

## "A Story of Change"

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How do we know when a person will initiate reversal from the destruction associated with active addiction, shifting into the construction which comes from active Recovery? Bear this question in mind as you read the story of a man we will call 'Mike.'

Mike came to Hockanum Valley for the first time in 2015. He was angry that he had been mandated to treatment by the court. I sat with Mike and listened to his story. It was one with roots I had seen before. Mike had an injury at a fairly young age which required surgery. Along with the post-surgery protocols came opioid medication to manage pain. It became apparent Mike had the intrinsic propensity to become addicted to the effects of opioids, including the dissipation of anxiety, a sense of euphoria, and seemingly boundless energy. A period of escalation in his opioid use led to seeking prescription medications off the street, ultimately graduating to heroin. Mike fell claim to the cumulative neurochemical shifts which occur as a result of continuous opioid use. Spanning his subsequent years of opioid addiction, his brain suffered an insidious neural rewiring toward a pattern of addiction, with all the included thoughts, feelings and behaviors which characterize the reality of the active addict. Physiological dependence had long been established. Mike felt acutely physically ill when he did not have opioids. The downward spiral continued until Mike, in the acute phase of the disease, was caught stealing to make money to support his habit. Legal consequences became the newest external manifestation of his illness, and a cold reality for Mike.

Mike came to us depressed, angry, remorseful, and anxious. Down across the board, he felt hopeless and unemployable. He was on probation, now with a criminal record. He was referred to us due to successive bouts of relapse with opioids. It was collaboratively decided between Mike, myself and his probation officer that Medication Assisted Treatment may be in order. Mike entered the program. He met with the Medical Director and began therapy. A combination of individual counseling, group therapy and Suboxone medication was established. At first, Mike did not share much in Individual counseling and even less in the groups. He appeared to tolerate his medicine well though, and reported no cravings. As time went on, he opened up more in the Individual counseling sessions. Through talk-therapy, it was learned that Mike had a valuable knowledge base around cars. He had strong ability to diagnosis issues with almost any car. With encouragement and support from us, his family and the sponsor he had begun to work with in Narcotics Anonymous, he applied at several dealerships. It was refreshing to see Mike smile while sharing enthusiastically about his job offer with a local dealership for luxury vehicles, as a parts specialist.

A year later, Mike could be seen in his group therapy, sitting comfortably and confidently. His presence was that of an elder statesman, wise of the journey that the newer members were embarking on. Mike never shared excessively in the group setting, however when he would, he would speak humbly and truthfully about his life's experience. At the time of this writing, we have seen Mike off to continue his journey in another state in the mid-west. You see, as a result of his long period of stable recovery and life building, he was able to win back the affections of a woman he loved. They were engaged at one time, but he had lost her in the chaos of addiction. I joyfully received the news that she had invited him to come live with her again, in the state where her university was located. We helped facilitate Mike's referral to a Suboxone provider near his new home. In the weeks prior to his move, he began to talk about "feeling ready" to explore tapering off his medicine, segueing his recovery efforts solely to continuing therapy and membership in Narcotics Anonymous. The doctor gave him advice and support. She walked Mike to the front door of the agency, past the reception desk, where he was wished well by the staff who were up front at the time.

Effective disruption of the chronic relapsing brain disease that is addiction is a difficult event to predict. We have clinical tools which help measure the likelihood of behavioral adjustments within our people. A story like Mike's though, is one I feel transcends the assessment tools, and speaks happily to the more mysterious elements of human growth and development. Mike achieved lasting change in his life, and his story speaks to the universal potential for change that is in all of us.