For Immediate Release

Success story: “That was the final bottom,” says man aided by QRT

MORGANTOWN, WV (Jan. 7, 2020) — At 15, John Shaffer wanted to fit in and decided that quitting school and dealing drugs would be a way to accomplish that. “I went from selling drugs to using them every day,” he said. The Grafton native became addicted to methamphetamines and eventually was arrested for selling ecstasy. He was placed in a community corrections program for two years during which he stayed clean.

When he was released, “I went right back into it,” he said. He explains why that happened, even though he had been sober for two years. “At that point, I was like, my life was pretty good. I had a good job. My family was back in my life. I had a daughter who was a couple months old. So I thought I could do this. But I totally wasn’t all right.”

In the ensuing months, he lost his job as well as contact with his daughter after her mother left him. “I was couch surfing all the time,” he said. “I was stealing, robbing, the works.” The break-up depressed him, so he turned to heroin, overdosing 13 times. The first 12 times, someone either called 911 to revive him, or used naloxone, which reverses the effects of an opioid overdose. The last time, he landed in the emergency department at Ruby Memorial Hospital. “That was the final bottom,” he said. “I knew I had enough.”

So he was receptive when Krista White, a peer recovery coach (PRC) with West Virginia Sober Living, visited him in the hospital. West Virginia PEERS, a grant-funded program through West Virginia Sober Living, is also part of Monongalia County Health Department’s grant-funded Quick Response Team (QRT). MCHD employees meet weekly with PRCs, first responders, law enforcement, a pharmacist and other community members to address the opioid crisis in the area. “He was in a room by the time I got there,” White said. “He was still pretty out of it.” It was important to White that someone be there when Shaffer woke up.
After an overdose, someone with substance use disorder “can isolate in active addiction, build a picture in our head that nobody cares and we have nobody,” she said. “I wanted him to know he had somebody who was in his corner, cheering him on.”

She can’t remember her exact words to him when he came to, but it went something like this: “I told him, ‘I’m here for you. You have people who care for you, and I don’t want to see you die. Do you want to do something different?”

PRCs often discuss how sometimes, initial meetings with someone who has overdosed are more about connecting them to services and building a relationship so that when the person is ready to go into treatment, that can be easily facilitated.

And while White can’t remember Shaffer’s exact words, it was something along these lines: “He said he was willing to answer some questions and do some referrals and give it an honest second shot at recovery.”

Dan McCawley, program manager at WV PEERS, which is part of West Virginia Sober Living, noted that the organization has a memorandum of understanding with Ruby Memorial to work in the emergency department so PRCs can do brief interventions and referrals for patients who come in.

White, who was stationed at Ruby Memorial with funds provided by the QRT when she saw Shaffer, worked to get him into treatment and he spent 28 days at the WVU Medicine Center for Hope and Healing.

“That went really well,” Shaffer said. “They showed me a lot of things I needed to know about myself and helped me learn some new tools to take with me.”

That included coping skills such as deflecting to activities such as listening to music, walking or drawing when he gets stressed out.

Shaffer’s success pleases both White and McCawley. “We are here to lend a helping hand for anyone along any stage of their recovery,” McCawley said. “If someone ODs once, twice or even 15 times and survives, recovery is always possible.”

White noted how satisfying it is to see someone transform themselves.

“No matter what the day has brought him, he’s been willing to put one foot in front of the other and get through every day successfully,” she said. “It has been amazing to get to watch somebody who is shaky and unsure and hurting and not sure how life is going to turn out because they are so accustomed to living in active addiction.”

And then, she noted, observers then can “watch the light come back on in their eyes and see the sparkle, and see somebody be excited about recovery, and realize that the sky is the limit as long as you stay in recovery.”

Brittany Irick, MCHD’s QRT coordinator, expressed how satisfying it is to see the fruits of the organization’s labor.

“Reading John’s story makes me proud of the work our QRT is doing,” she said. “Stories like this show us that the work being done by our QRT truly has an impact. I can’t wait to see the number of success stories grow as we continue and increase our efforts.”

The county-wide QRT has been meeting weekly since May, thanks to a $230,000 grant from the West Virginia Department of Health and Human Resources, Office of Maternal, Child and Family Health.
When MECCA 911, EMS or a police department get a report of an individual who has overdosed, it is shared to a HIPAA-compliant Dropbox account. WV PEERS members check reports frequently and try to connect with the individual within 24 to 72 hours of the incident to help get the person into treatment and/or social services and medication. Currently, Shaffer’s living at West Virginia Sober Living. He’s working as a cook but has plans to attend beauty school in the spring so he can become a barber. He attends at least five recovery meetings a week, one of the West Virginia Sober Living rules, and sometimes more.

And he now gets to see his daughter, who is 4 years old.

“It’s been phenomenal,” he said. It helps motivate him to stay clean, he added. “For sure. I feel like, yeah, I’m definitely moving forward toward getting back into my family.” Check out monchd.org and follow us on Facebook and Twitter @WVMCHD and on Instagram at #wvmchd for up-to-date information on health and wellness in the community.

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