The Providence Journal

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Portugal offers model for saving lives

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Published 4:45 p.m. ET Jan. 23, 2020 | Updated 4:45 p.m. ET Jan. 23, 2020

Rhode Island and Portugal have a strong connection, with almost 10% of Rhode Islanders having Portuguese lineage. We also share another tragic connection: a history of high rates of drug overdose.

However, through a public health model — rather than incarceration — Portugal has drastically reduced its overdose deaths. Last year, over 300 Rhode Islanders died as a result of a drug overdose. If we had Portugal's current rate, only three people would have died.

To help us reproduce the successes of the Portuguese approach, we brought to Rhode Island Dr. João Goulao, the often-heralded architect and implementer of the plan that drastically lowered Portugal's overdose death rate from the highest to the lowest in Europe. (https://opioidcobre.org)

During his weeklong visit, Dr. Goulao held conversations with over 1,000 people, including parents and family members who've lost a loved one to addiction; individuals in recovery and actively using; educators, clinicians and researchers; lawmakers and law enforcement; religious and community leaders; and advocates.

He emphasized that Portugal's success rested largely on treating addiction as a disease. Since 2001, people with an addiction in Portugal have been considered patients deserving treatment, not criminals.

The results from Portugal are staggeringly successful. Over the last twenty years, overdose and HIV rates plummeted by 80% and 95%, respectively. Drug use — most importantly, teen and problematic drug use — have decreased. Drug-related crime decreased and law enforcement report higher rates of job satisfaction, as they're able to pursue drug distribution channels and drug dealers, as opposed to people using drugs. Finally, Portugal was also able to spend less money on incarceration, while saving lives.

It remains illegal to sell drugs in Portugal, and drug use is not encouraged. People are still arrested for possession of drugs. However, if they possess less than a 10-day supply of drugs, they are sent, instead of to jail, to a civil hearing complete with a social worker, a therapist and a judge. This body evaluates individuals in a comprehensive way and refers them to appropriate treatment and supports. Individuals do not go to jail for use of drugs nor do they receive a criminal record. They

may be fined or issued other sanctions if they continue to use or possess drugs. The sanctions are similar to those issued here for driving without a seatbelt.

Fifty years into America's "war on drugs," we have more overdose deaths than ever, have incarcerated millions and bear witness to the drastic and damaging effects of the racial disparities of mass criminalization and mass incarceration.

For the first time in 100 years, the current overdose epidemic has led to a decrease in American life expectancy for three years in a row. People are left with lengthy criminal records that prevent them from full recovery. There is hardly a family in Rhode Island that has not been impacted. We need to do better.

Portugal's model presents lessons to save lives in Rhode Island. Dr. Goulao offered a message to Rhode Islanders that we, too, can succeed.

Not one of the over 300 Rhode Islanders who died last year died because we were not tough enough on crime, did not have enough laws, police, courts, prisons or jails. In fact, the opposite is glaringly obvious: the criminalization of drug use drives people away from treatment and reinforces negative stigma.

It is time to change drug policies in Rhode Island to treat addiction as the disease that it is and no longer continue to punish people with costly and counterproductive criminal sanctions.

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