## the doomsayers' lies are just as dangerous



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SO SOME people can combine a heroin habit with an otherwise normal life? So what else is new? It is no discredit to Glasgow Caledonian University—but a sharp warning to the purveyors of "responsible" official information—that it takes a team of academics, a sample of 126 heroin users, many months of research, and a bill for

4,000 to the Scottish Executive to establish what anyone with so much as a nodding acquaintance with the problems of drug addiction should know already. So should those who have lived in the Far East. Heroin destroys some people and not others.

I have known this for about thirty years. A couple of friends have for different and extended periods of their lives been addicted to heroin. Neither is addicted now, neither would recommend the drug, but both have told me that for them and for others whom they knew, it proved possible to stabilise their use of heroin at a level that did not destroy their working or domestic lives, or appear to damage their health. The Glasgow research found that among its sample, 70 per cent of those who had used heroin for more than seven years had not experienced serious health problems as a result.

That is not to say they were not addicted. So are serious tobacco smok-

and many steady drinkers. They seed their daily fix; they would suffer acute withdrawal symptoms if they tried to stop it; and they would find life much less tolerable without it. This is real addiction and it is rife in our society. The list of culpable chemicals includes alcohol, tobacco, anti-depressants, cocaine, crack, heroin and (arguably) marijuana, probably in something like that order of prevalence.

Not all are equally addictive and heroin is certainly among the most addictive, though I am not convinced it is more so than nicotine, a really hard drug. I have seen anguished smokers and alcoholics struggle as painfully with their habit as some heroin-users.

Nor are all equally available, which complicates the comparison; as does the fact that the use of drugs such as heroin involves the addict willy-nilly in crime; while the illegality of the drug drives the cost beyond many addicts' reach, provoking further crime.

Heroin also suppresses hunger, so if the user turns to crime and begins to neglect himself things can spiral out of control. My guess is that loss of selfrespect plays a big part, but it is difficult to establish how far this is an effect, or how far a cause, of addiction. The researchers at Glasgow Caledonian would acknowledge that men and women who are managing their habit successfully might be more likely to volunteer their story. David Shewan, the coauthor of the report, has rightly said that his findings should be treated with caution.

What is undoubtedly true is that heroin is a dangerous drug, which can wreck lives. What this study shows, however, is that in the direct experience of many people, heroin does not always do so. Both truths seem to me important to know. If we believe in free speech and personal choice we should have no difficulty in agreeing that neither should be suppressed.

Which is why the response of the anti-drug "community" so depresses me. David Pentland, a drug worker, has featured in a number of media reports commenting: "To put this information out into society is totally irresponsible." Shona Robison, the Scottish National Party's health spokesman, called the research "a waste of money". No media outlet I have encountered this week has felt able to publish the finding without appending to its report criticism, not of its accuracy, but of the very act of publishing it. The SNP seem to question even the commissioning of the research.

This is stupid. Official Britain should ask itself why government warnings and media scares are so often ignored, particularly by the young. Why, for instance, do you suppose that nothing

## 'My generation had warnings of "reefer madness"; we tried it and nothing happened'

any adult says about Ecstasy, no lurid headline the Daily Mail runs about the untold numbers of deaths threatened by this (now fading) drug of clubbers' choice, seems to be taken seriously in youth culture? The answer is obvious. Because politicians, civil servants and newspapers keep telling lies and peddling distortions about drugs to scare people. Young people's own direct experience teaches them that death or even collapse from the use of Ecstasy is unusual, and where people do collapse it is almost always because of violent abuse of the drug, dehydration or a polluted supply.

My own generation remember the American films about "reefer madness" and the propaganda we were bombarded with suggesting that one puff of marijuana would turn us into crazed monsters. We tried a puff and nothing happened. Next time we heard an official warning about drugs we took it

But this goes beyond heroin, beyond drugs. In every area of life, "safety first" has become a reason for high-minded mendacity, and high-minded mendacity is devaluing official warnings of every kind and widening the credibility gap between authority and the commo-

nality, about which politicians love to bleat

In 21st-century Europe the cries of the well-intentioned brigade of precaution-mongers have become all too familiar. "Better err on the side of caution!" they parrot; "One-death-is-adeath-too-many!" These people are habitual liars. Leaflets, pamphlets, public service announcements, government advice notes and relentless punditry are their medium; alarm is their message; and whenever there could—just could—be risk to life or limb, accuracy is a secondary consideration. Challenged over their carelessness with the truth, the sanctimony of the precaution-mongers is prodigious. They love the word "responsible"; "if it saves one life..." they squawk, casting a reproachful glance in your direction and tut-tut-ting about "irresponsibility".

But it is they who are irresponsible. Crying wolf is the greatest irresponsibility of all. Every exaggerated warning, wrongly trusted, erodes all trust; every piece of untruthful advice meant to scare undermines all official advice; every prohibition proved pointless breeds disregard of all prohibition. When our masters really do need our trust, they may find we are no longer listening.

I no longer turn off my mobile phone in aeroplanes; I just switch it to "silent". For at least the past five years it must have been plain to all regular air passengers that if mobiles really did interfere with the electronics in the cockpit, planes would be dropping out of the sky like pheasants on a January Saturday. I no longer attend to that ritualised modern ballet, the air steward's safety instructions, because I have never, ever, heard of a single case in which they saved a life.

I no longer divert when I see the sign "road-closed — access only" because most of the time the road is open if you navigate round a sand-heap. I no longer empty my pockets of change as instructed at security checkpoint X-ray machines, because non-ferrous metals do not seem to register. I no longer stop automatically at red traffic lights in Spain because there may be no cross-roads: local councils have gained powers to install dummy-lights designed only to slow traffic.

As a pedestrian I ignore those vile galvanised steel barriers at road intersections, now erected regardless of the danger and as a matter of course. So I climb over them as a matter of course. And I have been eating food which has passed its sell-by date for at least as long as the heroin addicts in that Glasgow research have been managing their habit alongside an otherwise normal life. I smell food to decide if it is off.

The more you try to ratchet up public anxiety in hopes of protecting a few by misinforming the many, the more the public's indifference to official information is ratcheted up in response. Yes, heroin kills; speed kills; carelessness kills. But by robbing warnings of their authority, you rob authority of its power to warn. Drugs do kill; but exaggeration kills too.