Children don’t care how much you know, until they know how much you care.
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Note to Staff from a Graduating Youth ...................................................... 29

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**For help in placing youth, or updates for services, contact:**

- **Harvey Funai**  
  Behavioral Health Program Manager  
  (206) 272-2156
- **MeLinda Trujillo**  
  Behavioral Health Program Manager  
  (360) 794-1365
- **Lauri Turkovsky**  
  Behavioral Health Program Manager  
  (360) 725-3812
- **Ruth Leonard**  
  Behavioral Health Program Manager  
  (360) 725-3742
- **Amy Martin**  
  Behavioral Health Youth Treatment Manager  
  (360) 725-3732
- **Tara Smith**  
  Behavioral Health Adult Treatment Manager  
  (360) 725-3701

---

**Additional youth resources:**

Call **866.TEENLINK (866.833.6546)** every evening 6-10pm

Youth online chat at [www.866teenlink.org](http://www.866teenlink.org)  
Monday, Tuesday & Thursdays 6-10pm

For 24-hour help for mental health, problem gambling and substance abuse, call **1-866-789-1511** or visit [www.waRecoveryHelpLine.org](http://www.waRecoveryHelpLine.org)
Youth Treatment Services Continuum of Care

MISSION STATEMENT

Youth services will be provided in a culturally relevant environment and in a culturally sensitive manner, which respects the diversity of the targeted population. Youth treatment services will:

- Be responsive to low-income, indigent youth and families who are in need of a community-based continuum of care.
- Be provided in a manner which reduces barriers and increases access, engagement, retention, and completion.
- Foster collaboration and community responsiveness at all levels of care, with other state agencies, including the Children’s Administration (CA), Juvenile Justice and Rehabilitation Administration (JJ&RA), Regional Support Networks (RSNs), and coordinated with academic and/or vocational needs.
- Be coordinated to reduce eligibility, financial, and clinical barriers to treatment resources.
- Ensure that family members and other significant adults in the lives of the youth we serve are welcomed, encouraged, and assisted in participating in the treatment, no matter how difficult or complicated the issues faced by the family.

Introduction

This is a resource guide to youth treatment services contracted by the Department of Social and Health Services (DSHS) - Division of Behavioral Health and Recovery (DBHR). The guide will clarify terms and definitions and provide instructions to refer youth to outpatient or residential treatment services.

The goals of DBHR-contracted youth chemical dependency treatment are to provide each youth and his/her family with a structured, age-appropriate program, which includes, but is not limited to:

a. Abstinence from alcohol and other drugs.
b. Ancillary treatment services to family members, which may include birth, adoptive, foster parents, and other caring adults and youth.
c. Comprehensive assessment of the youth’s drug and alcohol use, his/her family and other support systems, school involvement, and other high risk behavior, including suicide risk, HIV/AIDS Brief Risk Assessment, etc.
d. An assessment of adolescent development, including level of maturation, emotional stability and functioning, educational history, and learning ability.

Treatment should be provided which respects and addresses the age, gender, language, culture, ethnicity, and sexual orientation of participants and their family members.

DEFINITION AND REQUIREMENTS OF TREATMENT SERVICES

DBHR Certification: Certification is approval of a chemical dependency treatment program by DBHR. Certification of a program signifies that the program meets certain minimum standards as outlined in Washington Administrative Code (WAC) 388-877B includes a number of important references to youth counselors, outpatient and residential treatment, and treatment in schools.

Youth Contract Requirements: State certified outpatient and residential treatment programs have, as part of their contracts, specific guidelines for the treatment of youth, including specific assessment and counseling requirements, staffing ratios, reporting and referral requirements, etc. For specific information regarding
these contract requirements, contact your County Alcohol and Drug Coordinator, DBHR Behavioral Health Administrator, or the DBHR Behavioral Health Youth Treatment Manager.

**Assessment:** A thorough, multidimensional, individualized interview performed by a chemical dependency professional (CDP) to determine appropriateness for adolescent chemical dependency treatment. Either outpatient or residential treatment providers may conduct assessments. Often, agencies use a standardized, adolescent-specific chemical dependency assessment tool, such as the Global Assessment of Individual Needs (GAIN-I) or other appropriate assessment tools.

In compliance with Revised Code of Washington (RCW) 70.155.080 youth are prohibited from possessing tobacco products while participating in treatment services.

An assessment should include:

- An alcohol and drug use history.
- A family use pattern and addiction history.
- A description and assessment of existing support systems, including family and peer relationships and school involvement, and an assessment of high risk behaviors, including suicide risk evaluation and an HIV/AIDS Brief Risk Evaluation.
- An assessment of adolescent development, including level of maturation, emotional stability and functioning, educational history, and learning ability.

**DESCRIPTION OF ADOLESCENT OUTPATIENT SERVICES**

**A. Outpatient Treatment**

A state certified non-residential program, which provides chemical dependency assessments and an alcohol/drug-free counseling program for adolescents and young adults ages ten (10) through 17. Young adults ages 18 -20 may be served in youth agencies if appropriate. Collateral and family support services may also be provided to family members of youth clients. Clients under the age of ten (10) may be served with the approval of the DBHR contract manager. Outpatient treatment programs for youth are designed to diagnose, stabilize, counsel, and build family and social support systems, which promote abstinence and growth.

DBHR-funded youth outpatient services are funded through counties. A list of all these programs is located on pages 11 - 25 of this booklet.

**B. Outreach Services (contracted services with certified agencies)**

Defined as initiating discussion with youth regarding alcohol and other drugs, possible consequences of usage, and education and information about services and resources for individuals affected by their own substance abuse or chemical dependency, or by that of significant people in their lives. Youth outreach services may include outreach to youth in schools, Children’s Administration (CA), Juvenile Justice and Rehabilitation Administration (JJ&RA), Juvenile Courts, or referred by agencies or individuals concerned about children.

**DESCRIPTIONS OF ADOLESCENT WITHDRAWAL MANAGEMENT AND RESIDENTIAL TREATMENT SERVICES**

A DBHR certified and state licensed residential facility, which is voluntary, alcohol and drug-free, designed for youth, and supports abstinence from alcohol and other drugs. Family and significant other treatment is
included, as well as relapse and long-term recovery education and counseling. Individual programs may provide, depending upon the level of care (outlined in this section), more intensive therapeutic interventions and services. Some residential facilities treating youth may be a part of a program, which also treats adults. DBHR-contracted youth providers must comply with safeguards for the treatment of youth, which include separate and distinct sleeping room assignments, and specific developmentally appropriate programming.

The county contracted youth providers may conduct assessments to determine clinical eligibility for residential services, by DBHR-funded residential facilities. The treatment descriptions listed in this section are meant to be brief overviews. For more details on levels of care, contact the DBHR Behavioral Health Youth Treatment Manager, Amy Martin at (360) 725-3732.

DBHR-funded **residential, withdrawal management, and treatment services** are funded directly from DBHR to individual providers. A list of these providers is located in the DBHR’s “Directory of Chemical Dependency Treatment Services in Washington State,” located at: [http://www.dshs.wa.gov/dbhr/dadirectory.shtml](http://www.dshs.wa.gov/dbhr/dadirectory.shtml)

Financial assistance is available to those youth and families who qualify for residential treatment for the reimbursement of mileage and lodging (in-state only) associated with attendance at a DBHR-funded residential facility. See section on **Transportation Assistance/Family Hardship Program** on Page 10 of this booklet.

Taking into consideration the results of an assessment using ASAM Criteria makes determination of the need for inpatient treatment. The assessment process would include information regarding the safety of the minor, the likelihood of deterioration of the minors’ recovery if released and information received from collateral sources such as the parents, the patients’ referral, probation, school, etc.

**A. Youth Withdrawal Management/Crisis Stabilization Services**

The purpose of the Withdrawal Management and Crisis Stabilization Services for youth is to provide a safe, temporary, protective environment for at-risk/runaway youth who are experiencing harmful effects of intoxication and/or withdrawal from alcohol and other drugs, in conjunction with emotional and behavioral crisis, including co-existing or undetermined mental health symptomology. This service will address the needs of and treatment outcomes for youth who need chemical dependency and other treatment services but who may not be able to access these services due to acute intoxication and medical, psychological, and behavioral problems associated with their alcohol/drug use. Withdrawal management services are considered residential treatment. See Age of Consent Section.

Withdrawal Management/Crisis Stabilization Services are available to youth, ages 13 - 17, who are:

1. Experiencing harmful intoxication substance-induced disorders and/or withdrawal from alcohol/other drugs.
2. Experiencing an episode of clear and present danger to harm self/others due to alcohol/drug intoxication and/or withdrawal, with associated emotional and behavioral problems.
3. Experiencing co-existing or undetermined mental health symptomatologies, which need detoxification in order to make accurate assessment of treatment needs.

Youth under the age 13 or over age 17 may be served, based on clinical need and availability of age-appropriate services.

**B. Level I Youth Basic Residential Treatment**
Youth appropriate for this level of care include: Those ages 13 through 17 who evidence cognitive development of at least 11 years of age, have a primary diagnosis of chemical dependency, and require less clinical supervision and behavior management. A chemical dependency professional (CDP) will conduct a clinical assessment to participants, age 12 and younger, or age 18, 19, or 20, to determine their appropriateness for youth treatment.

Generally speaking, youth participants in Level I will not necessarily require intensive therapeutic intervention for other disorders, such as mental disorders or aggressive behavior, as part of primary chemical dependency treatment. Length of stay is variable, based on clinical needs determined by ASAM Criteria and program design.

Level I programs may admit youth that meet some of the clinical characteristics of a Level II-type client, if the decision is based on clinical assessment and program ability to meet the needs of the youth and their family.

C. Level II Youth Intensive Residential Treatment

Youth appropriate for this level of care include: Those ages 13 through 17 who meet the criteria for being both chemically dependent and with the symptoms of a mental health diagnosis (or potential diagnosis) requiring concurrent management with the treatment of a substance use disorder (e.g., attention deficit-hyperactivity disorder, depression, conduct disorder, etc.) and/or extreme family dysfunction, prior trauma due to emotional, physical, and/or sexual abuse, which may present a major risk of danger to the client and/or others, and high risk to not complete treatment. Participant’s age 12 and younger, or ages 18, 19, or 20 may be served with clinical assessment of appropriateness for youth treatment.

Length of stay is variable based on ASAM Criteria, but usually will be longer than Level I treatment due to the need to address mental health symptoms or potential diagnosis. Level II programs are required to provide chemical dependency counseling staff trained in areas other than chemical dependency, such as developmental issues, abuse, anger, aggression, and behavior management. They are also required to provide a mental health specialist position, and some form of staff and/or physical security for youth who are at risk to leave treatment against clinical advice. Some Level II programs are locked or are secure facilities. Youth with serious criminal history, history of assaultive behavior, sexual assault, murder, or attempted murder may be refused admission to treatment, but only upon review by DBHR youth program managers.

Level II programs may serve youth who fit the Level I characteristics, but Level II clients will have assessment and admission priority.

D. Youth Recovery House

Youth appropriate for this service include: Those youth ages 13 through 17 who have completed residential chemical dependency treatment and who cannot immediately live with their legal guardians, parents, foster parents, or relatives, or other out-of-home placement. Youth ages 18, 19, or 20 may be served in a youth facility if assessed by a CDP as developmentally appropriate for a youth treatment program. Youth from both Level I and Level II programs may be served in Recovery House Programs. DBHR currently has four recovery houses available for youth completing inpatient treatment.

Recovery House Programs provide adequate structure and supervision, continued treatment emphasis on recovery and abstinence from alcohol and other drugs, and improvement of living skills,
including education and employment skills. The programs also provide access to community support systems, and youth participation in age-appropriate activities. The Recovery House Program is an extension of and transition from residential treatment.

E. Secure Treatment

Some Level I and Level II facilities provide interior/exterior security systems to reduce potential for youth running away.

HOW TO REFER YOUTH TO TREATMENT

Each DBHR-contracted youth provider is responsible for determining a youth's clinical and financial eligibility for treatment at that contracted facility. Those youth who have already been determined to meet Apple Health (formerly Medicaid) and/or have medical coupons will be eligible for DBHR-contracted outpatient and residential services. Income eligibility information may be accessed through the youth provider (also see section on Early Periodic Screening Diagnosis and Treatment [EPSDT] on Page 9 of this booklet). Other family resources may be used in combination with DBHR funds if appropriately determined, such as insurance or private pay.

Generally, it is best to refer a youth to an outpatient facility for the initial assessment, although residential facilities will provide assessments for DBHR-eligible youth without cost. The outpatient counselor can ensure that youth who are referred to residential services are referred back to the local outpatient program for continuing care support. Residential facilities will make every attempt to refer youth back to local outpatient services.

Although many youth reluctantly agree to enter treatment, there has been a small percentage of extremely resistant, defiant, runaway, non-offender youth whose parents have not been able to get them into treatment.

With enactment of the At-Risk Runaway Youth Act, known as the "Becca Bill," state legislators focused attention on a parent's right to provide for the protection of and to establish guidelines for their runaway, out-of-control youth. The "Becca Bill" gives parents additional options for accessing needed services. In support of this legislation, DBHR assists parents of youth with an At-Risk Youth (ARY) petition and those who are being admitted under the Involuntary Treatment Act (ITA). The ARY petition originates with the parent's local office of the DCFS, where a Family Reconciliation Services caseworker will assist the parent in filing the petition with Juvenile Court. The ARY petition may be a helpful tool if all other avenues to get the youth into treatment have failed.

Youth who may be experiencing immediate and life threatening consequences of chemical dependency, and who meet the incapacity criteria described in RCW 70.96A.140, may require involuntary commitment. A Designated Chemical Dependency Specialist initiates the ITA commitment after an investigation and evaluation of specific facts alleging that a youth is incapacitated as a result of chemical dependency (see Appendix I in the DBHR “Provider Directory”).

BECCA Information

In the 1998 Legislative Session, Substitute Senate Bill 6208 was passed into law. The bill did not change the current laws regarding consent for outpatient and inpatient treatment, although they re-titled them as
"voluntary" treatment processes (listed in section "Age of Consent" in this Guide). The law added new procedures for that which is referred to as "parent-initiated" outpatient and inpatient treatment.

"Parent initiated" treatment allows a parent to bring a minor child to an outpatient or inpatient treatment provider to have the child assessed for admission, without the child's consent.

The new definition of "medical necessity" refers to inpatient care that will "alleviate a chemical dependency, or prevent the worsening of chemical dependency conditions that endanger life, or cause suffering or pain." Minor youth also have the right to petition the court for review of their continued stay in treatment. This and other safeguards will support the treatment of minors who are medically in need of treatment, but who refuse to consent or "volunteer" to be admitted.

In order to assist parents and treatment providers with the intent of all the Becca legislation, DBHR has defined “Becca-type” youth as those who have applied for treatment after going through any of the following processes:

- Parent-initiated admission of a non-consenting youth.
- Youth with At-Risk Youth (ARY) or Child In Need of Services (CHINS) petitions.
- Youth under an Involuntary Treatment Act (ITA) order pursuant to 70.96A.140.
- Youth referred after having been admitted to a DBHR-contracted Youth Withdrawal Management/Crisis Stabilization bed.
- Youth applying for admission as a “Self-Consent,” whose parents are unwilling or unable to provide, consent, and who meet the definition of a CHINS youth.
- Native American youth referred by a tribal court with any of the above legal designations.

For Further Information about Youth Treatment Resources Including Assessment, Contact:

- Local County Alcohol and Drug Coordinator (listed in the Provider Directory)
- DBHR Behavioral Health Program Manager (listed on the inside cover of the Provider Directory).
- Amy Martin, DBHR Behavioral Health Youth Treatment Manager, at (360) 725-3732
- Washington Recovery Help Line (866-789-1511) or 866.TEENLINK (866-833-6546) every evening 6-10pm

AGE OF CONSENT FOR YOUTH TREATMENT PROGRAMS

Parental authorization is required for any treatment of a minor under age 13.

- **Outpatient chemical dependency treatment.** Any person 13 years of age or older may give consent for counseling, care, treatment, or rehabilitation by a treatment program or by any person. Outpatient programs providing treatment to minors 13 years of age or older shall provide notice of the minor's request for treatment to the minor's parents within seven days if the minor signs a written consent authorizing the disclosure, or the treatment program director determines that the minor lacks capacity to make a rational choice regarding consent disclosure.

- **Residential chemical dependency treatment (includes withdrawal management services).** Parental consent is required for anyone under the age of 18, except that inpatient programs can now admit youth without a parental consent if the youth meets the definition of a Child in Need of Services. These youth should only be admitted if the youth has been living outside of the family home and the
parents are unavailable, unable, or unwilling to provide consent to treatment. Admitting a self-consenting youth is a determination made by the program to which the youth applies, based on information obtained by the program, and the program must document efforts to locate and engage the parents in the treatment process.

If legal custody is held by DSHS, the DSHS caseworker must be contacted to consent to residential chemical dependency treatment.

**FAMILY PARTICIPATION**

Family participation is encouraged and strongly recommended. A definition of family includes birth, adoptive, foster, stepparent, and marital relationships.

**EARLY PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT**

This is a Medicaid funded preventative health care program for children and youth 20 years of age and younger. Washington State calls its Early Periodic Screening Diagnostic and Treatment (EPSDT) Program "Healthy Kids." In addition to providing for routine health concerns, any needed treatment identified in the EPSDT exam must be provided. For Medicaid youth who are substance-abusing, treatment must be provided if a health care practitioner through the EPSDT/Healthy Kids program identifies the need.

To assure that youth making application for services receive the full benefit of the EPSDT/Healthy Options program, DBHR-funded youth contractors shall screen each applicant and make referrals as follows:

a. All youth shall be screened for financial eligibility and referred to the local DSHS Community Services Office (CSO), for Apple Health eligibility determination if the financial screen so warrants.

b. Contracted programs shall refer Apple Health eligible youth that have not previously received an EPSDT/Healthy Options health screen to an EPSDT/Healthy Options primary health care provider for such services.

**MEDICAL COUPONS FOR DBHR-FUNDED YOUTH IN RESIDENTIAL TREATMENT**

When possible, youth who are referred to residential treatment, who do not currently have any medical coupons, should be assisted in attaining them prior to entering treatment. If coupons for medical assistance are not obtained prior to entering treatment, youth can be assisted by treatment staff upon admission to complete a form that can be mailed to the local DSHS, EMFS office. To provide the most comprehensive medical and health services for DBHR-funded youth in treatment, contact the local EPSDT screener in your area.


**TRANSPORTATION ASSISTANCE/FAMILY HARDSHIP PROGRAM**

A program intended to assist families of youth who are patients in DBHR-funded, residential chemical dependency treatment programs, and youth withdrawal management services. The program will assist families with travel and lodging costs to enable them to fully participate in the family treatment program. Eligibility is based on those families at the lowest income level with the least amount of resources, and who
are required to travel more than 50 miles one way to attend treatment activities. Priority is given for travel that is clinically required. Lodging, when required, is also reimbursable. DBHR reimburses residential providers who, in turn, directly reimburse families. Add language from contract that includes in-state only

**PREGNANT AND POSTPARTUM YOUTH**

These youth are eligible for all substance abuse treatment services available for the youth population in general, as well as some specialized services for pregnant women. Pregnant youth who might require withdrawal management and medical stabilization services are assessed through county Alcoholism and Drug Addiction Treatment and Support Act (ADATSA) Assessment Centers. Adolescents who require withdrawal management and medical stabilization services must be determined financially eligible through the local DSHS, CSO office.

Pregnant youth can receive withdrawal management and medical stabilization in a hospital-based intensive inpatient treatment program. There are presently a number of hospital-based intensive inpatient treatment programs across the state with a program for pregnant women. Some of these programs may have specific services for pregnant adolescents. See the following Appendix listing, in DBHR's Provider Directory titled: DBHR Certified Hospitals Providing Intensive Inpatient Care for Chemical Using Pregnant Women (Appendix F); DBHR-Contracted Residential Services for Women and Children (Appendix E); and DBHR-Contracted Housing Support Services for Pregnant and Postpartum Women (Appendix D) which can be found on the web site at: http://www.dshs.wa.gov/dbhr/dadirectory.shtml

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**YOUTH OUTPATIENT CONTRACTORS**

<table>
<thead>
<tr>
<th>ADAMS COUNTY</th>
<th>Olympic Personal Growth Center</th>
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<tr>
<td>Community Counseling Services</td>
<td>390 E Cedar Street</td>
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<tr>
<td>Community Counseling Services</td>
<td>Sequim, WA 98282</td>
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<tr>
<td>425 E Main Street</td>
<td>360-681-8463</td>
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<tr>
<td>Othello, WA 99344</td>
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<tr>
<td>509-488-5611</td>
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<tr>
<th>ASOTIN COUNTY</th>
<th>True Star Behavioral Health Services</th>
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<tr>
<td>Quality Behavioral Health</td>
<td>1912 W 18th Street</td>
</tr>
<tr>
<td>900 Seventh Street</td>
<td>Port Angeles, WA 98363</td>
</tr>
<tr>
<td>Clarkston, WA 99403</td>
<td>360-417-2282</td>
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<tr>
<td>509-758-3341</td>
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<th>West End Outreach Services (Forks)</th>
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<tr>
<td>Community Health Center La Clinica</td>
<td>Forks Community Hospital</td>
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<tr>
<td>dba: Nueva Esperenza Counseling Center</td>
<td>530 Bogachiel Way</td>
</tr>
<tr>
<td>720 W Court Street, Suite 8</td>
<td>Forks, WA 98331</td>
</tr>
<tr>
<td>Pasco, WA 99301</td>
<td>360-374-6177</td>
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<tr>
<td>509-545-6506</td>
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<th>Educational Service District 123</th>
<th>Daybreak Youth Services</th>
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<tr>
<td>Youth Recovery Program</td>
<td>11818 SE Mill Plain Boulevard</td>
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<tr>
<td>3918 W Court Street</td>
<td>Vancouver, WA 98684</td>
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<tr>
<td>Pasco, WA 99301</td>
<td>360-750-9635</td>
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<tr>
<td>509-547-8441</td>
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<tr>
<th>Comprehensive Dependency Health Services</th>
<th>Community Services Northwest</th>
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<tbody>
<tr>
<td>2715 Andrews Loop, Suite C</td>
<td>1601 E Fourth Plain Boulevard</td>
</tr>
<tr>
<td>Pasco, WA 99301</td>
<td>Vancouver, WA 98660</td>
</tr>
<tr>
<td>(509) 412-1051</td>
<td>360-705-9378</td>
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<tr>
<th>CLARK COUNTY</th>
<th>Daybreak Youth Services</th>
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<tbody>
<tr>
<td>Change Point, Inc.</td>
<td>11818 SE Mill Plain Boulevard</td>
</tr>
<tr>
<td>10621 NE Coxley Drive, Suite #103</td>
<td>Vancouver, WA 98684</td>
</tr>
<tr>
<td>Vancouver, WA 98662</td>
<td>360-750-9635</td>
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<td>360-705-9378</td>
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First Step Community Counseling  
415 N Morain Street, Suite A, B,C & D  
Kennewick, WA 99336  
509-735-6900

Lourdes Counseling Center  
1175 Carondelet Drive  
Richland, WA. 99352  
509) 943-9104

Somerset Counseling Center  
1305 Mansfield Street, Suite 5  
Richland, WA  99352  
509-942-1624

CHELAN/DOUGLAS COUNTY  
Center for Alcohol and Drug Treatment  
327 Okanogan Avenue  
Wenatchee, WA  98801  
509-662-9673

CLALLAM COUNTY  
Jamestown S'Klallam Tribal Program  
1033 Old Blyn Highway  
Sequim, WA  98382  
360-681-4626

Klallam Counseling Services (formerly  
Lower Elwha Tribal Program)  
1026 E First Street, Suite 2  
Port Angeles, WA  98362  
360-452-4432

Makah Chemical Dependency Program  
Front Street  
Neah Bay, WA  98357  
360-645-2461  
Serves Native Americans Only

FRANKLIN COUNTY  
(See Benton County listing)

GARFIELD COUNTY  
Garfield County Human Services  
856 Main Street  
Post Office Box 758  
Pomeroy, WA  99347  
509-843-3791

GRANT COUNTY  
Grant County Prevention and Recovery Center  
1525 E Wheeler Road  
Post Office Box 1217  
Moses Lake, WA  98837  
509-765-5402

GRAYS HARBOR COUNTY  
Chehalis Tribal Recovery Program  
420 Howanut Drive  
Post Office Box 536  
Oakville, WA  98568  
360-273-5595

Quinault Indian Nation Treatment Program  
116 Quinault Street  
Taholah, WA  98587  
360-276-8211  
Serves Native Americans Only

Lifeline Connections  
1601 E Fourth Plain Boulevard –  
Building #17 - Suite A212  
Vancouver, WA 98661  
360-397-8246

COLUMBIA COUNTY  
Blue Mountain Counseling  
221 E Washington Street  
Dayton, WA  99328  
509-382-1164

COWLITZ COUNTY  
Awakenings  
206 ½ NW 2nd Ave.  
Longview, WA  98632  
360-423-2806

Cowlitz Tribal Treatment – Main Branch  
1044 11th Avenue  
Longview, WA  98632  
360-575-3316

FERRY COUNTY  
Northeast Washington Alliance  
Counseling Services-  
Republic Chemical Dependency Unit  
65 N. Keller  
Republic, WA 99166  
509-775-2958

Garfield County Human Services  
17018 15th Avenue NE  
Seattle, WA  98155  
206-362-7282

Center for Human Services  
22105 23rd Drive SE  
Bothell, WA  98021  
206-362-7282

Central Youth and Family Services  
1901 Martin Luther King Jr. Way S  
Seattle, WA  98144  
206-322-7676

Consejo Counseling and Referral Services  
3808 S Angeline Street  
Seattle, WA  98118  
206-461-4880

Consejo Kent Youth Outpatient Services  
515 W Harrison, Suite 109  
Kent, WA  98032  
206-461-4880

Friends of Youth-Branch of Issaquah  
Youth and Family Program  
414 Front Street N  
Issaquah, WA  98027  
425-392-6367
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Phone Number</th>
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<tr>
<td>Aberdeen</td>
<td>True North - ESD #113</td>
<td>1700 Cherry Street, Aberdeen, WA 98520</td>
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<tr>
<td>Island County</td>
<td>Island County Recovery Services</td>
<td>31640 State Route 20, Suite 1, Oak Harbor, WA 98277</td>
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<td>Jefferson County</td>
<td>Safe Harbor Recovery Center</td>
<td>686 Lake Street, Suite 400, Port Townsend, WA 98368</td>
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<td>King County</td>
<td>Asian Counseling and Referral Services</td>
<td>3639 Martin Luther King Jr. Way S, Seattle, WA 98144</td>
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<td>Auburn Youth Resources</td>
<td>816 F Street SE, Auburn, WA 98002</td>
<td>253-939-2202</td>
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<td>King County Cont.</td>
<td>Sea Mar Renacer Youth Treatment Center</td>
<td>10001 17th Place S, Seattle, WA 98168</td>
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<tr>
<td>Seattle Counseling Services</td>
<td>1216 Pine Street, Suite 300, Seattle, WA 98101</td>
<td>206-323-1768</td>
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<tr>
<td>Sound Mental Health</td>
<td>Administrative Offices</td>
<td>1600 E Olive Street, Seattle, WA 98122</td>
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<td>Sound Mental Health - Auburn</td>
<td>4238 Auburn Way N, Auburn, WA 98002</td>
<td>206-302-2200</td>
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<td>Sound Mental Health - Bellevue</td>
<td>14216 NE 21st Street, Bellevue, WA 98007</td>
<td>206-302-2200 / 425-653-4900</td>
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<td>Sound Mental Health – Capital Hill</td>
<td>1600 E Olive Street, Seattle, WA 98112</td>
<td>206-302-2200</td>
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<td>Sound Mental Health - Northgate</td>
<td>9706 4th Avenue NE, #303, Seattle, WA 98115</td>
<td>206-302-2900</td>
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<td>Sound Mental Health - Tukwila</td>
<td>6100 S Center Boulevard, 3rd floor, Tukwila, WA 98188</td>
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<tr>
<td>Integrative Counseling Services</td>
<td>701 N 36th Street, Suite 300, Seattle, WA 98103</td>
<td>206-216-5000</td>
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<td>Kent Youth and Family Services</td>
<td>Kent, WA 98032</td>
<td>253-859-0300</td>
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<td>Muckleshoot Behavioral Health Program</td>
<td>Auburn, WA 98092</td>
<td>253-804-8752 Serves Native Americans Only</td>
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<td>Northshore Youth and Family Services</td>
<td>Bothell, WA 98011</td>
<td>425-485-6541</td>
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<td>Renton Area Youth and Family Services</td>
<td>Renton, WA 98055</td>
<td>425-271-5600</td>
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<td>WAPI Community Services</td>
<td>Washington Asian/Pacific Islander Families Against Substance Abuse (WAPIFASA)</td>
<td>3722 S Hudson Street, Seattle, WA 98118</td>
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<td>Youth Eastside Services-Main Facility</td>
<td>Bellevue, WA 98008</td>
<td>425-747-4YES</td>
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<td>Youth Eastside Services-Lake Washington</td>
<td>Kirkland, WA 98034</td>
<td>425-747-4YES</td>
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<td>Youth Eastside Services- Redmond</td>
<td>Redmond, WA 98052</td>
<td>425-869-6036 / 425-747-4937</td>
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<td>Kitsap County</td>
<td>Cascade Recovery Center</td>
<td>9095 McConnell Avenue NW, Post Office Box 3452, Silverdale, WA 98383</td>
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<td>Kitsap Adolescent Recovery Services (KARS)</td>
<td>Port Orchard, WA 98366</td>
<td>360-337-5470</td>
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<td>Kitsap Mental Health Services</td>
<td>5455 Almira Drive NE, Bremerton, WA 98310</td>
<td>360-373-5031</td>
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<tr>
<td>Port Gamble S’Klallam Tribe</td>
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206-444-7900
Therapeutic Health Services – Kent Branch
24823 Pacific Highway S, #103
Kent, WA 98032
206-681-0010

Therapeutic Health Services – Rainier Branch
5802 Rainier Ave S
Seattle, WA 98118
206-723-1980

Vashon Youth and Family Services
20110 Vashon Highway SW
Vashon Island, WA 98070
206-463-5511

Washington Asian/Pacific Islander Families Against Substance Abuse (WAPIFASA)
606 Maynard Avenue S, Suite 106
Seattle, WA 98104
206-223-9578

LEWIS COUNTY
True North – ESD #113
2100 N National Avenue, Box 12
Chehalis, WA 98532
360-748-2274

LINCOLN COUNTY
Lincoln County Alcohol/Drug Center
510 Morgan Street
Post Office Box 152
Davenport, WA 99122
509-725-2111

MASON COUNTY
(See Thurston County listing)

OKANOGAN COUNTY
Colville Confederated Tribes
Tribal Headquarters
Nespelem, WA 99155
509-634-2600  Serves Native Americans Only

Colville Confederated Tribes – Omak Branch
507 Benton Street
Omak, WA 98841
509-422-7410  Serves Native Americans Only

Okanogan Behavioral Healthcare, Inc
1007 Koala Drive
Omak, WA 98841
509-826-5600

PACIFIC COUNTY
Shoalwater Bay Indian Tribe
2373 Old Tokeland Road, Building E
Tolke, WA 98590
360-267-8126  Serves Native Americans Only

True North- ESD 113 - Pacific
22 Viking Way
Raymond, WA 98577
360-942-3271

Willapa Behavioral Health
(North Pacific County)

31912 Little Boston Road NE
Kingston, WA 98346
360-297-3412  Serves Native Americans Only

KITTITAS COUNTY
Alcohol and Drug Dependency Services
507 Nanum, Room 111
Ellensburg, WA 98926
509-925-9821

KLICKITAT COUNTY
Dependency Health Services-Goldendale
112 W Main Street
Goldendale, WA 98620-9286
509-773-5801

Dependency Health Services- White Salmon
432 NE Tohomish
White Salmon, WA 98672
509-493-3400

PEND OREILLE COUNTY
Counseling Services
101 S Garden Avenue
Newport, WA 99156
509-447-5651

PIERCE COUNTY
Community Counseling Institute, Inc
2502 Tacoma Avenue
Tacoma, WA 98402
253-759-0852

Consejo Counseling & Referral Service
5915 Orchard Street W, Unit B
Tacoma, WA 98466
253-385-1528

Foundation for Multicultural Solutions
El Camino Program
2316 S State Street, Suite B
Tacoma, WA 98405
253-572-3214

Puyallup Tribal Treatment Center
2209 E 32nd Street
Tacoma, WA 98404
253-593-0247  Serves Native Americans only

Remann Hall Alcohol/Drug Development Program (RHADD)
Pierce County Juvenile Court
5501 6th Avenue
Tacoma, WA 98406
253-798-7900

The Center (Metropolitan Development Council)
721 S Fawcett Avenue #203
Tacoma, WA 98402
253-593-2740

SAN JUAN COUNTY
Compass Health – Friday Harbor
520 Spring Street
Friday Harbor, WA 98250
360-378-2669
Willapa Behavioral Health
(South Pacific County)
2204 N Pacific Avenue
Long Beach, WA 98631
360-642-3787

PEND OREILLE COUNTY
Camas Path BHS - North
Kalispel Tribe of Indians
72 Camas Flat Road
Cusick, WA 99119
509-447-7412  Serves Native Americans Only

Compass Health – Lopez Island
46 Eads Lane, Lopez Village, Suite D
Lopez, WA 98261
360-378-2669

Compass Health – Orcas Island
1286 Mt. Baker Road, Suite B201 &B203
Eastbound, WA 98245
360-378-2669

SKAGIT COUNTY
Northwest ESD 189
1601 R Avenue
Anacortes, WA 98221
360-299-4010

Phoenix Recovery Services
1601 E College Way, Suite A
Mount Vernon, WA 98273 360-848-8437
SKAGIT COUNTY CONT.
Sea Mar Substance Abuse-Mt Vernon
1010 E College Way
Mount Vernon, WA 98273
360-428-8912

Skagit Recovery Center-John King Recovery House
1905 Continental Place
Mt. Vernon, WA 98273
360-428-7835

Upper Skagit Tribe CD Tx Program
25959 Community Plaza Way
Sedro Woolley, WA 98284
360-854-7070 Serves Native Americans Only

SKAMANIA COUNTY
Skamania County Community Health
710 SW Rock Creek Drive
Stevenson, WA 98648
509-427-3850

SNOHOMISH COUNTY
Catholic Community Services-Everett
2610 Wetmore Avenue
Everett, WA 98201
425-258-5270

Catholic Community Services – Marysville
1227 2nd Street
Marysville, WA 98270
360-651-2366

Sea Mar Behavioral Health – Everett
5007 Claremont Way
Everett, WA 98203
425-609-5505

Sea Mar Behavioral Health - Lynnwood
19707 44th Avenue W, Suite 101
Lynnwood, WA 98036
425-977-2560

Sea Mar Behavioral Health - Monroe
14090 Fryelands Boulevard SE, Suite 347
Monroe, WA 98272
360-805-3122

Stillaguamish Tribe of Indians
17014 59th Avenue NE
Arlington, WA 98223
360-435-3985 Serves Native Americans Only

Therapeutic Health Services - Everett
9930 Evergreen Way, Building Z150
Everett, WA 98204
425-263-3006

Tulalip Tribal Behavioral Health Services (Youth)
2821 Mission Hill Road
Tulalip, WA 98271
360-716-4400 Serves Native Americans Only

THURSTON/MASON COUNTY CONT.
True North – ESD #113-Tumwater
6005 Tyee Drive SW

SPOKANE COUNTY
Daybreak of Spokane
960 E 3rd Avenue
Spokane, WA 99202
509-624-3227 x 24

Daybreak of Spokane (Valley Outpatient Program)
11711 E Sprague Avenue, Suite D4
Spokane, WA 99206
509-927-1991

Daybreak of Spokane
4001 North Cook Street
Spokane, WA 99207
509-444-7033

Excelsior Youth Center
3754 Indian Trail Road W
Spokane, WA 99208-4736
509-328-7041

N.A.T.I.V.E. Project
Alcohol/Drug Outpatient Program
1803 W Maxwell
Spokane, WA 99201-2831
509-325-5502

STEVENS COUNTY
Northeast Washington Alliance Counseling Services
Chemical Dependency Unit
165 E Hawthorne Avenue
Colville, WA 99114
509-684-4597

Northeast Washington Alliance Counseling Services _Chewelah
Chemical Dependency Unit
301 E Clay, Room #201
Chewelah, WA 99109
509-935-4808

THURSTON/MASON COUNTY
Nisqually Tribal Substance Abuse and Prevention Program
4816 She-Nah-Num Drive SE
Olympia, WA 98513
360-459-5312 Serves Native Americans Only

Northwest Indian Treatment Center
Squaxin Island Tribal
70 Squaxin Lane SE
Shelton, WA 98584
360-426-9781 Serves Native Americans Only

St. Peter Chemical Dependency Center
4800 College Street SE
Lacey, WA 98503
360-456-7575 Toll Free: 1-800-332-0465

True North – ESD #113-Mason
807 W Pine Street
Shelton, WA 98584
360-427-2050

Central WA Comprehensive Mental Health
402 S 4th Avenue
Yakima, WA 98902

K-6 Youth Residential
Tumwater, WA 98512
360-464-6870

True North – ESD #113- Yelm
1315 Yelm Highway
Yelm, WA 98597
360-458-6233

WAHKIAKUM COUNTY
Wahkiakum Chemical Dependency Services
42 Elochoman Valley Road
Cathlamet, WA 98612
360-795-8630

WALLA WALLA COUNTY
Serenity Point Counseling Service
912 S 2nd Avenue
Walla Walla, WA 99362
509-529-6036

WHATCOM COUNTY
Catholic Community Services Recovery Center
515 Lakeway Drive
Bellingham, WA 98225
360-676-2187

Lummi Counseling Services
2530 Kwina Road
Bellingham, WA 98226
360-384-2330  Serves Native Americans Only

Nooksack Tribe Genesis II
6750 Mission Road
Everson, WA 98247
360-966-7704  Serves Native Americans Only

WHITMAN COUNTY
Palouse River Counseling
340 NE Maple Street, #2
Pullman, WA 99163
509-334-1133

YAKIMA COUNTY
Behavioral Health Services
Yakima Valley Farm Workers Clinic
120 S 3rd Street, Suite 100
Yakima, WA 98901
509-575-8457

Dependency Health Services
505 S 4th Avenue
Yakima, WA 98902
509-248-1200

Merit Resources-Sunnyside
702 Franklin Avenue
Post Office Box 921
Sunnyside, WA 98944
509-837-2089

Merit Resources—Toppenish
321 W First Avenue
Toppenish, WA 98948
509-865-5233

Merit Resources—Wapato
312 W 2nd Street
Post Office Box 1067
Wapato, WA 98951
509-877-7271

Merit Resources—Yakima
315 N 2nd Street
Yakima, WA 98907
509-469-9366

Sundown M Ranch
2280 State Route 821
Yakima, WA 98901

Triumph Treatment Services
102 S Naches Avenue
Post Office Box 2849
Yakima, WA 98907
509-248-1800

Yakama Indian Nation Comprehensive Alcoholism Program
20 Gunnyon Road
Toppenish, WA 98948
509-865-5121  Serves Native Americans Only

For youth treatment at DBHR-certified private agencies that do not receive public funding, refer to the DBHR “Provider Directory” and find “YOUTH” under TREATMENT FOCUS of each listed agency.

For an updated list, for other information, or to report changes, contact:
Amy Martin at 360-725-3732,
Toll Free at 1-877-301-4557, or via email at:
martiak2@dshs.wa.gov
DBHR-FUNDED YOUTH RESIDENTIAL
CHEMICAL DEPENDENCY TREATMENT/DETOX SERVICES
(Revised August 2013)

DBHR-funded youth treatment and detox beds are open to youth regardless of county of residence. It is recommended that services be used closest to adolescent’s home, when possible. See further program description information in certified treatment program listings.

CLARK COUNTY
Level II Facilities:

Daybreak Youth Services-Vancouver
2924 Falk Road
Vancouver, WA 98661
360-750-9588 (14 DBHR Beds)
(Secure, males only)
for Admissions, call 888-454-5306 (26)

KING COUNTY
Youth Detox/Stabilization Facilities:

Lakeside Milam Recovery Center
10322 NE 132nd Street
Kirkland, WA 98034
425-823-3116/Toll Free: 800-231-4303

Recovery Centers of King County
Detoxification Center
1701 18th Avenue S
Seattle, WA 98144
206-325-5000

Level II Facilities:

Lakeside-Milam Recovery Center
12845 Ambaum Boulevard SW
Seattle, WA 98146
206-241-0890
Toll Free: 800-231-4303
(8 DBHR Beds)

Ryther
2400 NE 95th Street
Seattle, WA 98115
206-525-5050
(10 DBHR Beds)
(Secure, males only)

SeaMar Renacer Youth Facility
10001 17th Place S
Seattle, WA 98168
206-766-6960
(14 DBHR Beds; males, minority, primarily King County)
PIERCE COUNTY
Youth Detox/Stabilization Facilities:

Tacoma Detoxification Center
721 S Fawcett Avenue, Room 100
Tacoma, WA  98402
253-593-2413

SKAGIT COUNTY
Youth Detox/Stabilization Facilities:

Skagit Recovery Center -
John King Recovery House
1905 Continental Place
Mount Vernon, WA  98273
360-428-7835

Recovery House Facilities:

Skagit Recovery Center -
John King Recovery House
1905 Continental Place
Mount Vernon, WA  98273
360-428-7835
(17 DBHR Beds)

SPOKANE COUNTY
Youth Detox/Stabilization Facilities:

Community Detox Services
312 W 8th Avenue
Spokane, WA  99204
509-477-4631

Level I Facilities:

Healing Lodge of the Seven Nations –
Sage Program
5600 E 8th Avenue
Spokane, WA  99212
509-533-6910
(9 DBHR Beds; males only)

Healing Lodge of the Seven Nations –
Cedar Program
5600 E 8th Avenue
Spokane, WA  99212
509-533-6910
(9 DBHR Beds; males only)
SPOKANE COUNTY CONT.

Level I Facilities:

Healing Lodge of the Seven Nations – Pelpalwichiya Program
5600 E 8th Avenue
Spokane, WA 99212
509-533-6910
(7 DBHR Beds; females only)

Level II Facilities:

Daybreak Youth Services-Spokane
628 S Cowley Street
Spokane, WA 99202
509-624-3227
for Admissions, call 888-454-5306 (26)
(17 DBHR Beds)

Excelsior Youth Center
Starting Point
3754 W Indian Trail Road
Spokane, WA 99208-4736
509-328-7041
(11 DBHR Beds; males only)

Recovery House Facilities:

Excelsior Youth Center
Turning Point
3754 W Indian Trail Road
Spokane, WA 99208-4736
509-328-7041
(11 DBHR Beds; males only)

THURSTON COUNTY

Youth Detox/Stabilization Facilities:

Providence St. Peter
Chemical Dependency Center
4800 College Street SE
Lacey, WA 98503
360-459-8811

Level II Facilities:

Providence St. Peter
Chemical Dependency Center
4800 College Street SE
Lacey, WA 98503
360-459-8811
(9 DBHR Beds)

WHATCOM COUNTY

Level II Facilities:

SEAMAR/Visions
1603 E Illinois
Bellingham, WA 98226
360-647-4266 (17 DBHR Beds; females only)

Recovery House Facilities

SEAMAR/Visions
1603 E Illinois
Bellingham, WA 98226
360-647-4266 (6 DBHR Beds, females only)

YAKIMA COUNTY
Youth Detox/Stabilization Facilities:

Two Rivers Landing
504 S 3rd Avenue
Yakima, WA 98902
509-469-3727

Level I Facilities:

Sundown M Ranch
2280 State Route 821
Yakima, WA 98901
509-457-0990 (14 DBHR Beds)

Recovery House Facilities:

Sundown M Ranch
2280 State Route 821
Yakima, WA 98901
509-457-0990 (2 DBHR Beds)

See further program description information in certified treatment listing.
For assistance with difficult-to-place youth, call:
Amy Martin, Youth Treatment System Manager
at (360) 725-3732.

The Division of Behavioral Health and Recovery has youth treatment contracts with the following providers

**Level I**

- Sundown (Yakima) (509) 457-0990 14 beds (Males and Females)
- Healing Lodge of Seven Nations (Spokane) (509) 533-6910 7 beds (Females only)
- Healing Lodge of Seven Nations (Spokane) (509) 533-6910 18 beds (Males only)

**Level II**

- Providence St. Peter Hospital (Lacey) (360) 459-8811 9 beds (Males and Females)
- Lakeside – Milam (Burien) (206) 241-0890 8 beds (Males and Females)
- Daybreak of Vancouver (360) 750-9588 14 beds (Males Only)
- Daybreak of Spokane (509) 624-3227 17 beds (Males and Females)
- Sea Mar Visions (Bellingham) (360) 647-4266 17 beds (Females Only)
- Ryther Child Center (Seattle) (206) 525-5050 10 beds (Males only)
- Excelsior Youth Center (Spokane) (509) 328-7041 11 beds (Males only; priority minority youth King County)
- Sea Mar Renacer (Seattle) (206) 766-6960 14 beds (Males only; priority minority youth King County)

*Recovery House level; open to all appropriate youth from Level I, Level II Inpatient programs.
“Hey I’m going to really miss all of you. You all have brought me along way believe it or not I just want to thank you guys for having the heart to be willing to help teens out like us. No matter how much hell ive put you guys through ill always remember you all – and always have you staff in my heart and love you guys for being here for me and helping me out. I use to hate you guys so much until I stopped to think you guys taught me how to respect people, myself, & that I don’t need drugs to live through life. Thanks so much to all of you for putting your time to us love always.” Phil

-Written to a staff member by a recovery house graduate.

“Before I realized that I needed help I was living in a hotel using every day and did hardly go outside exepet to go sell drugs for one of my friends or to go pick up some drugs from the conection’s and to go shoplifting. While I was doing these thing’s I was acting like I enjoyed myself but deep down inside I was completely miserable and hated life. I was slowly climbing the scale of self-destruction and became veryy sick. I wanted to die and so I tried to kill myself and I ended up in detox and the sent me here or they tried to anyways because when I found out what this place was relly like I packed up and left and hitchhiked to Wenatchee stayed at my grandma for a copule day’s then tried to hitch hike to California but I got drunk and turned myself in. I made an agreement to go to treatment if they did not send me to jail because I had like 6 or 7 probation violations and then I got an out standing warent for leaving the city wile on probation and leaving with a court date still standing and so I came here.”

“Today I fell like a million dollars I am happy to be alive and I look pretty good. I’m gaining wait. I can run more than half a city block without dieing and I have 5 or 6 days untill I’ll be completely clean of any drug whatsoever in my body. Im excited for life. I want to get out and go to school and graduate with my class, and become a respectull sitizan get a good job and be relly helpful to my family when they need me, and not running away from my problems. I fell like I can go back out to the real world without a huge head and not push the people who love me away. Since I’ve been here I’ve dropped my ego so far down that I don’t think that could ever pick it back up to where it was when I first got here. I’ve learned that there is life after drugs and I relly hope to stay sober when I get out.”

Sincirly: James