

DYNAMITE IN SMALL DOSES

A Trip to the Stars or a Chamber of Horrors?

By JOAN HOCH

"To the true addict, drugs are food, drink, sex, life itself," says Captain George A. Sperber, head of the Cleveland Police Dept.'s Narcotics Squad. "Nothing else matters.

"I could seat an addict across from me, place a drug dose on the desk, point my gun at his head and threaten to kill him if he took the drug. He'd go right ahead and do it, his will power would be so broken."

When can drug use be labeled addiction?

According to the World Health Organization of the United Nations, "Drug addiction is a state of periodic or chronic intoxication detrimental to the individual, produced by the repeated consumption of a drug (natural or synthetic).

"Its characteristics include 1: An overpowering desire or need (compulsion) to continue taking the drug and to obtain it by any means. 2: A tendency to increase the dose. 3: A psychic (psychological) and, sometimes, a physical dependence on the effects of the drug."

Dr. Vincent T. Wrobel, a psychiatrist at Athens State Hospital, boils it down to simpler terms. "When the use of any drug disrupts daily living, employment and family ties, that's addiction," he said.

Both definitions would cover misuse of pep pills, sleeping pills and tranquilizers. Yet there is no federal control of these so-called dangerous drugs. They can only be obtained legally with a physician's prescription.

"But they're easy to get other ways if you really want them," one ex-addict said glumly. "And believe me, they can hook you just as good as the hard stuff (narcotics)."

The dangerous drugs are a trip to the stars for addiction-prone users—except many belatedly find they can't make the return flight. And their families find themselves in a chamber of horrors.

"Drug addicts become lethargic, slovenly and un dependable," says a local social worker who deals extensively with the problem. "They lose ambition and any concern for those close to them."

Capt. Sperber says, "The person who overuses dangerous drugs is just as much a menace to himself and society as the narcotics addict.

"His driving becomes reckless, his mind can be impaired by the drugs, and he often turns to crime. Cases involving use of dangerous drugs have just about doubled annually here for the last four or five years.

"And nationally, barbiturates have become the most common form of suicide."

How can you spot a potential drug addict?

"It's practically impossible," says Dr. Wrobel. "The average surgeon keeps his fingers crossed after an operation, hoping the patient isn't addiction-prone. If he is, postoperative pain killers might get him started."

There are two distinct personality disorders that pave the way for drug addiction, according to Dr. Wrobel. These are called passive-aggressive and passive-dependent.

The passive-aggressive person contains many hid-

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den hostilities. Under drug influence he can express himself freely, often violently. He usually turns to barbiturates or liquor for release.

The passive-dependent type harbors no hostilities. All he seeks is an escape from reality. Drugs, particularly narcotics and amphetamines, are his ticket to dreamland. Under their influence, his environment no longer bothers him.

"Drug addiction is primarily a psychiatric problem," says Dr. Wrobel. "Ideally, a physician would consult a psychiatrist before prescribing any dangerous drug. This isn't feasible, of course.

"But I do feel it should be done when a patient shows signs of strong emotional disturbance."

Other observers say women are especially susceptible to overuse of drugs during or right after pregnancy, during menopause, or when coping with severe emotional problems like divorce or a family death.

NEXT: The long road back.

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Narcotics Group: Port in Storm

By JOAN HOCH

"Are you sick and tired of being sick . . . and tired?"

The speaker was addressing a small group that gathered recently at Harbor Light, the Salvation Army refuge on Eagle Ave.

In the audience, listening intently, were four prospective members of Narcotics Anonymous. The group was started in Cleveland last month to help rehabilitate those who misuse dangerous drugs, as well as help narcotics addicts.

It is described by one close observer as "a lay group of quiet, desperate people." Members are joined by a vital bond—the sincere desire to rid themselves of dependence on the drugs that are destroying their lives.

The road back from drug addiction is a long, torturous, frustrating one, especially for drug abusers who acquire a physical or psychological dependence on sleeping pills, pep pills or tranquilizers.

Supervised care and treatment is the first step in "kicking the habit." Says a local social worker, "The finest medical treatment can be totally unsuccessful if the ever-present custodial needs of the patient are neglected.

"Withdrawal treatment at home is rarely successful because the addict's family cannot withstand his suffering and pleading during withdrawal."

Nerve-racking withdrawal symptoms—from uncontrollable trembling to violent convulsions—have been reported by persons who habitually take dangerous drugs like popcorn.

Yet in Cleveland, as in most major communities, there is not one hospital bed available for a drug addict except for emergency treatment.

Once withdrawal has been accomplished, the addict's battle is only half won. In most cases he returns to the same environment that triggered his addiction.

Still in the picture are family problems, job pressures and feelings of insecurity. He has little or no money. There are very few employers willing to take a chance on him.

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"If I could only find a job and have my children with me when I get out," said Jane R., a suburban housewife now in County Jail for forging drug prescriptions.

Jane started taking pep pills on a doctor's prescription. Unfortunately, she found too late she couldn't control her use of drugs.

"I can cook, bake, wait on tables, but who will hire me?" she asked somberly. Divorced by her husband while in jail, Jane will be in desperate need of help when her term expires.

One source she knows she can count on for moral support is Narcotics Anonymous. It has been the main salvation of hundreds of addicts since its start nationally 16 years ago. The program is similar to Alcoholics Anonymous.

"Only an ex-addict can fully help the addict," states the N. A. pamphlet "Our Way of Life."

"We must realize that we are in the grip of a progressive emotional and physical illness which, unless active treatment such as is afforded by the N. A. program is undertaken, steadily grows worse, never better," the pamphlet continues.

". . . Many of us, who were once helpless addicts have recovered from our malady. We have found a way of life which no longer compels us to use drugs. Narcotics Anonymous is the great reality which has expelled our obsession."

But the problem of controlling dangerous drugs still remains. "We need more legislation, stricter control of distribution and rigorous law enforcement," says Capt. George A. Sperber, head of the narcotics squad of the Cleveland Police Dept.

"We must have better understanding between the medical profession and law enforcement groups in finding solutions to our growing drug problem."



Bennett J. Cooper

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Bennett J. Cooper Appointed Commissioner of Corrections

"BENNETT J. COOPER, Ohio's new corrections commissioner, looks like a pro football tackle, talks like a psychologist and walks among inmates in the prison 'like a priest'."

That was the accolade given Bennett J. Cooper by a news service in late August when the former superintendent at Ohio State Reformatory in Mansfield was named commissioner of the Division of Correction by Martin A. Janis, Director, Department of Mental Hygiene and Correction.

Cooper, head of the Mansfield facility for four years, succeeds Maury C. Koblentz who retired July 13 after 16 years as Commissioner and 33

years as an employee of the State of Ohio.

Upon accepting the position, Cooper declared, "We in Corrections owe to the citizens of Ohio our efforts to return to society people who are able to function in that society. Underlying corrections is the assumption that people can change. People can and will change under proper circumstances. Therefore, it must be our charge to provide the circumstances and conditions to make that change possible."

That he is highly regarded in the correction field was the statement of Director Janis in making the appointment.



Bernard I. Barton

"During my eight years as Director of this Department, we have emphasized that persons appointed to any position must have the necessary knowledge and experience and, most important, an understanding of their fellow man.

"Society, today, needs individuals who believe in this basic philosophy and Ben Cooper is such a man. He has demonstrated a willingness for change, for innovation, and a capacity to work in cooperation with his employees. He is aware of his security responsibility but has not allowed it to override development of programs of a motivational nature.

"The foremost problem in the rehabilitation of inmates today is that we must develop a change in their attitude. This can only come from leadership that recognizes that basic to this success is a need to understand that human beings requiring help must be treated as equals."

The new commissioner holds a masters degree in psychology from Western Reserve University and has completed course work toward a doctorate degree. Following 10 years of supervisory and executive posts with the Cleveland Post Office, Cooper joined the Reformatory staff as director of psychological services in July, 1957, stepping up to the superintendency in 1966.

Appointment of Cooper brought these other favorable editorial comments from Ohio news media:

"Bennett J. Cooper clearly was the best choice—to assume the commissioner's job. Cooper has been tough enough to defuse potential riots by walking into a prison yard full of restless inmates and making it clear that rebellion is a waste of time"—DAYTON DAILY NEWS.

"The appointment of Bennett J. Cooper—opens the door to a new era in Ohio penology. Given money,