxation during therapeutic rehabilitation, and relieve or prevent cravings during relapse prevention. Acupuncture proponents point out that it is a low-risk, low-cost therapy that does not require medication, produces no side effects, and causes little to no discomfort.

Using data from the 2007 National Survey of Substance Abuse Treatment Services (N-SSATS), the primary objective of this report is to examine general characteristics of the 587 facilities (4 percent of all facilities nationwide) that offered acupuncture as a part

of substance abuse treatment. Selected comparisons are made between facilities that offered acupuncture and all substance abuse treatment facilities in general.

Facility Operation

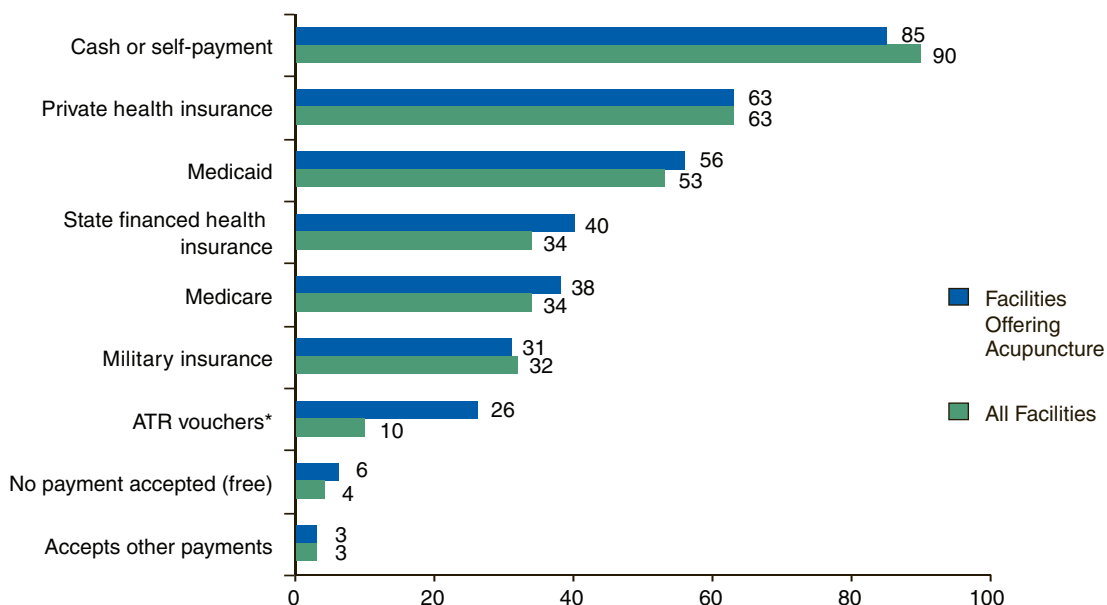
The majority of substance abuse treatment facilities that offered acupuncture were privately owned and operated (77 percent), either by a for-profit entity (25 percent) or a non-profit organization (52 percent). In addition, 11 percent of facilities offering acupuncture were operated by local governments, 6 percent by State governments, and 6 percent by Federal or tribal governments. When compared to

all substance abuse treatment facilities nationally, a smaller proportion of facilities offering acupuncture services were privately owned and operated, but a higher proportion were operated by local, State, and Federal or tribal governments.

Type of Care

N-SSATS categorizes substance abuse treatment offered by facilities into three main types of settings—hospital inpatient, residential, and outpatient. Some facilities provide one type of care only while others provide a combination. Of the facilities offering acupuncture, 56 percent offered outpatient treatment only, and 21

Figure 2. Percentage of Substance Abuse Treatment Facilities that Offer Acupuncture Services, by Type of Payments Accepted: 2007



* Access to Recovery (ATR) vouchers are available in CA, CT, FL, ID, IL, LA, MO, NJ, NM, TN, TX, WA, WI, WY.
 Source: 2007 SAMHSA National Survey of Substance Abuse Treatment Services (N-SSATS).

percent offered residential treatment only (Figure 1). Approximately 13 percent of facilities that offered acupuncture offered opioid treatment programs (OTPs), a slightly higher percentage than all substance abuse treatment facilities (8 percent).

More than a third (38 percent) of facilities that offered acupuncture also offered detoxification services. Most facilities that offered both acupuncture and detoxification services reported detoxifying clients from opiates (95 percent), and the majority reported detoxifying clients from alcohol (87 percent) or cocaine (81 percent).

Type of Payments Accepted

Facilities that offered acupuncture services most commonly accepted cash or self-payments (85 percent), private health insurance (63 percent), or Medicaid payments (56 percent) (Figure 2). Over a third of these facilities also accepted State-financed health insurance (40 percent) or Medicare payments (38 percent). A smaller percentage accepted Federal military insurance such as TRICARE or Champ VA (31 percent). Substance abuse treatment facilities offering acupuncture were more likely than

facilities in general to accept Access to Recovery (ATR) vouchers (26 versus 10 percent) and slightly more likely to accept other State-financed health insurance (40 versus 34 percent).

Services Offered

Overall, N-SSATS data show that substance abuse treatment facilities that offered acupuncture provided traditional assessment and treatment services to clients. Specifically, screening for substance abuse (95 percent) and comprehensive substance abuse assessment and diagnosis (92 percent) were provided by

Table 1. Percentage of Substance Abuse Treatment Facilities that Offer Acupuncture Services, by Ancillary/Transitional Service: 2007

Ancillary/Transitional Service	Percent
Substance Abuse Education	98
Discharge Planning	96
Case Management Services	87
Aftercare or Continuing Care	82
Social Skills Development	75
HIV/AIDS Education, Counseling, or Support	75
Health Education other than HIV/AIDS	72
Mental Health Services	72
Assistance with Obtaining Social Services	67
Self-help Groups	67
Mentoring/Peer Support	61
Assistance in Locating Housing for Clients	60
Transportation Assistance to Treatment	55
Domestic Violence—Family or Partner Violence Services	49
Early Intervention for HIV	44
Employment Counseling or Training for Clients	45
Child Care for Clients' Children	16

Source: 2007 SAMHSA National Survey of Substance Abuse Treatment Services (N-SSATS).

most facilities that offered acupuncture. Almost three-quarters provided screening for mental health disorders (72 percent), and more than half provided comprehensive mental health assessment or diagnosis (53 percent) or community outreach (53 percent). A smaller percentage offered interim services when admission was not possible (44 percent).

The majority of facilities that offered acupuncture

also provided the four main types of counseling services. Among facilities that offered acupuncture, most offered individual counseling (98 percent) and group counseling (93 percent), and a majority offered family (77 percent) and marital/couples (56 percent) counseling. A similar proportion of all substance abuse treatment facilities provided individual counseling (96 percent), group counseling (89

percent), and family counseling (72 percent). However, facilities that offered acupuncture were more likely than all substance abuse treatment facilities nationally to provide marital/couples counseling (56 versus 45 percent).

The most common types of testing provided by facilities that offered acupuncture included drug or alcohol urine screening (92 percent), breathalyzer or other alcohol blood testing (75 percent), and tuberculosis (TB) and Human Immunodeficiency Virus (HIV) testing (56 and 54 percent, respectively). Less than half of the facilities offered sexually transmitted disease (STD) (42 percent) or Hepatitis B or C (43 and 46 percent) testing services.

Most facilities that offered acupuncture also offered other ancillary or transitional services, which are services central to and supportive of the needs of clients. Such services included substance abuse education (98 percent), discharge planning (96 percent), case management (87 percent), and after-care or continuing care (82 percent) (Table 1). The majority also provided social skills development, HIV or Acquired Immunodeficiency Syndrome (AIDS) education, counseling, or support, other

Table 2. Percentage of Substance Abuse Treatment Facilities that Offer Acupuncture Services, by Programs or Groups for Specific Client Types: 2007

Programs for Special Groups	Facilities Offering Acupuncture	All Facilities
Adolescents	64	31
Adult women	55	32
Co-occurring disorders	52	37
Adult men	42	25
Criminal justice clients	33	27
Pregnant/Postpartum Women	25	14
Persons with HIV/AIDS	20	10
Seniors or older adults	12	7
Gays or Lesbians	10	6

Source: 2007 SAMHSA National Survey of Substance Abuse Treatment Services (N-SSATS).

health education, mental health services, assistance obtaining social services, self-help groups, mentoring/peer support, assistance locating housing, and transportation assistance to treatment.

Programs or Groups for Specific Client Types

Overall, 82 percent of facilities that offered acupuncture also offered at least one special program or group to serve a specific client type. The majority offered a specially designed program or group for adolescents (64 percent), adult women (55 percent), and clients with co-occurring disorders (52

percent) (Table 2). Substance abuse treatment facilities offering acupuncture were more likely than substance abuse treatment facilities in general to offer specially designed programs or groups for various client types. Most notably, facilities that offered acupuncture were twice as likely as all substance abuse treatment facilities to offer programs for adolescents (64 vs. 31 percent) and persons with HIV/AIDS (20 vs. 10 percent).

Discussion

Acupuncture is offered by a very small percentage of substance abuse treatment facilities nationwide. However, facilities that offer acupuncture tended to offer many other types of services that are designed to support recovery and address the needs of specific clients. Thus, although acupuncture may be viewed as an “alternative” therapy, facilities that offer acupuncture do so in the context of a broad range of traditional approaches to treatment.

End Notes

- ¹ Burke, A., Upchurch, D. M., Dye, C., & Chyu, L. (2006). Acupuncture use in the United States: Findings from the National Health Interview Survey. *The Journal of Alternative and Complementary Medicine*, 12 (7), 639-648.
- ² Henry J. Kaiser Family Foundation and Health Research and Educational Trust. (2004). *Employer Health Benefits 2004 Annual Survey*. Menlo Park, California.
- ³ Jordan, J. B. (2006). Acupuncture treatment for opiate addiction: A systematic review. *Journal of Substance Abuse Treatment*, 30, 309-314.
- ⁴ Moner, S. E. (1996). Acupuncture and addiction treatment. *Journal of Addictive Diseases*, 15, 79-100.
- ⁵ Otto, K. C. (2003). Acupuncture and substance abuse: A synopsis, with indications for further research. *The American Journal on Addictions*, 12, 43-51.

Suggested Citations

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Findings from SAMHSA's 2007 National Survey of Substance Abuse Treatment Services (N-SSATS)

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

N-SSATS collects three types of information from facilities: characteristics of individual facilities such as services offered and types of treatment provided, primary focus of the facility, and payment options; client count information such as counts of clients served by service type and number of beds designated for treatment; and general information such as licensure, certification, or accreditation and facility website availability. In 2007, N-SSATS collected information from 13,648 facilities from all 50 States, the District of Columbia, the Federated States of Micronesia, Guam, Palau, Puerto Rico, and the Virgin Islands.

Information and data for this report are based on data reported to N-SSATS for the survey reference date March 30, 2007

The N-SSATS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and by RTI International in Research Triangle Park, North Carolina (RTI International is the trade name of Research Triangle Institute). Information on the most recent N-SSATS is available in the following publication:

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2008). *National Survey of Substance Abuse Treatment Services (N-SSATS): 2007. Data on Substance Abuse Treatment Facilities* (DASIS Series: S-44, DHHS Publication No. (SMA) 08-4348). Rockville MD: Author.

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