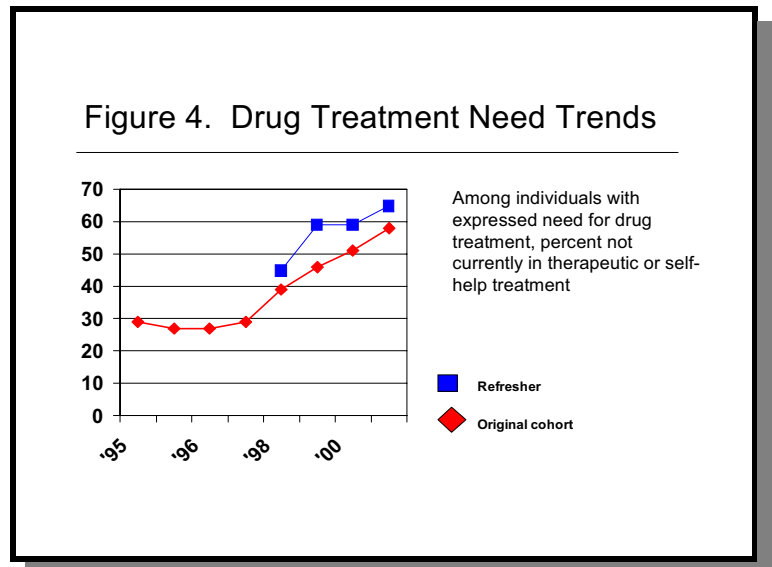


## Issue Area: Unmet Needs

In a number of CHAIN reports we examined expressions of need for various services, the subsequent receipt of services, and self-reported resolution of the expressed needs. Among the reports which featured these assessments of need and unmet need are Technical Reports 8 and 16, and Update Reports 3, 5, 6, 7, 8, 9, 16, 22, 24, 28, and 29. In the most direct measure of unmet needs, we asked respondents if they needed a particular service, such as housing, transportation, child care, job placement, etc., and then subsequently asked if they received any practical help from a professional or someone affiliated with an agency, and whether or not the problem was resolved or continued to persist. In several reports we explored “objective” expressions of need, such as unstable housing (presumed need for housing), low mental health scores (presumed need for mental health services), or current intensive drug or alcohol use (presumed need for drug treatment). Several reports looked at the “lagged” effect – in other words, does a report of case management in an earlier wave lead to the resolution of a specific problem (such as housing) in a subsequent wave?

### Key Findings

- Overall, the level of unmet need has diminished among the CHAIN cohort. Among the possible explanations are: (a) the care system has improved at resolving needs, (b) individuals have become more experienced at resolving their needs, (c) the need is no longer expressed, even though it persists, or (d) over time the people with the greatest unmet needs (such as the unstably housed) have been lost to follow-up. It is likely that all four of these explanations are at work in the diminishing trend line.



- Some needs, such as the need for drug treatment illustrated above, have increasingly been unmet. Figure 4 illustrates an unmet demand for service: among individuals who say that treatment or further treatment is moderately, considerably, or extremely important, the trend lines display the proportion currently in therapeutic or self-help drug or alcohol treatment.
- Certain groups report the greatest proportion of unmet needs. Single women with children and men living alone are the likeliest groups to report unmet needs. The single women, in particular, are the likeliest to report needs for appropriate medical care, and also the likeliest to report lower rates of HAART and lower rates of adherence.

**Table 4b. Trends in Alcohol or Drug (AOD) Treatment and Interest in AOD Treatment**

Interview	In therapeutic of self-help AOD treatment			Treat/further treatment is moderately, considerably, or extremely important		
	TOTAL	ORIGINAL COHORT	REFRESHER COHORT	TOTAL	ORIGINAL COHORT	REFRESHER COHORT
1	39%	39%		45%	45%	
2	41%	41%		44%	44%	
3	40%	40%		47%	47%	
4	44%	44%		45%	45%	
5	37%	39%	33%	48%	51%	44%
6	31%	34%	25%	53%	54%	52%
7	27%	32%	18%	42%	45%	36%
8	21%	24%	17%	43%	46%	40%

**Comments on Table 4b and Figure 4**

The upward trend of unmet need displayed in Figure 4 suggests that either the proportion of people in drug treatment is declining over time, the proportion expressing an interest in treatment is increasing over time, or both are occurring simultaneously. Table 4 illustrates these two underlying variables, and further displays the differences between the original cohort and the refresher cohort. It would appear from Table 4 that, overall, the proportion of individuals who report an interest in treatment or further treatment is relatively stable (more so for the original cohort), whereas the proportion of individuals who report that they are currently in therapeutic or self-help AOD treatment is clearly on the decline. From this one might infer that although the need or “demand” is relatively constant, the access or acceptance of treatment is on the decline, and therefore there is an increasingly unmet need for alcohol or drug treatment over time.

As a methodological addendum, the measurement of expressed interest in AOD treatment has been refined from that reported in the original Retrospective report. Whereas in the original report, expressed interest was characterized by a respondent who answered that he or she felt that treatment or further treatment was “slightly, moderately, considerably, or extremely important,” in this revised analysis the measurement has been restricted to individuals who felt that treatment or further treatment was “moderately, considerably, or extremely important,” thereby eliminating those who said treatment was “slightly” important from the measure of expressed interest.