

Is it not true that if someone other than the sick one thinks there is a problem, there is most likely a problem?

Dr. Mark Menestrina: This is very often the case. Part of the addictive process is denial, and often this denial is not even on a conscious level. So yes, if loved one's think there's a problem, there very likely is. Addiction is not really hard to identify, but it is often hard to talk about. My wife told me that she could tell if I was "under the influence" when she came home from work by how the dog acted at the back door, so, my dog could tell there was a problem!

Remember that often when family members voice their concerns, the addicted individual may often get angry, and often "turns it around" and blames the family. This can be very stressful for the family members trying to help the addicted individual, and counseling for family members and support groups for family members can be very helpful in this regard.

Dr. Mike Calice: I use the pneumonic CAGE as a screening tool in the ED to identify potential substance abuse problems:

- Ever felt need to **cut down**
- Ever made someone **angry** over your use of a substance.
- Ever been annoyed by someone commenting on your drinking or felt **guilty** about your substance use.
- Every taken an **eye-opener**, morning substance use.

These 4 simple questions are very good as a screening tool for addiction.

My oldest is 11, how do we get mini parenting sessions on setting limits and consequences and student sessions practicing role playing and giving them the tools to "say no" at the upper elementary or middle school level in our school system instead of waiting until there is a problem in high school. How can we as parents get more involved in prevention education?

Dennis Hinze: I would encourage you to talk to the Student Assistance Provider at your child's school. They may have something currently in place along the lines of what you are looking for or may be willing to put together a parent night for interested parents. If not, they may be able to put you in touch with appropriate community resources such as "STEP" parenting classes, etc.

Most teen use is done in high school, or before and after school, what steps do you have in place to find out and punish those students who come to school high or with drugs?

Dennis Hinze: While I do not deny that there are students who use drugs in school as well as before and after school, the statistics seem to suggest that the vast majority of adolescent substance use occurs on weekends. In answer to your question though, Livonia Public Schools has a policy for dealing both with students who come to school or school functions under the influence or who have alcohol or other drugs in their possession.

Depending on the severity of the offense the penalty may range from a suspension up to a recommendation for expulsion. In all cases treatment recommendations are made to the teen and to the parents. It should also be noted that periodically staff is in serviced as to what to be on the look out for and the proper procedure for handling a situation where it is suspected that a student is under the influence or in possession of alcohol or some other drug. All that said; LPS has a Substance Abuse Task for of its own. One of its goals is to review current policy and to recommend changes as needed.

Future plans for the Task Force?

Diane Montes: Quarterly speaker series, beginning with Ron Harrison on March 21; Run Drugs Out of Town 5K; Teen Help card with resource numbers on it; parent support group; taking youth in recovery into the schools to speak; developing Friends Committee with teens participating in changing the culture in our schools.

If DARE isn't working for school education, what will replace that program?

Dennis Hinze: There are a number of school education programs already in place regarding substance abuse education and prevention. The Livonia Public Schools Substance Abuse Task Force is beginning a review of research based Substance Abuse Education and Prevention programs and will be making recommendations for enhancing what is already being done as appropriate.

What are the most effective interventions Wayne County is using to treat/ assess underlying mental health issues leading to substance abuse and co-occurring disorders?

Dr. Mark Menestrina: I'm not sure I fully understand this question? Many health care professionals are quick and adept at considering co-occurring psychiatric disorders but often don't know how to address the chemical dependency issue. It's unfortunate that we seem to live in a society where it's more acceptable to be schizophrenic or bipolar, or depressed, than to be addicted. That is improving, but we still have a long way to go.

From a county/governmental standpoint, I am of the opinion that we have made great strides in addressing both issues. In fact, the county (and the State) sometimes sponsors physician education programs to address this very issue. Another factor is that often when a patient is actively addicted, they may have clear symptoms of a psychiatric disorder, and unless the health provider knows how to elicit an alcohol and drug history, only the psych disorder gets diagnosed. Then, later, if the addiction problem is treated, the psych disorder may disappear completely. Lastly, we do know that in some addicted individuals, they do have indeed a separate and co-existing or even predisposing psych disorder, and that unless both disorders are treated, recovery from either is very difficult.

What steps is Wayne County taking to fund treatment for lower middle class individuals who don't qualify for Medicaid and don't have private insurance?

Dr. Mark Menestrina: SEMCA, or Southeast Michigan Community Alliance, provides funding for Substance Abuse treatment for Wayne County (excluding Detroit--they have their own program) as well as Monroe County. The web site is www.semca.org.

I'm a grandmother, we are catching the drug problem too late. I would like to see doctors check drug from age 10 up when a child comes in for any exam automatic check for drug test.

Dr. Mark Menestrina: I think you are correct, in that we can and should screen much earlier for possible drug addictions than we currently do, although we are improving in this regard. Many pediatricians and family doctors are screening and physicians in training are learning much more than doctors did even 10 years ago. A drug test is only one way to screen, and history and exams and questionnaires can also be helpful.

While drug tests may be extremely helpful, they may be counter-productive if done in a punitive or “I caught you” style, and are most effective if done in a non-judgmental fashion. I like to draw the analogy of UDS being a screening test for possible addictive disorders like glucose tests are a screen for diabetes, but because of the stigma we have previously made references to, the UDS is not always viewed that way by a patient and/or parent.

The task force should try to spread the word that a parent should not have a goal of being their child's best friend. Somehow the consequences of this should be emphasized to those parents on a regular basis. Some parents think that it's okay for their child to drink if they do so, it's better that they do it in their home with the parents knowing what's going on. One parent told me that as long as she feeds the kids that drink in her home it's ok because at least they drink with a full stomach! This is wrong! The laws are different today, it's not like it was 20 years ago. The effects in life are more life threatening today. Send the message that we need to parent better!!!

Why won't LPS use drug sniffing dogs? Other districts, like South Lyon are using them.

Dennis Hinze: To my knowledge Livonia Public Schools has not used “drug sniffing dogs” in the past. As to whether they would consider doing so in the future; that question would need to be asked of Central Office level administrative personnel.