

Why I help addicts shoot up
A Christian defence of harm reduction
Feature Story by Meera Bai with John Stackhouse
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It's evening, and I'm walking where a middle-class, university-educated woman normally wouldn't walk alone, if ever. I'm in Vancouver's Downtown Eastside (DTES), home to the poorest postal code in Canada. And I'm going to work.

I approach the electronically secured doors at my job, and a staff member buzzes me in past what to most would appear to be a mess of ragged people, dirty bicycles and bottle-filled shopping carts. I work at InSite, Vancouver's supervised injection site for IV drug users. It's where I choose to work as a nurse—and as a Christian. Trying to follow the command of God to seek out and care for those in need of mercy has led me to find grace and pass it on among these people in the streets of the Downtown Eastside, the very definition of a marginalized population.

Walking through the waiting area and entering the injection room, I chat briefly with the day staff, asking them how their shift has gone. "There's some bad dope going around," one of them says. Some dealer has laced the heroin. Drug dealers often take advantage of people living with addictions, knowing that they will buy and use drugs even though they know there is a chance they may overdose or be hurt by contamination. Instead of allowing such people to die on the street, however, InSite staff have intervened in hundreds of overdoses, bad trips and poisonings, preventing every single potential death on InSite ground.

A participant walks up to me and gives me a hug. She comes in to use drugs multiple times in a day to feed the habit gnawing away at her. The previous week, she had overdosed and stopped breathing, her whole body shaking with a seizure. Now, she has returned to thank us. "You guys saved my life!" Then she adds, more quietly, "Sometimes I think that's not worth anything—what's the point? I'm just gonna use again anyways." A moment passes, and her face brightens a little. "Well, at least I got hope, I got another day, another start, another chance." This is a woman who understands grace.

Something about seeing people at their lowest and most desperate, half-clothed from turning tricks for drugs while hating themselves for it, opens into a profound level of intimacy. I am blessed to enter the darkest place of people whose sins are far more public than those of the rest of us. Constant humiliation makes the people I work with especially vulnerable, and vulnerable in almost every way: to violence, to exploitation, to false hope and finally to despair. When allowed into these dark places, it is my privilege, and that of all InSite staff, to communicate worth and love instead of judgment and scorn.

The day nurse asks me to keep an eye out for a specific participant—a regular who comes in several times a day. She hadn't been seen yet. Later that night, the woman finally comes in, and she's beaming. "I went to see my daughter today! And I didn't use all day! F---, soon I'm gonna get off this s---!" We break out in applause and cheers, celebrating her triumphs with her—as she mixes her drugs to take in a few minutes in our facility. Other participants in the room are excited as well; two of them come over to hug her.

Another regular later chats with me in the treatment room as I dress his abscess, trying not to cringe away from the overwhelming odour he emanates. "It would have been my anniversary with my wife today, if she hadn't gone missing. We've both been down and out, but she took care of me out here. Now, I got nobody to talk to. This is the first human touch I've had today." I look up, startled. I am wearing gloves, holding my breath, cleaning his sores with a 10-inch sterile Q-tip. Even this, my deficient attempt to heal, is taken as love by a man desperate for human connection. I am ashamed.

I finish dressing the wound, clean up, remove my gloves and give him a hug. I hop up on the treatment bench next to him and we sit together and talk for another 15 minutes: about life, love and faith. He says goodbye, and then asks for a referral to an exit program. I give it to him. He knows the referral is merely one point along our journey together, and that I will listen to his story whether he goes to the program or not. As a Christian, I know that his life is part of God's real story of redemption. InSite is one of the few places where I get to hear it openly spoken, with trust, without judgment.

Having witnessed three generations of the same family shoot up in the same room, I have come to understand that injection drug use is far from being the result of one bad decision. It is the outcome of a complex of systemic, familial and individual influences that must not be oversimplified to "It's their fault. They should just quit and get a job."

I am still shocked by the stories of abuse that I hear at InSite. Some of the people I respect the most in my life are injection drug users. Having heard what they have survived, I realize that they have far more strength than they are usually given credit for. I can understand why they turn to drugs as a coping mechanism amid the devastation they have endured. Dulling the pain has become a way of survival for many who come to InSite. Appreciating this simple fact leads to love and compassion, which leads to grace, given as freely as it has been received.

Often, participants at InSite are forced to sleep outside at night. Not having a warm, safe bed takes its toll on bodies, and special care is needed for feet. An InSite staff member chats with me behind the desk as he fills up a basin of warm, soapy water. Kneeling on the floor, he gently strips damp socks off the swollen foot of a participant and lowers it into the soothing water.

Washing feet here isn't an oddity from a discomfiting Bible story, but a regular occurrence. Foot baths are healing—for body and soul. As I fill up another basin, I marvel at the timelessness of this act of community. The humility necessary for all involved in washing feet produces beautiful vulnerability and relationship, which, unsurprisingly, creates change.

So why am I here? Aren't I enabling drug users to continue their awful habits? Aren't I wasting charitable funds that could be directed to other projects (and, let's acknowledge the implication, more "worthy" recipients)?

InSite has been shown to be a successful public health initiative in more than 30 scientific research reports published in peer-reviewed medical journals. Such reports demonstrate that InSite users are more likely to seek long-term addiction treatment and to stay off the street, than users who choose to inject outside. The HIV rates in the DTES are on par with many African nations. Such blood-borne diseases are spread by sharing needles—something that is banned at InSite. And instead of using puddle water from urine-soaked alleys, participants are provided with sterile water, which reduces various kinds of horrific

infection.

Clean supplies, safe rooms, friendly staff supervision during injection and compassionate nursing care help injection drug users to learn how to value their bodies, and thus themselves, even as our society generally tells them they are worse than useless. The choice to stop using drugs is a decision that many addicts cannot even imagine making, but InSite provides reachable steps toward a healthier life, offering participants a chance at redemption of both body and soul.

Despite the overwhelming evidence in support of Insite, however, it is currently having to fight before the Supreme Court of Canada for the right to stay open. The Harper government—one supported by many otherwise compassionate Christians—has been seeking to shut down this initiative, pressing its case at tremendous expense despite losing in lower courts.

Why are they doing so? It is part of their policy to turn away from harm reduction and put more money instead into policing and prisons. Better, it seems, to spend much more money locking up addicts or filling up waiting rooms in the ER, than making their difficult lives a little easier, a little safer, a little more graced by care.

The potential loss of this pioneering charitable work, the first supervised injection site in North America, should alarm Christians. Participating in God's redemption of Canada requires a multi-pronged approach, one that must include the basic principle of harm reduction. Do we wish all addicts were off drugs and healthily contributing to society? Of course we do. But wishing don't make it so. And in the real world—the only world there is and the world Christ calls us to love—sometimes the best we can do, at least immediately, is make things less bad—and in the case of InSite, much less bad.

InSite offers more than that, however. InSite offers not only the great gift of harm reduction, but the greater gifts of recognition, compassion, stability, safety and hope. In short, it offers love to people not well loved by Canadian society—or by most Canadian churches.

The Harper government must stop its wrongheaded hostility to InSite. Instead, it should look at why so many Christians, as well as other citizens, support it, and then work with municipalities to multiply it wherever necessary—along with, of course, proper funding for public safety, mental health, homes for the homeless and a judicial and policing system that will come down harder on drug pushers and pimps. Will you tell your MP that the Harper government should drop its opposition and instead support InSite?

Near the end of my shift, I watch in horror as a regular participant stabs wildly into his neck with a needle. He has been trying desperately to inject into his neck in order to find his jugular vein. When I intervene, he consents to letting me try to find him one in his arm. Midway through, however, he changes his mind and grabs my arm. "Don't!" he says. "I'm not worth it."

I look him in the eye. "Yes, you are."

He glares at me and holds out his arm. I tie the tourniquet wordlessly and find him a much safer vein. He injects himself, and then gruffly thanks me, tears welling up in eyes that refuse to meet mine.

This is grace, manifest in care of desperate persons, flesh and spirit. This is harm reduction. And I do it

because it is simply the Christian thing to do.

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