



Rural and Urban Similarities and Differences in Private Substance Abuse Treatment Centers

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Although previous research has considered the unique treatment needs of rural residents, little research has investigated the potential differences in the availability of treatment services in rural and urban areas. Using three waves of longitudinal data from a nationally representative sample of privately funded substance abuse treatment centers, this research compared rural and urban treatment centers with regard to the availability of clinical levels of care, the offering of specialty treatment tracks, the adoption of treatment innovations, and the average costs of care. Results indicate that rural and urban centers are similar in their increasing provision of inpatient psychiatric levels of care and their decreasing offering of more intensive levels of chemical dependency services between 1995 and 2001. Rural and urban centers were increasingly likely to offer specialty treatment tracks for women, adolescents, clients with HIV/AIDS, and relapsing clients over time, but rural centers were less likely to offer a treatment track tailored to substance abusing women. The use of treatment innovations was similar at rural and urban treatment centers with the exception of lesser use of acupuncture at rural centers. Rural and urban centers did not differ in their average charges for treatment services.