

In 2003 I attempted to access drug and alcohol treatment for my 17 year old son during a time of great crisis for him and our family. I was advised by professionals that an inpatient residential program would provide him with a more effective, safe treatment and transition plan. Two massive obstacles sat in the way of securing private substance abuse treatment for my son. The first was the limited availability of appropriate treatment programs in CT for youth as I was in no way comfortable with placing my teenager in an inpatient program with adult drug and alcohol abusers. There was the Stonington Institute which had a specific program geared for teens that seemed appropriate for his needs so my focus was to get him admitted there. The second obstacle came when the admissions counselor at Stonington told us that our insurer would not cover the treatment for his care. I verified this in a lengthy unsettling conversation with the insurance company. It seemed pointless to plead and cry with the insurance representative to show compassion for our situation. Feeling hopeless and desperate to get our son into treatment, I did it anyway to no avail.

The insurance company seemed to care more about dollars and cents, not people or common sense. An appropriate treatment program when our son needed it most would probably save the very same insurance company from future treatment expenses when he ended up sicker and more vulnerable to the negative consequences that waited. Consequences like abuse of other more dangerous drugs, fractured relationships, lost friends, physical injury, emergency health-care, lost jobs, homelessness, criminal behavior and arrest.

Most families would find paying for this treatment out of pocket a financial impossibility due to the exorbitant costs. I was devastated and at a loss for where to turn next when the crisis at hand was dire, and I was fearful for my son's well-being. I needed to find an alternative and find it fast. The alternative didn't come fast enough however, and our son spiraled downward suffering some of the consequences just mentioned.

Eventually, our son ended up going out of state to an outdoor wilderness treatment program for youth. With the assistance of a home equity line of credit I paid out of pocket \$305.00 a day for 73 days, and then \$350.00 a day for 11 months while he was in another states 3 level transition program for young adults. He lived and worked on site, advanced to taking college courses off site, to working and living in the community. Paying for this treatment and care came with great personal and financial struggle. I realize that not every family would be able to make the same sacrifices.

Access to appropriate treatment services for our young people must be a priority if we are committed to helping them survive this war on drugs which is of epidemic proportions. The ability to secure early intervention and age appropriate treatment programs in a safe environment make the most sense for youth seeking recovery. If I can encourage you and your colleagues to do whatever is necessary to effect policy change regarding this access dilemma, and it saves ONE life, then my efforts and yours will be well worth it. How can I be so sure of this? From first hand experience, I know that one life matters because my precious son relapsed and lost his life to this disease of addiction. He died young from a cocaine overdose leaving a caring fiancée and loving family who now suffer the nightmare of loosing someone so dear.

With the love of family and friends, with better knowledge of the disease of addiction and supports critical to recovery, by focusing on educating youth and adults to the dangers of drug abuse I am learning to cope with the greatest loss a parent can have. I've struggled, I'll continue to struggle. A short while ago, I had no hope of ever being able to move forward. By stepping out of the shadows to fight this good fight I am now moving forward.

Thank you for your attention and your good work to make it possible for more young people to get the treatment they require for the disease of addiction.

Karen Zaorski
36 Hempel Drive
Wolcott, CT 06716

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