

The NSDUH Report

January 14, 2010

Substance Use Treatment Need and Receipt among People Living in Poverty

Substance use disorders affect people in all economic circumstances, and all face challenges in trying to overcome these disorders. The difficulties faced by persons living in poverty, however, may be even more formidable as they may lack health insurance coverage. Considering that the number of people living in poverty has increased for 3 consecutive years—reaching a near record high of 39.8 million

in 2008¹—understanding the gap between service needs and service receipt may help policy makers and program managers ensure that the gap does not widen in the future.

The National Survey on Drug Use and Health (NSDUH) collects information that can contribute to this effort. NSDUH gathers data on family income, size, and composition (i.e., number of children) and respondent's age. This information is used to determine the respondent's poverty level. The poverty level is calculated as a percentage of the U.S. Census Bureau's poverty threshold by dividing the respondent's reported total family income by the appropriate poverty threshold amount. If a family's total income is less than the Census Bureau's poverty threshold for the corresponding size and composition, then that family and every individual in it is considered to be living in poverty (i.e., less than 100 percent of the U.S. census poverty threshold).

NSDUH also gathers information on the need for and receipt of substance use treatment. Persons are classified as needing treatment for a substance use (i.e., alcohol or illicit drug) problem if they met the criteria for dependence on or abuse of a substance or if they received substance use treatment at a specialty facility in the past year.^{2,3,4}

This issue of *The NSDUH Report* examines the need for and receipt of substance use treatment among persons aged 12 or older who are living in poverty.⁵ All findings in the report are annual averages based on combined 2006 to 2008 data.

In Brief

- Combined 2006 to 2008 data indicate that 3.7 million persons aged 12 or older living in poverty were in need of substance use treatment in the past year; of these, 17.9 percent received treatment at a specialty facility during this time period
- Males living in poverty were nearly twice as likely as their female counterparts to have been in need of substance use treatment in the past year (17.1 vs. 8.9 percent), but males who needed treatment were as likely as their female counterparts to have received treatment
- Among persons living in poverty, those aged 18 to 25 had the highest rate of past year treatment need; however, this age group had the lowest rate of treatment receipt

Table 1. Percent Distribution of Persons Aged 12 or Older Living in Poverty and in the Total Household Population, by Demographic Characteristics: 2006 to 2008

Sociodemographic Characteristic	Total Household Population (%)	Persons Living in Poverty (%)
Total	100.0	100.0
Aged 12 to 17	10.2	15.0
Aged 18 to 25	12.9	23.9
Aged 26 to 34	14.3	16.1
Aged 35 to 49	26.2	21.5
Aged 50 to 64	21.6	13.6
Aged 65 or Older	14.7	9.9
Male	48.5	41.6
Female	51.5	58.4
White	68.1	42.3
Black or African American	11.8	23.8
American Indian or Alaska Native	0.5	1.1
Native Hawaiian or Other Pacific Islander	0.3	0.5
Asian	4.3	4.2
Two or More Races	1.1	1.4
Hispanic or Latino	13.8	26.7
Health Insurance Coverage	85.5	69.4
No Health Insurance Coverage	14.5	30.6

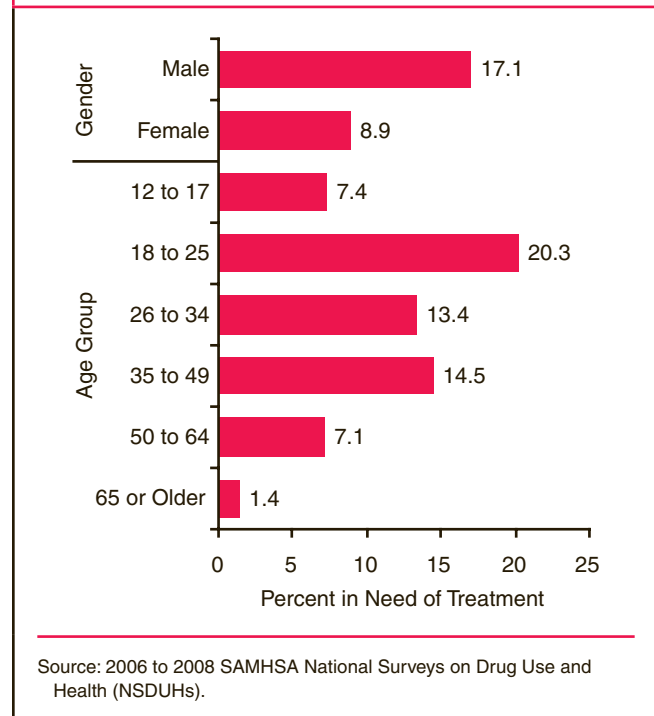
Source: 2006 to 2008 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Characteristics of Persons in Poverty

An annual average of 12.2 percent of persons aged 12 or older—an estimated 30.0 million persons—were living in poverty. Females comprised 58.4 percent of the persons living in poverty compared with 51.5 percent of the total household population (Table 1). In addition, persons living in poverty tended to be younger than those in the total population; persons aged 12 to 34 accounted for 55.0 percent of persons in poverty compared with 37.4 percent of the overall household population.

About two fifths (42.3 percent) of those living in poverty were white, 26.7 percent were Hispanic, and 23.8 percent were black. By comparison, 68.1 percent of the total U.S. household population were white, 13.8 percent were Hispanic, and 11.8 percent were black. Nearly one in three (30.6 percent) persons living in poverty were without health insurance coverage compared with about one in seven (14.5 percent) of the total household population.

Figure 1. Substance Use Treatment Need in the Past Year among Persons Aged 12 or Older Living in Poverty, by Gender and Age Group: 2006 to 2008



Treatment Need

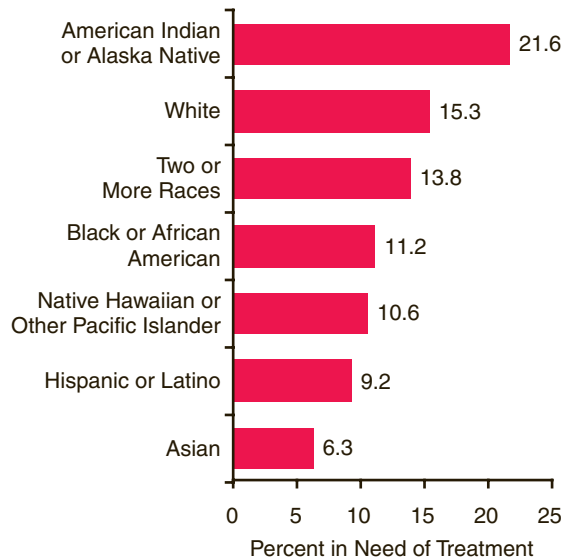
Among individuals aged 12 or older living in poverty, 12.3 percent (3.7 million persons) were classified as being in need of substance use treatment in the past year. The need for substance use treatment varied by demographic characteristics. Males living in poverty were nearly twice as likely as their female counterparts to have been in need of treatment (17.1 vs. 8.9 percent) (Figure 1). Among persons living in poverty, those aged 18 to 25 had a higher rate of treatment need than those in any of the other age groups. Need for treatment also varied by race/ethnicity among those living in poverty, ranging from 21.6 percent among American Indians or Alaska Natives to 6.3 percent among Asians (Figure 2).

Among persons living in poverty, those with no health insurance coverage were more likely than those with coverage to have been in need of substance use treatment in the past year (14.9 vs. 11.2 percent). An estimated 1.4 million persons living in poverty and with no health insurance coverage were in need of treatment.

Treatment Receipt

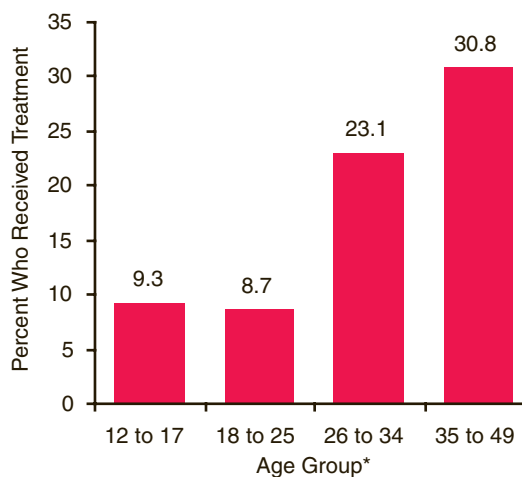
Of the persons living in poverty who were in need of substance use treatment in the past year, 17.9 percent (an estimated 663,000 persons) received treatment at a specialty facility during this time period. Nearly one third (30.8

Figure 2. Substance Use Treatment Need in the Past Year among Persons Aged 12 or Older Living in Poverty, by Race/Ethnicity: 2006 to 2008



Source: 2006 to 2008 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Figure 3. Receipt of Substance Use Treatment at a Specialty Facility in the Past Year among Persons Aged 12 or Older Living in Poverty and in Need of Substance Use Treatment, by Age Group: 2006 to 2008



* Data for other age groups are not shown due to low precision.

Source: 2006 to 2008 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

percent) of persons aged 35 to 49 living in poverty and in need of treatment received it compared with one quarter of their counterparts aged 26 to 34 (23.1 percent) and less than one tenth of young adults aged 18 to 25 and adolescents aged 12 to 17 (8.7 and 9.3 percent, respectively) (Figure 3). There were no statistically significant differences in receipt of treatment by gender or health insurance coverage (data not shown).

Discussion

Thirty million Americans aged 12 or older are living in poverty, and for some, their financial challenges are made even more difficult because of substance use problems. The data in this report indicate that there is a substantial unmet need for substance use treatment among individuals living in poverty, particularly among young adults and adolescents. Addressing the substance use treatment needs of individuals living in poverty may result in increases in economic sufficiency and employment, while decreasing health care costs and other adverse factors associated with substance use disorders (e.g., unintentional injuries, incarceration, and physical and mental health problems). Similarly, assessing needs for ancillary services, from basic subsistence needs to job hunting and placement, must be considered as essential components of the pathway to achieving recovery and sustaining resilience.

End Notes

- DeNavas-Walt, C., Proctor, B. D., & Smith, J. C. (2009, September). *Income, poverty, and health insurance coverage in the United States: 2008* (P60-236, U.S. Census Bureau, Current Population Reports, Consumer Income). Washington, DC: U.S. Government Printing Office. [Available as a PDF at <http://www.census.gov/prod/2009pubs/p60-236.pdf>]
- NSDUH defines illicit drugs as marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically. Nonmedical use is defined as the use of prescription-type pain relievers, sedatives, stimulants, or tranquilizers not prescribed for the respondent by a physician or used only for the experience or feeling they caused. Nonmedical use of prescription-type drugs does not include over-the-counter drugs; nonmedical use of stimulants includes methamphetamine use.
- NSDUH defines dependence on or abuse of alcohol and illicit drugs using criteria in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV), which includes such symptoms as withdrawal, tolerance, use in dangerous situations, trouble with the law, and interference in major obligations at work, school, or home during the past year. For details, see the American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- Substance use treatment at a specialty facility is defined as treatment received at drug or alcohol rehabilitation facilities (inpatient or outpatient), hospitals (inpatient services only), and mental health centers; it excludes treatment received in an emergency room, private doctor's office, self-help group, prison or jail, or hospital as an outpatient.
- Persons aged 18 to 22 living in college dormitories were excluded from all analyses because poverty status is not determined for this group.

Suggested Citation

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Findings from the SAMHSA 2006 to 2008 National Surveys on Drug Use and Health (NSDUHs)

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The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2006 to 2008 data used in this report are based on information obtained from 201,445 persons aged 12 or older, including 34,292 persons who were living in poverty. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Office of Applied Studies (OAS), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information on the most recent NSDUH is available in the following publication:

Office of Applied Studies. (2009). *Results from the 2008 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 09-4434, NSDUH Series H-36). Rockville, MD: Substance Abuse and Mental Health Services Administration. Also available online: <http://oas.samhsa.gov>.



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