

The DASIS Report

May 17, 2002

Pregnant Women in Substance Abuse Treatment

In 1999, the Treatment Episode Data Set (TEDS) recorded more than 400,000 admissions of women of childbearing age (15 to 44 years) to substance abuse treatment facilities.

In Brief

- In 1999, 4 percent of women aged 15 to 44 years who entered publicly funded substance abuse treatment were pregnant when admitted
- Among pregnant women, 84 percent of admissions were younger than age 35
- In 1999, 42 percent of pregnant women were not covered by health insurance

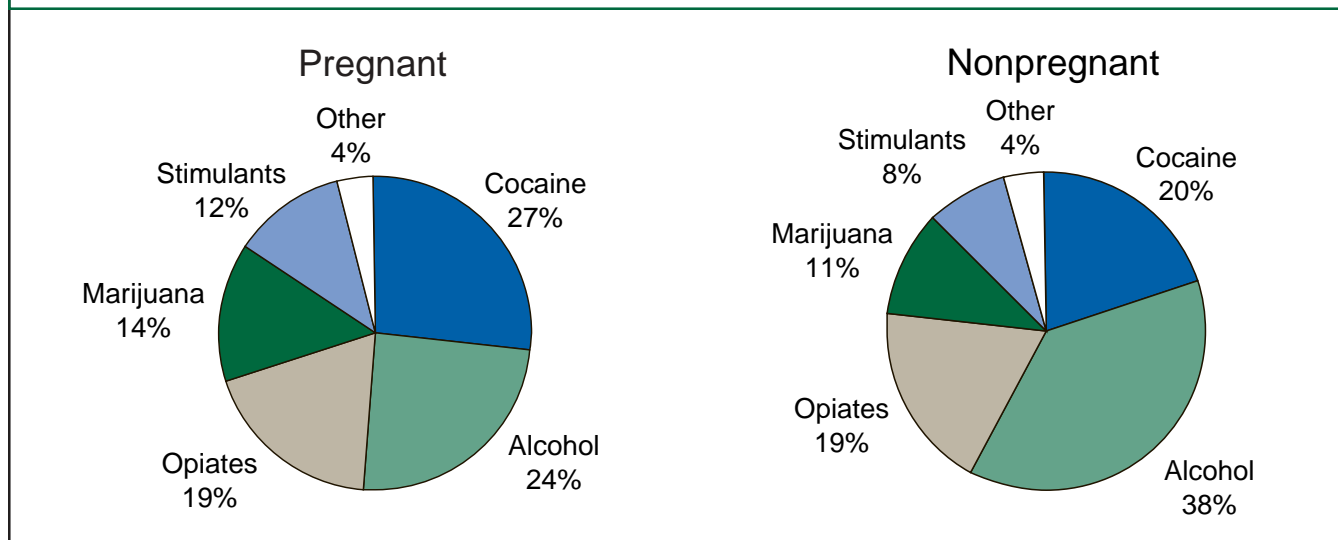
Pregnancy status—whether a female treatment client was pregnant at the time of admission—was reported for 1999 by 43 States and the District of Columbia.¹ Pregnant women represented 4 percent of all TEDS admissions of women aged 15 to 44 years in those States and the District. This percentage does not include women who became pregnant or became aware of their pregnancies during the course of treatment.

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. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

Primary Substance of Abuse

Pregnant women aged 15 to 44 were more likely than nonpregnant women of the same age group to enter treatment for

Figure 1. Primary Substance of Abuse among Women Aged 15 to 44 Admitted to Treatment, by Pregnancy Status: 1999



Source: 1999 SAMHSA Treatment Episode Data Set (TEDS).

cocaine abuse (Figure 1). In 1999, cocaine was the primary substance of abuse for 27 percent of admissions among pregnant women entering treatment compared with 20 percent of admissions among nonpregnant women.

Among women aged 15 to 44, alcohol was the primary substance of abuse for 24 percent of admissions among pregnant women compared with 38 percent of admissions among nonpregnant women, and opiates were the primary substance for 19 percent of admissions among both groups.

Sociodemographics

Pregnant women aged 15 to 44 entering treatment were slightly more likely to be Black or Hispanic than were nonpregnant women (data not shown). Among women of childbearing age entering treatment, 3 percent of admissions among Whites were pregnant at admission compared

with 5 percent of admissions among all other races.

Age at admission among women 15 to 44 varied according to pregnancy status. Pregnant admissions tended to be younger than nonpregnant admissions. Among pregnant women, 84 percent of admissions were younger than age 35 compared with 59 percent of nonpregnant admissions (Figure 2).

About 15 percent of admissions among both pregnant and nonpregnant women aged 15 to 44 were currently married (data not shown). However, the percentage of those who had never been married was higher among pregnant women than nonpregnant women (65 percent vs. 54 percent, respectively).

Health Insurance

Many women aged 15 to 44 who entered publicly funded substance abuse treatment in 1999

had no health insurance²: 42 percent of admissions among pregnant women and 58 percent of admissions among nonpregnant women were not insured (Figure 3). Pregnant women were more likely than nonpregnant women to be covered by Medicaid/Medicare (45 percent and 24 percent, respectively).

Treatment Services

Pregnant women aged 15 to 44 were less likely to be admitted to detoxification treatment than were nonpregnant women of that age group (7 percent and 15 percent of admissions, respectively—data not shown). A slightly higher proportion of pregnant than nonpregnant women entered residential treatment (23 percent and 19 percent of admissions, respectively). Pregnant women were more likely to be admitted to outpatient treatment than were nonpregnant women (33 percent

Figure 2. Age at Admission among Women Aged 15 to 44 Years, by Pregnancy Status: 1999

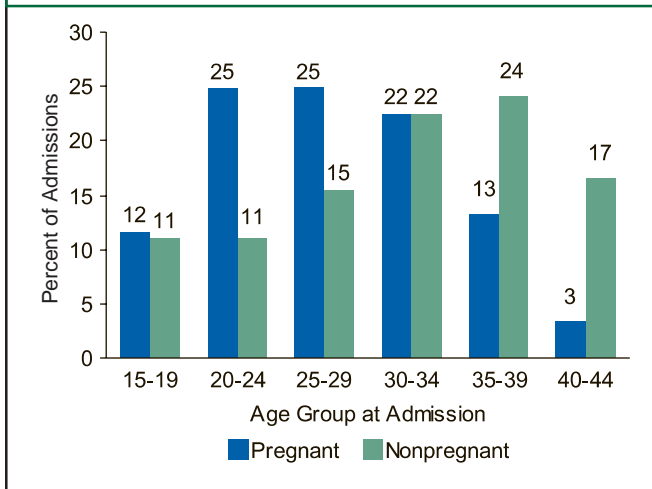
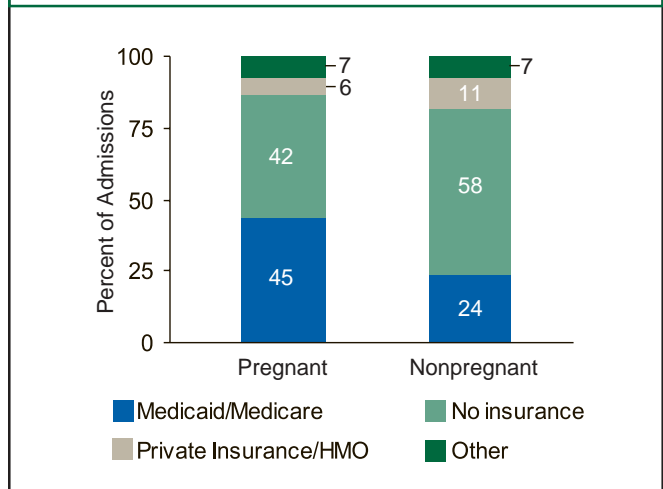


Figure 3. Health Insurance Status among Women Aged 15 to 44 Years, by Pregnancy Status: 1999



and 21 percent of admissions, respectively).

Among women who abused opiates, pregnant women were more likely to receive methadone treatment than nonpregnant women (51 percent and 38 percent of admissions, respectively).

Source of Referral to Treatment

In 1999, pregnant women aged 15 to 44 admitted to treatment were equally likely to be self- or individual referrals as to be referred through the criminal justice system (28 percent of admissions each—data not shown). In 1995, however, 33 percent of admissions among pregnant women were self- or individual referrals and 21 percent were referred through the criminal justice system. During the same period, referrals from health care providers decreased from 14 to 11 percent of admissions among pregnant women.

Nonpregnant women aged 15 to 44 had similar shifts in referral patterns, but were more likely to be self- or individually referred (40 percent of admissions in 1995 and 35 percent in 1999) and less likely to be referred through health care providers (9 percent each year). Criminal justice referrals among nonpregnant women aged 15 to 44 increased from 22 to 27 percent of admissions from 1995 to 1999.

End Notes

¹TEDS, a compilation of State administrative data, consists of a Minimum Data Set collected by nearly all States, and a Supplemental Data Set collected by some States. Pregnancy status is a Supplemental Data Set item. It was reported in 1999 for at least 84 percent of admissions of women aged 15 to 44 by all States except Arkansas, Florida, Nebraska, New Mexico, Rhode Island, Virginia, and Wyoming.

²Health Insurance is a Supplemental Data Set item. It was reported in 1999 by 27 of the 44 States reporting pregnancy status. States not reporting Health Insurance include, in addition to the above, Alabama, California, Connecticut, Iowa, Louisiana, Maine, Minnesota, North Carolina, New York, Ohio, Oklahoma, South Dakota, Tennessee, Utah, Vermont, Washington, and Wisconsin.

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 16, 2001.

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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