

In support of HB29: Health-Standards for Involuntary Admissions
and Petitions for Emergency Evaluation – Substance Use
Disorder

Testimony by Elena Suarez

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My daughter, Colette was a musician, song writer, an athlete, and an excellent and proud student of Winston Churchill High School in Potomac, MD. She was a proud recipient of the Churchill Bulldog award, given to students for their character, sportsmanship, and team spirit.

She had a passion for animals and for helping the homeless and spent many summers work with special needs children. Most of all, Colette had a pure, kind soul.

A few years ago, when my daughter went to Brazil for Spring break, she suffered a sexual trauma of which she did not speak. It appears that this was the experience that set off her addiction. She began to break down emotionally and physically. During her struggles she was introduced to and began using crack cocaine. Over the next year, Colette began to act out in ways we had never seen before. Every month the crisis and her addiction grew deeper and more desperate.

I attempted to coax her into participating in treatment. She was terrified of having her trauma exposed. As her condition worsened, I became desperate to do something. I knew she needed treatment, but she was reluctant to go. I believe this was due to her deep-rooted desire to avoid talking about her traumatic experience at all costs.

When I learned about Florida's Marchman Act, an involuntary commitment law for people suffering from acute and chronic substance use, I felt such relief to know that there was a law in place in Florida "that provides a means of involuntary and voluntary assessment and treatment of a person abusing drugs or

alcohol and who refuses to submit to voluntary care.” I was hopeful that I could save my daughter.

Within two weeks of petitioning her in Florida, my daughter was before a Judge in court where she opted to go treatment rather than face court sanctions.

As is quite common with individuals struggling with addiction, Colette would begin to do well and then relapse. Colette was struggling with her addiction and being in treatment because it was challenging to face the trauma that led her to the drugs, and the enormous pain and ugliness that she felt because of her uncontrollable addiction.

On multiple occasions, she ran away from the treatment centers, even though she acknowledged her improvements when she was there. Notwithstanding, it was always such a relief that we could rely on the Marchman Act to get her back into treatment and to receive the extended and prolonged care, which we all know is critical for a full recovery.

Most individuals return to treatment on average eight times –needing several rounds of treatment before the deep-rooted habits can be controlled and overcome by the struggling individual.

While my daughter would get upset with me for insisting on more treatment, as soon as she would become sober, she would thank me profusely. At her last treatment in June in Florida, she was doing well and had been drug-free for 2 months. Sadly, they discharged her due to an altercation with another patient. The day before her unplanned discharge to the streets, she had said, “Thanks so much Mama, I feel so good. I really needed this!”

Once we returned to Maryland, Colette overdosed several times because her cocaine had been laced with fentanyl –and one

experience resulted in her being in a coma for 5 days. It was clear that Colette needed further treatment. But she refused. I felt so hopeless not being able to put her back in treatment.

My precious Colette passed away 5 months ago, in August at the tender age of 19. I will always, however, be grateful to Florida's Marchman Act. It not only prolonged my daughter's life, but it allowed me to at least have the opportunity and means to try to save my daughter. Please pass HB29 to help the many Colette's out there that are suffering, alongside their parents and families. Thank you for the opportunity to share my story with you today.