The data in this fact sheet are based on clients in publicly funded and/or monitored alcohol and other drug treatment services in California during State Fiscal Year 2010/11. These data are reported in the California Outcome Measurement System - Treatment (CalOMS-TX), unless otherwise noted.

Background
"Substance abuse and addiction is by far the number one women's health problem, causing illness, injury and death and contributing to a whole host of related social problems." – Susan Foster, director of policy research for the National Center on Addiction and Substance Abuse (CASA) at Columbia University. CASA’s book, Women Under the Influence, emphasizes the importance of gender specific screening, diagnosis, and especially treatment, of substance use disorders in women.

Based on the 2010 National Survey on Drug Use and Health (NSDUH), an estimated 22.1 million persons aged 12 or older in the United States were classified with substance dependence or abuse in the 12 months prior to the survey (8.7% of the population aged 12 or older). The prevalence of substance use disorders¹ for females was 5.9%. Substances may include alcohol and illicit drugs, such as marijuana, cocaine, heroin, hallucinogens, inhalants, as well as the non-medical use of prescription drugs.

Women in Treatment
This fact sheet provides a snapshot of California’s female clients in publicly funded and/or monitored treatment programs for alcohol and other drugs (AOD) treatment. The fact sheet was prepared using California Outcome Measurement System – Treatment (CalOMS-TX) data for State Fiscal Year (SFY) 2010/11. Percentages may not add to 100% due to rounding.

Data on clients’ AOD abuse are collected at admission and compared with data collected at discharge to measure client outcomes, treatment effectiveness, and the impact that treatment has on the lives of clients. These data are collected each time a client is admitted or discharged from an AOD treatment service.

The data used for this fact sheet are based on client admissions and discharges, not unique client counts. A client is counted more than once if the client had more than one treatment admission and discharge during the selected reporting period. About 13% of female admissions were for detoxification services and are excluded from this report. Detoxification by itself does not constitute complete substance abuse treatment. It is short term, usually less than a week, and is often repeated.

¹Based on criteria specified in the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV) (American Psychiatric Association [APA], 1994).
numerous times. Therefore, including detoxification admissions would bias statistics in this fact sheet.

**ADMISSION STATISTICS**
During SFY 2010/11 there were almost 150,000 admissions to non-detoxification publicly funded and/or monitored treatment programs, of which more than 59,000 (40%) were female clients.

**Women in Treatment by Age**
- 49% were 26 to 45 years of age
- 20% were 18-25 years old
- 14% were under 18 years old

**Employment**
- 10% were employed at the time of admission
- 26% were unemployed and 64% were not in the labor force (i.e., not seeking work)

**Race/Ethnicity**
- 42% were White – not Hispanic
- 35% were Hispanic
- 14% were African American
- 2% were American Indian or Alaskan Native
- Asians and Pacific-Islanders together accounted for about 2%
- 2% identified themselves as Multi-racial
- 2% identified their race as “Other”

**Additional Highlights**
- 61% had minor children
- 46% were Medi-Cal beneficiaries
- 16% were homeless
- 20% reported at least one type of disability
- 6% were pregnant
- CalWORKs recipients accounted for 9% of admissions

**Education**
- 45% had less than 12 years of education
- 36% had 12 years of education or had obtained their GED
- 18% reported some college education
Primary Drug of Abuse

- Methamphetamine was the most common primary drug of abuse, accounting for 35% of female clients admitted to treatment.
- Second most common primary drug was alcohol (21%) followed by marijuana/hashish (17%).

Source of Referral

- 37% were referred from the criminal justice system, down from 43% in the previous two years.
- Self referrals accounted for the second greatest number of referrals at 36%.
- 27% were referred by other sources.

Type of Service/Modality

- 57% were admitted to outpatient treatment programs and 8% to a Day Care Rehabilitative treatment program.
- Long-term residential treatment accounted for 23%, and short-term was 1%.
- 10% were admitted to a Narcotic Treatment Program (NTP).

DISCHARGE STATISTICS

Discharge information is collected each time a client leaves the treatment service into which he/she was admitted. Clients are counted each time they are discharged from a treatment service/modality during the fiscal year. During SFY 2010/11, nearly 53,000 women were discharged from AOD treatment.

Time in Treatment

Research shows that longer treatment stays are associated with positive outcomes. However, time in treatment varies by type of service, client needs, and some treatment services have time limitations.

- 46% of clients in Outpatient Treatment stayed in treatment 3 to 12 months.
- 44% in Intensive Day Care Treatment stayed in treatment 3 to 12 months.

The following graph shows duration for various treatment service types that...
exceed 30 days. Short-term residential services are excluded because 100% of the stays are for 30 days or less.

Although treatment duration is shown here by service type, it is the total time in treatment that is important. Treatment frequently includes multiple types of treatment services starting with more intensive, costly services and then progressing to less intensive, less expensive services. For example, clients often start in residential services, and then continue with outpatient services afterward. Because of this, few clients stay in residential treatment services for more than 90 days.

**Discharge Status**

- 34% completed their treatment plan and related goals
- 25% did not complete treatment, but were referred to a different program to continue with treatment services
- 41% were administrative discharges—when clients stop attending treatment services in which they are enrolled. Under such circumstances, providers determine the last date the client was seen and complete an abbreviated discharge record to indicate that the client left treatment prior to the planned discharge date

**Changes during Treatment (Outcomes)**

This section reports the changes in primary drug use and other client functioning areas for female clients in treatment. Changes during treatment were calculated by comparing data on the clients’ addiction-related problems in the 30 days prior to admission to the same measures in the 30 days prior to discharge.

In SFY 2010/11, more than 31,000 female clients provided client functioning data upon discharge from treatment.

Administrative discharges accounted for 41 percent of all discharges and no data were collected for these clients. This biases the results toward positive outcomes as this data is collected only for clients who either completed treatment or are referred to another treatment service. ADP is working with stakeholders to increase reporting of the data used for client outcome measurement to reduce the bias.

- Abstinence from the primary drug of use increased 75%
- The number of participants not involved in the criminal justice system, (as measured by no arrests in the prior 30 days) increased by 8% at discharge
- During treatment, use of social-support recovery activities increased by 46%

Research shows that increases in social-support recovery activities are positively related to improved client
outcomes and improved long-term recovery

- The number of female participants who reported no health problems increased by 10%
- By discharge, the number of clients living in a stable environment increased by 11%

These changes are based on the clients’ situation at admission and discharge, rather than the 30 days prior:

- Employment was 46% higher at discharge than at admission
- Enrollment in school increased 14%
- Participation in job training increased 188%