

Summary of Comments and SAMHSA's Responses as of 05/19/2026

Comment Number	Date Received	Organizations	Summary of Comments	SAMHSA's Response
1	3/23/26	FIRN, Inc.	<p>This commenter argues that while NSDUH is valuable for estimating population-level substance use and treatment need, it is not designed to measure treatment capacity, infrastructure, or actual service delivery. They explain that NSDUH and other related datasets—such as state treatment episode data, facility data, and CDC overdose data—differ in scope, structure, and populations covered, making it difficult to compare them or develop a clear picture of treatment need, utilization, and capacity at the state level. The commenter recommends presenting NSDUH findings in a more accessible state-level format and improving alignment across datasets to better support planning, resource allocation, and policy decisions.</p>	<p>As the commenter notes, NSDUH provides population estimates of the need for treatment for the use of alcohol or drugs, receipt of substance use treatment, and the perceived unmet need for treatment. In addition to population estimates for these outcomes at the national level, NSDUH provided state-level estimates in 2024 for the receipt of substance use treatment in the past year, the need for treatment, and not receiving treatment among those who were classified as needing it (https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/state-releases/nsduh-state-result-data-tables).</p> <p>As a population survey of individuals in the civilian, noninstitutionalized population, measurement of treatment system capacity or infrastructure is beyond the scope of NSDUH. However, NSDUH does provide national-level data on barriers to the receipt of substance use treatment that are related to capacity and infrastructure, such as people not finding a provider to whom they wanted to go, no openings in their preferred program or access barriers related to childcare or workable appointment times. In addition, NSDUH data consistently show that the large majority of people who had a substance use disorder (SUD) in the past year but did not receive treatment in that period did not think they needed it. In 2024, for example, of an estimated 40.7 million adults aged 18 or older who had an SUD in the past year and did not receive treatment, only 1.7 million (4.4 percent) sought treatment or thought they should get it, with the remaining 95.6 percent thinking that they did not need treatment. Thus, a bigger challenge than capacity or infrastructure appears to be people's readiness to seek treatment for SUDs. Moreover, among adults in 2025 who had an SUD, did not receive treatment in the past year, and had a perceived unmet need for treatment, a lack of openings was the least common reason for not receiving treatment (CBHSQ, 2025).</p> <p>References: Center for Behavioral Health Statistics and Quality. (2025). Key substance use and mental health indicators in the United States: Results from the 2024 National Survey on Drug Use and Health (HHS Publication No. PEP25 07 007, NSDUH Series H 60).</p> <p>Substance Abuse and Mental Health Services Administration. (n.d.). National Survey on Drug Use and Health (NSDUH): State releases. Retrieved May 22, 2026, from https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/state-releases/nsduh-state-result-data-tables.</p>