

THE OPIOID CRISIS: THE COMMUNITY RESPONDS

BEYOND JUST JAIL

With incarceration looming, treatment and community service provided me with a clear path of recovery

By THOMAS MIKLOVICH
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During my 20s, as opioid addiction slowly took over my life, financial woes and run-ins with the law came with it. That there was a connection between my addiction and my legal and financial troubles is obvious to me now. At the time I could not — or would not — see it.



After completing his drug diversion and treatment program, Thomas Miklovich, above, in his apartment in Northampton, writes, "For the first time in years, I was free and clear of the legal system. The added stress, the vague sense of impending doom I'd experienced for most of my adult life, lifted."

STAFF PHOTO/CAROL LOLLIS

I never would have suspected that the very legal troubles that seemed to only add stress and anxiety to my life, dragging me further down into addiction, would actually provide a better chance at recovery.

I'm now 36, and my first experience in a courthouse is actually a pleasant memory. Around 1999, when I was 17 or 18, my father drove me to the Greenfield District

Court to appeal a traffic ticket. I had no idea what I was doing; I was just a nervous kid wearing a tie for the second or third time in his life, hoping I wouldn't have to pay the full \$250 fine. The judge struck the ticket entirely. I walked out of the courtroom feeling the sort of satisfaction unique to a teenager who has claimed a victory over authority.

Subsequent experiences would be quite different. It seemed I always owed money or had a warrant for unpaid court fines. In 2008, after being arrested on an OUI charge, I made a start at confronting my issues. Even then, it would take a decade of failed attempts, probation, detox and homelessness until, in December 2017, for reasons still not entirely clear to me, I began seeking help in earnest.

I found an answer far beyond what I'd come to expect. I had begun treatment for opioid addiction again, but my legal and financial troubles continued to accrue even after I'd stopped using.

I had overdue fines for default warrants stemming from overdue fines. I faced probation for drug possession. The judge told me if I appeared before court again with fines unpaid, I could expect time in jail to be the method of payment.

So when my attorney brought up the Drug Diversion and Treatment Program out of the Northwestern District Attorney's Office, I was all ears. We met with Maria Sotolongo, then program liaison (now director.) She said I qualified to enter treatment in lieu of prosecution, because my crime was directly related to my disease — possession of heroin — and because it was not a violent crime, among other criteria for eligibility. Successful completion of the DDTP would lead to the waiving of any new fines. The charge would be removed from my record.



STAFF PHOTO/CAROL LOLLIS
Maria P. Sotolongo, the director of the Drug Diversion and Treatment Program out of the Northwestern District Attorney's Office, said Miklovich qualified to enter treatment in lieu of prosecution, because, writes Miklovich, "my crime was directly related to my disease — possession of heroin — and because it was not a violent crime."

This seemed ideal — I'd already made a start on the treatment requirements on my own. I was receiving medically assisted treatment (Suboxone) and was in therapy, which is mandatory for people on MAT.

Getting the judge on board was more of a task than we anticipated. With two open cases (possession and driving with a suspended license) and a year-old unpaid \$950 fine, the court's patience was wearing thin. Lucky for me, at my next court date the judge approved my entry to the program.

Within a few short weeks, I experienced benefits I hadn't foreseen. The court readily granted me the opportunity to pay off most of my fines by way of community service. I had weekly appointments with a case manager, where we discussed the possibility

of residential treatment. With the help of a referral from ServiceNet, I was offered a place at Hairston House, a sober support house in Northampton. With encouragement from my case manager, my family and my therapist, I accepted the placement, a decision that would prove perhaps the best I'd made in my entire adult life.

At first, my life felt hectic, almost overwhelming. Between the daily requirements of the Hairston House (recovery meetings, community service and active participation in the functioning of the household), the DDTP, the court and my own personal recovery work, it seemed I was always rushing. But the time with my case manager was always relaxed. I experienced a flexibility and earnest desire for me to succeed that felt new to me.

Hairston House let me do my community service at the Northampton shelter where I'd spent time in the previous winter, and it felt good to give back to those who had helped me.

After about three months packed with appointments, recovery meetings, community service and about 36 drug screens, my \$950 in court fines were gone. My schedule relaxed enough for me to get a part-time job. By that point, I'd remained abstinent from all substances for about four months; the longest time I'd sustained in the previous 15 years.

The remaining three months, while far from easy in many ways, were smooth sailing in the DDTP. I came to appreciate my weekly meetings with my case manager. As my life stabilized, they became like another therapy session.

A week or so after my final appointment, I received in the mail a signed certificate of graduation from the DDTP program. I was done. That took time to sink in. For the first time in years, I was free and clear of the legal system. The added stress, the vague sense of impending doom I'd experienced for most of my adult life, lifted.

Four months later, I graduated from Hairston House and moved into a house Northampton run by the Gandara Center. I work, pay my rent, go to recovery meetings, and plan to return to school in the fall. Compared to a year ago, my life today is unrecognizable. I attribute much of the change to the DDTP. Just as important and hopeful, to me, is what it represents.

For all the suffering and misery the opioid epidemic has wrought, it has forced many to more closely examine how we deal with addiction and how we treat addicts. Drugs, crime and addiction are scary, understandably inspiring contempt or hatred; even deserving of a declaration of war.

But addicts? These are people. We cry when we lose them. And we need to look for answers that go beyond more jails and more people to fill them, guard them and suffer inside them.

To me, the DDTP represents the search for solutions to such daunting problems. To date, 194 people have been accepted into the program, and 77 have successfully graduated. There are currently 40 people enrolled.

My disease had led to me becoming mired in addiction, legal trouble, debt, poverty, any one of which would be a formidable obstacle to health and happiness. Dealing with all of them at once, not to mention the depression, anxiety, and isolation that so often follows can seem downright impossible.

This is a daily reality for many people. For a long time, it was mine. Fortunately, I found the right help for the right problems at the right time.

I know the DDTP can't be the right help at the right time for everyone. Nothing will be. But to borrow a phrase from my therapist, it's another useful tool in the toolbox. Franklin Roosevelt said "It is common sense to take a method and try it. If it fails, admit it frankly and try another. But above all, try something." That makes sense. The important thing is that we keep moving forward, hopefully with the humility to admit and learn from our mistakes, the humanity to fuel approaches with compassion, and the boldness to keep trying something new.

Thomas Miklovich lives in Northampton. Members of the Hampshire HOPE opioid prevention coalition run out of the city of Northampton's Health Department contribute to this monthly column about local efforts addressing the opioid epidemic.