

THE WAR FOR DRUGS

Two Vancouver activists gave away untainted heroin, meth and cocaine to dozens of drug users, with the support of politicians and public-health officials. They say they saved lives. The federal government says they're drug traffickers.

BY OMAR MOUALLEM

ILLUSTRATIONS BY JOHN PERLOCK

IN 2020, Eris Nyx (left) and Jeremy Kalicum (right) founded the Drug User Liberation Front to combat the overdose crisis. Out of a small office on Vancouver's Downtown Eastside, they bought clean drugs off the dark web and sold them at cost to a members-only club.

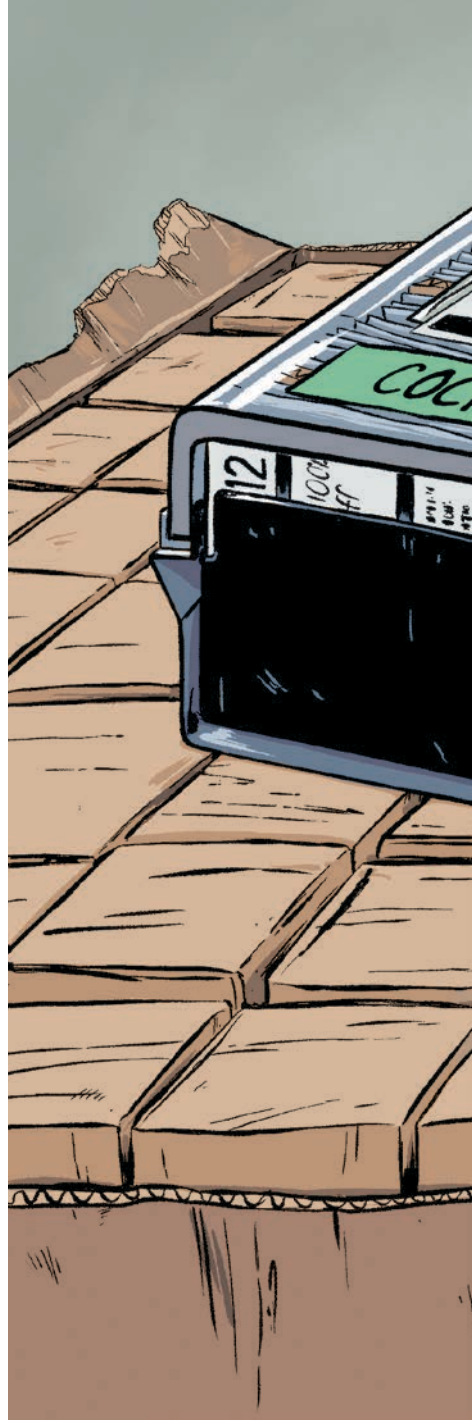
ERIS NYX

has always been rebellious. Growing up in the suburbs outside of Toronto in the mid-2000s, she spent much of her adolescence using drugs, getting into trouble with police and crashing at friends' houses. Her transgender identity wasn't accepted at home, and after high school she moved away for good, heading to Vancouver to study at the University of British Columbia. She worked as a bike mechanic for a while, before finding a job as an attendant at a homeless shelter on the city's Downtown Eastside, a poverty-stricken neighbourhood with one of Canada's highest rates of injection drug use.

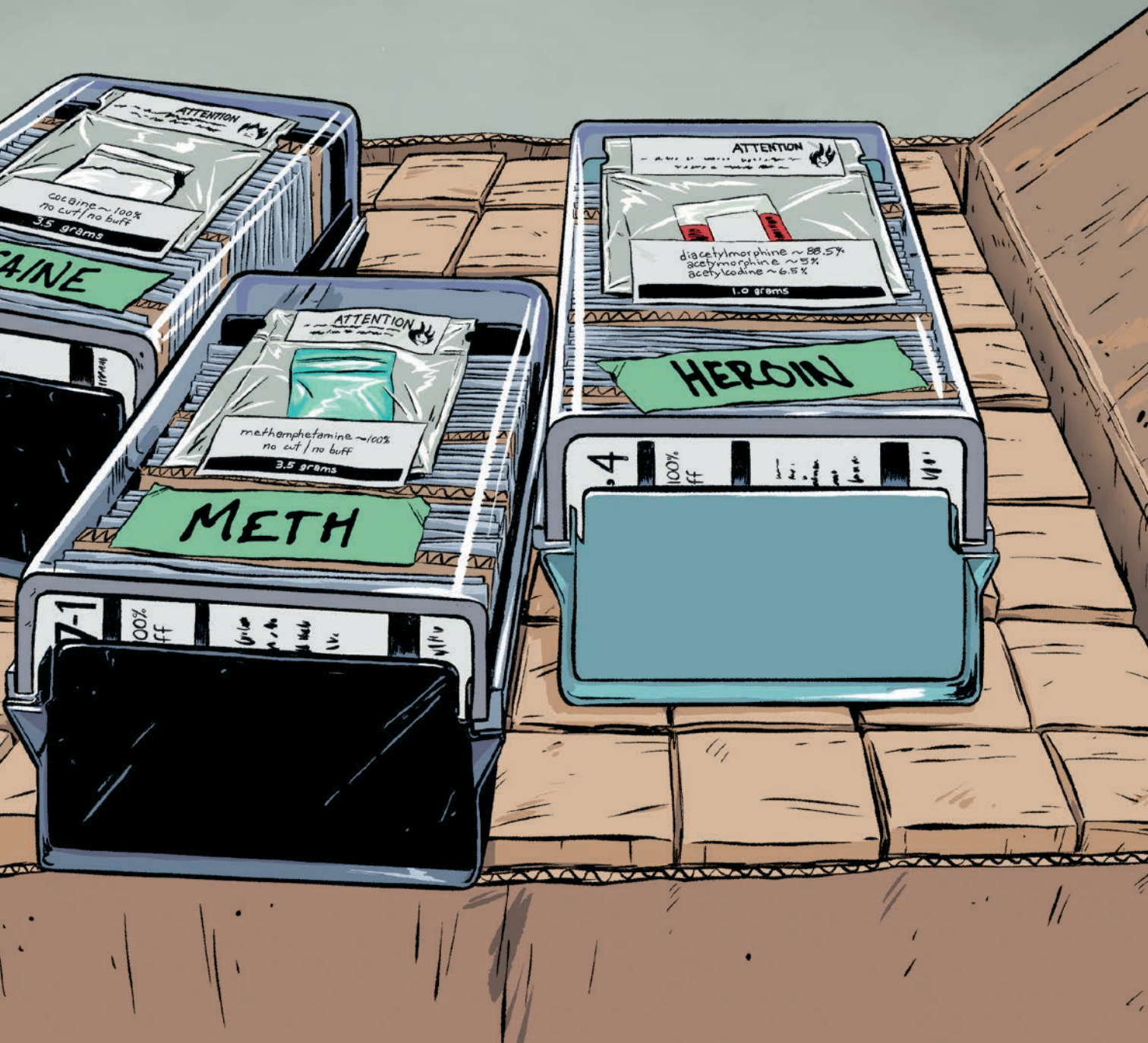
The neighbourhood was then in the early stages of an overdose crisis that would soon become a state of indefinite emergency. In 2015, around the time Nyx began working at the shelter, overdoses claimed nearly 500 British Columbians. The next year, when the province declared a public-health emergency, 800 people died; a year after that, nearly 1,300. Most of the casualties were due to fentanyl, the powerful synthetic opioid dealers were cutting into heroin and pressing into fake oxycontin pills. Drug users could no longer be certain what was in their supply, nor how powerful it would be. On the Downtown Eastside, where people were dying at a rate more than 25 times the national average, the overdose crisis felt like a massacre. Nyx was surrounded by death.

The provincial government responded with more funding for recovery and treatment programs and made it easier to open overdose prevention sites, where people could use drugs in a supervised setting. To Nyx, all of this fell short. Recovery programs could take years to work, if they ever did. Overdose prevention was good, but it didn't address the underlying problem: a poisoned product. Nyx believed the key was to provide users with safe supply—a legal, untainted and regulated supply of drugs traditionally bought on the illicit market. Nyx also believed that anyone using drugs, even recreationally, deserved the same consumer rights as users of legal substances like alcohol, a product clearly labelled with information about potency and quantity.

In 2018, Nyx founded the Coalition of Peers Dismantling the Drug War. Its goal was to create a peer-to-peer narcotics shop for clean drugs, and its image was transgressive. Its logo was a multi-headed creature with a syringe and pill bottle, surrounded by the faux-Latin phrase *illegitimi non carborundum*, or “don't let the bastards grind you down.”



DULF'S DRUGS were analyzed, packaged and labelled with detailed information about their ingredients



This punk-rock attitude was in contrast to more established groups, like the Vancouver Area Network of Drug Users, founded in 1998. It too was committed to the principles of harm reduction, which aim to mitigate the negative consequences of drug use, like overdoses, rather than promoting abstinence above all else. Its founders had also been involved in illegal activism. But VANDU had long since earned a seat at the table with the city's political and decision-making class. Nyx's coalition, on the other hand, put forth a list of implausible demands to government: pardon everyone imprisoned on

drug charges, repeal the Controlled Drugs and Substance Act and defund the police.

Soon after founding the coalition, Nyx attended a safe supply conference co-organized by Jeremy Kalicum, a 24-year-old controlled-substance analyst originally from Nanaimo, B.C., who worked at the British Columbia Centre on Substance Use, a research and policy outfit at UBC. Kalicum cut a straight-laced figure next to Nyx, though he too grew up getting in trouble with police, committing petty vandalism and stealing. When Kalicum was 16, a charity for wayward youth paid for him to attend a boarding school in Chicago.

There, he excelled in sports and scholastics. He even wanted to become a physician. While earning a bachelor of science at Vancouver Island University, he asked a doctor guest-lecturing a class what he could do to set himself apart from other would-be med students. "Open a needle exchange," the doctor said. Kalicum went further: he set up an unsanctioned overdose prevention site in the parking lot of Nanaimo's city hall.

After graduating he moved to Vancouver, working as a technician at overdose prevention sites on the Downtown Eastside, where he checked drugs for purity while pursuing a master's in public health at the

University of Victoria. Like Nyx, he got an up-close view of the toxicity of street drugs, especially “downs”—opioids—that users brought to him for testing. By 2019, the contaminants included not only fentanyl but carfentanil, a new, cheaper, massively more powerful synthetic opioid. Kalicum came to the same conclusion Nyx had: the problem was the volatility and toxicity of street drugs, and the solution to the overdose crisis was a drug supply with predictable ingredients and potencies. And he knew exactly how to secure it.

Kalicum told Nyx about research he’d done that showed drugs purchased on the dark web—an encrypted, hidden online universe where illegal goods are anonymously bought and sold—were cleaner than those on the streets. One reason was accountability. Just like any Amazon or eBay dealer, online drug dealers are reviewed by their clients and even issue refunds for bad products. What if Nyx and Kalicum could buy those drugs, test them for purity and give them away to high-risk users?

In May of 2020, the pair founded the Drug User Liberation Front, or DULF, with the goal of doing exactly that. Nyx and Kalicum connected with established activist groups who helped them coordinate a giveaway, where DULF would hand out clean cocaine and opium (having failed to obtain heroin) procured on the dark web at their own expense. The pair tested the drugs, packaging them with an information slip detailing their exact chemical compositions. A month later—on the day the B.C. coroner announced a record-setting death toll—Nyx and Kalicum organized a protest march through the Downtown Eastside and set up a distribution tent on the sidewalk. Above it they strung a banner featuring a lyric by punk band NOFX: “The only real drug problem is scoring real good drugs.” They had not even close to enough for the hundreds who showed up, and the event became instant neighbourhood lore.

That was only a prelude to what the pair envisioned for DULF. What came next was a radical, unabashedly outside-the-law experiment in harm reduction, pushing the idea further than ever before. But as it’s unfolded, public outrage and political blowback over the overdose crisis have begun eroding support for harm reduction. So

have fears of crime and of public drug use associated with B.C.’s decriminalization in 2023 of the possession of small amounts of drugs. Today Nyx and Kalicum are facing federal drug-trafficking charges, which will come with minimum three-year sentences if they’re convicted. They’re also challenging the federal government in a second case, which could in time see their efforts legalized—or quashed. Either way, there’s little middle ground in how they’ve been portrayed: as martyrs in the war on drugs or as reckless agitators, exacerbating one of the worst public-health crises in living memory.

THE DOWNTOWN EASTSIDE SHOCKED ME

the first time I went there more than 20 years ago. I had moved to Vancouver from a small town in northern Alberta, a place where addiction was kept behind closed doors, and I’d never seen so much desperation and extreme poverty on display.

But there was a sense of hope as well, and much of that was due to early efforts at harm reduction—an idea that first gained its Canadian foothold on the Downtown Eastside. As far back as 1988, a former heroin user named John Turvey risked prosecution with a campaign to supply clean needles to prevent the spread of HIV. In the 1990s, VANDU founder Ann Livingston set up an illegal safe-injection site called the Back Alley. Police eventually shut it down, but the idea of harm reduction was gaining traction.

In 2001, city council passed the “Four Pillars” framework for treating drug addiction, which foregrounded harm reduction alongside prevention, enforcement and treatment. A year later, an activist group planned to open another illegal injection site to be funded by private donors. City council, along with the local police and the regional health authority, were fully on board. In 2003, Health Canada granted them permission to operate a legal safe-injection site, known as Insite. It opened that fall at Main and Hastings, in the heart of the neighbourhood, where it remains today. A 2008 study in the *Canadian Medical Association Journal* estimated that Insite saved Vancouver taxpayers \$18 million over 10 years by reducing disease transmission. Insite still faced resistance, but it won an indefinite, precedent-setting

exemption from the Supreme Court. Today there are 39 supervised consumption sites in Canada, including one just blocks from my own home in Edmonton. Those sites have had more than 4.3 million visits since 2017 and reversed more than 50,000 overdoses at them.

In 2019, harm-reduction advocates in B.C. had reason to believe that safe injection sites were working: overdose deaths were finally going down, dropping 36 per cent over the previous year. Other provinces also reported declines. But then came COVID. Overdoses rose as unemployment and mental illness made addictions worse, and lockdowns and social distancing cut drug users off from harm reduction and other supports. The drug supply also grew more toxic. With borders tightened, illegal imported fentanyl was in shorter supply, so illicit labs turned to carfentanil. Some drugs were also cut with benzodiazepines, the ingredient common to both Xanax and Ativan. Opioids dim pain, but benzo-dope dims the lungs, slowing breathing so quickly that a user can become hypoxic, depriving the brain and body of oxygen. That’s what happened to my friend Danny in 2021.

Growing up, I thought of Danny like an older brother. He taught me how to build websites, make beats and understand cosmology. His intelligence was extraordinary—but his brain was unsettled. He used drugs, as he told me recently, “to free myself from the monotony of life.” In 2016 he left rehab and began outpatient treatment in Lethbridge, a small city in southern Alberta. It may have been the worst place he could have ended up. Lethbridge has the highest overdose rate in Canada, exceeding even Vancouver’s. Danny smoked meth, and he often took it to an overdose prevention site, the only one in the province that permitted smoking on-premises. It closed in August of 2020, defunded by the provincial government, which was moving away from harm reduction and toward an abstinence-first model.

The pandemic sent Danny spiralling. A windfall of CERB money allowed him to buy more drugs; social isolation gave him more time to use them alone. He mixed opioids with meth to intensify the highs and soften the crashing lows. He overdosed in April of 2021. He doesn’t

know what he used that day. Unable to find heroin, he asked for fentanyl, but he might have also received carfentanil and benzo-dope. While using alone, he became hypoxic and struggled for hours to get oxygen. By the time someone found him, he had suffered severe brain damage. Once able to effortlessly absorb heaps of information, he can now barely remember what day it is. He's spent the last three years in bed. He struggles to speak and eat. He's withering away to skin and bone, dying a slow death from drug poisoning.

BY THE SPRING OF 2021, DULF had spent a year building a coalition of allies, including Vancouver Coastal Health, the BC Centre on Substance Use at UBC and the Canadian Drug Policy Coalition, a think tank at Simon Fraser University. It had also been building its coffers. Using the crowdfunding platform Open Collective, it raised thousands of dollars from supporters around the world, including more than 100 who signed up for monthly contributions. One top donor was city councillor Jean Swanson, who provided about \$6,000 of the \$100,000 DULF has received to date.

In July of 2021, DULF requested Swanson's help for its boldest stunt to that point, asking her to hand out drugs in front of a Vancouver police station, which she did. The event was designed to garner attention for DULF's big announcement: a compassion club, which would distribute tested, untainted drugs to approved members. The group went to work formalizing its plan. Its first step was to request a section 56 exemption from Canada's Controlled Drugs and Substances Act—the same permission that enabled Insite to set up decades prior.

The idea of providing a safer supply of drugs to users wasn't entirely unprecedented. B.C.'s NDP government had already created Canada's first government-sanctioned safe supply program in 2020, offering pharmaceutical opioids such as hydromorphone and pharmaceutical amphetamines. But it was hampered by poor uptake, with many doctors hesitant to prescribe the drugs and some users finding them weak compared to the increasingly powerful street supply. Nyx and Kalicum were critical of the program, since it relied on access to the right diagnosis and sympathetic doctors, and because it

couldn't give people the drugs they really wanted, like heroin and cocaine.

The DULF version of safe supply was far less restrictive. Their Health Canada proposal outlined two possible approaches. In the first one—their preferred option—DULF would buy drugs from a licensed, regulated provider such as Fair Price Pharma. Fair Price, a company that produces injectable heroin, was co-founded in 2020 by a former B.C. provincial health officer and an epidemiologist who led Health Canada's only heroin-assisted treatment trial almost 20 years ago. (Fair Price is still seeking approvals for its products.) The drugs would be packaged, labelled and distributed by the compassion club, which would also be designated as an overdose prevention site. Members would be referred and screened by VANDU, which was a co-applicant on the request. DULF would ensure users were at least 19, use double-locked storage for drugs and keep detailed records. But the application also acknowledged that this approach was impossible, since federal law restricted heroin, cocaine and methamphetamines to scientific and medical use.

And so it detailed a second strategy: going back to the dark web and buying drugs illegally. Nyx and Kalicum sent their application on August 31, 2021, Overdose Awareness Day. It came to 56 pages, heavily footnoted with academic references and research. Meanwhile, DULF continued collecting letters of support. One

came from Fair Price Pharma, another from Vancouver city council. "Approving this application," wrote Vancouver's then-mayor Kennedy Stewart, "is an opportunity to save lives." Both council and Fair Price insisted that they only supported using a legal, regulated source. Remarkably, Vancouver Coastal Health's support involved no such caveat. It even offered DULF space inside a former overdose prevention site, plus \$200,000 in administrative fees for a narcotics testing technician and a site supervisor.

Three months later, Health Canada responded with new queries; DULF replied, then a few more months passed. All the while, DULF was holding monthly "Dope on Arrival" giveaways, attracting well over 100 people to each, and stepping up on-the-ground promotional efforts. In July of 2022, Health Canada's director general issued a final decision: the first model couldn't work for several reasons, including DULF's insistence on providing drugs without a doctor's diagnosis, concerns about street diversion and the lack of an authorized provider, since Fair Price was still in regulatory limbo. The dark web model was a hard no. The rejection cited public safety concerns with buying illegal products online. Nyx and Kalicum tried to persuade Health Canada with an expanded 96-page proposal, including a methodology for its research approved by UBC's ethics board. The director general was unswayed.

KALICUM KNEW DRUGS BOUGHT ON THE DARK WEB WERE CLEANER THAN THOSE ON THE STREETS. WHAT IF THEY BOUGHT, TESTED AND SOLD THEM TO HIGH-RISK USERS?



IN OCTOBER OF 2023, DULF's compassion club was raided by police, and Nyx and Kalicum were arrested. Today they face federal drug-trafficking charges.

The pair responded again, declaring that they planned to operate outside the law: "If we had a tangible, supportive response from your government, we would not be forced to run an unsanctioned program." In reality, DULF had planned to proceed with or without permission; they were already accepting applications from potential members, with plans to select 20 through a random lottery. They'd also retained two high-profile lawyers, anticipating their case might end up before the courts, and not just in front of Health Canada.

This is how the compassion club worked: first, Nyx and Kalicum converted

crowdfunded Canadian dollars to Bitcoin, then traded that for Monero, an untraceable cryptocurrency. They used private browsers to access the dark web and, for extra security, operated on private servers, which encrypted their IP addresses. To find online drug vendors, they searched discussion boards where people posted tests of substances they received. Careful to avoid international shipments, they only bought from Canadian vendors with good reviews. After selecting one, they'd order a small amount to confirm its purity. If a sample wasn't received—or if they got a bad product—they could get

a refund. Communication was limited to ordering and address details; the goods were delivered by Canada Post.

If the pair moved ahead with a full order, they screened the drugs for fentanyl and benzodiazepines using simple immunoassay tests, similar to COVID-19 testing. They then sent them to UBC and the University of Victoria, which both offer free, confidential drug checking on campus using a "gold standard" analysis to quantify trace concentrations of impurities. Unusable substances were destroyed using activated charcoal, which traps particles, making them irretrievable. The good stuff would go back to the DULF fulfillment centre in Vancouver.

Even as Nyx and Kalicum moved forward, DULF's legal team challenged Health Canada's rejection, trying to force a judicial review on constitutional grounds. They argued that Health Canada hadn't addressed drug users' Charter-guaranteed rights to life, liberty and security, nor balanced those against the objectives of the Controlled Drugs and Substances Act. Nyx and Kalicum were hopeful that the law, as it had in the past, would catch up.

IN SEPTEMBER OF 2022, DULF opened shop in a small office at Hastings and Columbia streets, provided by Vancouver Coastal Health. The address was given only to members, who entered through secure gates after Kalicum or Nyx confirmed their membership numbers. Inside they could buy heroin, cocaine and meth in quantities as small as one-tenth of a gram (a "point"), up to a weekly limit of 14 grams each. Sold at cost, prices fluctuated but remained far lower than street rates: about \$11.25 for a point of heroin, \$6.50 for cocaine, \$1.75 for meth. The drugs were affordable and, more importantly, they were clean. "We knew exactly what we were getting," says Howard Calpas, an early member.

Calpas does not fit the stereotype of a heroin user. A deeply religious, 62-year-old grandfather of six from southern Alberta, who sports a cowboy hat and a crucifix, he has suffered since childhood from a condition called spinal stenosis, which causes intense, spasm-inducing pains. He's been prescribed Percocet, methadone and hydromorphone, medications that have caused hair loss, intense nausea

and other side effects. He was drawn to heroin but too scared to look for it on the street, given the contaminated supply. As a member of the compassion club, he used heroin once every morning, dissolving it under his tongue like an Ativan pill. In the evenings, to steady his nerves, he took a government-provided dose of Dilaudid.

Calpas's best friend, Jeffrey Hearn, was DULF's 31st member. Hearn is a former heavy metal drummer who was beaten with a hammer during a home invasion in the late 1990s. He was given morphine in hospital and has been self-medicating ever since. As the pain in his life piled on—family estrangements, random violence, homelessness—the drugs he used grew stronger. “I can handle enough fentanyl to kill 10 elephants because I’ve been on it so long,” he says. Hearn is younger than Calpas, but much more obviously unwell—he has a severe spinal condition, likely due to osteomyelitis, a bacterial infection caused by IV drug use that can spread to the spine, blood, heart and brain. He relies on an electric scooter to get around.

Fentanyl was not included on DULF's menu, due to concerns that it was too potent to risk allowing users to self-dose or cut into other drugs, potentially for profit. Still, Hearn bought DULF's cocaine; at \$65 a gram, compared to \$90 on the street, he says it helped him wrestle his opioid addiction under control. When he took fentanyl, he often brought it to DULF for testing and to use on-site.

Many DULF members also participated in a year-long study, developed by the research director of the BC Centre on Substance Use and a Canada Research Chair in Substance Use Policy at UBC. The lengthy surveys were administered quarterly by a team of trained interviewers, including Nyx and Kalicum, to both DULF members and a control group of non-members.

At first, Nyx wasn't at all certain they'd get away with what they were doing. In 2023, she told a reporter from *The Economist*, “The fact that we're not in jail is unbelievable.” Within months, however, she believed there was less reason to be concerned. The preliminary results from the study had come in, and they were encouraging. When compared to a control group, DULF members reported significantly

fewer overdoses, hospitalizations, police interactions and instances of drug-related violence. No one had died, and no one had overdosed using DULF's supply. In September, speaking to a local website called *Vancouver Is Awesome*, Kalicum said that police and politicians were coming around to DULF's model. “I can feel it when I'm talking to people,” he said. “Everybody is on board and sees the value.”

As it turned out, that was a serious misread—public perception was already showing signs of growing more negative toward harm reduction in general. The previous year, an independent documentary called *Vancouver Is Dying* went viral on YouTube (it's been viewed more than 4 million times). It portrayed the city as a bleak landscape of urban decay and lawlessness caused by permissive drug policies and harm reduction. Months after that came Pierre Poilievre's “Everything Feels Broken” video, in which the Conservative leader called out the “failed experiment” of B.C.'s government-provided safe supply. Public sentiment on the subject was changing locally and across the country and, when DULF began publicizing its research results, attention landed largely on its illegal practices, even though they had been tacitly tolerated before. What Nyx and Kalicum thought would be a win became their undoing. The day Kalicum's interview with *Vancouver Is Awesome* was published, Elenore Sturko, a Surrey MLA with the BC United party, shared it on X, writing, “Isn't drug trafficking illegal in

B.C.?” Days later, Global News reported on the funds DULF had received from Vancouver Coastal Health. Sturko posted, “Through DULF, the NDP are funding the drug dealers. It's unconscionable.” Poilievre weighed in too, calling it a “disgrace” that the B.C. government was supporting DULF.

Days later, the NDP cancelled Vancouver Coastal Health's funding for DULF. The province's minister of mental health and addictions later said she only became aware of DULF and its public funding at this time; the health authority, despite previous support, stayed silent. So did the group's remaining allies on city council. The political goodwill was gone. Late last October, police raided the compassion club and arrested Nyx and Kalicum.

SINCE THE RAID, official harm-reduction efforts in B.C. have gradually stalled out and gone into reverse. Last fall, the B.C. coroner recommended providing a safe supply of drugs to people without prescriptions, arguing that relying only on doctor-prescribed drugs wasn't sufficiently addressing the crisis. Both the premier and the minister of mental health and addictions unequivocally rejected that idea. Then, this spring, the government kiboshed a key part of its decriminalization pilot, a three-year trial that decriminalized small amounts of drugs for personal use. This April, it recriminalized use in public places, partly in response to public and political blowback. (Private use is still permitted.)

**THE GULF BETWEEN RECOVERY-FIRST
CAMPS AND HARM-REDUCTION ADVOCATES
HAS WIDENED. TODAY, THE SECOND
GROUP IS LOOKING TO THE COURTS.**

The push against harm reduction has been strongest next door to B.C. In 2022, Alberta's United Conservative government set up a legislative committee to examine whether safe supply was contributing to overdoses. It commissioned a report on safe supply, which concluded that the term was a "loosely defined slogan" and that there was no evidence for its effectiveness. The lead reviewer on the report was Julian Somers, an addictions researcher at Simon Fraser University known for his skepticism about safe supply's effectiveness. Other addictions researchers across Canada later wrote to Alberta's review panel to dispute its findings. The province has since prohibited doctors from prescribing high-potency opioids in outpatient settings, moving instead toward a recovery-based approach to treating addiction. Yet overdose deaths in Alberta have continued to climb; between 2022 and 2023, the province recorded the largest increase in the country in opioid-related hospitalizations and deaths.

In Ontario, Premier Doug Ford has said he wants a moratorium on safe supply. This May, the federal government rejected a request from the city of Toronto to decriminalize possession of small amounts of certain drugs, including opioids, due to concerns about public safety. Similar shifts are occurring south of the border, with controversial decriminalization efforts being overturned after public outcry. Today, the gulf between recovery-first camps and harm-reduction advocates has widened. With advocates on both sides framing their positions in terms of absolute right and wrong, it has become nearly impossible to have a nuanced conversation.

As politicians and the public grow more skeptical of harm reduction's benefits, advocates are looking to the courts. This March, I attended DULF's Health Canada judicial review hearing in Vancouver. Nyx and Kalicum sat in the front row, ever the odd couple. She wore stitched-together plaid and black pants—a slightly more formal twist on her usual punk style—and he looked like a science teacher in a white collared shirt and trousers. (With their judicial review under way, neither Nyx nor Kalicum consented to interviews for this piece. Much of the information on them was informed by interviews with family, associates, their lawyers and prior reporting.)

DULF and its co-applicant, VANDU, claimed Health Canada's rejection was inconsistent with public-health principles, as well as the Supreme Court's precedent-setting decision years ago allowing Insite to operate indefinitely. One of DULF's lawyers, Tim Dickson, contended that Health Canada's director general had disregarded crucial evidence in DULF's proposal, failing to consider drug users' Charter rights to public-health benefits. The attorney general claimed the director general had considered Charter rights implicitly; Justice Denis Gascon appeared unconvinced. After the hearing, Nyx muttered "good luck" and stomped out; Kalicum went outside to call his mom.

DULF supporters were almost giddy afterward—it appeared that the case, with far-reaching implications for the future of harm reduction in Canada, could hinge on whether or not the director general did a thorough-enough job reviewing the proposal in front of her. As yet, there is no timeline for the decision, and a win for DULF would still not likely amount to a full exemption. It's more likely that Health Canada would be forced to reconsider the application under the court's direction.

For Kalicum and Nyx, there are more immediate worries. This May, the pair were charged with three counts each of possession for the purposes of trafficking. Expecting the case to stretch on for years, they're trying to raise \$150,000 for their defence. Kalicum was hoping to start medical school at UBC, but he'll have to put his plans on pause—and his charges may make him ineligible to attend. If the case goes to trial, and it's determined that DULF's online transactions benefited organized criminals, they could each face at least three years in jail.

BEFORE I LEFT VANCOUVER THIS MARCH,

I visited the small room where Jeff Hearn lives. He was hunched over the side of the bed, surrounded by pipes, razors and alcohol swabs. I sat on a sofa stripped of fabric, beside a set of syringes stabbed into the wall. The room had been repeatedly vandalized and damaged by a stream of visitors from inside the building—one of them had just dropped by, leaving a hard lump of bright-red synthetic opioid on

Hearn's coffee table before falling onto a sofa and into a mental state far from the sound of our voices.

I was showing Hearn Pierre Poilievre's "Everything Feels Broken" video, in which he blames safe supply for much of the despair on Vancouver's streets. Hearn was rapt as it began, watching Poilievre pose in front of a tent encampment not far from where he lived. He felt seen when Poilievre said, "This could happen to anyone," and related to the message that addictions can begin, as his did, with medical treatment. He soured when the video began blasting "woke NDP and Liberal governments." After Poilievre was done pitching his case for more investment in recovery and detox, Hearn said, "That makes me want to puke."

Politicians like Poilievre, he said, can't imagine the pain of addiction. "It's like dying," he said. "Every pore of your body screams out in pain. It's thirsty for relief. Your body is reeling. Your mind is screaming. You lash out at the ones you love. So you get ostracized, and that is the worst thing of all because no one will help you. You're on the streets alone, you can't get health care, no one can believe you. This is what it means to become totally, utterly discredited by everyone in society."

Hearn has lost count of his overdoses. And yet, as he used a razor blade to scrape some dust and crumbs from the lump—which had the consistency of dried Play-Doh—he remarked that there was enough in it to kill two people. He also assured me that he knows his limits, though he's less confident about what the drugs are doing to his body long-term. Nearly 20 years of addiction have slowed his endorphin production nearly to a stop. He would clearly benefit from the kind of care favoured by advocates of a recovery-first drug policy. But the odds of success for someone in Hearn's position are small. As governments try to balance recovery-oriented responses with harm reduction, people like Hearn are living day to day.

As I watched, he transferred some of the mystery drug to a glass pipe at the end of a long hose. I felt my stomach tighten, unsure what was in his supply or if I should intervene. But he was going to do this whether I was there or not. So, before he put a light to it, I asked him to show me his stash of Naloxone.