

The DASIS Report

February 20, 2004

Discharges from Long-term Residential Treatment: 2000

This report examines discharge data in the Treatment Episode Data Set (TEDS).¹ The TEDS system is

comprised of two major components, the Admission Data System and the Discharge Data System. Both admission and discharge data come primarily from facilities that receive some public funding.

In Brief

- About one-third (33 percent) of long-term residential treatment episodes involved individuals who completed treatment, while 9 percent involved those who were transferred to further treatment
- The long-term residential treatment completion rate was highest, at 38 percent, for episodes where alcohol was the primary substance of abuse
- The median length of stay for completed long-term residential treatment episodes was 75 days

States are asked to submit data for all discharges from substance abuse treatment. In 2000, 18 States² submitted 347,923 records for clients discharged from treatment. Nearly all of these records (94 percent) could be linked to a TEDS admission record. These 326,750 linked admission/discharge records are referred to as treatment episodes. Of these episodes, over 99 percent (323,156) had a valid response for reason for discharge.

This report presents data on the 8 percent (26,603) of these treatment episodes that represent clients who received long-term (more than 30 days) residential treatment (Table 1). Clients discharged from short-term residential (30 days or fewer) and residential detoxification are not included in this report.³

Table 1. Discharges from Long-term Residential Treatment, by Reason for Discharge and Primary Substance at Admission: 2000

Primary substance at admission	Total	Reason for Discharge				
		Treatment Completed	Transferred to Further Treatment	Left Against Professional Advice	Terminated by Facility	Other
Alcohol	10,320	3,867	903	2,907	2,204	439
Opiates	3,949	1,131	143	1,511	989	175
Cocaine	6,063	1,766	425	1,772	1,851	249
Marijuana/hashish	3,342	1,058	352	789	1,016	127
Stimulants	2,079	631	493	462	371	122
Other/unknown	850	345	66	214	164	61
Total	26,603	8,798	2,382	7,655	6,595	1,173

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

Reasons for Discharge

About one-third (33 percent) of long-term residential treatment episodes involved individuals who completed treatment and another 9 percent involved those who were transferred to further treatment (Figure 1). The remaining long-term residential treatment episodes involved clients who left against professional advice (29 percent), whose treatment was terminated by the

facility (25 percent), or who were discharged for other reasons (4 percent).

Primary Substance

Alcohol was the primary substance of abuse⁴ in 44 percent of the completed long-term residential treatment episodes (Figure 2), followed by cocaine (20 percent), opiates (13 percent), marijuana (12 percent), stimulants (7 percent), and other substances (4 percent).

Completion of Long-term Residential Treatment

The long-term residential treatment completion rate was highest, at 38 percent, for episodes involving alcohol as the primary substance of abuse (Figure 3). For long-term residential treatment episodes with marijuana as the primary substance, the completion rate was 32 percent. The long-term residential treatment completion

Figure 1. Reasons for Discharge among Long-term Residential Treatment Discharges: 2000

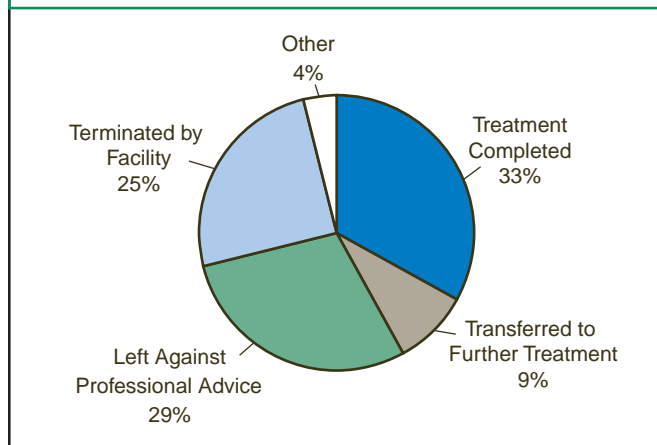
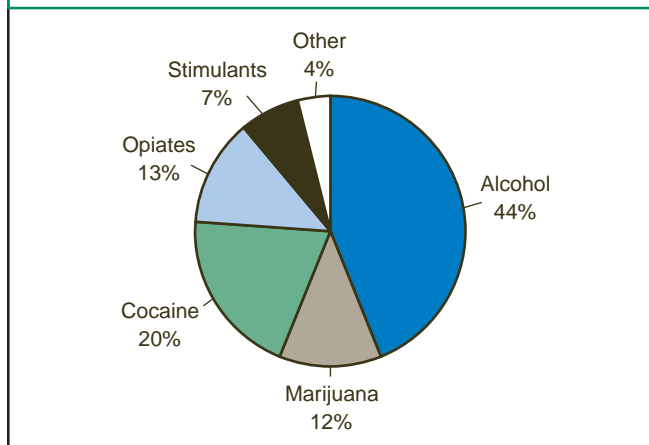


Figure 2. Primary Substances of Long-term Residential Treatment Completers: 2000

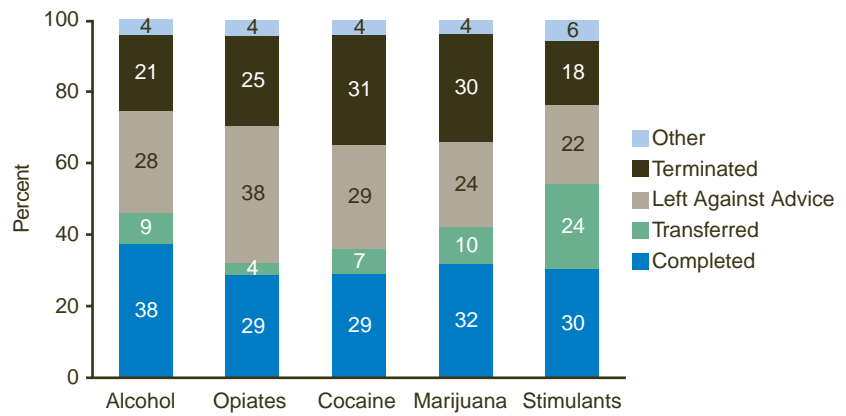


rate for episodes where the primary substance was a stimulant was 30 percent. Long-term residential treatment episodes involving opiates or cocaine as the primary substance were least likely to be completed, at 29 percent for both types of drugs.

Median Length of Stay

The median length of stay for completed long-term residential treatment episodes was 75 days, ranging from 73 days for cocaine to 91 days for opiates (Figure 4).

Figure 3. Reasons for Discharge from Long-term Residential Treatment, by Primary Substance of Abuse: 2000



End Notes

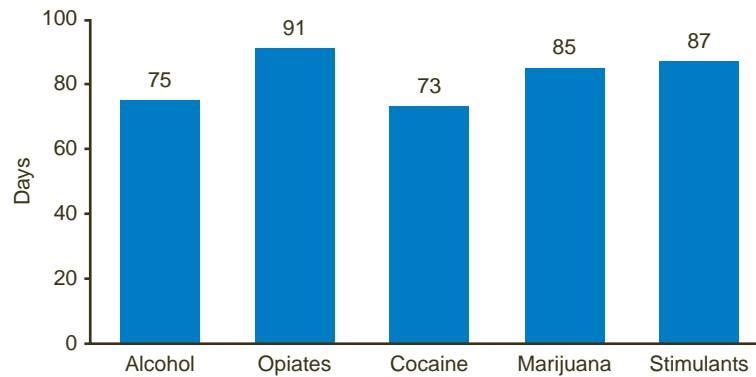
¹ For an earlier report on TEDS discharges, see Substance Abuse and Mental Health Services Administration, Office of Applied Studies. *The DASIS report: Treatment Completion in the Treatment Episode Data Set (TEDS)*. Rockville, MD. January 30, 2003.

² States included are CA, GA, HI, IA, IL, MA, MD, ME, MI, MN, MS, MT, NE, NM, OH, OK, UT, and WY.

³ Because treatment completion rates and lengths of stay vary across modalities or types of treatment, reports on other modalities, including hospital inpatient, outpatient, intensive outpatient, short-term residential, and detoxification treatment are being presented in other DASIS reports.

⁴ The primary substance of abuse is the main substance abused at the time of admission.

Figure 4. Median Length of Stay among Long-term Residential Treatment Completers, by Primary Substance: 2000



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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