Benefits of Dual Diagnosis Treatment:  
2013 Patient Outcomes for Substance Use and Mental Health Disorders  

FRN Research Report March/April 2014

Introduction

New attitudes about substance abuse are shining a light on the role of treatment centers. Does addiction treatment really work?

Recovery is possible, as this original, third party-verified research will demonstrate.

All treatment programs are not created equal, however. Data from large-scale national studies on treatment programs show that the best treatment facilities work with patients to achieve the following goals (Simpson, 2003):

- Encourage patient motivation for the treatment process
- Identify the severity of addiction
- Offer services that are appropriately intense
- Ensure engagement in the therapeutic process
- Provide follow-up support, including referrals to community-based social supports

As the body of research into effective treatments grows and health insurance options expand, treatment centers see more patients. Facilities offering evidence-based treatments, such as Cognitive Behavioral Therapy to build life skills and Motivational Interviewing to promote self-motivated change, see the best outcomes. Foundations Recovery Network offers these effective treatments and other therapies, giving patients better-than-average outcomes.

Foundations Recovery Network’s Internal Research

Foundations Recovery Network operates nine integrated treatment centers across three states: California, Georgia and Tennessee. From its Nashville, Tenn., headquarters, the FRN research department evaluates patient data, satisfaction surveys and outcome results, actively incorporating this information in the management and decision-making processes.

This paper discusses patient outcomes and offers data collected at three of FRN’s residential facilities: The Canyon at Peace Park (Malibu, Calif.), Michael’s House (Palm Springs, Calif.) and La Paloma (Memphis, Tenn.). The results track patients at intake through one-year post treatment. The information in this report is significant because historically, most substance abuse research is conducted in public treatment facilities, while FRN’s research is conducted in private, for-profit residential treatment centers. The research, therefore, offers information about a potentially different population.

Substance Use and Mental Health Treatment

Not all addiction treatment programs are the same. FRN offers an integrated treatment model, which provides comprehensive treatment for substance use and mental health disorders.
concurrently. Integrated treatment that serves dually diagnosed patients is widely recognized as beneficial but is still not offered in many addiction treatment facilities. Around 18% of addiction treatment and 9% of mental health programs meet the criteria of Dual Diagnosis Capable services (McGovern, Lambert-Harris, Gotham, Claus, & Xie, 2014).

Integrated treatment also offers better outcomes for severe cases of addiction, including users of multiple substances and users with severe forms of mental illness, such as schizophrenia. In addition to offering addiction and mental health services as part of a single package, effective treatment includes individualized services. This treatment method assesses how motivated a person is to change behavior and offers tools for making changes (Drake, Mueser, Brunette, & McHugo, 2004).

Across the country, a minority of addiction treatment facilities, around 30%, offer any form of mental health services along with addiction treatment. Most of these services are offered at outpatient facilities, while only 19% of residential treatment programs offer them (SAMHSA, 2013a).

![Treatment at Residential Facilities: Fewer Patients Receive Mental Health Care](https://www.samhsa.gov/data/DASIS/NSSATS2012_Web.pdf)


**FRN Research Model**

Patients who enter treatment at FRN’s residential centers are offered the opportunity to participate in an ongoing study. Participants must sign Institutional Review Board approved consent prior to participation, and the follow-up study includes interviews at intake and again at 30 days, six months and one year post-discharge.

Data is collected using validated instruments, including the Addiction Severity Index, Treatment Service Review and University of Rhode Island Change Assessment (URICA – Readiness for
Change Instrument). Responses from the research instruments are designed to assess several aspects of a person’s mental and physical functioning and all other aspects affecting a person’s life, including alcohol use, drug use, psychiatric symptoms, legal issues, family/social relationships, medical issues and employment issues.

FRN is committed to scientifically-sound research. All results reported herein are independently verified by a third party. Both research enrollment and response rates exceed federal minimum standards, further adding to the validity of findings.

**Our Findings: 2013 Clinical Outcomes, Alcohol Use**

FRN’s integrated treatment model contributes to positive patient outcomes. Year-over-year the organization sees improvement in its patient outcomes.

For 2013, patients reduced their average alcohol use considerably. Patients reported using alcohol an average of between 11 and 12 days a month at intake. At one year, the average monthly use was between two and three days. The one-year rates of reduced drinking compared to previous years. Results in 2013 were even more significant because patients reported more severe drinking habits at intake. In fact, patients reported drinking to intoxication 7.5 days fewer per month in 2013 compared to earlier years.

![Alcohol Use In Past 30 Days](chart)

Source: Foundations Recovery Network, 2013 Outcomes

The majority of patients reported no alcohol use at one year, shown by the following table:

<table>
<thead>
<tr>
<th>Rate of Alcohol Consumption</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not drink any alcohol in the 30 days prior to one year interview</td>
<td>65%</td>
</tr>
<tr>
<td>Did not drink or drank less than monthly in 6 months prior to one year interview</td>
<td>74%</td>
</tr>
<tr>
<td>Did not drink to intoxication in 6 months prior to one year interview</td>
<td>79.2%</td>
</tr>
</tbody>
</table>

Source: Foundations Recovery Network, 2013 Outcomes
Patients at Foundations Recovery Network facilities are similar to the nation as a whole when it comes to problems with substances and severity of substance abuse. The United States sees the most problems with alcohol usage. Around 6.5% of Americans age 12 and older are heavy drinkers, with 23% reporting episodes of binge drinking (SAMHSA, 2013b).

**Our Findings: 2013 Clinical Outcomes, Drug Use**

Illicit drug use, which includes illegal drugs and non-medical use of prescription drugs, is a significant issue for people 18-25 years-old. Around 21% of adults age 18-25 report illicit drug use, while 9.5% of 12- to 17-year-olds report usage and 7% of adults 26 and older (SAMHSA, 2013b).

In 2013, FRN patients reported using illegal drugs an average of sixteen days a month at intake. At one-year post treatment, average drug use fell to two days a month. Results were similar to the previous two years.

![Illegal Drug Use In Past 30 Days](image)

Source: Foundations Recovery Network, 2013 Outcomes

In addition, the majority of patients reported no drug use at one year, shown by the following table:

<table>
<thead>
<tr>
<th>Rate of Drug Use</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not use drugs in the 30 days prior to one year interview</td>
<td>82%</td>
</tr>
<tr>
<td>Did not use multiple drugs in 6 months prior to one year interview</td>
<td>88%</td>
</tr>
</tbody>
</table>

Source: Foundations Recovery Network, 2013 Outcomes

The lower rate of multiple substance use was another important trend noted. People who use multiple substances have more severe addictions and require more intense treatment. At one year, patients reported only one day of use in the previous months, a decrease of nearly seven days per month.

In a landmark study of national treatment outcomes, researchers found patients in all types of treatment, outpatient and residential, reduced cocaine use by 50% (Hubbard, Craddock, Flynn,
Anderson, & Etheridge, 1997). In his analysis of reported outcomes from over 400 substance abuse outcome reports, White (2012) noted that of the 50 adult clinical studies reporting abstinence rates, the average abstinence rate was 30.3%.

Our Findings: 2013 Mental Health Outcomes

It is common for Americans to have a substance use disorder along with a mental health disorder. Roughly 24% of Americans with mental illness also suffer from addiction. The incidence is even higher among adults with substance use disorders: 20.7 million (40.7%) adults with substance use problems have a co-occurring mental illness. In comparison, the rate of mental illness among adults without a substance use disorder is 16.5% (SAMHSA, 2013c).

FRN’s integrated treatment model treats people with co-occurring conditions by addressing addiction and mental illness simultaneously. The company’s commitment to its integrated treatment model puts it in the top tier of addiction treatment programs, according to an independent assessment conducted by Dr. Mark McGovern, a member of Dartmouth Psychiatric Research Center. FRN annually meets the criteria for Dual Diagnosis Enhanced (DDE) services, a feat only achieved by the top 5% of addiction treatment programs.

FRN patients saw marked improvement in their psychological problems after treatment. Patients reported an average of between 20 and 22 days of psychological problems in the month prior to intake; in the month prior to the one-year post treatment interview, the number of days dropped to an average of between seven and nine.

![Psychological Problems Graph](image)

Source: Foundations Recovery Network, 2013 Outcomes

While 86% of patients reported being moderately, considerably or extremely bothered by emotional or psychological symptoms at intake, at one year less than half (40%) reported problems.

Conclusion

FRN’s integrated treatment program sees positive outcomes year after year. Several factors are
behind the continued improvement rates:

- Patients receive evidence-based therapies, such as Cognitive Behavioral Therapy, Dialectical Behavior Therapy skill sets and Motivational Interviewing
- Other specialized therapies are offered, including trauma resolution therapies, such as Eye Movement Desensitization and Reprocessing (EMDR)
- Follow-up strategies keep in contact with patients and assess their well-being

Overall, FRN sees quality patient outcomes and is recognized for its evidence-based therapeutic practices. At one-year post treatment, abstinence rates are nearly double those found by SAMHSA researchers in their report, “Recovery/Remission from Substance Use Disorders: An Analysis of Reported Outcomes in 415 Scientific Reports, 1868-2011” (White, 2012).

Foundations Recovery Network is committed to research that improves treatment for all addicted individuals. If you would like to speak with an admissions coordinator today or if you would like to learn more about our research methods and programs, please visit us online at http://www.foundationsrecoverynetwork.com or call us directly at 877-714-1318.
References


Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment. (2005). *Substance Abuse Treatment for Persons With Co-Occurring Disorders.* (Treatment Improvement Protocol (TIP) Series 42). Rockville, MD: Substance Abuse and Mental Health Services Administration.