

RECOGNIZING FAMILIES AF-
FECTED BY THE NATIONAL
OPIOID EPIDEMIC

HON. ANN M. KUSTER

OF NEW HAMPSHIRE

IN THE HOUSE OF REPRESENTATIVES

Thursday, December 8, 2016

Ms. KUSTER. Mr. Speaker, it is my honor to include in the RECORD today the personal stories of families from across the country that have been affected by the opioid and heroin epidemic. In the U.S. we lose 129 lives per day to opioid and heroin overdose. In my home state of New Hampshire I have learned so many heartbreaking stories of great people and families who have suffered from the effects of substance use disorder.

Earlier this year, my colleagues and I were joined by many of these courageous families who came to Washington to share their stories with Members of Congress and push for action that will prevent overdoses and save lives. Since then, we passed both the Comprehensive Addiction and Recovery Act and the 21st Century Cures Act to provide much needed funding and critical policy changes to fight this epidemic.

The advocacy of these families truly is so important to leading to change in Washington and I am proud to preserve their stories.

ANTONIO LUCONI—POMPTON PLAINS, NEW JERSEY

On Sunday, March 20, 2016, Antonio "Ant" Luconi, lost the biggest fight of his life at the age of 28—to the disease of opioid addiction. Drug addiction does not discriminate—it ruins the lives of good people. When Ant died, the world lost a son, brother, Godfather, cousin, grandson, nephew and friend. Their loyal, handsome, funny, loving, Ant added so much to the lives he touched: He had a "tough guy" exterior and had the world's biggest heart. Ant never failed to say, "I love you."

Ant died nineteen days after being discharged from treatment. He was excited to start his life over, make his family proud and pursue his new life goals. He did not want to die. He had plans. Big plans. "28 is my year," he said.

At the age of 21, Ant began recreationally using Percocet, which progressed to Roxicet. He ingested both by crushing the pills and snorting them. As his addiction progressed, so too did his tolerance and the cost of supporting his addiction. As a result, Ant turned to snorting heroin, which was less expensive. While attending an intensive outpatient program, another patient taught him how to use a needle to inject heroin.

Over the course of seven years, Ant made numerous attempts to get clean. He detoxed on his own and under medical supervision. He attended intensive outpatient programs and worked with therapists. Ant's belief that he could conquer this disease on his own led to a disastrous end.

Ant was open and honest throughout his addiction. He spent numerous hours with his sister discussing his disease. She believed in Ant and named him the Godfather to her daughter. There were many nights when Ant's mother held him in her arms as he cried, apologized, and pleaded for help to end the nightmare of addiction—to become whole again. Ant's family encouraged him time after time to get help, but in retrospect, they did not fully understand the severity of the situation.

After accepting that his addiction had completely taken over his life and that death

was a real possibility, Ant decided to go to an inpatient treatment program. Can you imagine the relief Ant's family felt at hearing this news? While attending the recovery center in Florida, Ant became a favorite patient. During weekly conference calls with Ant and his treatment team, the connectors reported on his progress with sincere optimism, "Finally, someone who gets it and works the program. What a great guy. We know Ant will be a success story." He was chosen as group leader, which meant he was in charge of morning check-in meetings. Some of the most challenged men in the program sought Ant's advice and friendship. Ever a "man's man," he made everyone feel important and was loyal to a fault.

When Ant arrived home after completing the program, he was proud of his progress and confident in his new life, but the fear of relapse was constant: "I cannot wait to just live in the moment again." Ant shared with his family a letter that he wrote to heroin. The first sentence read, "I am saying goodbye because you have made me someone I am not, my life is now unmanageable, you destroy all good things in my life. I hate you."

Ant's counselors in Florida set up an intensive outpatient program for him to help him transition upon arriving home. But when Ant attended the scheduled assessment, he was declined admittance because a family member was already enrolled in the program. Given that Ant was in such a vulnerable time in his recovery, they should have made sure that he was enrolled in another intensive outpatient program before he left the building. Lack of continuity of care turned out to be a life or death situation.

Ant needed to stay in a program and continue to receive support but they turned him away. Ant was unable to get an assessment at another intensive outpatient program for a week and a half. Here was a man who was begging for help, had made the decision to change his life and was failed horribly by our system. This was not unfamiliar—if you only knew how many times Ant's family drove him from detox to detox only to be turned down by each one due to insurance issues and a lack of available beds.

Ant's mother and sister want things to change. They want more resources to be available for people who have that moment of clarity and decide to get help. They want someone to pick up the phone on a Sunday night when a person struggling with addiction decides to seek information about how to get into detox. The horrible alternative means a person wanting help has to wait until morning and continue to use in order to combat the withdrawal symptoms. That "one more time" hit could take their life.

Ant's family is left with massive holes in their hearts that will never be healed. Their souls are devastated. Ant put up one hell of a fight. He was supposed to start a new job the day after he died. His family was rooting for him then and remain proud of him today. They were never ashamed or embarrassed about Ant's struggle. They believe that it was the system that failed him.

Ant's family wants to help bring awareness to the fact that this disease has reached epidemic levels and needs to be stopped. Too many young lives have been taken. Too many people that they know personally. If anything can be done to remove the stigma associated with a disease that does not discriminate between class, color, race, or religion, then Ant will not have died in vain. Ant's family always felt that he was destined to do big things Perhaps this is Ant's legacy.

MICHAEL MARCELL—WITTMAN, MARYLAND

The mother of two wonderful, loving boys, Louis and Michael Marcell, never dreamed that addiction would devastate her family as

it has. This was not the life that she imagined when she became a mother. The grief and devastation of losing a child is unbearable and if her family's story can prevent just one family from dealing with this disease alone, she feels she will have made a difference.

Michael was always quiet and shy. He struggled in classes and was bullied during his formative years in school. When Michael was 16 years old, he became depressed and more withdrawn. His parents tried several times to get him help through the school system but to no avail. By the time Michael was a junior in high school and had failing grades, his parents made the difficult decision to withdraw him from school. Michael was determined to graduate high school, so he decided to take GED classes and he passed.

Michael enjoyed working with his hands and found his calling in carpentry work. He also loved skateboarding, snowboarding, and spending time with his friends and brother. He was drawn to nature and had an old soul. Around the age of 17, Michael began experimenting with alcohol and marijuana. His mother was concerned but thought Michael was just going through a phase. A few days before Michael's death, he told a friend that he needed help. Michael's mother didn't know the extent of his addiction until it was too late; never able to get him the help he so desperately needed.

Michael died on December 7, 2008, within days of celebrating his 18th birthday. He went to a party the night before and because of an argument going on at home, Michael decided to stay at the party overnight. That was the last time Michael's mother saw her son. On December 7th, the police came to Michael's home to tell his mother that Michael was gone and died of an accidental overdose of alcohol and oxycodone. Michael's mother remembers that moment as if it was yesterday.

If Michael's family had the tools and knowledge about addiction that they have today when Michael was struggling, they feel they might have been able to save him.

THEO MARINESCU—EAST HAMPTON, NEW YORK

If there is anything worse than losing a child, it is losing a child to a drug overdose because grief is often accompanied by judgement and blame. For parents, it is a gut-wrenching thing to watch your child suffer at their own hand.

Losing a child to addiction means you didn't get to say goodbye. It means that (if you are brave enough to be truthful about the cause of death) every day you have to deal with the stigma that surrounds addiction. You question every decision—you look for what you did wrong, what you didn't say, why you didn't have the sense that something was wrong. You look back over the years and dissect each part of their life—scanning for clues. You look for places to lay blame but mostly you blame yourself. You find an online group of parents just like you, where there is no judgement and everyone has the same questions and feels the same pain. You force yourself to read the coroner and toxicology report hoping there is an answer there. And you cry—a lot.

Theo was 25 years old when he lost his life to a fatal combination of heroin and fentanyl. Theo was a warm, open, loving, bright, intelligent and handsome man. He had a huge laugh and a fabulous smile. Theo was an outstanding athlete and won many trophies and awards. He played linebacker in football and loved the sport. He was also gifted intellectually and an honor roll student in high school. Theo lived with wild ambition and no regrets.

Theo was a brilliant storyteller and always found a way to make you laugh. He seemed to make friends wherever he went and in

turn, he made everyone feel welcome. Theo loved his little brothers with all his heart. He was a loyal friend to many.

Theo was very close to his family. Even during his years of drug use, Theo and his mother never became distant from each other. At times, it was torturous for his mother, but the one thing that was always apparent was that Theo loved his family and his family loved him—no matter what.

Theo started smoking marijuana during his later years of high school. Theo's mother never imagined that his drug use would progress to pills and then, cocaine. Theo's family believes his addiction started about seven years ago, but it's hard to say for certain because this disease entered their home slowly and quietly. Over the course of those seven years, Theo experimented with a variety of drugs, including his final drug of choice, opiates. He tried hard to stop many times. Theo felt broken and guilty for the hurt he inflicted on his mother and little brothers. He once wrote about the "fairytale life" that he had screwed up so badly, and towards the end of his life Theo's self-esteem was completely eroded. He always took responsibility for what he did.

When his behavior started to hurt the ones he loved the most, Theo decided it was time to do something about it. On September 30, 2014, Theo called Violeta crying and asking for help. It was the first time he admitted to being addicted to drugs. Although his mother was shocked and heartbroken, Violeta didn't criticize him because she knew he was hurting. Theo said he hated living in addiction: "Mom, please help me! I will do anything to get out from this hole . . ."

Theo shared with Violeta about how having a little fun at the age of 17 had escalated into a full-blown drug addiction. Theo felt alone despite the fact that he had so much love from his mother and so many others. Soon after his conversation with his mother, Theo entered a treatment facility.

Violeta reached out to a person at the treatment facility for information on how she could best support Theo during his time there. The man said, "Theo is the most motivated person I have ever worked with." He said that Theo's desire to improve his life and his appreciation for the littlest things made him stand out. He told Violeta, "If every person I tried to help had 10% of his motivation, a lot of families would sleep better at night."

Theo was motivated to get better but the system failed him. Theo's lack of health insurance prevented him from attending any dual diagnostic programs, especially those out-of-state, which limited his options for treatment. The available programs weren't able to address Theo's lack of confidence and ongoing feelings of letting people down. He needed intensive substance abuse treatment and to be properly evaluated for mental health issues. Theo was limited to one thirty-day inpatient program and then bounced around to several sober living homes, one of which he was kicked out of for using Facebook.

Theo was clean for about seven months when he relapsed. As a consequence, the halfway house where he was staying kicked him out in the middle of the night with a heavy bag of his possessions, no money and nowhere to go. Throwing people out of rehab or a sober living house for displaying the very symptom of their disease is nonsensical and dangerous. For Violeta's son, it was the perfect storm.

Theo was in Florida and his family lived in New York. After he spent two days on the streets, his family found help and sent Theo to a treatment center in South Carolina. At the time, Theo's mother didn't know that this facility also admitted drug dealers who

were forced by law to be there as part of their probation. Being forced to go to rehab is a very different thing than going willingly. In the treatment center, one person who was dealing drugs gave Theo and two other patients drugs for free.

The treatment center kicked them out when the drug use was discovered. One week later, Theo was found dead after having used drugs from the same dealer he met at the treatment center. Theo died in a shady motel room. The drug dealer is still on the streets.

The current system in the United States for treating people with substance use disorder is incredibly broken. People are dying from this disease. The numbers are appalling—about 47,000 people die from drug overdose annually. That is more than the number of Americans who are killed in car accidents and gun violence combined. Half of those drug-related deaths are due to opiate drug abuse.

There has been a lot of talk, some media attention, but little action to fight this epidemic which shows no signs of abating. Legislation languishes, insurance companies still do not provide the coverage necessary for adequate treatment, and the shame and stigma of addiction continues.

Watching a child battle with addiction is like a roller coaster. Parents learn to be hyper-vigilant, living always with fear. Parents have hope as well—as long as your child is alive, you have hope that he or she will get better. However, the sound of the phone ringing at night makes your heart sink. Your child's potential death is always in the back of your mind.

That fateful day for Theo finally came on May 17, 2015.

Friends flew across the country to be at Theo's funeral. Incredible sadness about how his death might have been prevented permeated the air. Because of the embarrassment he felt, Theo never asked his friends for help.

All Violeta has of Theo are memories and of course his clothes and a few other personal objects. It's hard to hold a grave marker. What she misses most about her son is his affectionate nature, his great sense of humor, and the little things like hearing his feet bouncing up and down the stairs, the smell of his cologne—everything.

Children are supposed to bury their parents. Parents are not supposed to bury their children.

Not a day goes by that Violeta doesn't think about who her son would have been, what he would look like, his wedding, his children—the bleeding never stops. There will always be an empty chair—empty room—an empty space in every family picture. Time can't fill the space. Gone is still gone.

When you lose a child, nothing is ever the same again. Every facet of your life has a memory of your child. Every room in the house, every trip in the car, a song, a picture, a book, a walk in the park. There is a hole in your heart that will never be filled. You search and search for answers that just aren't there.

To children who hear this story: you are loved and have so much to give to the world. The temptation to abuse any kinds of drugs is very real, but the courage to resist that temptation is also very real. Ask for help.

To parents—the advice is this: get informed and learn as much as you possibly can about addiction early on. Talk honestly about the risk factors of becoming addicted by experimenting with drugs. Talk about family history of alcohol or substance abuse. Show them your love, no matter what.

Death is not a time for blame, it is a time for reflection. We must get loud for the stig-

ma and shame to end. In its wake, it is time to speak. It's time to stop pretending that substance use disorder is a choice and it's time to stop shaming people who struggle with it.

10/7/1989-5/17/2015

JOSEPH (JOEY) MARTIN—YUCCA VALLEY, CALIFORNIA

Joseph (Joey) Martin was born on October 30, 1990. Growing up, Joey was a happy child. He was very outgoing, he had many friends, and he loved to be around them, his family, and his dog. Whenever Joey walked into a room he always captured the attention of others with his contagious smile and laughter. He loved all outdoor activities and looked forward to the days he and his father would go fishing. He was also passionate about baseball and skateboarding and he was very good at both. Joey was smart, had plans for his future, and had a beautiful heart. Every year he would volunteer at the annual Special Olympics bowling tournaments; he always had a special place in his heart for helping those with special needs. As Joey's parents, we had high hopes for his future and knew he would succeed in life. Unfortunately, his dreams slowly deteriorated as his addiction progressed.

At the age of 14 or 15, Joey was caught smoking marijuana. His parents did what any concerned parent would do in this situation: they kept a close eye on him, his friends, and his activities. They thought they were always one step ahead of his addiction. Joey's grades were good and he started playing baseball again.

In 2007, Joey and four friends were in a car accident. They were hit head on by a drunk driver, who had been racing on the wrong side of the road. Despite the terrible injuries received, and by God's grace, everyone lived. The following six years of Joey's life were spent going from doctor to doctor trying to relieve the source of the pain he had been complaining about.

As the years went by, Joey's need for a more powerful drug grew. His addiction was fueled by doctor prescribed pain medication. When Joey turned 18 years old, he was able to get almost anything he wanted from doctors. If Joey ran out or couldn't get drugs from doctors, he would get them from people he knew. By 19, Joey had a real problem—the need to relieve his pain turned into the need to get high. He spent the next three years in and out of treatment centers and sober living facilities.

In 2012, Joey enrolled into a treatment center in Loma Linda, CA and was living in the suggested sober home not far away. When Joey was six months clean, he decided he was ready to come back home. We were very hopeful that Joey was finally on track to living a sober lifestyle. Unfortunately, like many young individuals today, Joey did great until he met with a supplier and relapsed.

Shortly after his relapse, Joey contacted the previous house manager of the sober living facility in California and asked if he could go back. Three months later, on January 11, 2013, Joey died of an overdose. He was just 22 years old.

ANTHONY MARTINEZ—GAFFNEY, SOUTH CAROLINA

Anthony was set free from his toxic battle with addiction on May 24, 2016. Anthony was his family's Christmas present—born on December 25, 1987.

Anthony yearned for a life of love and peace—a life without pain. Anthony was a lover of music; you could always count on him to know the latest and greatest tracks. He was passionate about cooking and often volunteered to make everyone dinner. When he did, every plate was licked clean. Anthony also loved being outdoors and whenever he had spare time, you could bet he was

fishing, hunting or simply enjoying himself in some beautiful place.

Anthony always said things straight—he wouldn't sugar coat a single thing. He was a loyal friend; if you needed his help he would be there no matter what. He knew how to make the most pessimistic person crack a smile. In some ways, Anthony embodied the saying that the saddest soul is the one trying to make everyone else smile.

The disease of addiction is a merciless, non-discriminatory devil. The loss of Anthony has created a sore on his family's heart that will never heal.

DERRICK MARTTILA—CAPE CORAL, FLORIDA

Derrick grew up in Cape Coral, Florida. From a young age Derrick was very special. He enjoyed playing football, hockey, and excelled at karate. However, his biggest passion, which followed him into adulthood, was music. Derrick would write, play and listen to music every day. His mother, Kathleen, proudly watched her son grow up to be a man any mother would be very proud of. Sadly, she also had to watch him so bravely battle the disease of addiction. Derrick would always say he just wanted to be "normal." On January 16, 2016, Derrick lost his battle to an accidental overdose of heroin laced with Fentanyl. Derrick was 26 years old.

Derrick was an incredible person with a huge heart. He loved his family and friends and would do anything for them when they were in need. Derrick was a hard worker that strived to be the best he could possibly be. Derrick was loyal almost to a fault—he never wanted to let anyone down.

What is missed most about Derrick, is his larger-than-life personality. He loved to laugh and make others do the same. Derrick had a great sense of humor, complete with a trademark smirk and witty comebacks. He could light up a room with his laughter or suck you into a discussion about his obsession with conspiracy theories.

Regardless of the occasion he would always keep his family laughing. Kathleen has always been proud of her son and admired his strength in his battle against this horrible disease.

HONORING JONATHAN B. JARVIS,
THE 18TH DIRECTOR OF THE NATIONAL PARK SERVICE

HON. DONALD S. BEYER, JR.

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, December 8, 2016

Mr. BEYER. Mr. Speaker, today I stand in recognition of Jonathan B. Jarvis, the 18th Director of the National Park Service.

Director Jarvis, a native of Virginia, began his career with the National Park Service in 1976 as a seasonal interpreter in Washington, D.C. Today, he manages that agency whose mission is to preserve America's most treasured landscapes and cultural icons.

Director Jarvis's 40-year career has taken him from ranger to resource management specialist to park biologist to superintendent of parks such as Craters of the Moon, North Cascades, Wrangell-St. Elias, and Mount Rainier. Before being confirmed as the 18th Director of the National Park Service on September 24, 2009, Mr. Jarvis served as regional director of the bureau's Pacific West Region.

Today, he is responsible for overseeing an agency with more than 22,000 employees, a \$3 billion budget, and 413 national parks that attract more than 320 million visitors every year who generate \$30 billion in economic benefit across the nation.

Director Jarvis has reinvigorated the National Park Service's role as an international

advocate for protected areas and recognized world leader in cultural and natural resource management.

Managing the National Park Service through its centennial in 2016, Director Jarvis has focused on several key areas that are critical for the future: enhancing stewardship of the places entrusted to the Service's care; maximizing the educational potential of parks and programs; engaging new generations and audiences, and ensuring the welfare and fulfillment of National Park Service employees.

Director Jarvis speaks frequently about climate change, sustainability, the outdoors as a source of public health, and the parks as a unifying, inspirational force for the nation. His blueprint for the agency's second century, A Call to Action, calls for innovative, ambitious, yet practical ways to fulfill the National Park Service's promise to America in the 21st century.

From a seasonal interpreter in the year of our nation's bicentennial to the head of an internationally known institution on its 100th birthday, Jarvis has gained a thorough knowledge of these great American treasures, the national parks.

"America's National Park System is a gift from past generations to this and succeeding generations," said Director Jarvis. "And while the challenges we face today—like climate change, shrinking open space, habitat destruction, non-native species, and air and water pollution—could not have been imagined when this agency was established in 1916, our mission remains the same: to preserve this nation's natural and cultural heritage, unimpaired for the enjoyment of this and future generations."

IN RECOGNITION OF THE 30TH ANNIVERSARY OF SIERRA HEALTH FOUNDATION

HON. DORIS O. MATSUI

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, December 8, 2016

Ms. MATSUI. Mr. Speaker, I rise today to recognize the 30th anniversary of Sierra Health Foundation. As the staff, local partners, and community members gather to celebrate this momentous occasion and the impactful work that has been done in our community over the past 30 years, I ask all of my colleagues to join me in recognizing this outstanding organization.

I know firsthand the incredible impact Sierra Health Foundation has on our community. I have long been a supporter of Sierra Health Foundation and I will continue to offer my support in any way that I can because I believe in their mission to support and elevate partnerships and programs that improve health and quality of life for underserved communities in Northern California.

Since Sierra Health Foundation began grant funding in 1985, they have awarded more than \$97 million in cash grants to 1,004 nonprofit organizations and public agencies. Today, Sierra Health Foundation's funding region includes 26 counties in Northern California. The programs funded by Sierra Health Foundation in these counties address important issues such as racial and health equity and juvenile justice. Sierra Health Foundation has been a dedicated and forward-thinking leader in changing the landscape of Northern California for the better; from implementing the Afford-

able Care Act to pushing forward efforts to improve outcomes for young men and boys of color in our region.

Mr. Speaker, as Sierra Health Foundation and esteemed members of the community gather to celebrate their 30th anniversary, I ask all my colleagues to join me in honoring 30 years of service to our region.

IN RECOGNITION OF GINA ARGENTO

HON. CAROLYN B. MALONEY

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, December 8, 2016

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, I rise in recognition of Gina Argento, who was honored for her achievements as part of Women's History Month. Ms. Argento is President of Broadway Stages, one of New York's largest film, television, and music production facilities which is located in Greenpoint, Brooklyn.

Ms. Argento and her brother, Tony, opened Broadway Stages in 1983, turning a rundown movie theatre into a sound stage. Over the past 32 years, Broadway Stages has expanded both its physical size and capabilities. Broadway Stages now has over half a million square feet of space with 38 state-of-the-art stages and support facilities. Offering full service film, television, photography and music production facilities, Broadway Stages has served an extensive list of hit movies and television shows including "The Good Wife," "Blue Bloods," "Mr. Robot," "Madam Secretary," "Unbreakable Kimmy Schmidt," "Limitless," "Broad City," "Unforgettable," and "Master of None," in addition to commercials, print and music videos. Broadway Stages has facilities in Brooklyn and Queens and is currently in the process of building a 69-acre facility in Staten Island.

Under Ms. Argento's leadership, Broadway Stages has exhibited an unparalleled commitment towards the local community in Greenpoint, Brooklyn. In addition to creating hundreds of local jobs, Broadway Stages helps neighboring residents, small businesses, and community-based organizations. Broadway Stages has donated food, equipment, and additional resources to local soup kitchens, partnered with the McGolrick Park Neighborhood Alliance to clean up the beloved park located in the center of Greenpoint and hosted family-friendly neighborhood block parties during the summer. Most recently, Broadway Stages joined the television show "Blue Bloods" and CBS to give \$25,000 to the families of NYPD officers Rafael Ramos and Wenjian Liu who were brutally murdered in Brooklyn.

Ms. Argento is also committed to supporting young people. Broadway Stages provided new audio equipment to St. Stanislaus Kostka Catholic Academy, sponsored a 5 Boro Basketball team for teens, created a "Green Science Week" at PS110, and partnered with community organizations to hold a local "Schoolfest" fair for students and their families. Broadway Stages also funded the SYSTEM Teen Summer Program, which provides