



White America's Heroin Problem

On Tuesday, Obama heads to Atlanta's "Triangle," where heroin deaths are up 3,000 percent. One of those fatalities was my best friend.

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I glanced at an open window, a soiled sheet fluttering in the breeze, as I drove by the run-down, two-story apartment complex off Buford Highway near Dresden. Beyond a string of used car lots, title loan companies, and liquor stores, I passed the old tavern where we used to listen to the live band, smoke menthol cigarettes down to their butts, and toss back tequila shots until one of us fell out and one carried the other home.

Fuzzy's Place has since moved a few blocks up and, like almost everything else around here, the name has changed. The owner died some years back, I heard, and a handful of regulars couldn't stand to let it go.

But almost everything and everybody else has moved on.

The boy with the careless smile, the one who fell in love too hard, too deeply, and too easily, was gone too. I knew I wouldn't find him here, but I guess—like Fuzzy Cawthon's old customers—I couldn't stand to let him go.

Queenie.

He died almost 10 years ago after somebody dumped him off at a suburban Atlanta emergency room with a needle still stuck in his arm. It was a bad batch of heroin, they said, cut with too much fentanyl—an opioid painkiller 100 times more potent than morphine. The synthetic drug, which looks like heroin, is fast acting and potentially [deadly](#) even in small amounts.

Drug counselors say that with heroin there is at least a chance for recovery after a relapse. But fentanyl can kill within moments. The high takes off even before the injection is complete. That explains why addicts, like Queenie, are so often found lifeless with the syringe still dangling from their veins. Fentanyl is so cheap and so prevalent that is now being peddled as a stand-alone.

Queenie was a vivacious and flamboyant teenage boy—living the stages of his life out loud—when we met in high school. He was popular, always wore the most exquisite clothes and he was gay. Nobody needed to say that. One Friday night, before a football game, Queenie showed me how to put on smudge-proof liquid eyeliner.

“Honey, we can't have you looking like a raccoon,” he joked.

Queenie was always looking out for me and, over the years, I tried to return the favor.

“We're getting old,” I remember kidding him, as I topped off his gas tank at a Quik Trip. By then, we were in our twenties—Queenie and me, living different lives—though Queenie looked much older. The sparkle in his river-blue eyes remained, even then, though streets had not been kind.

I don't know when Queenie got hooked on “smack.” But it was always something—a little booze, a few tears, and then some weed. In time, I got married and started a family. We talked infrequently—usually only when he needed a few dollars for rent, an overdue utility bill, or some gas money.

It was always going to be this way, I lamented as I navigated my way through the southbound traffic and made the curve onto Sidney Marcus Boulevard. In and out of jail, a couple of short stints in rehab, Queenie was always chasing a high.

He was always going to die.

The recent surge in overdose deaths around the country has prompted congressional hearings and a national conversation around how we deal with drug addiction. For them, Queenie is a data point—from a white working-class family—that says nothing about his fight to survive, to live and love in a world that did not always love him back.

Heroin deaths have nearly [tripled](#) over the last five years, according to the DEA. It's cheaper now, and more potent than anything law enforcement encountered two decades ago. In and around Atlanta, the number of heroin-related deaths has climbed by 3,844 percent in an area now known as "The Triangle." The body count is mounting in the stretch of suburbia that begins a few miles north of Fuzzy's Place and spans across the top end of Interstate 285 through Fulton, DeKalb, Gwinnett, and Cobb counties.

The president will address the nation's heroin epidemic at a conference here Tuesday. He will, presumably, urge us to focus our collective attention on prioritizing treatment over criminalization. His proposal includes a request for \$1.1 billion in new funding for drug treatments that would go directly to the states and training for health providers and drug prescribers.

Republicans are, predictably, hesitant about appropriating more funding. However, by an almost unanimous vote, the Senate approved legislation this month designed to fight the heroin epidemic and encourage the use of naloxone—a drug used to reverse overdoses. The House will take up the measure soon.

Tellingly, the approach differs from that of the Reagan administration. The now infamous "war on drugs" was less about advancing public health than it was about filling prison beds. There was, it seems, another distinction—one many believe comes down to race and income.

But even that, as we know now, did not begin with Reagan.

President Richard Nixon, according to a new article in *Harper's* magazine, used drug policy as a political strategy—to neutralize his political foes, specifically "the anti-war left and black people."

His domestic policy adviser John Ehrlichman, who spent 18 months in prison for his part in the Watergate scandal, outlined a scheme by which our policies to combat illicit drug abuse "could disrupt those communities."

"We knew we couldn't make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities," Ehrlichman reportedly [told](#) journalist Dan Baum in 1994.

"We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did."

Ehrlichman, who died in 1999, confirmed what so many of us long suspected: When it comes to drug treatment versus jail, race matters.

In fact, race has always mattered more than the drug in question—be it cocaine, heroin, or marijuana. It didn't seem to matter whether there was a Republican or a Democrat in the White

House. Mass incarceration, driven by laws sweeping through the states and the 1994 federal crime bill signed by President Bill Clinton, was—in part—a result of inequities in sentencing between crack and powder cocaine that were codified in mandatory sentencing rules.

One was used in the “streets” and the other in the “suites.” One would get you jail time. The other would more frequently result in probation and mandatory treatment. Despite a handful of reforms advanced by the Obama administration, the disparities in policing, prosecution and sentencing continue to saturate our criminal justice system.

But the scourge is not contained to distressed urban neighborhoods. Like crystal meth, heroin and fentanyl addiction is now almost exclusive to white America and it is far from invisible. News reports of people being found locked in public restrooms are more frequent. Where they are being found—white suburban and rural communities—has alarmed lawmakers on Capitol Hill and in statehouses around the country.

“Now, things are changing,” Rep. Elijah Cummings (D-MD) said in a recent congressional hearing. “Between 2006 and 2013, the number of first-time heroin users nearly doubled, and about 90 percent of these first-time users were white.”

In predominantly white New Hampshire, Massachusetts, West Virginia, and [Oklahoma](#), drug deaths associated with opioids have skyrocketed with [incidences of death](#) “reaching levels similar to the HIV epidemic at its peak.”

“No group is immune to it—it is happening in our inner cities, rural and affluent communities,” Timothy R. Rourke, the chairman of the New Hampshire Governor’s Commission on Alcohol and Drug Abuse, told *The New York Times*.

Maybe the new rhetoric will result in meaningful policy solutions. Maybe this time, we will come to see drug addiction as a disease, a public health issue, which knows no color. Maybe now we will come to understand that no community—black, white or brown—is immune.

It would be years before I ran into Queenie again. He was selling women’s shoes on the upper level of a Buckhead department store. I almost didn’t recognize him beneath the layers of MAC foundation and the soaring eyelashes. He was thinner now, wearing a silk dress and strutting across the sales floor in an eye-popping pair of stilettos that I would have given up my second-born child for. But the sideways grin, the dovelike nickel-sized eyes, and singsong of his voice were unmistakable.

Happier than I had ever seen him, something was still missing. Something was always missing. We talked a while, sharing a bottle of wine at an upscale restaurant, and then kissed goodbye.

“I missed you, girl,” I said through a flood of tears.

He squeezed me tighter, “We’ll always be girls.”