

To Chairman Nelson and fellow committee members,

My name is Tory Queensley, and I am a proud resident of Fargo in District 21. Today, I testify before you in full support of HB 1012, advocating for critical need of funding for the Behavioral Health Division, with a specific focus on the pregnant and parenting sector.

As a mother in recovery, I have lived through the heart-wrenching reality of battling addiction while pregnant. This experience has shown me the dire need for accessible, comprehensive services for women and families facing addiction, especially for those who are pregnant or parenting. I am deeply involved in our community's resources, and I witness firsthand the tremendous gap in services that provide a holistic, supportive approach to recovery.

The lack of adequate support for pregnant women in recovery perpetuates a cycle of generational trauma and addiction. Women struggling with addiction often face intense stigma as I have experienced personally, and this is even more pronounced when they are pregnant or already parents. It's time to break this stigma and offer real support—not just for mothers, but for fathers as well, as they too need access to resources that will help them become better parents and healthier individuals.

Imagine, for a moment, that the person closest to you—whether it's your daughter, your sister, your friend, or someone you care about deeply—has been battling addiction. She's faced unimaginable hardships throughout her life—struggling to find worth, to feel confident, to feel like she's just *normal*. She's never had the support she needs, fighting alone against a world that often doesn't understand her pain.

Now, imagine she finds out she's pregnant.

The fear that comes with pregnancy is overwhelming for anyone. But for a woman in active addiction, the fear is multiplied a hundredfold. She's not just worried about the future of her child—she's terrified for herself. Terrified of being judged. Terrified of what might happen to her baby. Terrified that the cycle of addiction, of hopelessness, will continue and destroy her family. This is not just a moment of fear. This is a crisis—an all-consuming, life-altering crisis. It's the kind of crisis that demands action, not just compassion, but real, tangible support. We cannot turn our backs on these women who are facing the impossible. They need help, they need support, and most importantly, they need the resources that will give them a chance to break free from the vicious cycle of addiction. My story reflects this exact scenario.

My story begins in a family where addiction was a constant presence—an invisible, toxic force shaping everything around me. As a young child, I was exposed to the chaos that came with drug and alcohol use. I remember hearing the fights, the yelling, the arguments that would erupt during the parties, while I lay upstairs, just trying to sleep so I could go to school the next day. I remember hiding when the police would show up, terrified and alone, with no one to comfort me. Or crying and screaming when they would haul my mother away and not knowing when I would see her again. I remember being the one who had to make my own meals and get myself to school because there was no one there to look out for me. No one to remind me that I was just a kid, and I shouldn't have to do any of this on my own.

I was alone a lot, and I felt like no one cared about me. No one saw me. I felt worthless, invisible, as though I didn't matter. I didn't grow up feeling loved or accepted. Confidence was a foreign concept, and I was convinced I wasn't good enough. I never had the chance to join sports or the band, never

learned the social skills needed to make friends. Instead, I found myself desperate for attention and any kind of comfort. That's when I turned to alcohol and drugs—something to fill the emptiness I'd been carrying for so long. The cycle continued, an inevitable result of the environment I was raised in and the lack of support I had.

By high school, I was using drugs regularly, and as I got older, the substances became harder, the behaviors riskier. I didn't feel like I had a reason to live. I didn't know that help was available to me, or that treatment could be a path to recovery—it felt like something you had to do because you were a problem, not a place of healing.

In September of 2019, I felt something was off and went to the doctor. As an addict, I'd never willingly walked into a clinic or hospital, but something told me I needed to find out if I was pregnant. When they confirmed it, I was in shock. I didn't know what to do. I was terrified. Terrified of being judged. Terrified of being seen for who I truly was—an addict.

I was afraid of what people would think, afraid I'd lose my child, so I tried to detox on my own. I tried to stop using the hardest drugs, thinking that if I could just get through it, I could protect my baby. But I had no idea how dangerous it was to try and quit cold turkey when I was pregnant. Even with all the willpower I could muster, I couldn't stay clean.

When I had my daughter, I remember being in that hospital, feeling more alone than ever. The way I was treated in that hospital—it was as though they saw me as the problem, not the person in need of help. They didn't understand what it's like to be alone, to be an addict, to feel like you're constantly fighting an uphill battle.

But that day, something shifted. I realized how lucky I was. By the grace of God, my daughter was okay. The fear of losing her became the catalyst for change. It drove me to start attending meetings, to seek help, and to fight to be better. But it wasn't easy. It took years before I was truly clean.

Today, I see women just like me—women who are still trapped in that cycle of addiction, women who are pregnant and terrified, women who don't have the coping skills or the support they need. They feel like there's no one who understands them, no one to turn to. And the fear they carry—of judgment, of losing their children, of failing—is overwhelming. They need help. They need support.

Women who are pregnant and have children are found lacking support. If a woman showed up pregnant with children in tow on the doors of a treatment center there would be nothing they could do. They would need to be housed or sheltered in order for the mother to gain access to treatment. This is mind blowingly unacceptable. The act it takes to admit you need help can be one of the hardest things an addict can do.

To take that step and then be told they cannot take you in for services until this other area is met is detrimental and people die from this. We know that addiction is often genetic, but early intervention can reduce the risk that future generations will follow the same path. This bill is not just an investment in services—it's an investment in our children, our families, and the future of our community.

My support for this bill goes beyond just funding—it's about making sure our voices are heard. It's about ensuring that future generations aren't doomed to repeat the same cycles of addiction and poor environmental exposure. When we intervene early, before a child is born, we give both the parents and

their children a fighting chance. When parents can break free from addiction and find help, they can become better parents, better individuals, and role models for their children. Women need a recovery housing environment where they are not separated from their children. They can seek out recovery and they can heal in an environment that fosters safety and security with support. They need effective case management throughout their journey and they need follow-up resources to ensure the continuity of care. The State of North Dakota needs a more structured pathway for women to follow and seek out support without the fear of child protective services having to intervene. Imagine a time where CPS can be looked at as a source of help and support and not the bad guys. Imagine being able to end the stigma that women face and being able to help them and their children seek better lives and break that cycle. Imagine actually making a difference in people's lives and changing the way our people see our system.

I urge you to support HB 1012, not just because it addresses a critical need, but because it offers a chance for lasting change, healing, and hope. Thank you for the time you have given to read this testimony and I appreciate the work you do for our state.

Tory Queensley