

Handing Heroin to Addicts by David Berner

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Would you cross the street to give a drunk a shot glass of whiskey? Hand the keys to the new Camry to a known and chronic car thief?

Of course, you wouldn't.

Yet everyone who is now poised to give heroin to addicts is being hailed for innovation and progressiveness.

Take John Reynolds.

Mr. Reynolds, co-chair of Stephen Harper's 2006 campaign and a full-time political operative, is on the board of something that calls itself with the Inner Change Society.

The entire purpose of the Inner Change Society is to promote the giving of heroin to heroin addicts.

For this, one editorial has called Reynolds "enlightened," adding that his message "has a powerful and refreshing ring to it."

Have you ever tried "inner change?" It's damn hard work.

Try dropping sugar or salt from your diet, or changing your morning route to work. Inner change is an enormous psychological challenge. It includes confronting lousy behaviour and owning up to deeds, good and bad. It asks of us to appreciate the best in ourselves and others.

Heroin is an inert white powder. If I give you some heroin, in what way am I helping you with "inner change?"

All I am really saying to you is, "You are so stupid, so beyond redemption, that I can only keep you drugged up. Maybe that at least will keep you from breaking into my home and car."

Mr. Reynolds goes further. He calls this handing out of heroin "people helping people."

Can he be charged with abuse of the language?

The quasi-scientists behind this strategy of giving drugs to addicts are largely self-described “addiction research experts.” In all my years of dealing with addictions, I have never met one “addiction research expert” who has helped an addict get clean. Not one.

Now, these given us two Biblical-sounding programs. NAOMI (North American Opiate Medication Initiative) was a government-funded exercise over two years in giving addicts heroin. It cost you and me \$8 million. The researchers claim that addicts in this program were healthier and that they committed fewer crimes.

Really?

Show us the numbers. Demonstrate with any conviction at all the efficacy of this tragedy.

NAOMI is to be followed by SALOME (The Study to Assess Longer-term Opioid Medication Effectiveness.)

These honorable folks claim their long-term goal is to help addicts get off hard drugs, BUT in the short term, they’ll give them some drugs to “reduce the harm.”

Have you ever had a child whining and screaming for just one cookie before bedtime? Did giving the child the cookie help?

What is missing in this dreadful, inhuman approach is a basic understanding of the mechanics of addiction. More “research” is not needed. We already know what addicts want. Addicts want more. More heroin, more coke, more wine, more scotch, more gambling, more sex, more.

You can merrily supply them with a fix or a clean, well-lit place in which to fix at 10am.

And by 2:15, they will be back in the alley cranking up again. Ask the police. Ask the early supporters of Insite, who are now begging for real treatment opportunities.

By the way, what makes me an “expert” on this subject?

I ran a residential treatment center for addicts, alcoholics and others for ten years. The program has been running successfully since 1967, sending hundreds and hundreds of addicts back into the mainstream clean and sober. The program fits into what is called the “therapeutic community model.”

I haven’t been directly associated with this kind of work for some years.

But I continue to cheer on all those brave souls (mostly recovering addicts themselves) who continue to work hand-in-hand with users like themselves, offering the realistic hope that one can move on and live a life free of the misery of addictions.

And I continue to be horrified by the John Reynoldses of the world who have only more drugs to offer. Who wrap their destructive, enabling, hope-destroying ploys in the language of compassion and pretend that they know or care.