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SAMHSA: Changes, Regional Shifts in U.S. Treatment Admissions over Decade

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Research Summary

A new report from the Substance Abuse and Mental Health Services Administration (SAMHSA) reveals large regional shifts in rates of admissions to drug treatment between 1998 and 2008, even as national rates remained steady, according to a Dec. 22 [press release](#) issued by the agency.

According to the report, "Treatment Episode Data Set (TEDS) 1998-2008: State Admissions to Substance Abuse Treatment Services" ([PDF](#)), national treatment admission rates as a whole remained steady (at 770 admissions per 100,000 people) over the 11 years studied.

Broken down by type of drug and geographic region, the data showed significant differences by region.

For example, the percent of patients seeking admission for alcohol as a primary drug dropped 15 percent nationally, but remained steady in West North Central states (Ark., Iowa, Kan., Minn., Mo., N.D., Neb. and S.D.).

Unlike treatment rates for alcohol, admissions for treatment of illegal drugs increased nationally. Marijuana treatment admissions rose 30 percent across all regions, but were highest in the West North Central and Middle Atlantic states (N.J., N.Y. and Pa.).

Every region saw a rise in admissions for abuse of pain relievers as well as a drop in admission rates for cocaine use, which fell 23 percent nationally. Admissions for heroin use fell three percent nationally but rose in some states, especially in the New England (Conn., Mass., Maine, N.H., R.I. and Vt.) and Middle Atlantic states.

Although methamphetamine treatment admissions were 53 percent higher nationally in 2008 than 1998, the percent of admissions had dropped "significantly and consistently" since cresting in 2005.

"This study provides insight into the regional nature of substance abuse by highlighting the shifting trends in the reasons for admission to substance abuse treatment," said SAMHSA Administrator Pamela S. Hyde, J.D. "By carefully analyzing these data, policy makers, public health experts and behavioral health service providers can better direct limited resources and meet the treatment needs of people living in states and communities."

This article [summarizes](#) an external report or press release on research published in a scientific journal. When available, links to the sources are provided above.

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