

silent treatment

ADDICTION IN AMERICA

Look for this
Five-Part
PRINT and ONLINE series
Examining
Addiction

Over the past 20 years, studies have offered striking new research on the genetic patterns of addiction, leading to new medications, connected services and increasing recognition of addiction as a chronic disease. Still, of the nearly 23 million Americans addicted to alcohol and drugs, nine out of 10 don't find their way to readily available treatment for reasons that include denial, shame, expense and an often fatal misunderstanding of the disease that holds them in its grip.

"Silent Treatment: Addiction in America," a five-part newspaper series produced by Public Access Journalism and distributed nationwide through Knight Ridder/Tribune (KRT), will detail the efforts to bring addiction out of the closet.

The series will be distributed free on Aug. 2 to all U.S. newspapers at www.krtdirect.com/treatment.

Look for:

- 5 main stories, each with sidebars (see inside for details)
- Photos
- Graphics
- "Silent Treatment: Addiction in America" logo
- Comprehensive tips, guides and resources for readers
- Media Toolkit with sources and background information
- Paginated reprint of entire series
- Web banners, buttons, and interactive features for your Web sites
- Public Service Announcements on addiction issues



Coming Aug. 2

PAJ
Public Access
Journalism

KRT

To localize stories: In conjunction with National Recovery Month (September), a source list of national, state and community advocacy groups and agencies will be posted for journalists at www.krtdirect.com/treatment, as well as resources for local stories, follow-ups and a comprehensive calendar of community events.

A network of organizations and advocacy groups focused on addiction prevention, treatment and recovery also may contact you to help identify sources for local tie-in stories, provide localized lists of resources and highlight community efforts and events.

"Silent Treatment: Addiction in America"

Available August 2 through Knight Ridder/Tribune News Service
www.krtdirect.com/treatment

Breaking the Silence, by Thom Forbes

I am, at the least, a fourth-generation alcoholic. So, too, is my wife Deirdre. Our 22-year-old daughter, Carrick, is a recovering heroin addict. Most members of our family have been successful professionally — Deirdre's father was an attorney and judge; my side of the aisle brims with journalists who kept the proverbial pint flask in their desk drawers. My great grandfather was run over by a trolley car while covering a story in 1904 — still reporting, probably inebriated, but certainly a broken man who was estranged from his family. Many of his progeny shared his taste not only for booze but also for the illusory camaraderie that goes with it in bars and binges. Most of us got sober, but we've taken different routes to get there. To greater and lesser degrees, we functioned despite our illnesses, as many of you, or your loved ones, do today. More than 22 million of us above age 12 abuses or are

dependent on alcohol or illegal drugs, according to government figures, and that's not counting prescription drug misuse, a rising crisis. Sixty-three percent of Americans say that addiction — their own or another's — has had an impact on their lives. The market for mind-altering drugs is a lucrative one, indeed. But the money for treatment is harder to come by. The Bush administration's \$12.7 billion drug control budget request for 2007 earmarks 65 percent for interdiction and law enforcement and barely 36 percent for treatment and prevention. A National Center for Addiction and Substance Abuse report found that of the \$277 each American paid in state taxes to deal with substance abuse and addiction in 1998, only \$10 went toward treatment and prevention. *2000 words, with photos and graphic.*

● With three sidebars: Top 10 Addiction Myth-Busters; from pain to advocacy; resources on addiction treatment and recovery.

Research: Where It Starts, by William Celis

Changing attitudes about drug addiction, treatment and recovery are starting to take hold. New and effective medications now suppress drug cravings. Hospitals and treatment centers are making stronger efforts to prevent people with addictions from falling through the cracks as they are passed between institutions. And physicians, hospitals and private clinics have learned that treatment means not only medical attention but setting the stage — with social services, housing and job training — for a successful reentry into a challenging life without drugs and alcohol. The strongest treatment programs have always offered a smorgasbord of services under one roof or connected critical lifelines for their clients, but the push now across the country is fueled by groundbreaking brain research in the late 1980s indicating that addiction isn't driven by weak character, loose morals or lax discipline.

While downing those first few drinks or pills may be a choice, 20 studies conducted over nearly as many years indicate that, from there, genetics may take over for the one in two people who are predisposed to addiction. The discovery, coupled with new awareness of addiction as chronic disease, has led to a growing sense that a connect-the-dots approach is needed at every turn. *2000 words, with photos and graphic.*

Voice: Spring is here, and Pierre, an otherwise successful 46-year-old businessman, has been out of treatment about a dozen weeks now — "110 days," in the world of day-by-day recovery. But his month at the McShin Foundation in Richmond, Va., a critical time during which he addressed his addictions, his health and his ghosts, is still fresh on his mind. 850 words

● With three sidebars: How to choose, find and pay for quality treatment programs.

Youth: The Danger Years, by Richard Scheinin

Of the 1.6 million young people between the ages of 12 and 18 with serious alcohol and drug problems, fewer than one in 10 receive treatment. Of the estimated 175,000 who do, only about 25 percent stay in treatment for three months, as recommended by the National Institute on Drug Abuse; less than 50 percent stay for even six weeks, according to the Office of Applied Statistics in 2005. And there is virtually no continuing care for teenagers who struggle to stay straight once back in the larger community. Is it any surprise, then, that a 2002 study in the *Journal of Substance Abuse Treatment* found almost 80 percent of teenagers relapse within a year of treatment? There is an explanation for this public health embarrassment: The epidemic of drug and alcohol abuse among young people was until recently an invisible problem, either unrecognized, ignored or wishfully dismissed as too awful to be true. Until 1997, there were

only 14 studies published in the field of adolescent drug treatment, and those were widely regarded as being of questionable quality. Today, the field is moving from an uninhabited backwater to a state-of-the-art discipline, with dozens of new federal grants, hundreds of published studies, promising new interventions and — finally — evaluated program outcomes. *2100 words, with photos.*

Voice: Tony Landecker has two words tattooed on his back: "Never Forget." He was a child prodigy of substance abuse — drunk, crack smoker, paint huffer. Now 23 and living in special housing for students in recovery at Augsburg College in Minneapolis, he is a believer in the 12 Steps. "If you don't start having a higher power and start cleaning out the wreckage of the past," he says, "you don't have a chance." 1300 words.

● With three sidebars: Anatomy of a successful program; how to find treatment for adolescents and teens; a screening test for teens.



silent treatment

ADDICTION IN AMERICA

Disparity: The Silent Victims, by Sara Solovitch

Women: Though men still far outnumber them in arrests for drug-related crimes, women now represent the fastest-growing prison population nationwide for drug offenses. In 1996, the number of female state and federal inmates in jail for drug crimes grew at nearly double the rate of males. According to the Women's Prison Association, the growth "corresponds directly to the mandatory minimum sentencing laws in effect since the early 1970s. Since more women are convicted for non-violent, drug-related crimes than for any other, these sentencing policies have had a particularly profound effect on women." And specialized treatment is hard to come by. "Many women say it's easier to wind up in prison than to get treatment," says Malika Saada Saar, executive director of The Rebecca Project for Human Rights, a national advocacy group. "Treatment programs are turning women away because they have children. Or they're pregnant." 1800 words, with photos.

In the courts: As a longtime crack addict from Lexington, Ky., George Moorman was one more black male being churned through America's criminal justice system until one day in 1997, when he came before a drug court judge for stealing a camcorder. "He decided to put me in the

drug court program—he told me I was too intelligent to go to the penitentiary," recalls Moorman, who, at 54, just earned a doctorate in educational psychology from the University of Kentucky. "I'd already made the decision to change. But saying you're going to make a change doesn't mean you're going to do it. You have to have the support." A difficult task, as increasingly harsher sentencing mandates have stacked the numbers against African American men, resulting in prisons becoming the largest treatment centers in the country. 1250 words, with photo.

***Voice:** For the first time, things are on track for Holly, a cute, 28-year-old blonde and recent graduate of Fayette County Drug Court in Lexington, Ky., and a specialized women's aftercare treatment program. But this was her life before: "I was raised in an alcoholic home. My dad was very abusive to my mother growing up. I remember him one time pulling her hair out and me, being waist-high to him, hitting him as hard as I could. ... After my dad left the house, I was molested, sexually abused, and raped—all by a friend of the family." 1000 words.*

● With three sidebars: Segregated treatment programs for women; resources for women-specific and court support programs.

Recovery: The New Activism,

by Jodi Mailander Farrell

For a community of people — believed to number in the millions — who have learned to live with their addictions, overcoming an age-old silence is the next big challenge. A small but growing group of activists bubbling up from national, state and local recovery groups are hoping to end discrimination against addicts, drumming up moral and financial support by modeling their efforts after the public awareness campaigns that pushed breast cancer and AIDS onto the country's radar screen. "We've got to get the message out there," says Dorian Grey Parker, who has opened a Connecticut recovery house for other addicts since he got clean eight years ago, and turned out for last year's annual Recovery Walk. "I show up for the newcomers, who are finding hope in seeing people with multiple years of recovery, and I come out for the clueless. There is such a moral stigma attached to this disease. It all comes from not

understanding, but we can change that." The movement is made up of a sprawling underground network as diverse as addiction itself, united in its goal to make alcohol and drug addiction a public health issue. 2500 words, with photos.

***Voice:** Angela Lee's sobriety date — Dec. 20, 2000 — is embedded in her memory, like a birthday or a wedding anniversary. It's the day her body shut down from chronic alcohol poisoning, the diagnosis on her charts at the South Miami Hospital Addiction Treatment Program, where she spent the next 65 days. For Angela, 54,—a well-educated woman from an upper-middle class Miami family whose ambition at one time was to become a state senator—it was the beginning of a difficult journey she will be on until the day she dies. It's called recovery. 2200 words, with photo.*

● With three sidebars: Guide to first year of recovery; new paths to long-term recovery; resources for recovery groups.



silent treatment

ADDICTION IN AMERICA

*The series is produced and coordinated by Public Access Journalism LLC,
an independent media company that examines social issues.
The series is supported by the Robert Wood Johnson Foundation.*

For more information on distribution, contact:

Becky Sher
KRT Special Sections
(202) 383-6022
bsher@krtinfo.com

For more information on content, contact:

Jane McDonnell
President
Public Access Journalism LLC
(410) 923-0218
jmcdonnell@pajournalism.com

Produced by
Public Access Journalism LLC



Distributed by
Knight Ridder/Tribune Information Services



www.krtdirect.com/treatment

Supported by



www.silenttreatment.info