



Heroin: Combating this Growing Epidemic in Rural Pennsylvania

Submitted to the Reading Hearing on Heroin and Opioids

By: George J. Vogel, Jr.

Council on Chemical Abuse

July 22, 2014

Good Morning, my name is George Vogel, the Executive Director of the Council on Chemical Abuse, the Single County Authority for Berks County. I would like to thank The Center for Rural Pennsylvania for allowing me to present testimony today regarding the new old problem of heroin and opioid addiction.

Hardly a day goes by without a media reference to the destructive properties and disturbing portrayals brought about by the use of drugs and alcohol. Alcoholism and drug addiction is directly related to the prevalence of gangs, violence, overdoses, deaths, and accidents caused by drug impaired drivers. This disease results in individuals who as youth were destined to achieve great heights, now standing in unemployment lines and residing in shelters and jails. But I am not here today to talk about alcoholism; rather I am here to speak about the heroin epidemic. Interesting isn't it, that no matter what substance is being used, so many of the resultant behaviors of addiction are identical. However, what is different is the potential and immediate harm that heroin and other opioids can have on an individual. This is true for an individual that is a first time user, a person who has a history of addiction, or somewhere in between.

In the early 1900s, heroin was introduced as a means of treatment for individuals addicted to morphine. Ironically, what was once "touted" as the cure, is now the curse. In the past, heroin was viewed as a highly addictive drug used only by inner city addicts. For many of us in this

room, heroin was elsewhere. It was not in our “backyard”. But now it is, and that is what brings us here today.

The drug trade is governed by a simple paradigm of **supply** and **demand**. Neither can exist without the other. We see stories and images in the media of arrests and prosecutions of “drug pushers” in an effort to alter the traffic of **supply**. Law enforcement is extremely diligent in detecting and arresting the drug sellers in a continual effort to eliminate avenues to obtain drugs illegally. Such action must and needs to happen. Let me repeat, it must and needs to happen!

What remains in the paradigm is an approach that affects the reduction of **demand**. It is an approach that everyone in a community bears responsibility to work towards. Community leaders, medical and health care professionals, parents, educators, neighbors, etc., all can affect the demand. This is an “all in” approach. The reduction of demand is about changing attitudes, strengthening decision making skills, fortifying resistance to harmful influences, all of which can build and promote self-confidence in today’s youth and lessen the need to escape via the use of drugs.

Easier said than done. Absolutely true! But parent by parent, school by school and community by community, we will need to commit to and take ownership of helping our youth to make their tomorrow a better day than today. Moms and Dads, certainly our 1st educators (and perhaps our most prominent), need to engage in messaging that fosters trust and openness. Parents need to serve as that available presence for youth especially those who are troubled or in crisis. There is a need for school curriculums that not only speak to academics, but also to the building of resiliency and character. And finally, communities must find ways to provide fun activities and opportunities for youth to participate in and feel good about. These strategies constitute our primary efforts to reduce demand. However, there also is another component to our approach to reduce demand. For those individuals who become addicted, treatment and recovery provide yet another means of reducing the demand for the drug. Addressing the addiction through treatment and recovery is better than a life time of HELL and the public price tag that follows.

Not to give our best to reduce demand will only result in even more casualties, which are measured by increases in jail populations, ER admissions, broken families, promising careers side tracked and unfortunately and sadly, the number of obituaries that need not to have occurred.

In closing, I would like to take a quote from the New York Times magazine article almost 10 years ago titled "My Addicted Son". In this quote, the author's son is in a drug treatment program and is reflecting on his drug addiction. "How the hell did I get here? It doesn't seem that long ago that I was on the water-polo team. I was an editor of the school newspaper, acting in the spring play, obsessing about which girls I liked, talking Marx and Dostoevsky with my classmates. The kids in my class will be starting their junior years of college. This isn't so much sad as baffling. It all seemed so positive and harmless, until it wasn't."

It needs to be our goal that no person should have to think or make a statement like that ever again.