

# Substance Use Disorder (SUD): The Need for Accountability in Context of SUD Treatment and Care

## Abstract

- Substance use disorder (SUD) is an evolving public health crisis that has revealed the lack of systemic support and productivity in converting existing research into practice
- The goal of this poster is to bring awareness to the complexity of substance use disorder (SUD), and the need for better accountability in a care system that supports a sustained recovery. I would also like to bring light to specific organizations like American Society of Addiction Medicine (ASAM) and their efforts in making national initiatives to implement a change.

Figure 1. Substance Use Disorder Continuum of Care



## Introduction

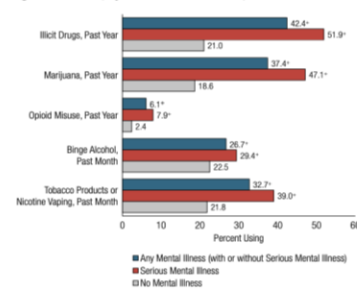
- Substance use disorder (SUD) is a chronic medical condition that is led on by recurrent compulsive use of drugs, alcohol, or medication. Like other chronic illnesses, there is no absolute cure, lifelong symptom management is necessary.
- There remains a substantial gap between applying research findings to improve clinical care as well as inconsistencies that are barring access to the existing limited care.



## Results

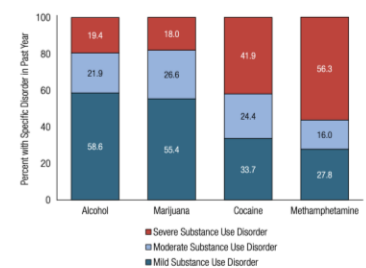
- Only 14.6% of 48.5 million diagnosed with SUD in the past year received treatment
- Some common reasons why no treatment was received include not feeling ready to stop using, concern related to stigma, financial burden, and not knowing how or where to find treatment
- United Behavioral Health denied over 50,000 coverage claims for mental health & SUD based on medical necessity criteria that were more restrictive and inconsistent compared to generally accepted standards of care developed by medical professionals
- American Society of Addiction Medicine (ASAM) criteria's multidimensional assessment gives level of care and treatment recommendations based upon biopsychosocial factors and influences.
- Partnership between American Society of Addiction Medicine (ASAM) and Commission on Accreditation of Rehabilitation Facilities (CARF) introduced a certification program for residential facilities to demonstrate alignment of care.

Figure 44. Past Year or Past Month Substance Use: Among Adults Aged 18 or Older; by Level of Mental Illness, 2023



\* Difference between this estimate and the estimate for adults aged 18 or older without mental illness is statistically significant at the .05 level.

Figure 34. Substance Use Disorder Severity Level for Specific Substances in the Past Year: Among People Aged 12 or Older with a Specific Substance Use Disorder; 2023



Note: The percentages may not add to 100 percent due to rounding.

Note: There are 11 criteria from the Diagnostic and Statistical Manual of Mental Disorders, 5th edition, that apply to these substances. People who meet two or three criteria are considered to have a "mild" disorder; those who meet four or five criteria are considered to have a "moderate" disorder; and those who meet six or more criteria are considered to have a "severe" disorder.

## Methodology

- Information and evidences were sourced from an analysis of scholarly articles within the past 5 years. Articles selected would specifically reveal the nation's progress in SUD research implementation, identification of barriers, and current available resources to aid in increasing progress towards consistency.

## Conclusion

- In summary, while the care system for substance use disorder (SUD) is far from complete or adequate, many organizations and institutions are actively working towards closing the gap and bringing accountability to the field of addiction medicine.
- Increasing society's understanding about SUD will aid in decreasing stigmas and introduce opportunities of treatment development and updates. Which in turn will encourage those who have unmet treatment needs to come forward and initiate their journey to recovery.