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What can Massachusetts and Rhode Island learn from Portugal decriminalizing drugs? Forum offers detailed look

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FALL RIVER - After hitting rock bottom - with one in 10 people hooked on heroin and hundreds of thousands addicted to other types of drugs - Portugal decriminalized drugs 22 years ago and has seen dramatic drops in overdoses and drug-related crime.

In the United States, by contrast, the drug epidemic continues to worsen, and overdose deaths remain at crisis levels.

In 2022, a record 109,680 lives were lost to overdoses, according to the U.S. Centers for Disease Control and Prevention (CDC).

In Massachusetts, there were 2,357 confirmed and estimated opioid-related overdose deaths in 2022, a new record high, according to data released last week by the Department of Public Health.

The Ocean State experienced 434 accidental overdose deaths last year, according to the Rhode Island Department of Health.

Given Portugal's tangible results, should the United States follow the Portuguese pioneering drug policy, or at the very least try to apply some of the lessons learned there?

With that in mind, dozens of Massachusetts and Rhode Island lawmakers and health and law enforcement officials came together June 26 at a forum held at Bristol Community College to learn about the Portuguese experience in decriminalizing drug use and engage in discussion on ways to reduce opioid related fatalities.

The forum was organized by the Luso-American Development Foundation (FLAD) of Lisbon in partnership with the Center of Biomedical Research Excellence (COBRE) on Opioids and Overdose, and BCC's LusoCentro.

“This is the worst crisis,” said Dr. Josiah D. Rich, the Principal Investigator of the NIH-funded Center on Biomedical Research Excellence (COBRE) for Opioids and Overdose at Miriam Hospital in Providence. “We need everybody on board - law enforcement, politicians, educators, scientists, everybody - to change this.”

He emphasized that while Portugal has 10 times the population of Rhode Island, it experienced six times less overdose deaths than the Ocean State, according to the most recent data.

“We have to look at what’s happening in Portugal and see how we can translate it to Rhode Island and Massachusetts,” he said. “How can we do it today and not wait years for it to happen. We need to do it now. People are dying now.”

What is Portugal doing to win the war on drugs?

The forum’s keynote speaker was Dr. João Goulão, Portuguese Drugs and Alcohol National Coordinator.

He was a member of the Portuguese Committee which, in 1999, prepared the report on which the first Portuguese Drug Strategy was based that included decriminalization proposal and paved the way for the change in the Portuguese drug policy. He was also Chairman of the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA) from 2009 to 2015.

Dr. Goulão said one common misconception is that Portugal legalized drugs.

“We did not legalize drugs,” he stressed. “The use of drugs in Portugal is prohibited, including cannabis.”

Instead of receiving jail time, drug users are sent to counseling and offered access to treatment if found in possession of any drug in amounts that would last the individual 10 or fewer days. If they exceed that quantity, then criminal procedures take place.

In his view, a more humane and pragmatic approach to drug policy and addiction yields more positive outcomes.

“It’s not the drug that matters; it’s the relationship with the drug,” he said. “What’s key is the way we address the problem. We need to address it in a humane way. We focus our policies on the citizens.”

He said the Portuguese drug policy model has been successful because it’s cemented on a robust strategy across government, healthcare, law enforcement and community groups to

effectively disrupt the chain of supply, provide intervention and treatment options and educate the public.

“We’re dealing with a health and social issue rather than a criminal issue,” Dr. Goulão said. “Why put people in jail? Then you have people with a crime record, which is for life, and it stigmatizes.”

He said statistics provide a clear picture on how the policy is working.

In 1998, 350 lives were lost to overdoses in Portugal. According to the most recent data, there were 74 overdose deaths in 2021.

While heroin was consumed by 1% of the Portuguese population in 1998, only 0.33% used it in 2021.

HIV notifications also decreased from 56% to 3%. In 1998, there were 100,000 problematic users, while in 2021 that number fell to 33,200.

“I am very proud of what we’ve achieved so far,” Dr. Goulão said.

What’s the role of agencies for drug treatment in Portugal?

Psychiatrist Miguel Vasconcelos, coordinator of the addiction unit at Centro Taipas in Lisbon, provided an overview of the role of agencies for drug treatment in Portugal.

He said they follow an integrated model of treatment, using evaluation, discussion, and intervention by a multidisciplinary team.

Centro Taipas currently employs six psychiatrists, 13 psychologists, 12 nurses, four social workers, one physiotherapist, and one occupational therapist among other professionals. Each patient is assigned to a reference therapist and an individual therapeutic (TP) project is constructed with the client. The center has supervised drug consumption facilities, and in some cases methadone is dispensed.

“It’s a client centered intervention, according to the TP established, integrating simultaneously or sequentially the different therapeutic modalities and the community resources,” he said, adding that challenges like housing, food, accessing education and behavioral health treatment need to be addressed in concert with substance use treatment in order to turn the tide on the drug crisis.

After Dr. Vasconcelos' presentation, Kristine Campagna, Associate Director at Rhode Island Department of Health, Division of Community Health and Equity, told O Jornal that being invited to hear what others are doing is “critical” in order to address the drug crisis in our local communities.

“What I appreciated most is their interdisciplinary approach,” she said of the Portuguese drug policy model. “It’s critical to solve the problem together, and to treat people with respect and dignity. The work they are doing considers the whole person, mapping resources and equality of treatment.”

What’s the law enforcement stance on Portugal decriminalizing drugs?

Artur Vaz, Director of the National Unit for Fighting Drug Trafficking for the Portuguese Judiciary Police, explained that when police authorities intercept a person using drugs or in possession of quantities up to the limit allowed – heroin (0.1 grams), cocaine (0.2 grams), cannabis (2.5 grams), ecstasy (0.1 grams) or amphetamine (0.1 grams) – they identify the person, seize the drug and draw up a police report that is sent to the Commission for the Dissuasion of Drug Addiction with territorial jurisdiction, which is the user’s residence area. Currently, there are 18 such commissions throughout the country.

Vaz acknowledged that at the time Portugal’s drug policy was approved many law enforcement officers viewed decriminalization with skepticism and fear that the drug use and trafficking would increase, and that Portugal would become a tourist destination for drug use.

There’s been an increase in the amounts of drugs seized by authorities since 2001, but Vaz said that’s because law enforcement agents have more time to focus on intercepting large-scale trafficking rather than dealing with petty crimes and massive paperwork.

“At present, 22 years later, given the results achieved and the social evolution witnessed, we believe that the overwhelming majority of the population and law enforcement officers consider that the solutions adopted in the wake of the first national strategy, including decriminalization, were the right ones,” he said.

Public Security Police Superintendent Dário Prates painted a similar picture.

He said that before 2000 the police would waste a lot of time on “useless” arrests because individuals would be released by the judge within 48 hours.

Although it took some time to change the police mindset from the criminal to the non-criminal perspective, he said the outcome has been very positive.

“Yes, it was worth it,” he said. “We’re now more focused on drug trafficking, and whenever we get a drug user, he is getting the help he needs.”

Prates noted, however, that a 2007 Penal Law amendment, which allows police officers to conduct house searches without a warrant, has made all the difference for police officers.

“Drug traffickers know the law, so they carry the allowed quantity,” he said. “So, now if I see someone on the street selling drugs, I can arrest him and go to his place and search it. This was really helpful.”

Another thing that is extremely important is to set clear rules and quantity limits, he stressed.

“The legislation must be very simple and very clear,” he said. “We, police officers, like things to be black and white because we’re dealing with human rights.”

Dr. Miguel Moniz, an anthropologist at CRIA ISCTE/Instituto Universitário de Lisboa and the Executive Director of the Migrant Communities Project, which worked with COBRE to organize the forum, was the moderator of the law enforcement panel. He said he has been aware of the harm done to local immigrant communities by drug policy since working on the deportation issue in the 1990s.

He pointed out most U.S. permanent residents deported to Portugal were repatriated due to crimes related to substance use disorder. Had these individuals received treatment and not criminal records, they would have been allowed to stay in the U.S. and build back their lives, he said.

“It’s very important to get law enforcement in these conversations,” he said. “Oftentimes when we talk about drug policy, law enforcement is somewhat an afterthought.”

Could a similar drug policy model be applied in the U.S.?

Bridgewater Chief Police Christopher D. Delmonte, a graduate of the 255th Session of the FBI National Academy in Quantico, Va., and a member of the Massachusetts Chiefs of Police Association (MCOPA) Executive Board, said there are some similarities between here and what’s taking place in Portugal.

“We currently in law enforcement do subscribe to some of those strategies, particularly when it comes to our association with substance abuse programs and how we are doing intervention strategies, meaning we are visiting with people that are suffering from addiction and we have recovery coaches,” he told O Jornal. “These are strategies that were foreign to law enforcement many years ago. So, today there are things that we are doing that are very similar to that.”

But there are also contradictions, such as police officers being able to conduct house searches without a warrant, he added.

“Those are things that are going to be problematic here for constitutional reasons,” said Chief Delmonte. “But I also think there are some good points and things that we should evaluate.”

Acknowledging there's no quick answer, Chief Delmonte said the word that resonated with him was coordination amongst all the services.

“It requires a lot of coordination amongst the social service agencies and amongst law enforcement,” he said. “There are prevention strategies, reduction strategies and treatment strategies. So, it's not as simple as just decriminalization. You've got to look at all those issues as well, and they all require improvement.”

He pinpointed the United States faces some different risks and threats than Portugal, which so far has not been significantly affected by fentanyl consumption.

“We have to take those things into consideration, but that doesn't mean you can't pick a few pieces of it that has some value and things like that wouldn't be helpful to our communities,” he said.

What's next?

Massachusetts State Representative David Vieira (R-Falmouth), who helped spearhead this forum, said his goal was to “bring folks together to change the dialogue.”

“First to understand that Portugal did not legalize drugs and to look at the details of this policy,” he said. “The second part is to build relationships with those that have gone through this journey in Portugal. Here in Massachusetts, just last week, we saw the highest opioid related fatality numbers since this epidemic started. Clearly throwing more money and doing more of the same is not getting us any different results.”

Rep. Vieira said everyone should be looking at implementing a coordinated strategy.

“My concern is that we’ll look at one piece of it,” he said. “We’ll either look at decriminalization or at safe injection sites. In order for us to make a dent in this, I believe we have to have a comprehensive policy and strategy.”

Since the United States has a federal system, there probably will be more conversations such as this one in the future.

“We’re having this dialogue now with Rhode Island and Massachusetts, as sovereign states, which still fall under our federal drug policy,” he said. “I think that this potentially is the first step to having a federal conversation about this experience and rising this level to national policy discussion. I’m hoping we can get there.”