

The NSDUH Report

October 25, 2012

Need for and Receipt of Substance Use Treatment among Hispanics

Hispanics represent the country's largest and fastest growing minority group.¹ Between 2000 and 2010, the Hispanic population in the United States grew by 43 percent,

accounting for more than half of the total growth in the U.S. population in the last decade. In 2010, approximately 50.5 million persons in the United States were of Hispanic or Latino origin (about 16 percent of the U.S. population). Because this level of growth is expected to continue, it is increasingly important to address health and health care disparities experienced by Hispanics.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is committed to reducing disparities in access to and quality of behavioral health care for ethnic minorities, including the Hispanic population.² The overall health and well-being of the Nation is improved by the extent to which our population has access to substance use treatment if it is needed. Better understanding of whether Hispanics with substance abuse problems seek and receive specialty treatment may help improve treatment and outreach programs for this population.

In Brief

- Combined 2003 to 2011 data indicate that Hispanics aged 12 or older were more likely than non-Hispanics to have needed substance use treatment in the past year (9.9 vs. 9.2 percent)
- Hispanics who needed substance use treatment were less likely than non-Hispanics to have received treatment at a specialty facility in the past year (9.0 vs. 10.5 percent)
- Among Hispanics needing but not receiving treatment, only 5.6 percent perceived a need for treatment

The National Survey on Drug Use and Health (NSDUH) gathers information on substance use treatment need and service utilization. NSDUH classifies persons as needing substance use treatment if they meet the criteria for substance dependence or abuse (based on symptoms they report) or if they received substance use treatment at a specialty facility in the past year.^{3,4,5} Respondents are also asked if there was any time during the past 12 months when they felt they needed substance use treatment. Persons who felt the need for treatment but did not receive treatment were asked if they made an effort to receive treatment in the past 12 months.

This issue of *The NSDUH Report* examines the need for and receipt of substance use treatment among Hispanics aged 12 or older.⁶ All estimates in this report are annual averages based on the combined 2003 to 2011 data.

Need for and Receipt of Specialty Treatment

Combined 2003 to 2011 data indicate that Hispanics were more likely than non-Hispanics to have needed treatment in the past year. That is, 9.9 percent of Hispanics (3.4 million) and 9.2 percent of non-Hispanics (19.7 million) needed substance use treatment. Among persons aged 12 or older who were in need of treatment, Hispanics were less likely than non-Hispanics to have received treatment (9.0 vs. 10.5 percent) (Figure 1). An estimated 3.1 million Hispanics needed but did not receive specialty treatment.

Self-Perceived Need for and Efforts to Receive Treatment

Among Hispanics who needed but did not receive treatment in the past year, 94.4 percent did not feel the need for it, 3.6 percent felt the need for treatment but did not make an effort to get it, and 2.0 percent felt the need for treatment and did make an effort to get it (Figure 2). Similarly,

among non-Hispanics in need of but not receiving treatment, 94.8 percent did not feel the need for treatment, 3.5 percent felt the need for treatment but did not make an effort to get it, and 1.7 percent felt the need for treatment and did make an effort to get it.

Discussion

This report shows that from 2003 to 2011, Hispanics were more likely to have a need for substance use treatment. Among those who needed treatment for illicit drug or alcohol use in the past year, Hispanics were less likely than non-Hispanics to receive specialty treatment. As the Hispanic population increases, the need to address access to specialty treatment facilities and outreach programs for this population is likely to increase.

Figure 1. Receipt of Substance Use Treatment at a Specialty Facility in the Past Year among Persons Aged 12 or Older Who Needed Treatment, by Ethnicity: 2003 to 2011

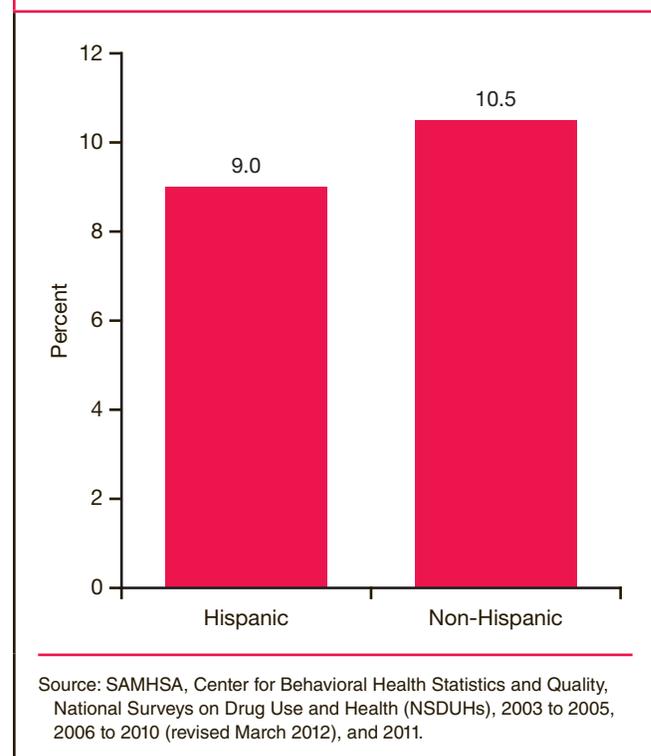
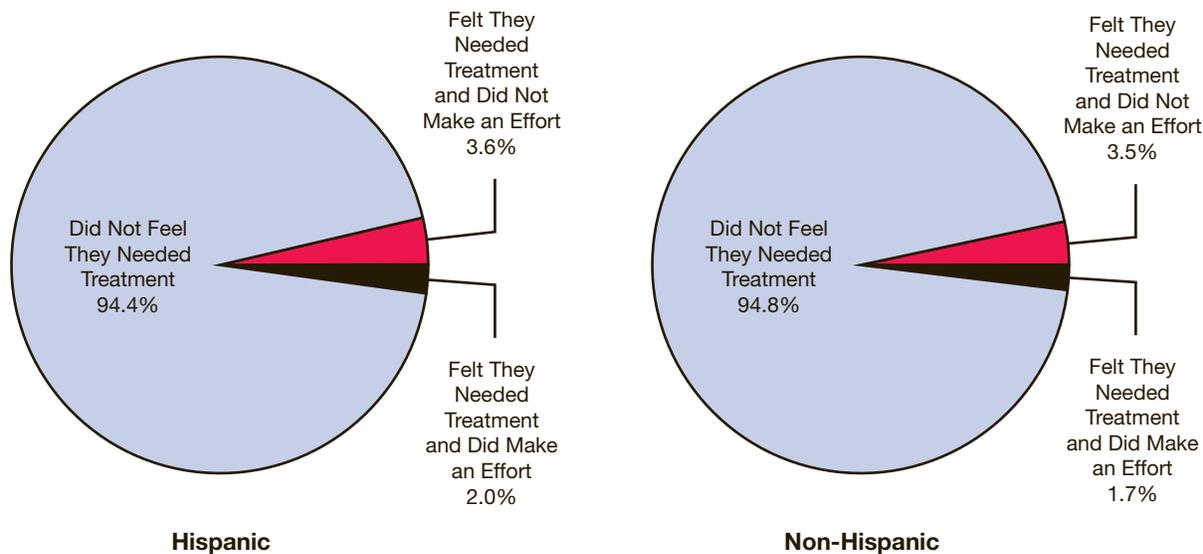


Figure 2. Past Year Perceived Need for and Effort Made to Receive Specialty Treatment among Persons Aged 12 or Older Needing but Not Receiving Substance Use Treatment, by Ethnicity: 2003 to 2011



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2003 to 2005, 2006 to 2010 (revised March 2012), and 2011.

End Notes

1. Ennis, S. R., Rios-Vargas, M., & Albert, N. G. (2011, May). *The Hispanic population: 2010* (2010 Census Briefs C2010BR-04). Washington, DC: U.S. Department of Commerce, Economics and Statistics Administration, U.S. Census Bureau.
2. U.S. Department of Health and Human Services. (2011, April). *HHS action plan to reduce racial and ethnic disparities: A nation free of disparities in health and health care*. Washington, DC: U.S. Department of Health and Human Services.
3. 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 include such symptoms as withdrawal, tolerance, use in dangerous situations, trouble with the law, and interference with major obligations at work, school, or home during the past year. For details, see: American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
4. Illicit drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically, including data from original methamphetamine questions but not including new methamphetamine items added in 2005 and 2006.

5. 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.
6. NSDUH asks a series of questions about race/ethnicity. First, respondents are asked about their Hispanic origin; then they are asked to identify which racial grouping best describes them: white, black/African American, American Indian or Alaska Native, Native Hawaiian, other Pacific Islander, Asian, or other. Respondents may select more than one race. For this report, respondents identifying themselves as Hispanic were assigned to the Hispanic group regardless of their racial identification.

Suggested Citation

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Findings from SAMHSA's 2003 to 2011 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 2003 to 2011 data used in this report are based on information obtained from 92,200 Hispanics aged 12 or older, and 520,400 non-Hispanics aged 12 or older. 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 Center for Behavioral Health Statistics and Quality (CBHSQ), 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:

Center for Behavioral Health Statistics and Quality. (2012). *Results from the 2011 National Survey on Drug Use and Health: Summary of national findings* (HHS Publication No. SMA 12-4713, NSDUH Series H-44). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available online: <http://www.samhsa.gov/data/>.



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