

Leprosy and Drug Addiction

Temple B'nai Shalom

Braintree, Massachusetts

Rabbi Van Lanckton

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Our Torah reading today is a double parashah: Tazria and Metsorah.¹

A note in our chumash, Etz Hayyim, says that these readings “describe the ritual of purifying and reintegrating the recovering leper.”

That is not what seems to me most important here. What I see in these readings is the absence of any explanation for what causes the skin conditions described and the cruel treatment of those who suffered from them and had not been cured by the various techniques the text describes.

No explanation is given here for why someone contracts these conditions. In this ancient text, they are not called diseases. We now know that leprosy is a recognized and treatable disease but many of the conditions in our text were probably not leprosy and our text seems to consider these conditions to be a moral fault of the sufferer.

We also see in this text that the cures offered in those days would sometimes work and sometimes not.

When the cure didn't work, the affected person was ostracized. He or she was forced to live outside the camp, by whatever means we don't know, and could not return until fully cured.

What I see in these descriptions is a society that would turn its back on those with scary conditions, diseases they could not understand. When someone had such a condition, they excluded him or her from the society.

An epidemic in our own time seems to me similar to the treatment of afflicted individuals in this text. I refer to the epidemic of drug addiction.

Last year the Surgeon General issued a comprehensive report on drug addiction. The report begins:

All across the United States, individuals, families, communities, and health care systems are struggling to cope with substance use disorders. These disorders have devastating effects, disrupt the future plans of too many young

¹ Leviticus 12:1 – 15:33.

people, and all too often, end lives prematurely and tragically. This is a major public health challenge and a priority for our nation to address.

The report states that “addiction is a chronic neurological disorder and needs to be treated as other chronic conditions are.”

But that’s not what we do. The Surgeon General admitted as much in his introduction to the report. He said:

Before I assumed my position as U.S. Surgeon General, I stopped by the hospital where I had worked since my residency training to say goodbye to my colleagues. I wanted to thank them, especially the nurses, whose kindness and guidance had helped me on countless occasions.

The nurses had one parting request for me. If you can only do one thing as Surgeon General, they said, please do something about the addiction crisis in America.

As I have traveled across our nation, meeting people struggling with substance use disorders and their families, I have come to appreciate that substance use disorders represent one of the most pressing public health crises of our time. Whether it is the rapid rise of prescription opioid addiction or the longstanding challenge of alcohol dependence, substance use disorders can—and do—prevent people from living healthy and productive lives. And, just as importantly, they have profound effects on families, friends, and entire communities.

The Surgeon General then said, “We need a cultural shift in how we think about addiction. For far too long, too many in our country have viewed addiction as a moral failing. This unfortunate stigma has created an added burden of shame that has made people with substance use disorders less likely to come forward and seek help.”

This epidemic does a lot more harm than stigmatize those who suffer from addiction. In far too many cases, addiction kills. Last year in Massachusetts, nearly 2,000 people died from opioid overdoses.

Alice and I belong to a support group for parents whose sons or daughters have died. It’s called The Compassionate Friends.

Our son Sam did not die of addiction; he died two years ago of medical neglect while an inpatient at McLean Hospital.

But in each of our meetings of The Compassionate Friends, one third of the parents there are grieving sons and daughters killed by heroin or fentanyl or other drug overdoses. One third.

Treatment centers are hard to find and don't do much good. The police are not interested in finding culprits who, for example, sell fentanyl to unsuspecting young people who think it's heroin. Fentanyl is 50 to 100 times more powerful than heroin and is implicated in a rapidly increasing number of deaths.

And treatment is not even the first option for many addicts. Instead, they become statistics in the failing War on Drugs that's been waged on the streets of our country for the last 40 years. Policies related to the War on Drugs have caused the number of people arrested, convicted, and incarcerated for drug-related crime to increase drastically. In 1980, there were forty thousand people incarcerated for drug offenses; by 2013, this number increased to nearly 500,000. Considering that most drug arrests are for possession, the criminal justice system is left to address high levels of substance abuse and addiction.

What we are doing to sufferers of the disease of addiction hardly differs from what the ancient Israelites did to sufferers from skin ailments like leprosy. We don't understand addiction. We don't want sufferers in our midst. They banished sufferers from the camp. We banish sufferers from society by locking them up or leaving them to the inadequate resources their families can muster if they are fortunate to have understanding families with the capacity to help.

Drug addiction in America in 2017 is the leprosy of ancient Israel.

We have got to do better.

Our reading begins on page 649.