From: angelica fontanez
To: Veltri, Victoria
Subject: Fw: barriers to treatment
Date: Wednesday, October 17, 2012 9:14:37 AM

----- Forwarded Message -----
From: raymond currytto <currytto@yahoo.com>
To: little one <angelica.fontanez@yahoo.com>
Sent: Wednesday, October 17, 2012 6:10 AM
Subject: barriers to treatment

Barriers to treatment in substance abuse:

I have over twenty years experience with multiple family members having substance abuse troubles. I can provide a few notes on issues I have seen. These will likely line-up with the observations of others.

The first barrier to treatment is in the recognition and willingness of the individual to accept that there is a problem and to seek treatment. **Perhaps a continuing public campaign aimed at the individuals awareness of the problem and options for treatment would help.**

Once the individual decides to seek treatment there are barriers of insurance and available space within programs. It often takes up to two weeks for even state insurance programs to be activated. The individual continues to use the substance while waiting for activation of insurance. This time lapse often changes the course of potential treatment, with other events occurring in the interim. This may be, death from overdose, incarceration, or a loss of desire for treatment. **Perhaps a pool of money in a fund can be immediately available to treatment facilities to bridge the time-gap between contact of facility and client insurance activation.**

The parole and probation departments use clinics, hospitals, etc., for treatment, when their individuals need treatment. The individual is told to seek treatment, often left to their own ability to seek and set-up treatment. One primary issue with substance abuse is the individuals inability to coordinate treatment. Perhaps the Parole and Probation departments need quick access to ready facilities, possibly back within the jail hospitals, or direct links to outside services. Immediate re-

incarceration is better than continued substance abuse on the street, as these individuals very often are committing crimes to support the substance abuse. This leads to deeper legal troubles and further societal damage. **Perhaps direct mandatory access to treatment should be at the parole and probation officers disposal and discretion.**

It seems that hospital substance abuse and mental heath treatment is up to the hospital to build a program. **Perhaps, it would greatly stem the tide of substance abuse and homelessness if all hospitals had mandatory treatment program development with direct channels of treatment branching out from the emergency rooms.** Individuals often receive acute care and are released. This time period does not sufficiently interrupt or break the habit.

Perhaps, a trained staff could do outreach through the clinics on the street, encouraging individuals, especially homeless individuals, to seek various treatments, whether substance abuse, mental health, or usually both. **Perhaps a public campaign including, print, radio and television could provide easy channels, such as the 211 information service, to make seeking and identifying treatment options a smooth and rapid process.**

Thank you for the opportunity to provide these thoughts. I would be interested in helping to create a public campaign and have the resources, references and professional contacts for doing so.

Raymond Currytto
22 Milandale rd.
Fairfield, ct. 06824
currytto@yahoo.com (203) 549-5010