Puff Daddies

More Americans over age 50 are smoking marijuana than ever before. Are my parents among them?

By Daniel Engber

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At the time, Mom’s question caught me by surprise: “Have you ever tried marijuana?” she asked, sloshing her coffee around in a mug as we stood together in the kitchen. My mind went blank. Could this be the fabled “drug talk” that parents are supposed to give to their teenage children? If so, why was I getting it at 30?

It turned out my mother was less interested in my drug use than her own. When I told her I’d smoked pot in college, and a bunch of times since, she took the news in stride. The thing was, she and my father were hoping to score some weed. Did I know anybody?

A little context: My parents paid for my college education. They sat through three school plays and one flute recital; they came to my art opening; they bought me a skateboard. But given the chance to pay them back—in part, at least—for so many years of support and encouragement, I failed to deliver so much as a dime bag.

“You didn’t say no,” my mother recalled the other day, “but you didn’t say yes. It was clear that you were very hesitant about this.” After a moment, she added: “You didn’t give off positive vibrations.”

OK, so I never hooked up my parents. But in the weeks and months that followed, I discovered that many of my contemporaries—people in their late 20s or early 30s—had experienced something similar. Soon I’d heard dozens of stories about retired moms and pops returning to the marijuana habits of their youth. There were solicitations made over family dinners, intergenerational drug deals worked out over holiday weekends—the anecdotes were easy enough to find. Would I come across any data to support this trend?

In fact, a statistical trace of what I’ve taken to calling the “puff daddy” movement emerged a few years ago, when researchers at the National Institutes of Health compared national drug surveys conducted over two-year periods beginning in 1991 and 2001. Their analysis, published in the Journal of the American Medical Association, found that the percentage of people who say they smoked marijuana in the past year had remained fairly stable over the 10-year stretch. (That is to say, it ended where it started.) But they found a very different pattern among those between the ages of 45 and 64: As my parents’ generation matured, the number of smokers in that group had nearly tripled.

The baby boomer drug uptick turns up again in the recent data. According to the 2007 National Survey on Drug Use and Health, almost 6 percent of all adults between the ages of 50 and 59 reported smoking marijuana in the past year. That’s up from about 3 percent five years earlier. Meanwhile, the number of recent users over the age of 50 has climbed to 2.65 million people nationwide (and we can assume the real prevalence is somewhat higher, since these figures are based on self-reported drug use). Here’s something to think about: There are as many boomers using cannabis today as there are high-school students doing the same.
Still, it’s not easy to get an accurate picture of who these puffing oldsters are and how their drug habits have evolved over the last few decades. (It’s also not clear to what extent the legalization of medical marijuana has been a factor.) In August, researchers at the Substance Abuse and Mental Health Services Administration published a detailed look (PDF) at patterns of drug use among the boomers. Most appear to have used marijuana continually throughout their lives, but a sizable portion were classified as “recommenders”—those who recently emerged from a long hiatus in smoking dope. Sure enough, almost all the puff daddies and pot mommas I’ve encountered fall into this latter category: After years of abstinence, they’ve just recently started to rifle through junk drawers for vintage roach clips and rolling papers.

Barbara, a 61-year-old mother of two from Belmont, Mass., began using drugs in her post-college years. She was living in Europe and following the Hippie Trail through Turkey, Pakistan, and Afghanistan in 1971 and ’72—a period during which she smoked hash every single day. Then she came back to the United States, got married, and started a family.

Over the next 20 years, Barbara says she tried marijuana only a handful of times, with friends. “I was a soccer mom,” she explains. “I wasn’t into smoking at all. I didn’t think about it, and I didn’t miss it.”

The habit came back after she separated from her husband in the 1990s. These days it’s more about the living room than the magic bus: “I like to smoke at home and just relax,” she says. “Sometimes I’ll get on my treadmill; sometimes I’ll get out my guitar; sometimes I’ll just watch Desperate Housewives and giggle.”

Barbara’s story jibes with the conventional wisdom on how drug and alcohol use develops across the lifespan. Getting married and having kids tend to be associated with reductions in drug use, while divorce and retirement often come with increased dosages.

Whatever the cause, empty-nesters seem to be enjoying marijuana now more than ever. That doesn’t mean they’re comfortable with the public face of marijuana use: As a rule, the people interviewed for this article did not want to share even their first names—one cited the potential for legal trouble; others worried about what their friends might think. As for the experience of smoking itself, none reported any paranoia or anxiety whatsoever. In fact, most said they find a calm and serenity in marijuana that was lacking in their youth.

For a 57-year-old retired schoolteacher in southeastern Ohio, smoking has become an evening ritual with her husband. She’d given up a weekly habit in 1975, only to be reintroduced by her son 25 years later. (First they shared a joint to celebrate his engagement; then he helped her fashion a beer can into a rudimentary bong.) Now she and her husband enjoy a few puffs as they watch the sunset through the kitchen window. “It’s really a treasured part of our day, just calming down from whatever, chewing over what was going on,” she says.

The high never makes her feel self-conscious or uncomfortable, as it did when she smoked at parties in the old days. “My mind is a lot more peaceful than it was when I was younger,” she says. “We’re not trying to buy a place, we’re not trying to get enough money to live on, we’re not raising a family. ... It’s just very mellow.”

Where does she get her marijuana currently? She has a friend “who knows somebody” with a top-notch source. “It’s a designer variety. Acapulco gold.”

The mind-boggling array of highly potent cannabis strains can be intimidating for some boomers. “Pot’s different now,” says a divorced, 54-year-old counselor in Philadelphia, who remembers an awkward evening spent with her son and a pan of brownies. “One hit and you’re goneo. I figured that out after a few behavior mishaps.”

Back in the early 1970s, an everyday habit had made her deeply depressed, and she ended up quitting at the suggestion of her therapist. (”It was like I could see the sky again,” she says.) Later she spent some time as a drug and alcohol counselor, helping college students who were smoking too much. But her recent experiences with marijuana have been very positive, once she got used to the modern varieties.

The puff daddies and pot mommas do have some reservations about smoking, but these tend to be health-related. Barbara, the ex-soccer-mom from Belmont, is afraid of a product tainted by biotechnology. “I am like a Whole Foods profile,” she says. “I want organic meat; I want fish that comes in from dayboats; I only drink distilled water. ... What I smoke today, I know who grows it, and I know it’s not a genetically engineered superstrain.” Others fear gaining weight from too many bouts of the munchies or bad interactions between marijuana and prescription meds.
The clinical evidence suggests that the greatest danger faced by boomers who use cannabis is heart disease. Getting high can increase your heart rate by about 40 beats per minute and cause unusual blood pressure fluctuations, which may in turn temporarily boost the odds of a heart attack. In 2001, a team of researchers from the Harvard Medical School found that smoking marijuana causes a transient, fivefold increase in risk. (Exercise, sexual activity, and bouts of anger can cause similar short-term risks.)

A 2008 paper published in the American Heart Journal takes these findings a step further: Although its sample sizes were small, the study found that marijuana users were significantly more likely to die, from cardiovascular distress or other problems, than those who didn’t use illegal drugs. According to the paper’s first author, Kenneth J. Mukamal, marijuana appears relatively safe when looked at across the general population. But it may be risky for certain subgroups, like those with incipient heart problems.

Then again, there may be some good reasons to keep smoking. In August, researchers at the University of Edinburgh published evidence that the drug might help prevent osteoporosis among the elderly. Cannabis can also be used to treat nausea and unintentional weight loss, and it may (or may not) have some salutary effect on older patients with glaucoma or Parkinson’s disease. Advocates for the medical use of marijuana cite many other potential applications.

I called Dr. Mukamal to find out whether he thought cannabis was good or bad for old people. He didn’t seem too impressed by its age-defying effects. “People of heart-attack age are smoking marijuana. Frankly, I think those folks should be concerned about it.”

My parents didn’t seem perturbed by this doctor’s warning. Nor were they put off by my cautionary tale about the 65-year-old grandma who’d recently been caught with 33 pounds of premium marijuana in the trunk of her car. I tried to nag them, but they were pretty mellow about the whole thing.

Correction, Sept. 17, 2009: The original version of a sidebar to this article incorrectly described the nonpartisan ProCon.org as an “advocacy group.” (Return to the corrected sentence.)
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