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Senior drug addicts increasing

USA must prepare for their treatment, abuse experts say

By Charisse Jones
USA TODAY

NEW YORK — Evelyn Barnette first got high when she was 19, and for nearly 40 years hid her marijuana and cocaine use behind a mask of respectability. She began using crack three years ago, and that nearly devoured her soul. Thoughts of suicide finally compelled her to seek help.

So, she sits with others in their 50s and 60s, a circle of peers, speaking of addiction and healing.

"I realized I wanted help," says Barnette, 56, a resident at **Odyssey House**, an alcohol and drug treatment center in New York City. "But I was older and I felt embarrassed to go into a program with young kids. . . . I was desperate to get into this program."

It is a largely unforeseen consequence of the aging of America. As the elderly population continues to grow and baby boomers move into their senior years, the number of older adults who abuse drugs — from pain pills to marijuana and cocaine — is likely to increase. And the nation should prepare to meet the special needs of older addicts, says Ron Hunsicker of the National Association of Addiction Treatment Providers.

"There's such a huge increase in the number of folks 55 and older happening that we're seeing a lot more people in that group using illegal drugs," says Marvin Seppala, chief medical officer of the Hazelden Foundation, an alcohol and drug rehabilitation center based in Center City, Minn.



Photos by Todd Pliitt, USA TODAY

Working with kids: Mildred Simmons, 66, a recovering alcoholic, helps at the day care at Odyssey House in Harlem.

Alcohol is the most common substance abused by older adults, followed by prescription drugs, Seppala says. But people 50 and older who entered treatment for heroin abuse rose from 7,000 to 27,000 between 1992 and 2002, according to the federal Substance Abuse and Mental Health Services Administration. And those treated for cocaine addiction increased from 3,000 to 13,000.

The administration projects that the number of people 50 and older who will need treatment for alcohol or drugs will nearly triple in the next 15 years, to 4.4 million in 2020 from 1.7 million in 2001.

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Evelyn Barnette

"What we see is basically a steady trend in terms of alcohol admissions, but it's the illicit drug admissions that have been going up over the last 10 years," says Joe Gfroerer of the substance abuse administration.

'Why deal with that?'

The problem crosses ethnic lines, in the suburbs, cities and rural communities, says Robert Higgins of New York state's Alcoholism and Substance Abuse Services. Yet drug abuse among seniors is largely hidden. Society is more likely to envision a young man as a cocaine addict or marijuana smoker than an elderly grandmother.

"There's kind of a laissez-faire attitude. 'Why deal with that? He's already 75. Who cares if he keeps using?'" Sepala says. "And the truth is it could hurt significantly."

A key reason for the increase is baby boomers, those born between 1946 and 1964 who often embraced more casual attitudes about marijuana and other drugs. As they age, they may not abandon their drug use or may return to it to cope with loneliness and boredom.

"We're discovering that we're occasionally arresting people in their 40s, 50s and 60s who are making methamphetamine and wanting to get high," says John Benschoff, professor of rehabilitation counseling at Southern Illinois University in Carbondale, Ill. "It would be unheard of for my 85-year-old mother to pick up a joint. But for someone who used marijuana throughout life . . . that might not be so unheard of."

About one-third of older adults who abuse alcohol or illegal drugs began recently, while two-thirds have been using them longer, Higgins says.

Odyssey House started its residential rehabilitation program for those 55 and older with a handful of beds in 1997. It currently has 63 clients. In the fall, Odyssey House launched an outpatient program for seniors based in the Bronx. New York State began a program nearly two years ago to train counselors in geriatric addictions, and that is being adapted to teach those working in nursing homes, churches and other centers that cater to seniors.

In Detroit, people 50 and older accounted for roughly 20% of the 7,787 admissions last year for substance abuse treatment, says Kanzoni Asabigi, deputy director for Detroit's Bureau of Substance Abuse. That increase prompted the city to contract with an agency that focuses on seniors seeking help.

Still, nationwide, there are relatively few drug treatment programs for seniors. Fewer than 20% of about 13,700 licensed substance abuse programs offer help specifically for the elderly, according to a 2000 survey by the University of Iowa.

Asabigi and some other treatment providers say seniors don't need separate drug rehab programs but do need



Getting help: Recovering drug addicts older than 55 attend a meeting led by John Roberts, 63, inside Odyssey House drug rehabilitation center in Harlem.



Cleaning up: Ross Martinez, 56, who has been addicted to heroin since his 20s, makes his bed at Odyssey House. Many residents have used drugs for decades.

medical treatment for health problems worsened by their addictions, such as diabetes and high blood pressure.

Seniors 'more receptive'

Yet Otto Feliu of Crouse Hospital in Syracuse, N.Y., and several other drug counselors say seniors tend to do better among their peers.

During the past year at Odyssey House, those in the ElderCare program had a 55% completion rate in comparison to 25% to 30% in general for adults in long-term residential treatment.

"They're more receptive, because they've bottomed out more," says Peter Provet, president of Odyssey House.

Ross Martinez, 56, a native New Yorker, used heroin for more than 35 years but has been sober for 10 months. He entered treatment before, about 25 years ago. "But I was young. I was strong. I was wild," he says.

"As you get older you get tired," Martinez says, his voice dropping an octave. "That's why I came to the ElderCare program, because I knew there were

other people who were tired now, too."

Residents speak of spending quality time with their grandchildren for the first time, of now wanting to tend to their health.

By Wednesday, Barnette had been sober 90 days. "I have children in my life," she says of her great-nieces and nephews. "I feel I can look at them instead of trying to hide from them. And that's a good feeling, because I was hiding for so long. Now I can face the world."

