

# ANXIETY

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worse by stress. Substance abuse is no different. The stress of the economy is affecting people, no doubt."



HOLMES

Christine Holmes, who oversees specialty services (including substance abuse) at the David Lawrence Center in Naples, agrees. "In times of great stress, such as we are experiencing now, coping mechanisms that individuals use to manage their lives can break down and become dysfunctional," she says.

## The local picture

Southwest Florida mirrors what is occurring nationally. In a poll taken last September by the American Psychological Association, 80 percent of respondents said they were experiencing stress directly related to the economy. The National Sleep Foundation reports that 27 percent of the people it surveyed are experiencing difficulty sleeping because of anxieties related to the economy. And last January, the National Suicide Prevention Lifeline said the economy "played a central role" in a dramatic upsurge in telephone calls from people contemplating self-destruction.

"The economy and fear of what's going to happen is having a huge effect," according to Sarah Bullard Steck, a Washington, D.C., therapist who runs the employee assistance program for the U.S. Commerce Department. Ms. Steck told *The New York Times* that economic uncertainty leads to "severe anxiety... more marital strife, some domestic violence, some substance abuse."

Locally, professionals say poor economic conditions mean that many people who are undergoing problems related to stress are actually delaying treatment or hoping to avoid it altogether. The result is that those who finally do seek treatment often are in an acute or critical stage of their disorder.

"We are seeing more people with dual substance abuse addictions," says Mrs. Holmes, who is a licensed mental health counselor. "By the time we see them, the severity of the addiction is greater than we generally saw in the past."

The reluctance to seek treatment may be associated, in small part, with the stigma some in our society place on those who acknowledge problems with substance abuse or with other common mental health ailments, such as depression or anxiety.

"Many (people who need help) are often isolated, depressed and embarrassed," Mrs. Holmes says. But she and Mr. Lewis say that while prejudicial attitudes still exist, they are gradually eroding and that the public is generally more accepting of those who enter treatment.



LEWIS

Many who are unashamed to seek help are constrained, however, because they may have lost their job and have no health insurance, or if they are insured they may be unable to make co-payments. Even fees that are offered at greatly reduced or rock-bottom rates are beyond the means of all too many victims of the recession.

There are alternatives to clinical treatment, especially in the area of substance abuse. Twelve Step groups such as Alcoholics Anonymous are free, open to anyone and easily found by consulting a telephone directory. But these



COURTESY PHOTOS

## if you need help

>> If emotional disorders or problems with alcohol or drugs are impairing your day-to-day functioning, help is available through the David Lawrence Center in Naples and SWFAS, or Southwest Florida Addiction Services, in Fort Myers.

The David Lawrence Center provides treatment for substance abuse and emotional problems. In addition to its headquarters at 6075 Bathey Lane in Naples, there's a satellite facility in Immokalee at 425 North First St. Call (239) 455-8500 to reach the Naples center or (239) 657-4434 for the Immokalee facility. Telephones are answered 24/7.

>> SWFAS treats chemical dependency and abuse at its adult outpatient facility at 3763 Evans Ave. in Fort Myers. Call 332-6989 anytime.

>> SWFAS and David Lawrence specialists take calls and will advise if immediate emergency care is needed or if further evaluations and consultations are in order. They will also answer preliminary questions regarding payment options for their inpatient and outpatient programs. All information is confidential.

>> Payment plans are available at both David Lawrence and SWFAS, and no one is discouraged from seeking treatment, regardless of their financial situation. Both facilities charge for their services, but they attempt to make treatment available to as many patients as possible. Space is limited in some treatment regimes — especially detox, where waiting lists are common.

groups, which can provide the foundation for long-term recovery, are not designed to address acute problems that require immediate medical attention.

"As the (economic) problems persist, access to appropriate treatment goes down," says Mr. Lewis. "We can see this in our outpatient programs. Many people don't realize that substance abuse treatment doesn't necessarily mean inpatient treatment. More people are treated as outpatients."

SWFAS currently has about 1,000 outpatients, which Mr. Lewis says represents about a 5 percent drop over this point last year. He says 110 patients are receiving treatment as inpatients.

"The bulk of our treatment is outpatient, and that always surprises people, but that is not unlike other medical services," he says.

The 5 percent reduction in outpatients may be a result of the economy and not reflective of the true scope of the problem.

"In a recession, people either cut back or cut out things, and that includes medical care of all kinds," he says. "People will postpone having their teeth cleaned, to give an example, and people will delay treatment for substance abuse if they are having a tough time with finances."

SWFAS' new detox facility is booked solid, he says, and that is indicative of the tendency toward delaying treatment until the addiction has progressed to the



Above, programs at the David Lawrence Center in Naples include group therapy sessions. Left, Southwest Florida Addiction Services' new facility in Fort Myers.

point of medical emergency.

"In this economy, the demand shifts to emergency services, so you see an increase in the detox unit," he says.

There are currently about 25 people receiving treatment in the unit, and Mr. Lewis says there is usually a waiting list of 30 to 40. He hopes to be able to eventually accommodate 40 patients in detox, but current funding and staffing levels simply do not allow for that.

With demand increasing and resources — both for the patient and for the facility — at a premium, treatment centers are faced with tough decisions about whom they will treat.

Both SWFAS and David Lawrence attempt to provide treatment through measures like sliding fees, Medicaid and grants. They discourage no one from seeking treatment at their facilities. But the reality is that tough choices must be made regarding who will or will not be treated.

"We have to pick and choose who we spend money on," says Mrs. Holmes. "We have to prioritize treatment. It often is a matter of whose addiction or illness will have the most devastating effect on the community."

At the top of this prioritized list, she explains, are pregnant women and people with dependent children.

"It may be that a homeless man who has no children, who we would have treated in the past, may not be able to receive treatment," she adds. "This is not what we want, but it is where we are. Children are always a consideration."

Mrs. Holmes says that on an average day, about 100 people receive some sort of care at David Lawrence. The center maintains a 12-bed detox facility ("It's almost always full," she notes), a 16-bed short-term residential treatment unit and a variety of outpatient programs.

As if all of this bad news isn't enough, Mr. Lewis and Mrs. Holmes say an increasing trend toward the abuse of opiates (powerful painkillers, heroin, morphine and the like) and a wide variety of prescribed drugs is leading to longer and more medically complex stays in detox, where waiting lists are commonplace.

"The average stay in detox is now five to six days," says Mr. Lewis. "It had been around three days not so long ago, but the primary reason for the increase is a change in the drugs of choice. It is

the opiates and prescription drugs that dominate, and these require a longer detox."

Twenty years ago, he says, about one in 20 people detoxing at SWFAS was there for opiate or prescription drug withdrawal. Now he puts that figure at 12 to 13 out of 20 in detox.

Mrs. Holmes reports a similar phenomenon at her facility.

The ready availability of prescription drugs, and a preference among young people for these substances are the primary factors driving the upsurge in this particular form of abuse, both Mr. Lewis and Mrs. Holmes say.

Neither Mr. Lewis nor Mrs. Holmes offer assurances that things will get better anytime soon. As long as the economy falters, the stress will remain and funds to deal with the inevitable psychological casualties will be stretched to the breaking point.

Mrs. Holmes says those with financial issues can counter stress by taking sensible steps on their own. She counsels healthy eating, exercise and proper rest. But as a realist, she knows that doing the right thing is much harder when times are tough financially.

She explains: "Take eating, for example. People who are having a hard time with finances generally eat poorly. The truth is that it is cheaper to eat things that are bad for you. It costs more to eat the right things, and people often don't have the money for proper nutrition. And exercising is hard when you are depressed and anxious, although exercise can help those two conditions. But it is hard to get motivated."

In tough times, she goes on, the brain can become a person's worst enemy.

"If things are bad, the brain tells you to feel sorry for yourself," she says. "It tells you to be self-indulgent, not disciplined. People under stress begin to isolate and withdraw from social activities, and this makes things worse. We all probably know what we should do, but the brain often hops on the opposing track and urges us to do what we shouldn't."

Maintaining sobriety or emotional equilibrium is a battle that growing numbers of Southwest Floridians who are living under crushing financial stress must wage on a daily — and sometimes on a minute-to-minute — basis.

The unpleasant truth is this: In this economy, the battle sometimes is fought alone. ■