

Meth-22

by Jessica Mayrer

February 15, 2007

The state is expanding its treatment options. Unfortunately, many addicts can't get help until they go to jail.

Tears stung her eyes and her breath came in quick gasps. She felt like she was going to pass out.

At 28 years old, Bigfork's Traci Jordan developed a case of postpartum depression that kept her shut in the house for days at a time.

"I would have panic attacks," Jordan, now 36, says. "I'd sit on the floor and just rock back and forth."

She went to the doctor. He told her to wait it out.

"I didn't want to feel these feelings," she says. "I'd just sit in my house and cry."

Her boyfriend was using and selling meth. He suggested she try some. It would stop the sadness, he told her.

It did.

"I had the confidence that I used to have," she remembers. "In my mind I had the power, I had the drug."

Eventually she used it every day, blocking out her family and the life she'd once known. "I just kind of threw it all away," she says. "They needed to take the kids away from me. From there it was just a spiral down. I couldn't stop."

Over the last five years, Jordan, once a high-school cheerleader, was arrested four times. The last time was for carrying a glass pipe with meth in it, a felony. It landed her at the Montana Women's Prison in Billings.

The girl who "tried pot once and broke out in a rash" is now finishing a meth rehab program through the Missoula Prerelease Center. After that, she'll likely be paroled.

Jordan is one of a growing number of women incarcerated in Montana prisons. In 1977 the state held two women prisoners. Today that number is closer to 500.

Meth is responsible for much of the increase. The Department of Corrections (DOC) estimates that half of the women in Montana jails are there because of drug-related offenses, and expects the female prison population to increase at close to 17 percent yearly. The corresponding male population increased 6 percent last year.

To address the increases, the DOC is opening two new nine-month meth treatment centers in May, says DOC Communications Director Bob Anez. The programs, a 40-bed women's facility in Boulder and a men's program in Lewistown, will be the only residential drug programs in Montana to provide the long-term counseling many experts say addicts need to beat meth.

Building the new treatment centers will cost close to \$14 million, and Anez thinks the investment will pay off. Meth is unique, he says, because it stays in the body longer than other narcotics, so addiction takes more time to treat than with other drugs. By giving addicts the time to clear the drug out of their systems, and new tools to cope with frequently attendant mental health issues, the DOC hopes to slow the flow of women into the state prison system.

The hitch is that women in trouble with meth will have to break the law to access the new services. The still-missing piece of the puzzle is a method for getting them help before they go to jail.

Addicts and recreational users who have never run afoul of the law have few options on the outside, says Scott Boyles, of the state's Chemical Dependency Bureau.

"If you want to get services, get arrested," Boyles says.

Because the Montana Department of Corrections gets the biggest share of the state's drug-funding pie, breaking the law is the cheapest and fastest way to get help, according to Boyles.

Programs available to the general public receive a tiny amount of funding compared to prison programs. The state's general fund allocates less than \$100,000 a year to non-prison alcohol and drug-treatment programs, Boyles says.

Private drug programs on the outside run up to \$25,000 a month.

Today in Missoula, few options exist for users who need help with a drug problem, says Karen Orzech, Justice of the Peace.

The reason women go to prison, she says, is because that's where the programs are.

"It's easy to say nail 'em, rail 'em and jail 'em," Orzech says. "It is not smart justice."

“We don’t even have an inpatient facility anymore,” Orzech says.

St. Patrick Hospital had an inpatient drug program until about a year and a half ago, says Diane McLaverty, clinical supervisor for addiction treatment at the hospital.

Now they evaluate users and send them home. If a patient needs more than a couple of months of counseling, she refers them to treatment on the East Coast, “because we don’t have anything around here.”

A state-run inpatient treatment facility, Montana Chemical Dependency Center, open to anyone, has a three-week waiting list for its 30–60 day program in Butte. It operates on a sliding scale, based on a \$200 per-day fee.

Inpatient drug treatment, outside the corrections system, is ultimately cheaper and may prevent a prison stay down the road, says Sarah From, of the Institute on Women and Criminal Justice, a New York City-based advocacy group for women in prison.

“It costs much less to have a woman in, let’s say, residential treatment,” From says. She questions the wisdom of locking addicts up. Treatment and early intervention saves money and lives. Prison has a tendency to consume both.

There is no turning back after a drug conviction, From says. Often children are taken away and put into foster care, adding further emotional and financial expense for families and taxpayers.

And because Montana denies social service benefits to citizens convicted of drug felonies for the rest of their lives, help like food stamps, welfare benefits and often tuition assistance are withheld. As a result, women are more likely to revert to the kinds of behavior that got them arrested in the first place, From says. Without more funding for drug programs on the outside, she says, addicts will continue to flood jails.

As it stands now, there is no end in sight to the state’s ballooning corrections system. Since 1997, Montana has expanded its women’s prison population by 137 percent.

“The number of people getting into the system has not gotten any smaller,” says Jan Ullom, a Missoula probation officer. Over the last 25 years she has watched a new generation of criminals grow up in Montana, and new prisons built to house them.

“We still can’t seem to keep things at a dull roar,” Ullom says.

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The anticipation of getting high makes some people throw up. Others gag or get stomach cramps. But Carla Crandall, like Jordan, always felt butterflies in her stomach.

Crandall also recently went through treatment at the Missoula prerelease center. She is 33 years old and her teeth are brown and rotting. Eight had to be pulled while she was in custody.

Crandall was arrested for writing \$2,300 in bad checks to pay for food, alcohol and meth, she says. "I'd just go to Joe's Jiffy Stop, you know, Lucky Lil's...after you write a couple of checks and they give you the money, you just keep doing it."

Crandall's first speed experience was about 10 years ago. She was drinking with friends at her trailer off of I-90 in Billings, and her husband put some meth into a beer cap and told her to try it. "I was like, 'nah, I'm not doing this,'" she says.

But she did.

"The burning, the pain, after I got past that, it was all right," Crandall recalls. "I felt kind of like superwoman. It took the depression away."

Almost everyone with a chemical dependency problem also suffers a mental disorder of some sort, Anez says. And the Montana Department of Corrections estimates that about half of women in the state's prisons have suffered from physical or sexual abuse at some time in their lives.

In many cases drugs are used to self-medicate, Orzech says.

"They try meth and they feel good, and it's the only time they feel good. And boom, [an] addict is born."

The counseling Crandall has received in prison has given her new tools to fight the depression, she says.

"Grief can make us kill ourselves, for Christ's sake," she says. "And then you hear a country song and it just gets worse."

After leaving the prerelease center, Crandall planned to move into a one-bedroom apartment with her fiancé and can't wait to get back to her life and kids.

"You can lose everything, and you know shit happens. But if you do it again, then damn you. I have no room in my life for screw-ups," Crandall says.

Many women, though, just don't have anywhere else to turn but prison, Jordan says.

"They've been to prison so many times, it's home," she says. "The prison is an open revolving door for women."

Jordan says the drug programs in prison have helped her to acknowledge past mistakes and prepare for the future.

“This is what I did with my lying and manipulation. And this is what I did to pay for it,” she says.

She will be on parole for more than a year after she gets out. If she’s caught using again she will go back to prison.

“I will definitely lose my family,” Jordan says.

But she sometimes still gets scared and panics. “Oh my God, without drugs what am I going to do?”

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