## Karel Hoffman Narrator

**Sue Purchase Interviewer** 

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Karel Hoffman -KH Sue Purchase -SP

**SP:** Want to say your name and you give me permission?

**KH:** My name is Karel Hoffman and I give Sue Purchase permission to talk to me about harm reduction in Minnesota.

**SP:** This is Sue Purchase and I am talking to Karel Stennis Hoffman about her experience in Minnesota working in harm reduction and living with harm reduction. Take it away Karel. This is a guide and you can use it as you see fit and what story you want to tell and what feels comfortable for you.

KH: I guess I'll just start with how did you become involved? I applied for a job at some place called Golden Valley Treatment Services. I didn't really know what kind of treatment services that was or what they did but I was looking for another job. I got called in for an interview and found out that this was a methadone clinic, which I really didn't know. I knew a little about methadone clinics. Mostly the horror story things you would have seen on TV. All the terrible people out there and they're hanging outside selling drugs and they've got to have cops around. I thought, "Wow this will be interesting." This was a brand new clinic opening in Golden Valley which is a decent area in an industrial area. There were a few other businesses around but we weren't in the midst of the city. We opened in November 2016. We've been open now I believe it's been six months. There are like five or six of us there by just kind of flying by the seat of our pants have kind of figured out how to open and run a methadone clinic. The executive director had worked in prisons, he's a LADC [licensed alcohol and drug counselor]. He's done lots of things but he'd come from the prison system. We've got a doctor and a couple of pharmacists and a nurse and me who's the front desk receptionist manager.

I kind of do everything. I greet everyone and make sure the place is clean. It is a nice, clean clinic. Right now we have thirty patients. It took a while to get going. Once we did word of mouth really keeps things going. We've gotten a lot of transfers from other clinics that people don't care for. They don't like how they're treated in many, many different ways, personally and by the changing doses and doing things without communication. It really makes these people mad. They've heard through other people about us and they come in and find that we're kind and gentle and we're friendly and clean and we treat them with dignity and respect as they should be.

They've been shooting heroin for however long or popping pills. I know what that's like. This is what they need. I don't know what they've tried before but methadone is what works for them. We're there for them. I had no idea what we were doing. It's really gratifying knowing these people are suffering, they're coming in and we're taking care of them. Not just like, "Next, next, number." We know their names and they know ours. It's just kind of like a little family almost.

**SP:** A big family. Would you talk a little bit about what brought you to methadone?

KH: Like I said I didn't really know much about methadone treatment at all. I, having been in recovery for five years now, having been addicted to opiates I know what it's like to be in withdrawal and how wonderfully uncomfortable and ungodly that is. First of all, I've been in recovery for five years. I went to Hazelden in Center City. For two and a half years prior to me working at Golden Valley Treatment Services I worked at Hazelden, formerly known as Hazelden Center for Youth and Families in Plymouth, Minnesota. That's for young people say twelve to twenty four. I worked there for a couple of years on the women's, girls unit. I worked overnight which was very difficult. For a lot of my shift I was by myself. I looked forward to the mornings when the girls got up and they were getting ready for breakfast. I'd take them down to breakfast and I'd read them a morning affirmation and we just had a really good bond. That part of the job I really loved. It was the overnights that just wasn't working for me. I realized if I didn't get out of overnights I was going to be locked in a padded cell somewhere likely.

**SP:** No other shift in terms of employment options for you there?

KH: The day shift for the women's unit, they had people there during the daytime that had been there for a while and were not planning to go anywhere. There were other options, I could have maybe worked a different shifts or on one of the guys units or something. I really wanted to be with the girls. We really connected. I just loved them. It was hard to leave in that way. I really needed a day shift. I found this place. I applied at this place called Golden Valley Treatment Services. I couldn't really find information on them. I was curious. That was because it was brand new. It helps I think in understanding the people. I'm not just there as the receptionist gal up front. I get it. I went through the addicted to opiates thing. When I went into recovery I didn't know about methadone. That just wasn't an option that was mentioned. I've done the abstinence thing which is challenging of course. I know what I don't want to go back to. I don't want to go back into withdrawal like these suffering people are. I don't want to do that so I have to stay away from it.

**SP:** In some circles we refer to it as the gray bar detox but it sounds like you just went into withdrawal and suffered through it.

**KH:** When I would go into withdrawal because I ran out of my pain pills which I needed for pain because I do have real pain. I would generally run out early because I took more than I was supposed which is pretty common. I'd suffer through some withdrawal but I usually managed to get back to a doctor and get more. When my pain doctor realized that I wasn't holding to our contract which was take as prescribed he said to my family, they asked him, "Do you think she should go into treatment?"

**SP:** This is your family asking?

**KH:** My husband and my oldest son came with me to see my pain doctor. I said, "Okay, I'll go to outpatient." They asked the doctor, "What do you think?" "No she needs to go to inpatient." Actually, I can just remember it. I can feel it. I could feel my shoulders drop. Something's got to be done. This isn't working. I don't know how it's going to go down because I'm in pain. What's going to happen with my pain? That's all I could think about was my pain. Anytime I said 'pain' I'd cry. It was terrible. He said, "I can't in good conscience just send you off." He gave me thirty days of lowering dose.

**SP:** Dose titration?

**KH:** Yes. So very slowly over a month I went down and down and down. My husband had the meds. He had them locked in a little safe. He would dispense them to me. I would get really mad. "It's ten minutes before can't you just?" "No." The doctor just really felt that I needed to decrease the dosage slowly. After that month was up I went into treatment. Then I really didn't have to suffer. I suffered some. It's still not easy. It wasn't a drop from high amounts of opiates to nothing. I didn't have to suffer through that. Thank God this doctor knew enough to do that.

**SP:** A little more humane treatment.

**KH:** A little more humane. From what I've heard that's not always the case. I was lucky in that regard. I had a really good pain doctor. I kind of blew it on my end. Then I went into treatment. That was the best thing. Sometimes I tell people being in recovery is the best gift I've ever gotten. I've learned so much more about myself and obviously a lot more people at meetings or in recovery, I have my recovery friends. I've just learned so much. I've met so many wonderful people. If I hadn't been in recovery I wouldn't know these things that I know now. I'm glad that I know them now. I'm glad that I'm not just a regular person, a normie who applied for this job to be the receptionist at this place. I get it. I understand what they're going through. I feel for them. I want them to be treated properly because they should be. Everybody should be regardless. We're all just a bunch of humans trying to get by.

**SP:** That's wonderful. Do you have anything you'd like to add to it?

**KH:** Not really. That's really my story.

**SP:** Thank you so much for sharing Karel.

[End of Recording]