



Pregnant Akron woman recovers from heroin addiction while preparing for birth complications

Jennifer Kiser sat toward the back of the Middlebury Chapel in Akron on a recent Sunday, as she does most Sundays, scribbling in a tattered notebook while a small crowd around her danced to a seven-piece band.

The names of her three children jotted on the front cover are a constant reminder of the recent years blighted by her past addiction to heroin.

But with a new baby on the way, Kiser tries to remember that she's not the same person she was a year ago — that the best way to move now is forward.

As the region battles an opioid epidemic, hundreds of babies born to addicted mothers each year are the youngest victims.

If women use heroin or opiate painkillers during pregnancy, their babies become dependent on the substance, too. When the drugs leave their tiny systems after birth, they can develop withdrawal symptoms known as neonatal abstinence syndrome (NAS).

Kiser, 32, of Akron, is following the safest recommended option for pregnant recovering addicts and their babies — medication-assisted treatment.

Each day, she takes a pill form of methadone to ease her cravings for heroin.

Kiser's baby is still at risk of being born with NAS. Though approved by the FDA for use during pregnancy, methadone is an opioid, meaning withdrawal symptoms can happen after birth.

But medical experts say medication-assisted treatment — combined with prenatal care, planning and plenty of support — is the best way to keep pregnant users in recovery and ensure the healthiest lives possible for their babies.

Kiser is allowing the Beacon Journal/Ohio.com to follow her as she navigates her recovery while preparing for the uncertainty of a new life in the process.

She agreed to share her journey through pregnancy and beyond to show other recovering addicts that there is help available to stay clean and keep their families together.

"I'm trying to be in a good place ... I'm working on being a Christian, being a mother, being in recovery," Kiser said. "Being normal, as some would say."

Past traumas

Like so many stories of heroin addiction, Kiser's starts with pain pills.

Shortly after she had her first child in 2005 when she was 21, Kiser's father passed away. She tried a Percocet someone offered her to try "filling the voids." Until that moment, she said, she'd only had alcohol and marijuana and never used any other drugs.

But when one pill turned into 20, and 20 became too expensive, Kiser turned to heroin.

The drug quickly took hold over everything else. Soon, Kiser was using daily.

A little less than 1½ years after Kiser started using, she said her mom called the police to her house because she thought Kiser left her daughter home unattended. Kiser hadn't, but she did admit to the police that she was using heroin.

Children Services got involved and removed her daughter from her home to live first with Kiser's mom, and then her grandmother, who still has custody of the girl.

"The one thing I've always wanted to be was a mother," Kiser said. "When I lost [my daughter], it really tore me up inside."

Kiser had two other children while still using heroin in 2007 and 2010. She put both up for adoption immediately after they were born, and they were adopted by the same family.

Kiser said she doesn't know much about the condition of her sons after they were born, though she did hear from family members that the youngest boy was in the neonatal intensive care unit for some time.

She wasn't around them long enough to see.

Instead, she left the hospital and went back to using.

“I went right back to the darkness. Darkness was, like, all I knew,” Kiser said. “Addiction ... it just takes everything away from you. Even children.”

The six years that followed were a blur of on-again, off-again attempts to get clean, underscored by bouts of jail time, unemployment and even homelessness.

In the deepest throes of her addiction, Kiser found Will Martin and Middlebury Chapel.

Kiser met Martin, who was battling his own drug addiction, through a mutual friend in 2016. Struggling with money, the two sometimes went from church to church in search of a hot meal.

One day that summer, they stumbled on Middlebury Chapel, a nondenominational church, and the people there encouraged them to come back. Kiser said she felt guilty about continuing to promise pastors she'd come back, but never returning.

She and Martin went the next Sunday for a service and have been going ever since.

“I had such a rough life that I was against God. I was like, ‘Why me?’ I was pissed off,” Kiser said. “The community Christians have is just love, and I was coming from a life of hate.”

As their faith grew, so did their motivation to get clean.

Kiser sought help for her addiction in June 2016 at Community Health Center, a clinic in Akron that provides comprehensive treatment for the rehabilitation and prevention of addictive and compulsive disorders. She agreed to start taking methadone, although she had previously snubbed it, as many do, as replacing one addiction for another.

Methadone, one form of medication-assisted treatment, is an opioid that tricks the brain into thinking it's still getting the abused drug without the sickening withdrawals or risk of overdosing.

Still, she and Martin struggled in sobriety. Back and forth, on and off, they danced with addiction, at times spinning far from it but never fully leaving its clutches.

In April 2017, Kiser checked herself into inpatient rehab in the Community Health Center's Touchstone program, which is a home for women in recovery.

There, Kiser decided she needed to distance herself from Martin, who was still doing drugs, to get sober for good. In her mind, she gave Martin the duration of her time in rehab — 45 days — to decide to get clean with her, or she'd cut him off.

He met her at a 12-step meeting at their church *{Addiction Recovery In Christ}* on Day 42.

The two have been clean ever since, leaning on one another and their newfound faith to stay sober.

“It’s just stepping out on that faith and knowing God will provide,” Kiser sad. “It might be on that 42nd day, but it will happen.”

Two new lives

In August 2017, Kiser celebrated four months sober from heroin.

She also found out she was one month pregnant.

A flood of guilt came rushing back from her previous pregnancies, reminding her of her old life as an active drug user.

“I was very scared at first,” Kiser said. “I had to tell myself I wasn’t that person anymore.”

Kiser and Martin, who are now engaged, had discussed having a baby before, but they didn’t plan on doing it so soon. When Kiser told Martin, though, he was excited about having his first child.

Still, they were only four months sober and considered themselves addicts — even as they do today.

And then there was the methadone.

Kiser goes to the Community Health Center several times a week to get her doses of methadone, which she has taken orally every single day since she entered rehab. People can take methadone to curb opioid addictions for as long they need. Some take it the rest of their lives.

“I am very worried. ... This isn’t what I wanted for him, but it’s better than the alternative,” Kiser said. “If I could tell people to do it without methadone, of course I would tell them to do that. But if you can’t see yourself out of that darkness, then it is a solution.”

If a woman taking methadone gets pregnant, it’s highly recommended not to stop until after birth. In fact, illicit drug users who seek help during pregnancy are actually encouraged to start medication-assisted treatment as part of their recovery.

Quitting methadone — or any opioid — cold turkey can send the fetus into withdrawal and intense stress, which can increase the probability for pre-term labor or even stillbirth.

An abrupt stop of methadone also makes it more likely that the woman will return to illicit drug use, which would increase the chances of birth complications even further.

“What we’re really concerned about is the cycle of addiction,” said Dr. Gregory Roulette, an OB-GYN at Summa who is caring for Kiser. “Mom takes an opiate, comes down, and then coming down multiple times for prolonged period seems to be a risk factor.”

Experts say the dangers of continued illicit drug use by an expectant mother far outweigh the risks of NAS.

Ronna Johnson, a nurse care coordinator at the Community Health Center, called NAS a “constellation of symptoms.” NAS can range from mild to severe and includes a number of ailments, including low birth weight, tremors, high-pitched and excessive crying, breathing problems, seizures and more.

The severity of these symptoms is based on a number of other factors — including the baby’s tolerance, the length of exposure and how quickly the drug leaves the body — that show in the first few days after birth.

Kiser’s baby is due March 28.

Until then, she waits — and prepares.

Finding support

One Tuesday in November, Kiser stood in a circle with about a dozen other pregnant women at Summa Health’s Opioid Centering Pregnancy program.

Karen Frantz, a nurse case manager, led the women in their biweekly mantra: “This is my body, this is my pregnancy, this is my baby, and I am making them the best I can.”

Since she found out she was pregnant, Kiser has filled her days with support groups. Tuesdays are for Centering, and Thursdays are for MOMAT — Mothers On Medication-Assisted Treatment — at the Community Health Center.

Throughout 10 Centering sessions at Summa, women receive more one-on-one time with their doctors during checkups than they would during a typical prenatal visit. They also participate in group sessions to learn how to take care of themselves throughout their pregnancy. While Centering is available for all pregnant women, the Women’s Health Center at Summa started a group in 2015 to help expectant mothers who are recovering addicts connect, learn from one another and receive care from addiction specialists.

The group is an addition to Summa’s Maternal-Fetal Opiate Medical Home Care program, which Summa began in 2010 to better serve opiate-addicted moms and their babies.

The program, which has earned several best practice awards from the Ohio Patient Safety Institute, has led to healthier moms and babies, Frantz said. In fact, the last two babies born to moms in the program didn’t require stays in a neonatal intensive-care unit at all.

“With Centering, they have so many better outcomes,” Frantz said. “Neonatologists have said our mothers are the most prepared.”

The Community Health Center’s MOMAT program, run by addiction specialist Karen Cole, provides support to pregnant women and mothers who are receiving medication-assisted treatment, as well as case management services to facilitate communication between parents and the hospital. The group is another chance for women in addiction to connect with each other, as well as learn more about what comes after the baby is born.

They discuss the trials that come with being an everyday mom, as well as those that come with addiction, like what to do if a baby is born with NAS and how to communicate with Children Services in the likelihood that the agency gets involved.

If a baby shows symptoms of NAS, it is protocol for many hospitals to place a call to Children Services regardless of whether the mother’s opiate use was illicit or not. Then, the agency talks with the family them to determine the safety of the situation and whether case workers need to get further involved.

“Every family is unique, every family brings their own set of strengths and needs to the situation, and we like to look at each family individually,” said Dawn Boudrie, the department director of intake screening and support for Summit County Children Services.

Between the two groups, Kiser has learned what it means to be a mom in recovery.

She still struggles. She’s trying to quit smoking cigarettes, and the temptation of addiction still tugs at her.

“I’ve got to remind myself on a daily basis that I gotta work hard. Every little problem, I’m already on alert about,” Kiser told a group of women one Tuesday at MOMAT.

Then, she let out a laugh. “I’ve got problems all the time.”

Every woman in the group shares different, but similar, problems — problems they learn to manage.

Not all prevail.

Kiser said one of the friends she met through both groups recently relapsed and her children were removed from her home.

“That’s so scary to me,” Kiser said. “We are addicts. At any minute of any day, one could pick up a needle and say, ‘I’m done with life.’”

Tiny victories

In the swarm of uncertainty, fear and doubt, Kiser finds tiny victories.

She recently found a job at a distribution center sorting through industrial supplies, while Martin works as a machinist in Tallmadge.

In the journey to rediscovering normalcy after addiction, Kiser relishes most in the mundane tasks of everyday life — paying bills on time, cooking spaghetti, going to church every Sunday.



On a recent Sunday, Martin wrapped his arm around Kiser as the two listened to the pastor's sermon about change. Kiser jotted down a list of people to pray for and notes from the sermon, with the top page reading, "U R Worthy."

The names of her three children on the front cover of her notebook still flash at her, delivering a pang of guilt despite the fact that she reminds herself, "I loved them enough to give them another life."

Although they're open adoptions, Kiser hasn't seen any of her children since she gave them up. She doesn't plan to until she knows she's in a good place and they want to see her, too.

"I just have to heal first. I want to come back changed," Kiser said.

Now that she's trying to create a new life for herself, Kiser is determined to do so for the sake of Dominic — the name that she and Martin decided on for their future baby boy.

"He's never gonna know we ever struggled," Kiser said. "He'll never have to know anything about that dark place."

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<https://www.ohio.com/akron/news/local/pregnant-akron-woman-recovers-from-heroin-addiction-while-preparing-for-birth-complications>