## Judge stalls Mich. drug testing program for welfare applicants

Michigan's plan to test new welfare applicants for drug use will have to wait, as a federal judge this month imposed a temporary injunction against the effort. Substance abuse field leaders around the country are watching the case because it likely will set a precedent for whether states with aggressive welfare-to-work programs can test residents for substance abuse when they apply for public aid.

Michigan began the pilot testing program in October as part of its larger welfare reform effort (see *ADAW*, Oct. 11). But on Nov. 10, U.S. District Judge Victoria Roberts ruled that the testing program, which requires new applicants for public assistance to undergo urinalysis, is "likely unconstitutional."

The American Civil Liberties Union (ACLU) of Michigan, on behalf of a group of welfare recipients, requested the temporary injunction. The ACLU argues that the testing program violates participants' Fourth Amendment protections against illegal search and seizure.

Under the program, welfare applicants who refuse to be tested would be denied benefits. Clients testing positive for drug use would be required to complete a specified treatment plan; if they refused, their benefits would decrease by 25 percent.

Despite the injunction, Michigan officials hope to continue the testing program following a formal hearing scheduled for mid-December. At that time, the judge will decide whether to grant class-action status to the plaintiffs' claim and/or issue a preliminary injunction against the testing program.

Douglas E. Howard, director of the Michigan Family Independence Agency, the state agency overseeing the testing program, said, "We look forward to returning to this program which was allowed by federal legislation, enacted by the Michigan legislature and supported by our customers and the general public. The drug testing pilot is an opportunity to help individuals find employment and to strengthen families."

Karen Sorbet, a spokeswoman for the Michigan Family Independence Agency, told *ADAW* that the state will comply with the judge's order and cease all testing of welfare applicants.

## Extent of drug use

Legal issues aside, some question the necessity of screening welfare applicants for drug use, since only about 8 percent of the participants in the Michigan pilot tested positive. This usage rate is comparable to that typically found in the general population. Of the 268 people tested under the Michigan program, only 21 tested positive for drug use. Of the 21, all but three were found to have used marijuana.

But supporters of the program say it is necessary because substance use poses a significant barrier to employment.

Oregon tried a similar program to Michigan's, but discontinued it after determining that client anger over testing impeded treatment and that testing for illegal drugs did little to address alcohol problems. Efforts to link welfare benefits to drug use status also have waned in Florida and Louisiana.

## Study says naltrexone effective when combined with therapy

Use of the drug naltrexone in conjunction with cognitive behavioral therapy reduces the number and duration of relapses among alcoholics, according to a study published in this month's issue of the *American Journal of Psychiatry*.

In the study, 131 recently abstinent alcohol-dependent outpatients were treated with 12 weekly sessions of therapy and either 50 mg a day of naltrexone or a placebo. Alcohol consumption, craving and adverse events were assessed weekly.

Study completion, therapy participation and medication compliance rates were high, with no difference between the two treatment groups. However, participants who took naltrexone drank less, took longer to relapse, and had more time between relapses. They also exhibited more resistance to alcohol-related thoughts and urges.

Over the course of the study, 62 percent of the naltrexone group did not relapse into heavy drinking, compared to 40 percent of the placebo group.

Principal researcher Raymond Anton, M.D., of the Medical University of South Carolina, said in a Reuters article that the study shows that naltrexone can be added to a proven counseling program. But he cautioned that there are no data suggesting that naltrexone can work without counseling.

A recent review of information by the federal Agency for Health Care Policy and Research (AHCPR) confirmed that naltrexone assists in the treatment of alcoholism (see ADAW, Jan. 18), though the studies reviewed were small in scope. Researchers found that naltrexone helped reduce the urge to drink; decreased the frequency with which a person drinks; minimizes relapse; and, in some cases, improves abstinence rates.

Naltrexone is sold by DuPont Merck and marketed in the United States under the brand name ReVia.

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