Racial disparities in SSRI availability in substance abuse treatment
H.K. Knudsen, L.J. Ducharme & P.M. Roman
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Objective: The high rate of co-occurrence of psychiatric and substance use disorders suggests that specialty substance abuse treatment facilities may be an important site for the delivery of psychotropic medications. However, the literature suggests there may be associations between the percentage of racial and ethnic minority clients and the availability of selective serotonin reuptake inhibitors (SSRIs) in these facilities. Methods: Survey data from the National Treatment Center Study, comprising nationally representative samples of 326 publicly funded and 339 privately funded substance abuse treatment centers, were used to measure the availability of SSRI medications from 2002 to 2004. Independent variables included the percentages of African-American and Hispanic clients, center type, organizational affiliation, region, size, accreditation status, presence of an integrated care program, and physician availability. Results: SSRIs were available in 48% of the centers. Logistic regression analysis indicated that greater minority representation in centers’ caseloads was negatively associated with the availability of SSRIs. The association between the percentage of African-American clients and SSRI availability was fully mediated by the addition of factors related to treatment inputs, such as the presence of a physician on staff or contract and the presence of an integrated care program. With organizational and treatment characteristics factored out, there was a negative association between the percentage of Hispanic clients and the availability of SSRIs. Conclusions: Although SSRIs were available in nearly half of these substance abuse treatment settings, racial and ethnic disparities exist in the availability of these medications.

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