

# The DASIS Report

May 24, 2002

## Facilities Offering Special Programs for Dually Diagnosed Clients

Individuals with both mental and substance abuse disorders are said to be “dually diagnosed.” Some substance

abuse treatment facilities provide special programs for dually diagnosed clients that integrate multiple treatment services in the same location.

### In Brief

- By 1999, nearly half of substance abuse treatment facilities provided programs for dually diagnosed clients
- Fifty-seven percent of facilities with a mental health focus provided dual diagnosis programs
- Facilities offering hospital inpatient care were more likely to provide service for dually diagnosed clients than were other types of facilities

This report uses information from SAMHSA’s 1999 Uniform Facility Data Set (UFDS) survey to examine the characteristics of substance abuse treatment facilities offering special programs for dually diagnosed clients. UFDS is an annual survey of all facilities in the United States, both public and private, that provide substance abuse treatment.

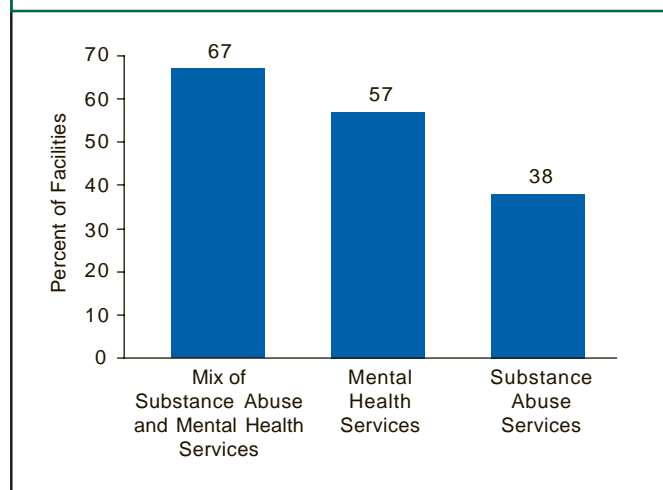
Of the 15,239 treatment facilities that responded to the 1999 UFDS survey, nearly half (45 percent) reported that they provided programs for dually diagnosed clients (Table 1).

**Table 1. Substance Abuse Treatment Facilities Providing Dual Diagnosis Programs, by Ownership and Problem Treated: 1999**

	All Facilities	Facilities Providing Dual Diagnosis Program	Percent of All Facilities	Percent of Facilities Providing Dual Diagnosis Program
<b>Total</b>	15,239	6,818	44.7	100.0
<b>Ownership</b>				
Private non-profit	9,077	4,030	44.4	59.1
Private for-profit	3,976	1,658	41.7	24.3
Local government	1,134	581	51.2	8.5
State government	555	289	52.1	4.2
Federal government	321	180	56.1	2.6
Dept. of Veterans Affairs	168	123	73.2	1.8
Dept. of Defense	116	37	31.9	0.5
Indian Health Service	22	12	54.5	0.2
Other	15	8	53.3	0.1
Tribal government	176	80	45.5	1.2
<b>Problem Treated</b>				
Both alcohol & drug abuse	14,686	6,660	45.3	97.7
Drug abuse only	388	112	28.9	1.6
Alcohol abuse only	165	46	27.9	0.7

Source: 1999 SAMHSA Uniform Facility Data Set (UFDS).

**Figure 1. Percentage of Treatment Facilities Providing Dual Diagnosis Programs, by Primary Focus: 1999**



## Ownership

In 1999, private non-profit facilities made up the bulk of the facilities reporting to UFDS (60 percent), followed by private for-profit (26 percent) and State/local government (11 percent). The ownership characteristics of treatment facilities offering programs for dually diagnosed clients were similar. Almost 60 percent of dual diagnosis programs were located in private non-profit facilities, 24 percent were in private for-profit ones, and 13 percent in State/local government ones (Table 1). Private for-profit facilities were as likely to provide programs for dually diagnosed clients as private non-profit ones (42 percent vs. 44 percent). Dual diagnosis programs were most

likely to be provided by VA-owned facilities (73 percent). The facilities least likely to have programs for dually diagnosed clients were owned by the Department of Defense (32 percent).

## Substance Abuse Problem Treated

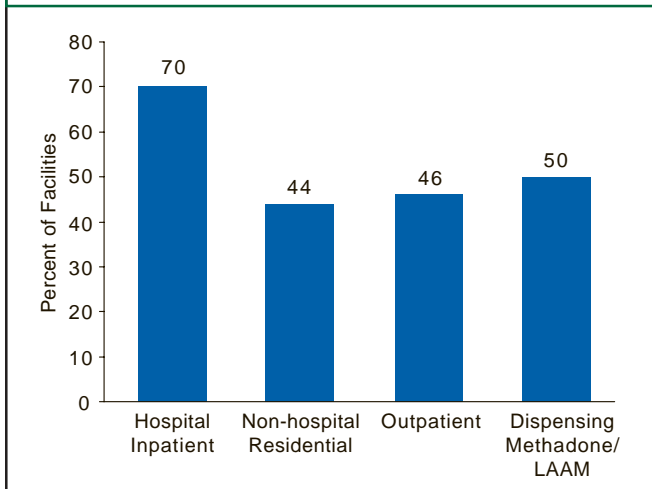
Almost all facilities offering dual diagnosis programs (98 percent) treated both alcohol and drug abuse (Table 1). Moreover, facilities treating both alcohol and drug abuse (45 percent) were more likely to offer programs for dually diagnosed clients than facilities treating drug abuse only (29 percent) or alcohol abuse only (28 percent).

## Primary Focus

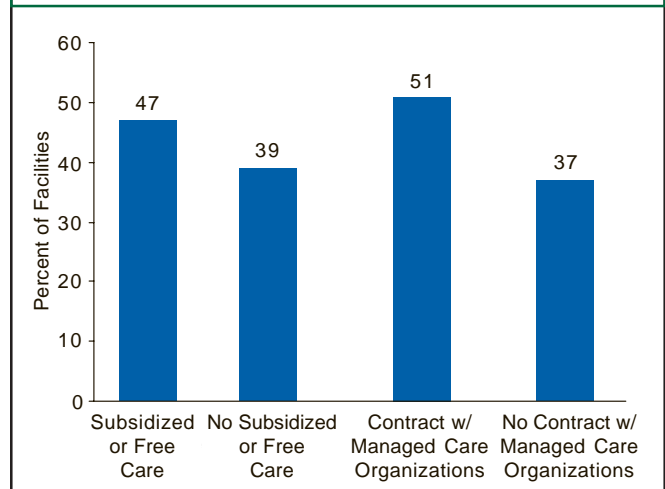
Facilities focused on treating a combination of substance abuse and mental health problems (67 percent) and on treating mental health problems (57 percent) were more likely to provide treatment programs for dually diagnosed clients than treatment facilities reporting that treating substance abuse problems was their primary focus of activity (38 percent) (Figure 1).

More than half of facilities offering dual diagnosis programs reported their primary focus of activity was treating substance abuse problems. Another 20 percent of facilities offering dual diagnosis programs focused on mental health problems or a mix of mental health and substance abuse problems (data not shown).

**Figure 2. Percentage of Facilities Providing Dual Diagnosis Programs, by Type of Care Offered and Dispensing of Methadone/LAAM: 1999**



**Figure 3. Percentage of Treatment Facilities Providing Dual Diagnosis Programs, by Payment Accepted and Managed Care Agreements: 1999**



### Type of Care Offered

Facilities offering hospital inpatient care (70 percent) were more likely to provide dual diagnosis programs than facilities offering outpatient care (46 percent) or non-hospital residential care (44 percent) (Figure 2). While only 9 percent of facilities offering dual diagnosis programs dispensed methadone/LAAM, half of the facilities dispensing methadone/LAAM offered dual diagnosis programs.

### Type of Payment Accepted

Programs for dually diagnosed clients were more likely to be in facilities offering subsidized or free care or a sliding fee scale (47 percent) than in facilities that did not (39 percent) (Figure 3).

### Managed Care Organizations

About 64 percent of facilities offering dual diagnosis programs had agreements or contracts with managed care organizations to provide substance abuse treatment services (data not shown).

Facilities having contracts with managed care organizations were more likely to offer programs for dually diagnosed clients than ones without such contracts (51 percent vs. 37 percent) (Figure 3).

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 Uniform Facility Data Set (UFDS), now known as 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.

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 UFDS for the survey reference date October 1, 1999.**

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

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

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<http://www.DrugAbuseStatistics.samhsa.gov>



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