

# Canada's policy on heroin another lesson for U.S.

It's been nearly 100 years since the U.S. sent heroin underground, banning the sale of what was, at the time, a marginalized opiate.

In the time since, heroin use has reached ever-increasing levels, spanning all socioeconomic classes and touching every community, town and metropolis in America.

It's well passed the time to rethink our approach to what is, and has always been, a dire health problem coopted into political and economic power struggles.

In considering a better path, the U.S. has a new leader to look to. Canada recently announced it will be legalizing prescription heroin for severe addicts.

Soon, any sanctioned physician will be able to prescribe diacetylmorphine, a pharmaceutical-grade heroin, to addicts for whom other courses of treatment have proven ineffective.

Why?

Because – when you peel back the hubris – it works. Canada's move is the first serious step forward on this front from a North American country, but it follows the path of European nations that have embraced more progressive – and successful – attitudes around harm reduction.

This isn't a free-for-all, open-the-floodgates proposal, but a measured decision in the face of real research. Research and real results, as evidenced in the Vancouver Crosstown Clinic, which has operated a heroin maintenance program since 2005.

The U.S. and Oregon should take note of the Canadian initiative, not through the eyes of law enforcement, but through the eyes of health care.

Canada's Providence Health Care (not affiliated with Providence Health and Services in the U.S.) conducted North America's first clinical trial of prescribed heroin at its clinic from 2005 to 2008.

"The result of the study found that patients given injectable diacetylmorphine were more likely to stay in treatment, and more likely to reduce illegal drugs as well as other illegal activities than those patients being treated with oral methadone," stated the report.

In Portland, we have a chronic heroin problem that

spans Vietnam War veterans to kids still years away from buying their first beer. Street Roots has covered this issue for many years, hearing directly from the addicts voices and from mavericks looking to shake up policy.

What is often seldom understood about heroin is that after the addiction has taken hold, it isn't so much about the high any more. It is used to maintain, to stave off sickness, and it's a terrible addiction to try to shake. On the streets, compounded by desperation, it's nearly impossible. The illegality of drugs make them more dangerous – from the lack of quality or potency measurements, to the deterrents to seeking out help when needed and care when essential.

On the policy side, innovative ideas always have an uphill battle against the war on drugs mentality. But there's a growing chorus to move beyond the taboo, just as we have with alcoholism and as we are with the medical applications of marijuana. Portland has already moved the ball forward with broadening distribution of overdose-reversing drug naloxone and sanctioning a syringe-exchange program – actions that save lives and give people a second chance.

Included in Multnomah County's latest Domicile Unknown, the fifth annual report of deaths among the homeless, is a recommendation to evaluate the feasibility of a safe injection site. The first ever has already been proposed by the mayor of Ithaca, N.Y., as a conduit to get people suffering from addiction the health care and recovery services they need. Such sites exist in Canada, Europe and Australia. There already exists a roadmap, decades long, of lessons learned and successes to be followed.

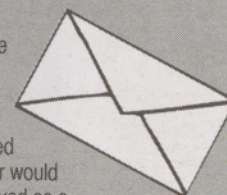
Many local authorities are waking up to the fact that the federal approach, the so-called war on drugs, has failed in terms of protecting the health and welfare of Americans. Where it has succeeded is in actually fostering hard drug use and putting hundreds of thousands of people who suffer from addiction behind bars, into poverty and on a downward spiral.

We have to let go of our stereotypes and stigmas. We have to shake the industrial prison complex mentality. It's time to embrace health.

## EDITORIAL

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If you would like to have something that you've written published in our pages, or would like to get involved as a member of our reporting staff, contact Managing Editor Joanne Zuhl at 503-228-5657, joanne@streetroots.org. We ask that all submissions include the author's name and contact information, if available.



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PHOTO COURTESY OF INSITE

Supplies for heroin use at Insite, Vancouver, B.C.,'s safe injection site.