

Kids hear firsthand account of drug addiction

By SUP BUCK
STAFF WRITER

The first brick on the road to Eric Worley's cocaine addiction was laid by his experimentation with alcohol during the eighth grade.

"I thought it was the cool thing to do," Worley said. "It made me feel older."

Representatives from the Farmington school district ninth grade listened Tuesday to recovering addict Eric Worley of West Bloomfield speak on substance abuse and its effects on him personally.

Students then shared the information with their ninth-grade health classes.

The program, a kickoff breakfast, was sponsored by Farmington Families in Action, which has organized several drug awareness activities this month.

Worley is a recovering cocaine addict who turned his life around after years of abuse. Today, Worley is an accountant for Plante and Moran.

He's a graduate of West Bloomfield High School and Michigan State University.

"Ask any questions you want," Worley told the audience before he began.

Starting small

Worley told of how he used to get high on weekends five and a half years ago, starting with alcohol, then adding marijuana, and then cocaine.

"Alcohol is good for a while, but then you want something more, to kind of live on that edge," Worley said. "My sophomore year is when I experimented with cocaine at the same friend's house where I first experimented with alcohol. We'd been drinking that night, which of course, impairs your judgment."

At times, he thought he could control his habit. Drug use would slow down during wrestling season because he had a different set of friends and practice took a lot of time.

He soon found he had two sets of friends: those that he enjoyed athletics with and those that he hung out with and did drugs.

It was the summer after his sophomore year that things really got bad, Worley said. "I got my first part-time job, so I had some money coming in."



Tuned in: Sarah Martinez (right) listens to Worley talk about his drug addiction. At left is Cindy Plezia. Both are Our Lady of Sorrows Middle School eighth-graders.

Cocaine use became a daily habit and Worley removed himself from family activities.

"You're looking at \$25 versus \$1,000," Worley said. "I no longer had the money to pay for this (cocaine), so I started selling it. That's how I supported my habit."

Everyone continued to see Worley as the varsity athlete, a member of the yearbook staff and president of his church youth group.

"But I was slowly killing myself," Worley said. Worley started working more hours, or rather, saying he had to work to disguise his habit.

Worley said he made sure no drug contacts called him at home. All contact was made during his part-time job.

There came a time when he could no longer hide. Worley began to have nose bleeds and then one day, he went into convulsions. "Every muscle in my body tightened up and I couldn't react," he said.

Two of Worley's friends intervened and contacted a counselor at school.

"My parents had no idea," Worley said. "It came as a real shock."

Road to recovery

Worley entered a two-month drug treatment program in Minnesota. He was in group therapy with 20 people.

"They told us that (statistically) one year from that date, 10 of us would be dead, 10 of us would be using again and ten of us

would be OK," Worley said.

"It's one-third, one-third, one-third. Fortunately, I was the one-third that was OK."

When Worley returned home after treatment, it became evident he no longer had much in common with his previous drug-using friends.

His former friends were afraid he would tell on them, Worley said.

His parents enforced two lists: one with names of friends he could see and one with names of friends he was no longer allowed to see.

It was difficult, Worley said, because he knew one friend since age 5.

Since breaking the habit, Worley said he feels better physically and feels better about himself.

"I no longer care what people think," Worley said.

Students impressed

In interviews with ninth grade students afterwards, those statistics stuck in student minds. They also cited those percentages in evaluation forms they completed after the speech.

Students were impressed they could listen to a real person discuss his problems.

"I think it helped to hear it from somebody who's been there," said Sarah Escott of Farmington High School.

Listening to Worley was better than just reading it from a textbook, said Betsy Nedwick of the same school.



STAFF PHOTOS BY SHARON LEWIS

Compelling story: Eric Worley, a graduate of Michigan State University, told ninth graders of his own battles with cocaine addiction Tuesday in a breakfast sponsored by Farmington Families in Action at the Farmington Community Center.



HEALING OUR
HEALTH CARE SYSTEM

Seniors take keen interest in reforming health system

By BILL COUTANT
STAFF WRITER

Call it good timing.

When Dr. Paul LaCasse offered to talk about health care reform to a group of senior citizens a few months ago, he had no idea that President Bill Clinton would make a major speech on the administration's health care plan that very night. So it came as no surprise when about 125 seniors, most of whom belong to Bedford General Hospital's ElderMed group, came to hear what LaCasse thought of the plan.

LaCasse, the Farmington Hills hospital's medical director, told them he was favorably impressed with the plan because it addresses the problems of access and costs, two of the biggest problems in health care in the United States today.

"Little did I know that the president would be following my remarks on TV," LaCasse quipped to the group at Vladimir's Sept. 22. The audience laughed, but from then on, for the most part their mood changed to one of concern, frustration and anger at the present system's inadequacies.

That, said LaCasse, is precisely why doctors, hospitals, insurance companies, the uninsured, senior citizens groups and others have been calling for change in a system that costs up \$900 billion a year, or about 14 percent of the U.S. gross domestic product. That amount continues to grow at the same time that money for other needs, such as education, which represents about 6.6 percent of the GDP, declines.

Despite the big dollars the United States spends on health care, it ranks only sixth in life expectancy and seventh in infant mortality among developed nations. Those other countries, including Canada (8.7 percent of GDP) and Japan (6.7 percent of GDP) spend much less with much better outcomes. LaCasse also pointed out that in those countries, virtually everyone has health insurance coverage.

Part of the higher cost involves high tech advances, he said. At the same time 36 million people do not have insurance or are underinsured.

"The young are especially hard hit," LaCasse said. "About 10

million children have no insurance."

Reaction to the proposal was mixed among seniors who attended.

"I'm very skeptical," said Lea Aronson for Farmington Hills. "I pay \$80 for cholesterol medication right now and that's not covered."

LaCasse said the proposal would eventually phase in prescriptions.

Sally Richards of Southfield also had her doubts about the plan.

"There is going to be a big hue and cry from a lot of us," she said. "They're talking about cutting (the increase in) Medicare."

Although the plan has its flaws for some seniors, there was a sense that there is a need for a national plan.

"There are 37 million without health care and that's sad," said Ivar Nylén, a Farmington Hills resident who, with his wife Kathleen, counsels seniors on health care issues for the American Association of Retired Persons. "You have to start somewhere. And it's going to take a long time to implement."

Study finds older adults give more

Although older Americans spend a much greater percentage of their income on health care and use the system more than other groups, they are not necessarily a financial burden on the younger generation.

A recent University of Michigan study found that, in fact, the opposite was true.

Americans between the ages of 25 and 34 net an average of \$500 a year from their parents, while those 65 and older receive no net financial support from their children. The study also found that the younger adults also averaged a net of 35 hours of help from their parents while older Americans do not receive the same

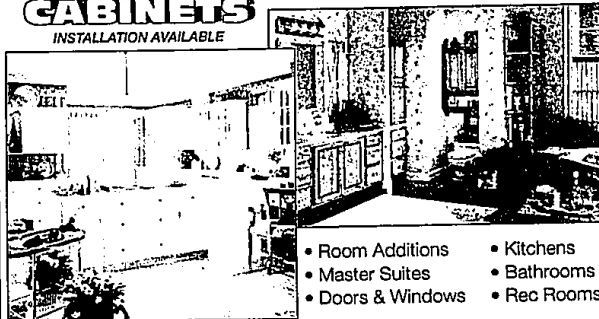
amount of help from their children until they reach age 75.

"In all but the oldest age groups, adult children tend to give less to their parents than their parents give to them," said Martha S. Hill, an associate research scientist at the U-M's Institute for Social Research.

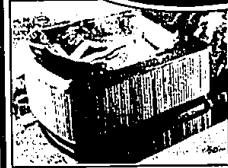
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