

## Chapter 1

### Toledo, Ohio

**M**att Bell was in a coma for five days. He woke up in a hospital in downtown Toledo, Ohio. Although disoriented, he knew where he was and that he'd overdosed to get there.

"Fuck," Bell remembers thinking as he opened his eyes. "I messed up again." It was November 2014.

After another two days at ProMedica Toledo Hospital—while his body learned how to walk again—Bell was ready go home. He grabbed the bag that the hospital had stuffed his possessions into when he arrived, and his girlfriend drove him home. As he was unpacking his things, he found a business card. "Lucas County Sheriff's Office," it read. Bell moved to throw it in the trash but then slipped it into his wallet instead.

Bell had been a freshman at the University of Toledo. He'd graduated high school with a straight-A report card and received a full scholarship for baseball. Major League teams, including the Baltimore Orioles and Toronto Blue Jays, were already scouting him. How he found himself waking up from a heroin overdose in a Toledo hospital is a story that will sound very familiar to thousands of opioid addicts across North America today.

"I hurt my shoulder," Bell begins. "They did surgery, and they gave me ninety Percocets. And that's all she wrote. I abused Percocets to an extreme," he continues. "And then somebody introduced me to Oxy[Contin] because those were stronger. And then I started doing Oxy. That became a \$400-a-day habit. And then it went to heroin."

In the eight years between his first time using heroin and the five days he spent in a coma at ProMedica Toledo Hospital, Bell tried and failed at rehab twenty-eight times. He was arrested thirteen times in

four different states. He previously overdosed twice. Once he found himself in a back alley, where his dealer had dragged him and left him to die. The second time was at his mother's house, where Bell woke up covered in vomit. Bell's third overdose, in November 2014, was the one that came closest to killing him.

There were 2,744 drug-overdose deaths in Ohio that year, placing it among the top five states in America for drug fatalities.<sup>5</sup>

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Twenty-seven hundred deaths is triple the roughly 900 fatal overdoses that Ohio saw one decade earlier, in 2004. Since 2014, the number has continued to climb, to 3,310 in 2015 and then to an estimated 4,000 deaths in 2016.<sup>6</sup> In June 2017, NBC News reported that based on deaths during the first five months of the year, Ohio's Montgomery County coroner predicted the state will see 10,000 fatal overdoses in 2017.<sup>7</sup> That's more than the entire country recorded in any given year during the early-1990s.

The overdose crisis that Ohio is experiencing is part of an epidemic playing out across the United States and Canada. In the 1980s, there were less than 10,000 drug-overdose deaths in America each year. Twenty years later, in the mid-2000s, that number had grown to 30,000. In 2017, it's projected that America will see some 60,000 people die of a drug overdose, according to a comprehensive analysis by the *New York Times*.<sup>8</sup>

The very day that Bell checked himself out of that hospital in downtown Toledo, he was using heroin again. After another nine months on the drug, he put a gun in his mouth.

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<sup>5</sup> Statistics throughout the book for drug-overdose deaths in the United States up to 2015 are sourced to the US Centers for Disease Control and Prevention. [www.cdc.gov/drugoverdose/data/statedeaths.html](http://www.cdc.gov/drugoverdose/data/statedeaths.html)

<sup>6</sup> "Ohio Had More Than 4,000 Overdose Deaths in 2016," The Associated Press, May 28, 2017.

<sup>7</sup> Jacob Soboroff, Mitch Koss, Aarne Heikkila, "Mass-Casualty Event: Ohio County Now Tops U.S. in Overdose Deaths," NBC News, June 19, 2017.

<sup>8</sup> Josh Katz, "Drug Deaths in America Are Rising Faster Than Ever," *New York Times*, June 5, 2017.

He was tired of heroin and tired of the hustle it kept him on. Tired of waking up every morning in a panic over where the next fix was coming from, scheming every day for enough money to keep withdrawal at bay. He was tired of being an addict.

Then, with the gun in his mouth, he remembered the card in his wallet.

“I wasn’t even supposed to be around a gun,” Bell remembers thinking. “I had two active felony warrants in two different states. I had drugs and I had paraphernalia. But I called [the sheriff’s office], and they came there and they took me to treatment instead of to jail.”

Bell ended up at Zepf Recovery House, where he spent the next ten days going through detox and then beginning down the road to long-term recovery. At Zepf, he got to know a few guys who were in there for using the same drug, and they grew close. Before each group-therapy session, Bell and these four other men would form a circle, put their hands in the centre, count to three, and then break, raising their hands in the air like a baseball team does before taking the field. “One, two, three—Recovery!” they’d shout. Then they’d get on with their group-therapy session.

“It was a joke,” Bell says. “We were feeling like shit and we were just trying to do anything to make each other feel better.” But the nickname “Team Recovery” stuck.

Society doesn’t make life easy for people coming out of recovery for a drug addiction. Most job applications have a box you have to tick if you’ve ever been convicted of a felony, and a lot of former drug users have. They tick that box and then seldom receive a call back. Meanwhile, a lot of an addict’s friends are often still on drugs, which makes reconnecting with them a bad idea for anybody who’s trying to stay sober. It all makes for a lot of free time. “When we got out, we were bored,” Bell recounts.

“Let’s go down and hold signs on Cherry and Summit,” one of the guys suggested. Cherry and Summit is a busy intersection in Toledo where panhandlers sometimes congregate. The idea was to break the stereotype of a heroin addict as an unwashed homeless person standing on the side of the road asking drivers for drug money. Toledo is part of America’s Rust Belt. The region was devastated by North

America's loss of factory jobs. Then, in the early 2000s, prescription opioids swept into town. Heroin followed shortly after. In Toledo—and right across North America—addiction was a disease affecting families. Team Recovery wanted families to be able to talk about it. Just like the homeless addict people imagine when they think of heroin, Bell and the guys decided they would go down to the intersection of Cherry and Summit and hold cardboard signs. But instead of asking for money, they would give it away.

“Honk if you hate heroin,” one of their signs read. “Heroin’s killing our town,” read another. And a third, “We used to take, now we give.”

Into the hand of each driver who stopped to chat for a second, they placed a one-dollar bill. “Completely flipping the stereotype,” Bell explains.

People loved it.

Just about everyone who drove by Team Recovery that day knew someone who was struggling with an addiction. Many had already lost someone. Stigma prevented them from talking about it, Bell remembers thinking, but everyone knew what was going on.

The guys had created a Team Recovery Facebook page a few days earlier. It only had twelve followers, but nobody cared. It was just an inside joke and an easy way for the guys to stay in touch. If it spread a little awareness about addiction and recovery, that was a bonus. The evening after they'd taken signs down to Cherry and Summit, Bell uploaded a few photos to the Facebook page. The next morning, when he woke up and logged online, the pictures of the guys and their “Honk if you hate heroin” signs had more than 200,000 likes. In February 2016, Team Recovery decided it wanted to organize something bigger.

After they put the word out on social media, more than a thousand people gathered in the parking lot outside Zepf Recovery House one chilly afternoon. There was free food, coffee, and hot chocolate for kids. It was a family event. They had a bouncy castle and face-painting stations. On a small stage, politicians, police officers, and recovering addicts spoke about a need to break the stigma around drug use in Toledo.

A journalist with a local newspaper reported that the head of the

Toledo Police Department was there that afternoon and stood on the stage to say that it was time Ohio take a new approach to addiction. “Chief Kral called the heroin addiction a ‘public health crisis’ and said, although it might seem counter-intuitive to some, the police department is ‘moving away from putting everyone in jail to putting the right people in jail,’” the article reads.<sup>9</sup>

From Zepf Recovery House, the crowd marched down Collingwood Boulevard, making a public call for government action on Ohio’s overdose epidemic.

The city had never seen anything like it, Bell remembers. Toledo is a conservative town, and people seldom spoke publically about a friend or family member’s drug problem. If somebody died of an overdose, that was never mentioned in the obituary. The February 2016 rally began to change that.

Team Recovery grew from there. They established a twenty-four-hour hotline for help accessing treatment services as well as for people who called just to talk. They launched an education and prevention campaign, visiting more than fifty high schools and speaking with more than 27,000 students in the first year. Team Recovery now holds twice-weekly support groups for the families and friends of people who are struggling with an addiction or who have lost someone to drugs.

In mid-2016, Team Recovery partnered with Ohio Mental Health and Addiction Services to teach overdose response. Its family-support groups usually meet at a church, and at the end of those meetings, attendees can stick around to learn how to use naloxone (the generic name for Narcan), a prescription drug that reverses the effects of an opioid overdose.

“In Lucas County, we’ve put out more Narcan than the health department, all pharmacies, and every other facility combined,” Bell says. “And it’s confirmed that some of these kits have saved lives.”

Bell won’t call it harm reduction. He emphasizes that Team Recovery focuses on abstinence-based treatment. They don’t even encourage widely accepted opioid-substitution therapies such as methadone.

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<sup>9</sup> Taylor Dungen, “Ohioans Rally against Heroin Abuse,” *The Blade*, February 26, 2016.

“We realize that everybody has their own path, but the way that we got clean and sober was through twelve steps,” he says. “Harm reduction is not our purpose. Yes, it will stop the spread of disease and it will stop people from sharing syringes and all that stuff, but we think that getting somebody clean and sober will stop those things too. I can’t actually support any kind of needle exchange,” Bell continues. “I just can’t wrap my head around it. I get that it works in other places and I know the data behind it ... but that’s just not in our mission. In Ohio, it would never happen.”

Few people involved in that February 2016 march down Collingwood Boulevard had ever heard the name Bud Osborn. Bell concedes that he never had. Osborn grew up in Toledo. Many years later, in Vancouver, Canada, Osborn was a key figure in a grassroots movement of drug users who transformed how Canada responds to addiction. He helped pioneer North America’s first harm-reduction programs, expanding needle exchange and eventually establishing the continent’s first supervised-injection site.

Some thirty years before Team Recovery existed, Osborn arrived in Vancouver, in a rundown part of the city called the Downtown Eastside.