

Representative Mitch Greenlick
Chair, House Committee on Health Care
Oregon State Legislature

Re: Support for House Bill 4137-1

Chair Greenlick, Vice Chair Nosse & Vice-Chair Hayden

My name is Alison Mann. I'm a mom. I'm not here with a title or a role in the treatment profession. I'm just a mom.

My reason for being at this table today is my life changed the summer of 2015 as my son's disease spiraled out of control, a healthcare crisis I couldn't call 911 for. With the insurmountable fear that my child would die at the hands of his addiction, we began the desperate search for a program to help him. Sadly, that's when our nightmare became even worse. With each and every call my frustration and desperation grew.

There was lots of compassion from caring people but there was no roadmap forward. There were county mental health and juvenile professionals who tried desperately to communicate their concern. There were local law enforcement officers who stood as I cried, shared my sorrow and wanted something better for my son. There were school counselors and administrators ready to give me a hug, wanting nothing more than for ME to be able to find a solution for saving my son.

Simply put, Oregon has very few options for adolescents! Not one provider had a safe and secure facility where I could take my son for the medical treatment he desperately needed. And those where he might have found services were not part of a continuum of care with efficacy data I could trust as a mother fearful for her son's life. In the end, ours boiled down, in many respects, to a story of luck. It was not until a

mental health professional pointed us to a potential solution outside of Oregon that I began to have hope my son might live.

As a family, we got lucky. But that “luck” involved liquidating ALL of our assets, including selling our home so we could send our son to the other side of the country to start his recovery journey. After three months in a program in GA - the equivalent to a therapeutic “emergency room”, we moved him to AZ for long-term care and treatment through his high school years, assuring he got the help he deserved. The program in AZ, with long-term success data, is built around an evidence-based continuum of care. It provided my son with a high school education tailored to meet the needs of adolescents in early recovery, and the therapeutic and social supports to buoy his long-term recovery from addiction - a chronic medical condition for which THERE IS a solution!

But the bottom line is this: that solution doesn't exist in Oregon. It shouldn't be that difficult or expensive to access the life-saving medical care your child needs.

Last night we got to sit over dinner with our son who is now back in Oregon pursuing higher education. Had we not found the pathway we found outside of Oregon, I'm certain our visit last night wouldn't have been over dinner but potentially through jail bars or over his gravestone.

We must transform the current, fractured and incomplete system into a recovery-based, continuum-of-care that recognizes addiction as a chronic health condition requiring a lifetime of attention.

Thank you for hearing me today. I urge you to vote yes on HB 4137-1