

The TEDS Report

August 5, 2010

Sociodemographic Characteristics of Substance Abuse Treatment Admissions Aged 50 or Older: 1992 to 2008

In 2008, adults aged 50 or older comprised approximately 31 percent of the total U.S. population.¹ This older adult population is projected to place a growing burden on the substance abuse treatment system.² Data show a substantial rise in the number of admissions to substance abuse treatment among this age group, as well as significant changes in the sociodemographic characteristics of these treatment admissions. Characteristics of treatment admissions aged 50 or older can be examined with the Treatment Episode Data Set (TEDS), which collects information on the

characteristics of persons admitted to substance abuse treatment. This report examines the sociodemographic characteristics of adult treatment admissions aged 50 or older (also referred to as “older admissions”) from 1992 to 2008. A previous report examined changes in the substances of abuse among this population.³ In 1992, there were approximately 102,700 substance abuse treatment admissions aged 50 or older. By 2008, the number more than doubled to approximately 231,200.

In Brief

- Between 1992 and 2008, the number of admissions to substance abuse treatment aged 50 or older more than doubled (from approximately 102,700 in 1992 to 231,200 in 2008)
- Unemployment among older treatment admissions rose from nearly one fifth (19.4 percent) in 1992 to nearly one third (31.0 percent) in 2008, while full-time employment declined (from 23.4 percent in 1992 to 16.7 percent in 2008)
- Among admissions aged 50 or older, wages/salary as a principal source of income dropped from 32.3 percent in 1992 to 24.4 percent in 2008

Gender and Race/Ethnicity

Between 1992 and 2008, there was an increase in the proportion of female admissions aged 50 or older (18.1 to 25.1 percent) (Figure 1). However, males continued to comprise the majority of this treatment population.

In 2008, as in 1992, non-Hispanic Whites formed the majority of older admissions. However, during the 17-year period, the proportion of non-Hispanic White admissions decreased (from 65.8 percent in 1992 to 55.6 percent in 2008) while the proportion of non-Hispanic Black admissions and Hispanic admissions increased (from 19.9 to 28.8 percent and from 9.8 to 11.3 percent respectively) (Figure 2).

Education, Employment, and Income

Overall, the education level of older treatment admissions increased over time. Among this age group, the percentage of these admissions who were high school graduates increased (from 35.1 percent in 1992 to 40.8 percent in 2008) as well as those who had completed some college (from 22.5 percent in 1992 to 31.3 percent

Figure 1. Substance Abuse Treatment Admissions Aged 50 or Older, by Gender: 1992, 2000, and 2008

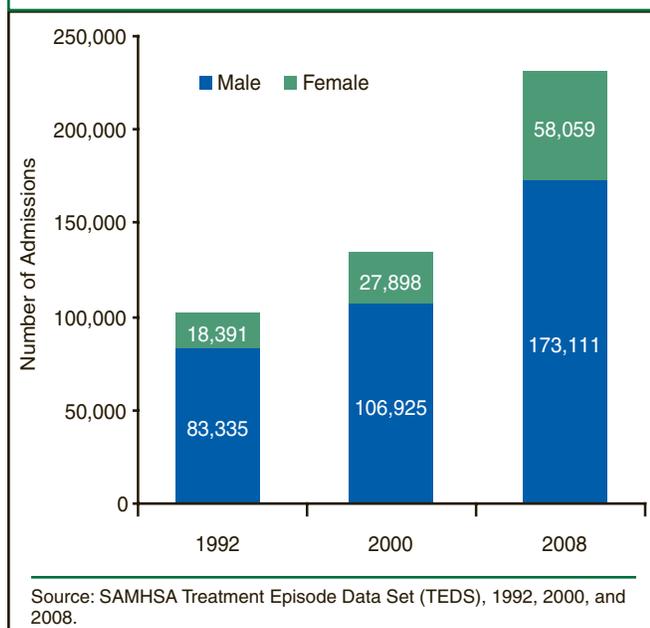
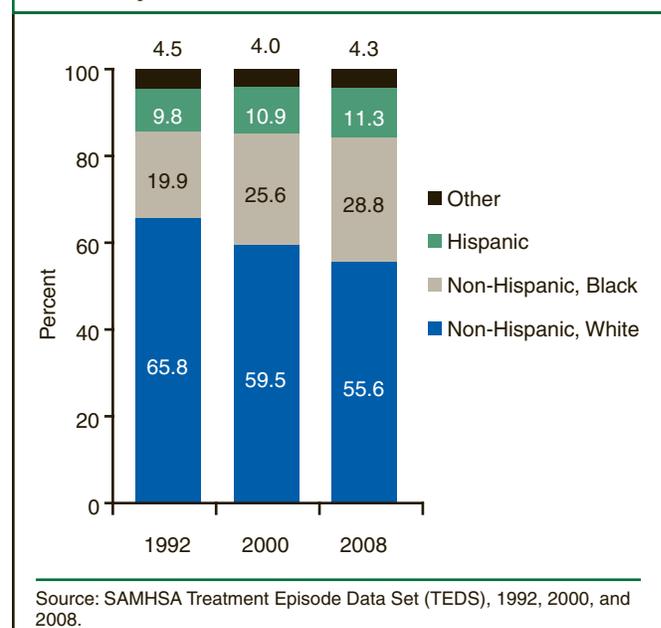


Figure 2. Substance Abuse Treatment Admissions Aged 50 or Older, by Race/Ethnicity: 1992, 2000, and 2008



in 2008). Admissions having less than a high school diploma or GED decreased from 42.4 percent in 1992 to 27.9 percent in 2008.

Unemployment among older treatment admissions rose from nearly one fifth (19.4 percent) in 1992 to nearly one third (31.0 percent) in 2008. In comparison, the proportion employed full-time declined (from 23.4 percent in 1992 to 16.7 percent in 2008) (Figure 3).

The principal source of income for admissions in this age group also changed over time. Among admissions aged 50 or older, wages/salary as a principal source of income dropped from 32.3 percent in 1992 to 24.4 percent in 2008 (Figure 4).⁴ Further, the percentage of admissions in this age group that reported that they had no principal source of income at the time of admission to substance abuse treatment more than doubled from 1992 (11.0 percent) to 2008 (28.8 percent).

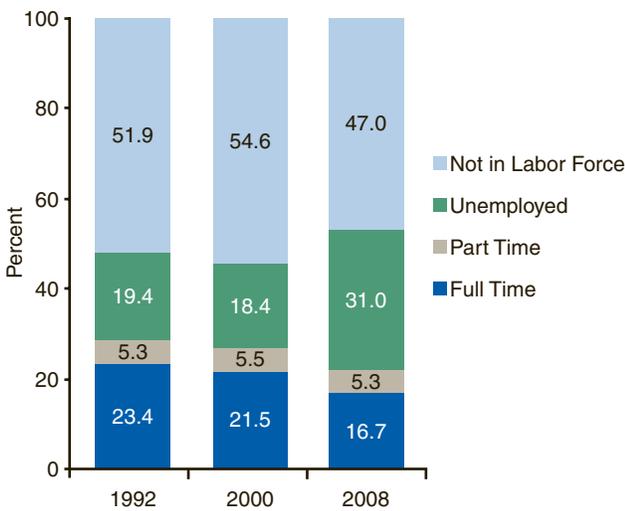
Marital Status and Living Arrangement

The data also show shifting trends in marital status and types of living arrangements (homeless, independent living, or dependent living). In 2008, a greater proportion of older treatment admissions reported that they had never married than in 1992.⁵ Admissions that had never married more than doubled between 1992 (13.2 percent) and 2008 (30.3 percent), while there were decreases in the proportions of those who were currently married (33.3 percent in 1992 vs. 21.5 percent in 2008) or divorced/widowed (43.9 percent in 1992 vs. 39.9 percent in 2008). Homelessness slightly increased from 15.9 percent in 1992 to 19.5 percent in 2008, while the percentage of admissions residing in independent living situations decreased from 72.4 to 67.1 percent.⁶

Discussion

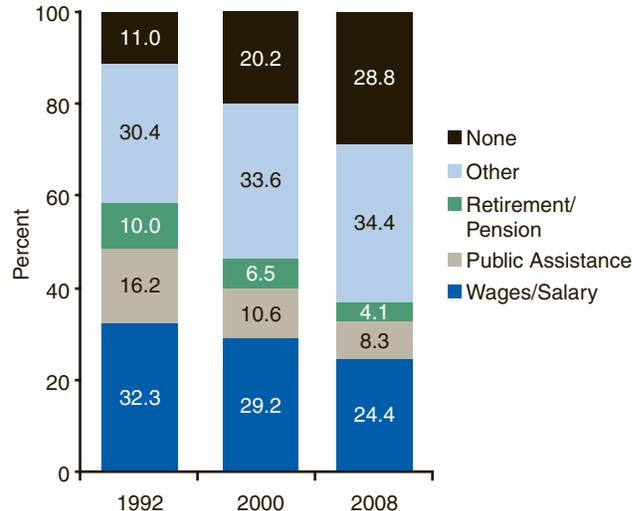
The information provided in this report depicts the changing sociodemographic and socioeconomic characteristics of substance abuse treatment admissions aged 50 or older, and highlights possible areas of need among this group. Unemployment, lack of income, and homelessness among these treatment admissions grew between 1992 and 2008. These findings suggest that this population may need financial assistance with the costs associated with substance abuse treatment. Additional case management programs and services may be needed to help individuals in this age group who are currently in treatment or transitioning out of treatment find housing and employment. The data show that increasing numbers of admissions in this age group reported that they had never married.

Figure 3. Substance Abuse Treatment Admissions Aged 50 or Older, by Employment Status: 1992, 2000, and 2008



Note: Percentages may not sum to 100 percent due to rounding.
Source: SAMHSA Treatment Episode Data Set (TEDS), 1992, 2000, and 2008.

Figure 4. Substance Abuse Treatment Admissions Aged 50 or Older, by Principal Source of Income: 1992, 2000, and 2008



Note: Percentages may not sum to 100 percent due to rounding.
Source: SAMHSA Treatment Episode Data Set (TEDS), 1992, 2000, and 2008.

This finding draws attention to a possible need for additional social support for these admissions as they progress through and transition out of treatment. Finally, the growing number of admissions to treatment aged 50 or older who were female, Black, or Hispanic indicate the need for gender and culturally appropriate services.

End Notes

¹ U.S. Census Bureau, Population Division. Table 1: Annual Estimates of the Resident Population by Sex and Five-Year Age Groups for the United States: April 1, 2000 to July 1, 2008 (NC-EST2008-01. Release date: May 14, 2009. Available at: <http://www.census.gov/popest/national/asrh/NC-EST2008/NC-EST2008-01.xls>

² Gfroerer, J., Penne, M., Pemberton, M. & Folsom, R. (2003). Substance abuse treatment need among older adults in 2020: The impact of the aging baby-boom cohort. *Drug and Alcohol Dependence*, 69, 127-135.

³ Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (June 17, 2010). *The TEDS Report: Changing Substance Abuse Patterns among Older Admissions: 1992 and 2008*. Rockville, MD.

⁴ *Source of income support* is a Supplemental Data Set item. The 15 States and jurisdictions in which it was reported for at least 75 percent of all admissions aged 12 or older in 1992, 2000, and 2008—HI, IA, ID, IL, KS, ME, MN, ND, NE, NV, NY, OH, PA, RI, SD—accounted for 32.2 percent of all substance abuse treatment admissions aged 12 or older in 1992, 35.6 percent of all such admissions in 2000, and 38.2 percent of all such admissions in 2008.

⁵ *Marital status* is a Supplemental Data Set item. The 32 States and jurisdictions in which it was reported for at least 75 percent of all admissions aged 12 or older in 1992, 2000, and 2008—AL, AR, CO, FL, HI, IA, ID, IL, IN, KS, LA, MA, MD, ME, MI, MN, MO, NC, ND, NE, NH, NJ, NV, OK, OR, PA, RI, SC, SD, TN, TX, WY—accounted for 57.3 percent of all substance abuse treatment admissions aged 12 or older in 1992, 54.9 percent of all such admissions in 2000, and 54.1 percent of all such admissions in 2008.

⁶ *Living arrangement* is a Supplemental Data Set item. The 25 States and jurisdictions in which it was reported for at least 75 percent of all

admissions aged 12 or older in 1992, 2000, and 2008—CO, HI, IA, ID, IL, IN, KS, LA, MA, MD, ME, MI, MN, ND, NE, NH, NJ, NV, NY, OH, OK, OR, RI, SD, TX—accounted for 59.5 percent of all substance abuse treatment admissions aged 12 or older in 1992, 58.1 percent of all such admissions in 2000, and 60.8 percent of all such admissions in 2008.

Suggested Citation

Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (August 5, 2010). *The TEDS Report: Sociodemographic Characteristics of Substance Abuse Treatment Admissions Aged 50 or Older: 1992 to 2008*. Rockville, MD.

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Findings from SAMHSA's Treatment Episode Data Set (TEDS) for 1992 to 2008

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The Treatment Episode Data Set (TEDS) is a compilation of data on the demographic characteristics and substance abuse problems of those aged 12 or older admitted for substance abuse treatment. TEDS is one component of the Drug and Alcohol Services Information System (DASIS), an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). TEDS information comes primarily from facilities that receive some public funding. Information on treatment admissions is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once. State admission data are reported to TEDS by the Single State Agencies (SSAs) for substance abuse treatment. There are significant differences among State data collection systems. Sources of State variation include completeness of reporting, facilities reporting TEDS data, clients included, and treatment resources available. See the annual TEDS reports for details. TEDS received approximately 1.9 million treatment admission records from 48 States, the District of Columbia, and Puerto Rico for 2008.

Definitions for demographic, substance use, and other measures mentioned in this report are available in the following publication: Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (December 11, 2008). *The TEDS Report: TEDS Report Definitions*. Rockville, MD.

The TEDS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and by RTI International in Research Triangle Park, North Carolina (RTI International is the trade name of Research Triangle Institute). **Information and data for this issue are based on data reported to TEDS through August 31, 2009.**

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