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6/25/2008 8:47:00 PM

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## Long Highland

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They had all the proof they needed that they were fighting a real war.

Recently, two detectives from the Nassau County narcotics/vice squad went for a quick bite at a county line area bagel store. Both are seasoned veterans, having fought the darker side of suburban life for some years. Among other duties, of late, their time had been spent dealing with an increasing heroin problem in Nassau County, one they know is very real and very frightening.

Across the store, they noticed a young man sitting at a table falling asleep, or nodding off, into his lunch. Moments later, another young man exited the men's room with blood trickling down his arm. The detectives moved in to investigate. The young man snoozing in his bagel was arrested after the cops found heroin in his pocket. In the confusion, the bleeder got away.



Heroin, once considered one of the most unsavory drugs, is making a comeback. Unfortunately, it is becoming the drug of choice for teenagers and young adults.

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This was in the middle of the day, in a typically white, middle-class American suburb. And it is becoming a familiar story.

## A Typical Teenager

Jessica\* seems like the nicest girl in the world. She's soft-spoken, bright-eyed and as sweet as can be, the kind of girl you'd want your kids to hang out with.

For years, she'd find the kind of kids *she* wanted to hang out with on the streets of Levittown. That's where the former Island Trees High School student would wander to buy her heroin—from fellow students. That is, until the night her stepmother found her in bed unconscious, blue-faced, with saliva dribbling down the side of her mouth, ODeD.

"I almost died," remembers Jessica.

In the hospital, she was shot with adrenaline through a needle in her heart, an instant detox. She remained in the hospital with a collapsed lung for a week, going cold turkey.

"I was convulsing and thrashing, trying to get out of my body," she recalls. "I weighed 100 pounds and eight people had to hold me down. I look back at it now and cringe. I had no concept of how I was playing with death."

She started using heroin at 15 and stayed on it for four years. Now, five years clean and 24 years old, she says, "I desire it all the time. I liked the rush and release. It was an exciting, thrilling and new experience that you just cannot feel unless you're high."

That's what authorities are up against.

## In The Trenches

Going to the offices of the Nassau County Police Department Narcotics/Vice Squad (NCNVS) makes you feel like you are up to no good. There, they don't look like cops, and there's a degree of mistrust in their eyes that cannot be shaken. It is the product of dealing with liars for a living.

Detective Lt. Andrew Fal's face does not carry the lines one might expect from a cop who has been on the job almost 40 years. As the commanding officer of the NCNVS, Fal has a lot on his plate. His day consists of dealing with some of the darkest aspects of the human condition, including human trafficking, prostitution and drug dealing. He has seen the drinking age change more than once, several police commissioners and county executives come and go, and crime stats go up and down in Nassau. Nothing should surprise him, really. But recently he has been shocked by something he never thought he would see again: heroin, once again taking root as a popular drug, on LI's manicured streets.

When heroin began to show up in arrests around Nassau, especially with young people, Fal was stunned.

"I said, 'No, this can't be,'" says Fal, who remembers when heroin began to claim lives in Nassau 30 years ago. "I mean, how stupid are these kids?"

## The Butcher's Bill

According to the Nassau County Medical Examiner, young white males make up the majority of drug deaths. While it is not all heroin, the majority of the deaths are from opiates. In 2007, white men from the ages of 21 through 60 died as a result of drugs, and 25 from alcohol. And the geographic breakdown tells the story, too:

- 71 dead in the Town of Hempstead
- 14 dead in the Town of North Hempstead
- 23 dead in the Town of Oyster Bay
- 8 dead in the City of Long Beach
- 1 dead in the City of Glen Cove

## Interactive Poll

Do you think the East End should become it's own county?

**Please select one:**

No, it's confusing enough

Yeah, that's what we need—more government

It's a great idea. The East End is totally different that the western parts of Long Island

I don't care, as long as I can still go to wineries and to Board Barn

There is no denying that the drug is a big problem among kids in their late teens and early 20s, says Fal. Across Nassau and Suffolk, more and more arrests, overdoses and, most disturbingly, casual use, are related to the drug that is perhaps the most hardcore of all illicit substances.

According to Detective Lt. Peter Donohue, deputy commanding officer of the NCVS, the numbers don't lie. In 2003 in Nassau, he says, there were 102 heroin-related arrests. Last year, there were 151—a frightening increase of almost 50 percent. But those numbers can be misleading. Many people who are arrested for petty crimes, rather than drugs, are committing them for one reason—to get more heroin.

Although Suffolk police were unable to make heroin arrest statistics available as of presstime, *The New York Times* reported 95 fatal heroin-related overdoses in 2005 in Suffolk, compared to the 47 in 2004. Rehab clinic admissions for opiate abuse from a criminal justice referral source rose in both counties, by 32 percent in Nassau and twice as much—66 percent—in Suffolk between 2000 and 2007, according to the New York State Office of Alcohol and Substance Abuse Services.

"Heroin is emerging as a threat," says Suffolk County District Attorney Tom Spota through his spokesman. "Over the past few years, a significant rise in the drug's purity coupled with a greater supply on the streets has resulted in an increase in the frequency of heroin overdoses," the spokesman added. As a result, in 2005, Suffolk County police responded by creating a special unit in the county police narcotics bureau, to track and investigate heroin overdose cases.

Detective Lt. William Burke, commanding officer of the Suffolk Police Narcotics Section, points out that there has been a shift in the heroin-abusing demographic since his rookie days three decades ago.

"When I first came on the police department, I always came across heroin junkies who were 40-year-olds. Now you will see younger kids using heroin," he says, attributing the change to the new, stronger wave of smack. He gives another reason for the resurgence: Today's heroin is cheaper.

"It's a trend that's been going on over the last several years," adds Burke. "We have issues with heroin everywhere."

## **"OBVIOUS AND OUT IN THE OPEN"**

According to the NCVS, the hotbed of LI's heroin community seems to be the South Shore communities of Massapequa, Bellmore, Merrick, Seaford, Wantagh, Copiague, Lindenhurst and Babylon.

But the epidemic does not stop there. Tony North Shore towns are also facing their own problems, Fal warns. Economics may play a role in why the rest of the Island may not hear of these issues on the Gold Coast.

"On the North Shore, the problem is well hidden behind money," says Fal. "When a kid gets in trouble, [he or she] is sent off to rehab quietly."

And many teenagers and young adults do seem to be in trouble. Students at Syosset High School say that there's a pocket of seniors who have \$400-a-day heroin habits. High school kids in Copiague say that their town is home to dealers who service teens. Massapequa High School students say heroin use is rampant—"obvious and out in the open"—in their school and town. At Ward Melville High School in East Setauket, the commons is called "The Pharmacy." At Sachem North, there's a part of the school openly known as "The Drugstore." Lindenhurst High School students brag that they're the "Heroin Capital of Long Island." And in Bellmore, kids from Calhoun High School say heroin is so prevalent that in some families, it's an intergenerational thing. Several sources from different towns report that some middle- and

upper-class kids have junkie parents, and they steal their stash.

Most of the students and heroin users interviewed for this story warn that young heroin users aren't the stereotypical-looking strung-out junkies we know from the movies. These are white middle-class kids who pass for normal, looking sweet and typical-like Jessica-but who often suffer and die silently.

"Parents need to know that their goody-goody child could be doing heroin," says Jill\*, 25, a seven-year crack and heroin user from Babylon, "and unless they pay very close attention, there are very few telltale signs until it is too late."

"Weekends and parties are the places where most of these kids use heroin," says one Syosset High School senior, who takes drugs but not heroin.

Across the board, the consensus is that the increasingly common path to heroin starts with what users call "pharm parties," where kids take whatever opiate-based prescription drugs are in their parents' medicine cabinet-Vicodin, Percocet, oxycodone-perhaps going so far as to crush the pills into a powder and sniff them. Teens who abuse prescription drugs are 12 times likelier to use heroin, according to a 2005 Columbia University study that also found that prescription drug abuse by teens tripled between 1992 and 2003.

## **Smackonomics**

There is something very wrong when heroin is more affordable than gasoline. But, say police sources, that is exactly the situation. NCNVS's Donohue says that heroin is cheaper and easier to get than ever before.

Users agree that it does not cost much money at all to get into the game. A small bag could cost as little as \$7. Once the heroin habit really begins, junkies may start to buy in "bundles," which could be as many as 11 or 12 bags, but usually an even 10. That could cost about \$200 or less. The typical user buying in that quantity would get about two bundles, or 20 bags.

Fal says that the drugs are being sold primarily by neighborhood kids who start out by going to Brooklyn, Queens or the Bronx to buy heroin for themselves. As word begins to spread, they start to pick up heroin for friends. Suddenly, they are dealers.

"They find their trade expands exponentially," says Fal. "They never see themselves as dealers when they are arrested. They just think they are picking up for their friends."

"Brooklyn's the cheapest," says a Syosset High senior. This is confirmed by most of the junkies who find they have to go off the Island to buy their heroin after they graduate high school.

"It's so easy to get heroin in school," says Jessica. "When you graduate, you graduate to Brooklyn or the Bronx, and things start to get seriously dangerous."

Most heroin users remain under the radar until their addiction causes them to commit petty crimes to support the habit. At first, they're stealing from parents and friends. Then they get more desperate. When caught, if they don't have heroin on them, they could be off the hook for the drug charge.

Being caught with a small amount of heroin, say, a small bag or two, is treated as a misdemeanor possession charge. The addict could be back doing the drug in just hours-or even less.

But getting caught with multiple bags could result in an intent-to-sell charge, which is big trouble for the suspect. They could wind up in custody at the worst time: when their withdrawal begins. Then it is a completely different nightmare altogether.

## Not Just Horsing Around

Heroin is a hell of a drug. Few substances have its immediate addictive qualities. Heroin is derived from the poppy plant, native to Southeastern Europe and Western Asia, but now is cultivated in many other parts of the world. Cops say the majority of the heroin that makes it to LI comes from countries such as Colombia, via Mexico. A member of the opiate family, which are the most addictive drugs, heroin goes right to the brain. It's that first hit that a heroin addict will chase after, forever. It is a futile chase, as most addicts will tell you.

It's been said by junkies that heroin is better than sex. While most would probably disagree, it makes scientific sense. In the early 1970s, scientists found that the human brain has receptors that seem to welcome opiates with open arms. Morphine, heroin, opium and other similar substances affect the part of the brain that releases endorphins, those sweet, natural brain chemicals that provide a "rush."

Some have said the initial rush of heroin is like an orgasm, complete with flushed skin and heavy limbs. But as the drug begins to settle down and travel through the body, it acts like morphine, numbing and calming the nerves. The feeling is so pleasant that users want to do it again. And again-well, that is, if they don't mind vomiting every once in a while. Welcome to the Terror Dome.

"Users develop a tolerance, so you need more and more heroin to feel the euphoria that is associated with the first heroin high," says Dr. Joseph Rio, the chief toxicologist for the Nassau County Medical Examiner's office.

Consequently, the brain urges the addict to do whatever is necessary to get that high. Of course, along the way the body begins to develop a dependence, too. Rio says that, not unlike substances like tobacco, the physical hook of heroin becomes a painful, nagging feeling.

But that tolerance is phony, because it is only the brain that is getting used to the opiate effect of the drug. The body continues to take a pounding, and there is no real tolerance level to achieve. Organs like the liver and kidneys will be damaged. And once a sniffer graduates to the needle, a host of other issues present themselves, including hepatitis B and C, HIV/AIDS, abscesses from repeated punctures not being cleaned, and other infections. Once someone begins doing heroin, there really is no upside.

Fal says, though, that this dependence works to the advantage of the cops.

"Addicts don't want to get sick," says Fal. "They get what we call diarrhea of the mouth."

That is when the cops can start to break down the walls of silence built up by drug addicts.

"When we arrest addicts, they know they only have a certain amount of time before they start to sneeze, get chills, and eventually be lying on the floor in the fetal position in withdrawal," says Donohue. And don't forget the insatiable itching, parodied by non-users but feared by junkies.

And a junkie will do anything to get a fix. That desperation has led to recent arrests in both counties. Sources confirm a recent bevy of arrests in the Massapequa area, which they believe will continue to lead to more information.

Recently, a married couple was arrested for a string of robberies in Massapequa. The man and wife were robbing school-aged kids, tearing chains from the kids' necks or grabbing whatever they could to fund their heroin addiction. Beyond south Nassau, on June 25 in north Suffolk, 21-year-old Victor Chunga of Smithtown was sentenced to 35 years to life for stabbing to death 70-year-old Martha Watson in her Nesconset home last December. Chunga stabbed Watson while trying to steal heroin from her grandson, Matthew Watson, who had stopped supplying Chunga with heroin. Matthew Watson was also stabbed repeatedly, but

lived.

## Fighting The Fire

The problem is so alarming that Nassau Police Commissioner Lawrence Mulvey and County Executive Tom Suozzi hosted a May 8 conference organized by the Nassau County Police Department for Nassau's school administrators.

A multimedia presentation opened the eyes of school officials, for many had no idea that heroin was making such a comeback locally.

The police department announced that it was holding the meeting with school personnel from districts "located in the south corridor of Nassau County, where an increase in the use of heroin amongst teens has made a significant resurgence." And yet, many insist that the drug is not a problem within their schools.

When asked about heroin use at Massapequa High School, Massapequa Public Schools administrators responded to the *Press* with fervor.

"The Board of Education and administration have never been informed of any use of heroin within the high school by our supervisory staff," said Acting Superintendent of Schools Charles Sulc in a letter faxed and mailed to the *Press*. "Furthermore, the Nassau County Police Department has never been in contact with the Board of Education, nor any level of the high school or district's administration, regarding heroin use by Massapequa High School students."

Sulc did not return calls from the *Press*, relying only on the letter.

Robert Schilling, executive director, assessment, student data & technology services for Massapequa Public Schools, flatly denied any heroin incidents with Massapequa High School. He did, however, attend the police department's conference. So what did he do with the information gleaned from such a dramatic presentation?

The school district had no comment on that question. Neither did officials from both the Copiague and Lindenhurst school districts, according to an e-mail from their publicist, Kathy Beatty.

"We had no specific [incidents] at Massapequa High School," says Fal. "But, in general, there is a problem. And, it's a conclusion you can make, that it is in the schools.

"We are not about mincing words," Fal continues. "We made that presentation so all the school administrators knew that [heroin] could be coming. It's an emerging problem. We have to create an awareness. You can't just wait until you have a problem."

On a recent walk through downtown Park Avenue in Massapequa Park, Massapequa High School students were observed spending their newfound summer freedom hanging out on benches lining the street. When asked, one 16-year-old boy admitted to heroin use. "It's a good drug," he said, while trying to persuade passersby to purchase cigarettes for him and his friends.

At nearby Brady Park, a small, informal 18th birthday remembrance for a boy from Massapequa who died unexpectedly this past March was taking place. His friends were open about the boy's heroin use.

"Plain and simple, [Massapequa High School] has problems with dope," said the dead boy's 20-year-old friend from Levittown. The friend admitted that he himself is a former heroin user, right after the group at the table finished smoking some marijuana. "I don't think [the school district] wants to admit they have a problem," said the Levittown friend. He would know-he did heroin with the Massapequa teens.

Ask any junkie in high school, and they will probably laugh at the idea of the administration not knowing that heroin is being used by students in the school. Often, these kids do not hide the fact that they use.

Edward, now 24, took heroin while at Lindenhurst High School. He says, bluntly, "They knew who we were. It's this generation's drug of choice." This sentiment is echoed by many young heroin users.

Jessica, who once trolled the streets of Levittown for drugs as a high school student, agrees. She says, "Teachers are well aware of the heroin use. I had one girl in my English class announce to the whole class, in front of the teacher, 'I was up all night doing heroin.' I thought the teacher was going to flip out."

But Alice Andersen, a licensed social worker who serves as the drug and alcohol counselor for Levittown Division High School, says she has never seen a student with a heroin problem at the school.

"Alcohol and pot have always been the drugs of choice," she says. "We have not had one child [on heroin], or one report of heroin abuse in the school."

Ask someone who has used, though, and you get a very different answer.

"I knew I could always get heroin from a student from Levittown," says Jessica.

But it's not just administrators who disagree that heroin is becoming more prevalent. Some students do as well.

"I don't think it's really that bad-it's just certain kids," says Andrew Carroll, 17, who graduated Massapequa High School in June. The former hockey team captain, taking a quick break from his job at a local deli, described the news coverage focusing on the school as "exaggerated." Others see any trace of heroin use as something to be concerned about.

Abusing heroin leads to obvious addiction, but too often that habit will end in death. Dr. Rio explains that heroin affects the brain as it is communicating with the body. So, the brain might tell the heart to stop pumping blood, or the lungs to stop breathing. Too often, when someone who is high on heroin goes to sleep, they never wake up.

By all accounts, the heroin that is being used today is immeasurably more potent than in the past. The potency allows users to sniff heroin as opposed to shooting it at first. That is a mind trick that Fal believes gets the ball rolling in the wrong direction.

"Kids think it's no big deal if they sniff it," says Fal. "It takes the stigma away from the drug. The image of someone using a needle is not reality to them."

But no matter how it's taken, heroin use is a harsh reality. A hit of heroin that is sniffed or snorted can take up to 15 minutes to affect the brain. A subcutaneous injection-one that goes just under the skin-will make its way to the shooter's system in about 10 minutes. But an intravenous shot, one straight into the vein, is almost instant.

"We've been in a little bit of an upswing," says Kevin Leonard, clinic manager with the Suffolk County Department of Health's Division of Community Mental Hygiene. He is careful not to term the increase a trend, describing opiate abuse as "cyclical in nature," and noting that in his three decades in the rehab field, he's seen lots of ups and downs in terms of heroin use.

Meanwhile, though, Fal, Burke and the rest of the cops across the Island remain steadfast in stamping out the flare-ups before they become an inferno. Fal remains astounded that heroin use is even an issue.

"With all the technology and information at their fingertips, how could these kids do heroin?" he wonders. "I mean, heroin is not just recreational. It is highly addictive. It causes problems. It increases crime."

Fal pauses.

"And, it causes death," he says. "They just don't understand the consequences."

*-With additional reporting*

*by Heather Burian*

*For help with heroin addiction, call Suffolk Helpline, 631-853-7374 or Nassau Helpline, 516-481-4000.*

\*Not their real names.

## **Junk Bonds**

### **As Their Lives Disintegrate (And Are Occasionally Rebuilt), Long Island Heroin Users Search For The Next High**

By [Robbie Woliver](mailto:rwoliver@longislandpress.com): [rwoliver@longislandpress.com](mailto:rwoliver@longislandpress.com)

Carol Whelan, a nurse, sits on her couch in her cramped, middle-class Cape home in Lindenhurst, occupied by a laughing parrot, two dogs and a monkey. She shakes her head sadly. "The truth is," she says, "I'm getting tired of going to so many funerals of young people."

The young people she is talking about are her son Edward's friends. They were around his age, 24, when they died, and the death count is now about 10. The most recent was the worst-Thomas, Edward's best friend.

And what are they dying from? Heroin.

Edward is an imposing young man, 6-foot-2-inches tall, 195 pounds, a good-looking Penn Jillette with long hair in a partial ponytail and one of those great giant-dimpled smiles that lights up the room. That's not the only thing that's lit up in Edward's basement studio on this unusually hot June evening, where several of his friends are gathering. There's also Ricky and Lorraine, a 27-year-old married couple from Bellmore. They are junkies and they have just gotten high.

Edward, too, has been on heroin. That is, until this past April, a month after Thomas ODeD.

"I just stopped," he says. "In honor of [Thomas]."

Sitting amongst the heavy metal posters, drum sets, electric keyboards and assorted other instruments where Edward's heavy metal band InRed practices, are Jill, 25, and Ryan, 25-two of Edward's friends who also were heroin users, but who have since gone to rehab and are currently sober. Jill and Ryan have been clean since January of this year, and Ryan has been out of rehab since early May. Ryan came close to using heroin a week and a half ago, but a friend stopped him, and Ryan is very thankful his friend did that.

"It's a day-to-day struggle," admits Ryan, who looks like the clean-cut jock-next-door.

While Ryan and Jill discuss their successes, Ricky, with an almost clichéd hangdog look, is



nodding out near his wife, who has such a sad aura about her it is palpable. When showing the needle marks on her black-and-blue arms, the scars of recent cuttings are also obvious. Ricky looks helpless as she shows her bruised arms-even though he does help shoot his wife's battered veins with heroin.

Tonight Ricky-who seems like he might once have been a sharp, interesting young man-is, shortly after shooting heroin, zombielike. Edward, Jill and Ryan seem absolutely radiant, compared to him. He is their past.

"I can end any time I want," says Ricky, obviously not believing his own empty words. Ricky, Edward says, is unusual. "He can stop for a day and be OK. That's very hard to do," Edward says, almost in awe of his slumped-over, droopy-eyed, sallow friend. OK is a relative term here.

Jill and Ryan, who are not too far past that life themselves, agree. Jill, for example, was shooting up heroin several times a day. And that was just to bring her down from the crack cocaine she was smoking.

"I had a 95 average in high school," she says, wistfully describing her past. "I had a lot of dreams, but now I just make f\*\*king \$7.50 an hour in Waldbaum's." Unlike the others in this group, Jill started drugs late, at age 18. Coke was her drug of choice, and she had been an addict for close to seven years, first taking ecstasy, then snorting coke and then smoking crack and finally shooting heroin to come down from the coke and crack. She started late, but she made up for it big time.

She was shooting up all day, but no longer getting high, so she needed more and more. For a while she worked three jobs and says she kept up her appearance, but that all came to an abrupt end. She lost about 30 pounds (as did Ryan when he was using) and fell to 80 pounds. She now weighs a healthy 110 pounds and looks fit. She also collapsed a vein and now can't get blood taken from the arm.

The wake-up call? There were several. ODing was a biggie. "I almost died," she says. "My heart stopped." At this point her skin was yellow, she had black eyes and her back teeth fell out. She also couldn't breathe. "The doctor told me I had such a large hole in my nose [from snorting drugs] that it would kill me," she recalls

So she stopped snorting. And she started injecting.

Jill, who never smoked pot, says she was oblivious to the degeneration of her circle of junkie friends. "They had no teeth. They were dirty like bums," she says in retrospect.

Remember, while these users are now in their 20s, they all started using drugs as teens, some as young as preteens.

It was rampant in school, they all say. "You can count the people who aren't on heroin," says Edward, "as opposed to the ones who are." And Lindenhurst, they all say, is "the heroin capital of Long Island." That is, until Bellmore and Massapequa and Copaigue and Levittown and countless other towns come up.

"It's wherever you go, and the kids are getting younger and younger," says Edward, who attended Lindenhurst High School (partly at the Alternative Learning Center [ALC]). "We'd smoke weed in the classroom. In ninth grade, kids would have coke and heroin on the table in the classroom.

"A lot of kids from the high school and ALC would get sent away for a year or so, their drug problem would be so bad," Edward says. His best friend Thomas was one of those kids.

## Why heroin?

"It's a social drug, and everyone was doing it," says Edward, who, like many of his friends, first began experimenting with drugs at age 11.

He started heroin when he was 14. His entire crowd was doing it. (There are some, who, 10 years later, are still on heroin.) It was cheap and very easy to get. Their stories are similar- they started by sniffing it and eventually turned to shooting it.

"It makes you not care what anyone says. It makes you an asshole," he says. "But I liked the feeling. It was amazing."

There is no stigma, nor a badge of honor. It's just what everybody does. No big deal.

"It was cheaper than marijuana, coke, pills and alcohol, and one \$10 bag would do the trick," says Jill. The coke high is only 20 minutes. Heroin would last longer, until the tolerance would build.

And where are the parents in all this? Jill says her parents "thought something was up. It was obvious, I wasn't holding down a job, I wasn't going to school.

"When my mom would go to work, I would shoot up and it would last two to three hours and then I'd have to get high again. I had to get high two or three times a day.

"I'm getting sick just talking about it," she says.

"Toward the end, I felt like I was tripping out. I was having anxiety attacks. I was hot, cold, throwing up, very emotional. I kept trying to leave signs, leaving needles around, stuff like that."

Jill's mother, who had been addicted to cocaine herself, finally said, "That's it. I know something's up. I want to take you to a funeral home. I want you to see your funeral. I don't want to find you dead." Jill's uncle ODed and her brother is a recovering addict.

Jill: "It was disgusting. You felt dirty no matter what you'd do. You lied to everyone. Drugs ruined my life."

So she got clean. "I took a long hard look," she says, starting to cry. But it's not easy.

She is now in a drug and alcohol program three to four days a week.

"Sometimes when I get frustrated and think about my shitty job, I ask myself, 'What am I clean for?' I know it takes a year to get really clean. But I smile again now. My family is trusting me again, and my friends are trusting me again."

At this point, Edward's cell phone rings, and he tells Jill that it's a friend of hers. Jill gets in an animated discussion with her friend, who informs her that Jill's mother is frantically searching for her, angrily saying things like, "I know she's up to no good. I know what she's doing. I know she's sneaking around."

"Fuck that," Jill says, "I told her where I was going," and with that she calls her mother and angrily reminds her that she is being interviewed for a newspaper story.

"I have no car. No phone. I live in a cubicle with no door, no privacy," she says. "They are treating me like I am 16.

"There are so many things I could have done with my life," Jill says.

Edward's situation is a little different. His parents are more trusting. They were very supportive when he came to them last January and told them that he was a junkie.

"I suspected something," says his mother, who is a methadone nurse.

"It's better when you have their support," says Edward, the soft-spoken rocker.

Part of why so many young people are junkies is the ease with which they can obtain the heroin, says Edward. "We'd go to [the dealer's] house and there would be cars lined up—sometimes 10 cars on each block. We had to wait hours almost every day." Ryan laughs at the memory. What they don't address is the danger inherent in these deals. These dealers, who sometimes have their much younger siblings deliver the goods, are dead serious, and they have the firearms to prove it.

But these dangers are of no significance to a junkie, when caught up in heroin's web. "Everyone seems to be doing it," says Edward. "In high school it seemed like 80 percent of the kids were doing it."

"And then there's the environment," Ryan adds. "Every commercial says, 'Take this pill.' Society is feeding you with drugs and saying, 'This will solve this problem.'"

What's the effect of school programs like DARE? These heroin users say, for them, the programs did more harm than good.

"They lied to us about marijuana, so we didn't believe them about heroin," says Edward.

And then there's the cheap cost. "I couldn't afford weed and alcohol," says Edward. "Heroin was a snap: \$10 a bag."

But that \$10 has a greater cost.

### **Married to the drug**

Ricky and Lorraine have been married for three years. Ricky has been sniffing heroin for about six months, and has been shooting up for the past six weeks. "You need more when you're sniffing it and it's more expensive," he explains.

Ricky's reason for using heroin is somewhat startling. "I install carpets," he says, "and I am in pain a lot. Tylenol will do nothing."

That's the problem. Heroin is no big deal.

"It takes away the pain," Ricky says. "It takes away the physical muscle pain and the mental anguish. You're just not aware of anything. I want to stop doing it. I am trying to get off it now. I know it's bad. The addiction is just uncontrollable."

Jill shakes her head, and responds, "When you're on it you always make plans to quit. It's not that easy."

Lorraine, slouched over as she speaks, wears a pretty brown ribbon in her hair, making her seem girlish and innocent. But that couldn't be further from the truth. She's been on opiates for four years, and was hooked on morphine. She has been doing drugs since she was 13.

"Heroin addicts don't last very long...a year," says Lorraine, who has been doing heroin for the past seven months. She's been shooting up for the past six weeks.

"I can't imagine a good life," she says, head down, about her future.

What about life with each other now? "[Ricky] seems a little more zombielike, secretive, when he uses [heroin]," she explains. "I don't believe a word he says. He does six bags, two needles, sometimes before he even really wakes up."

Besides mistrust, there is no intimacy amongst junkies. Ricky, who started drugs at 14, says, "We don't think about sex. It's not an option."

"We know it's bad," says his wife Lorraine. "We just encourage each other. We say, 'This is ridiculous, we have to stop.' Then the other one says, 'You want to get high?' We're never in agreement."

"I don't care if I do it by myself. I don't really care. I'll do it in a parking lot, on the side of the road," Ricky says.

"Are you afraid of being arrested?" he's asked. He looks back with a blank stare.

"Maybe that would be good," someone adds.

"Our families are really concerned," Lorraine says dead-eyed, with no emotion.

## Quittin' Time

How do you get the strength to quit?

"You have to be tired of the life, because you'll never get tired of the feeling," says Edward.

Ryan, who's been friends with Edward since kindergarten, has been on drugs since his early teens. He started off with pain killers, Vicodin, OxyContin, and then moved to heroin a year ago, "because it was cheaper," he says. "You'd get higher and it was a cleaner high." He entered rehab in January of this year and got out on May 2.

All five say they stole from parents and friends to support their habit. Some worked.

"Our money situation is hard," complains Lorraine, in the same tone she would use to say she was wearing a ribbon in her hair. Of course it's hard; there are two junkies who need to satisfy their addictions.

"I remember what that is like," says Ryan. "I would have rather taken \$80 and spent it on drugs than eat three meals. I always said, 'I don't have a problem.' Just like Ricky is doing now. I remember coming here [Edward's house], puking. I didn't give a shit."

Ryan returns to the recent incident, when he almost used again. "After all the effort I put into it, it would hurt my family," he says. "They were so proud of me. One of the best feelings was finishing the program."

Jill looks at Ricky and tells him he's beginning to look like a junkie. "What does a junkie look like?" he asks. "Your skin is yellowish," she responds. "It's the way you carry yourself. Your facial structure. It changes from weight loss. You look like one," she reiterates.

"Have you noticed the changes in him?" Lorraine is asked.

"I guess," Lorraine says.

Jill shakes her head. She's been there.

Edward knows there's no talking sense to the two. They need something to scare them, or to inspire them.

An inspiration like Thomas.

Thomas died from a heroin overdose on March 5, 2008. Edward stopped shooting heroin a

month later.

"He promised me he would never die," says Edward about the friend he had known since they were both 8. "He e-mailed me the day before he died, saying that."

*Two weeks after the gathering in Edward's basement, Jill was in a local Applebee's, where she noticed the clientele staring at a particular table where a couple was sitting "facedown in their food." It was Ricky and Lorraine.*

*At presstime, Edward notified us that he had just learned that two more friends died of ODs. He called back soon after to also inform us that Ricky and Lorraine had been arrested for possession. They scored some heroin and on the way home, Lorraine suggested they shoot up in an abandoned parking lot in Bellmore, close to where they live. Ricky suggested they go home and do it. Lorraine won out, and they quickly were discovered by a cop on patrol. Lorraine is out on \$2,500 bail but Ricky remains in jail. Ricky says that this is a good thing, and he hopes it will help him clean up.*

*Some of the names used in this story have been changed.*

## Reader Comments

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*Posted: Monday, June 30, 2008*

Article comment by:

I have watched way too many people die and I am only 22....people need to wake up. Kids start in their parents medicine cabinets, the denial is insane. Having gone to Syosset high school, I am very aware of a drug problem it was coke when I was there but these parents need to stop handing cash out to let their children destroy their lives. I think this article was great now if only Syosset and other wealthy parents werent so naive

*Posted: Monday, June 30, 2008*

Article comment by:

you guys wrote a powerful story about this monster that is destroying our young. as a dad with a addict daughter i know this pain first hand. she started snorting and after being clean for four years and putting her self throught school in the medical feild she relapsed. for 15 months we have been on a roller coaster from hell. she moved on to needles after the snorting wasnt enought any more.she is smart, pretty and loving. she has been in five rehabs in 15 months and sober houses, and shelters.we as a family understand the nature of this sickness she has and it effects every one and every thing that happens in the family.our biggest fear is her dying. the pain at times is unbearable and we hurt for her so. we love her and support her subriorty with all our hearts. i want to thank you for writing this article. it was over due and every parent has to read this. the addict has to do this but as a parent who has been there and still lives it, we missed the signs and we knew what to look for. hug your kids, tell them you love them and support them emotionally every day of there lives.i hope and pray every day my daughter kicks this junk and finds peace in her life then maybe we will also. thank you again.

*Posted: Thursday, June 26, 2008*

Article comment by:

"Swish: Maria in the Mourning," (with 25 reviews on Amazon) is the real deal about heroin: death of a beautiful young woman named Maria from a heroin overdose at 23. This non-fiction narrative chronicles a mother's process of mourning and how many are affected by the deaths of these young people.

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