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Something just as simple or as profound as an unexpected phone call can make all the difference. It can bring unsurpassed joy. Or, it can evoke unspeakable grief.

It was September 26, 2016. I had just arrived at my elderly parents' home in the Dallas/Fort Worth area after taking them back from a delightful visit with us. That's when I got an unexpected phone call from our eldest son. He struggled to speak. Only with great difficulty was he finally able to articulate his message, "Dad . . . Chris is dead!" My heart heaved in violent pain. The blood drained from my face. I staggered and had to sit down. Our 34-year-old son had died two days before from an overdose of injected heroin. It took the medical examiner's office that long to identify him and find a close relative to notify.

That unexpected call is one no parent, family member or friend ever wants to get. Yet it's replicated thousands of times to fathers, mothers, children, siblings, grandparents, aunts, uncles, cousins and friends, resulting from the deaths of the estimated 144 people who die every day in our country from drug overdose. That's almost 53,000 loved ones per year – more than the number of American's killed during the Vietnam War in the 1960s and early '70s.

Just one unexpected phone call, but repeated thousands upon thousands of times . . . multiplied missives of misery.

Yet, it was also an unexpected phone call that carried the incredible, but exhilarating news that we had become the parents of a week-old baby boy. It was December 21, 1981, four days before Christmas. While others made their last-minute holiday gift purchases, we scrambled to buy diapers, bottles and baby blankets. The adoption agency had told us that though we were approved, we should not get our hopes too high. We already had a three-year-old son. But

exactly nine months later, an unexpected phone call gave us the best Christmas present imaginable . . . William Christopher Guy. How could we have known then that our beloved, sweet Chris would grow up to become enslaved by the disease of addiction?

Chris was one of the most beautiful babies I have ever seen. He had a full head of abundant brown hair, the face of a cherub and bright blue eyes that radiated health and charm.

A bit introverted and shy around groups of people as a toddler, he was a daddy's boy. At church or even at large family events, you'd generally find him in my arms or on my lap.

Nothing thrilled him more than to be around any creature, great or small. Puppies, kittens, rabbits, and much to the chagrin and horror of his mother, frogs, lizards and especially, snakes. He loved the outdoors and was much happier at the fishing pond than just about anywhere else.

Chris was a gifted artist. He could take a scrap of paper and some pencils, and within minutes perfectly replicate an object of intricate complexity. For a time, he studied to become a graphic artist, but he spent most of his adult life in the food industry. He worked his way up to responsible positions as a cook in good restaurants in Portland, Boston, Nashville and Oklahoma City.

Chris was a bright and beautiful soul . . . kind, caring and compassionate. He had been raised in church. He was adored by an extended family. He had such hopes for his future, such potential. But unbelievably, our beloved son was also a drug addict.

For more than twenty years, Chris was trapped on a ride through a macabre house of mirrors, never knowing which twist or turn might bring him sorrow or pain, guilt or shame. He kept trying to escape, but never could find the way out. And for too many of those years, feeling guilty and desperate ourselves for not being aware of his plight sooner, and then not knowing how to help him, we unwittingly kept buying him "ride tickets" in the form of well-meant

financial support that only perpetuated his tragic journey. Isn't that what good parents do? Try to help their children when they are mired in pain and horror? We were at a loss, and Chris even more so.

Finally, it was grace, and the help of programs like Al-Anon and Parents Helping Parents, we came to realize that Chris' addiction was an illness, part of an eviscerating epidemic sweeping the nation. Something he could no more overcome without professional help than he could cure an affliction of diabetes or cancer.

Addiction is a disease. Who would willfully choose to inflict such repeated suffering upon themselves and those they love if it was a merely a matter of choice? I have witnessed Chris in the throes of sweaty, feverish, painful agony, but there's no way I can comprehend the compulsion to repeat it, time after time after time. Not even the addicted can do so.

Chris so desperately tried to win his fight. But tragically, the professional help he needed was extremely difficult or often even impossible to get. For those who work in jobs where there is scant or no health insurance, or who cannot work, or who lose their jobs because of the ravages of the illness, the despair is manifold. Often compounded by mental health issues, the disease of addiction is a life and death struggle made even more desperate by its attendant guilt and shame. Despite heroic efforts to overcome their despair enough to truly seek help, they too often find that there is no place available for them to get it.

On any day in Oklahoma, there are between 600 and 800 addicts who need rehabilitative treatment unavailable to them. The waiting lists are lengthy for the state-funded programs, and there are not even enough slots in private pay facilities for those who have insurance or other financial means to pay for them.

On numerous occasions, Chris tried to get a rehabilitative treatment placement, only to be told that it could be days or even weeks before one might become available. On the streets and with no viable means of support, he had to take his pitiful chances, hoping his luck might change, but knowing the odds were against him. And we were left to shuffle an incomplete deck, hoping for a full hand, trying to support him without enabling him.

Relying on short-term emergency room treatment and the incarceration of non-violent addicts and the mentally ill without hope of rehabilitation and treatment, can doom them to a life-long cycle of disease and despair. Meanwhile, all of us are paying for it, either monetarily or emotionally or both. Surely it makes sense, even if only economic sense, to increase the availability of preventative education and rehabilitative treatment programs. And isn't it also a compassionate thing to do.

While we still have much work to do to increase access to treatment in Oklahoma and the United States, I join the many families afflicted by this insidious disease who were so heartened by the bipartisan passage last July of the Comprehensive Addiction and Recovery Act (CARA).

I'm here today to honor our beloved son's struggle and ultimate death from drug addiction, and to represent the thousands upon thousands of individuals like him and families like ours. In the words of St. Francis of Assisi, "Start by doing what is necessary; then do what is possible; and suddenly, you find you are doing the impossible."

Just maybe, we can cut the frequency of those heart breaking, unexpected phone calls.