

## Drugs in the world

# Project Prevention gives \$300 to drug addicts in exchange for their fertility

JACKSONVILLE, Fla. -- Barbara Harris has been called a lot of things.

As long as she can stop drug addicts from having children, she doesn't care. "The money is motivating them, bribing them. I don't care what word is attached to it, it's working. It's their choice to use drugs, but the babies don't have a choice," she said.

Fact: Since 1997, the non-profit Project Prevention has paid drug addicts, men and women, to be sterilized. In 15 years, 4,269 people have taken money in exchange for their fertility.

The program requires the participants to prove their drug addiction and then prove they had tubal ligation, long-term birth control, or a vasectomy. She then hands them \$300 cash, no questions asked. "People will say, 'well you know they're going to use this money for drugs,' well, that's their choice. My babies didn't have a choice," she said.

She started the program after adopting her own child in California. Her daughter was born addicted to PCP, crack, and heroin. And in the three years following, she adopted three more children from the same woman, all of them born addicted to drugs. Watching her newborn children struggle to overcome addiction, she tried to get legislation passed in California. The bill would have forced women who give birth to babies addicted to drugs to be sterilized.

Project of prevention. While the legislation failed, her drive to make a change didn't, so Project Prevention was born. "If you can't trust them to make a decision, how can you trust them with a child? To me it's all common sense," she said. But it hasn't been common sense for many people

The program was practically run out of the UK when she tried to introduce it overseas, and a documentary featuring mothers who have overcome addiction begs women to reconsider. Just this summer, she and her adoptive children took a bus tour through Florida. Nine women in Jacksonville took her up on her offer, and she said that should be welcome news on the First Coast. "The nine women that we paid in Jacksonville had 23 abortions before coming to us, because many of these women use abortion for birth control," she said.

She was only in Florida for a couple weeks, but she said her trip will ultimately save Florida millions. The cost of care for children born addicted to drugs can be astronomical. And if the birth

mother can't care for her baby, taxpayers are on the hook for care. She said she sees the effects everyday, just recently on a little boy her friend took in to foster care. "The cost to keep him alive for three years was \$4 million dollars. And he died at age three, so for those who say those should be spending your money on drug treatment, we say we basically are," she said.

Project Prevention doesn't cost taxpayers anything.

Harris takes in private donations to pay for the procedures and said they're growing every year. Her largest donation was for \$100,000, and her biggest donor is from Florida. Though her cause is controversial, she said it's one people who support Project Prevention believe in. "I guess it's just about where your heart is at. Is it all about the woman and her right to procreate, or is it about the child. **Does the child have any rights?**" she asked.

First Coast News

ROSS, Kaitlyn. Project Prevention gives \$300 to drug addicts in exchange for their fertility. [online]. [cit. 2013-03-13] Available from: <http://www.firstcoastnews.com/loptions/article/2975931483/The-Choice-of-a-Child->

## Models of Care for the treatment of drug and alcohol misusers

A) **The intervention** consists of:

1. Specific information, advice and support.
2. **Liaison services**, e.g. for acute medical and psychiatric health services and social care services (such as child care and housing services and other generic services as appropriate).
3. A range of **evidence-based prescribing interventions**, in the context of a package of care, including medically assisted withdrawal (detoxification) in inpatient or residential care and prescribing interventions to reduce risk of relapse.

B) There is a wide range of types of **residential rehabilitation services**, which include:

1. **Drug and alcohol residential rehabilitation services** whose programmes suit the needs of different service users. These programmes follow a number of broad approaches including therapeutic communities, 12-step programmes and faith-based (usually Christian) programmes, residential drug and alcohol crisis intervention services (in larger urban areas).
2. **Inpatient detoxification** directly attached to residential rehabilitation programmes.
3. **Residential treatment programmes** for specific client groups (e.g. for drug-using pregnant women, drug users with liver problems, drug users with severe and enduring mental illness). Interventions may require joint initiatives between specialised drug services and other specialist inpatient units.
4. **“Second stage” rehabilitation** in drug-free supported accommodation where a client often moves after completing an episode of care in a residential rehabilitation unit, and where they continue to have a care plan, and receive keywork and a range of drug and non-drug-related support.