

Opioid-related overdose deaths decline for second straight year in Massachusetts

Opioid-related overdose deaths in Massachusetts declined by 4 percent in 2018 compared to 2017, marking the second consecutive year-over-year decrease in deaths, according to the latest quarterly opioid-related overdose deaths report released today by the Massachusetts Department of Public Health. That 4 percent decline follows a 2 percent decrease in opioid-related overdose deaths between 2016 and 2017. In total, opioid-related overdose deaths declined 6 percent between 2016 and 2018. **Opioid-related related deaths declined 15% in New Bedford.**

Fentanyl, however, remained a key factor in opioid-related overdose deaths; it was present in the toxicology of 89 percent of those who died of an opioid-related overdose and had a toxicology screen in the third quarter of 2018. Meanwhile, the rate of heroin or likely heroin present has been declining since 2016, falling to about 34 percent of opioid-related overdose deaths that had a toxicology screen in the third quarter of 2018.

“While we are encouraged to see fewer opioid-related overdose deaths for a second consecutive year and a 35 percent decrease in reported opioid prescriptions since 2015, the opioid epidemic continues to present a very serious challenge that is made more difficult due to the presence of fentanyl,” said Governor Charlie Baker. “We look forward to working with our colleagues in the Legislature to continue ramping up the Commonwealth’s funding for prevention, intervention, treatment and recovery services in the FY20 budget, in addition to the

Administration's proposal to strengthen the hand of law enforcement by providing \$5 million to support a new Regional Fentanyl Interdiction Task Force."

"Our administration is proud of the progress we have made in coordination with the healthcare community, state and local officials to fight back against the horrible disease of addiction impacting every community across Massachusetts," said Lieutenant Governor Karyn Polito. "These reports serve as critical snapshots in time and provide us with a view of the evolving nature of this epidemic, allowing us to more strategically target our response efforts and our resources."

In 2018, preliminary estimates showed 1,974 confirmed and estimated opioid-related overdose deaths or 82 fewer deaths than the 2,056 confirmed and estimated deaths in 2017. There were 2,099 confirmed deaths in 2016.

"The decrease in overdose deaths provides some hope that our approach to combating the opioid epidemic is having an impact," said Health and Human Services Secretary Marylou Sudders. "We must maintain an intense focus on this crisis and continue to expand opportunities to increase harm reduction initiatives and expand treatment and recovery services."

While the report showed an overall decline in opioid-related overdose deaths, Non-Hispanic black males experienced a 45 percent increase from 2016 to 2017 in the opioid-related overdose death rate.

"The opioid epidemic does not discriminate by race or ethnicity or by geographic region. Individuals and families of every race and in every part of the state have been impacted," said Public Health Commissioner Monica Bharel, MD, MPH. "Our data analysis is critical to addressing the opioid epidemic and it points us in the direction where we need to go, in terms of focusing our education, outreach, and prevention efforts."

As part of that response, DPH has invested more federal opioid funding targeting communities of color, trained more individuals who are black or Hispanic as certified addiction counselors, and promoted public awareness campaigns in predominant communities of color. In addition, DPH plans to establish a community advisory process to help develop culturally sensitive programming and treatment and recovery strategies.

The report also showed that in the fourth quarter of 2018, there were 546,000 Schedule II opioid prescriptions reported to the Massachusetts Prescription Monitoring Program, representing a 35 decrease from the first quarter of 2015. Just over 246,000 individuals in Massachusetts received prescriptions for Schedule II opioids in the fourth quarter of 2018, a 37 percent decrease from the first quarter of 2015.

Other findings of the latest opioid report include:

- The percentage of opioid-related overdose deaths where prescription drugs were present trended downward from 2014 through 2016 and has remained stable since then. In the third quarter of 2018, approximately 15 percent of opioid-related overdose deaths had prescription opioids present in toxicology.
- Since 2017, the presence of some stimulants such as cocaine and amphetamines in opioid-related overdose deaths has been increasing.
- In the third quarter of 2018, the greatest number of suspected opioid-related overdoses treated by Emergency Medical Services continued to be among males aged 25-34, accounting for 25 percent of opioid-related incidents with a known age and gender.

The Baker-Polito Administration has made major investments to address the opioid epidemic, and with its FY20 budget proposal is recommending \$266 million in funding for substance misuse

treatment and services. Since FY15 the Administration has increased funding for treatment, counseling, education, and other services by \$147 million, an increase of 123 percent. The total includes funding made available through a federal 1115 waiver that allows Massachusetts to increase Medicaid coverage for specific Substance Use Disorder services.

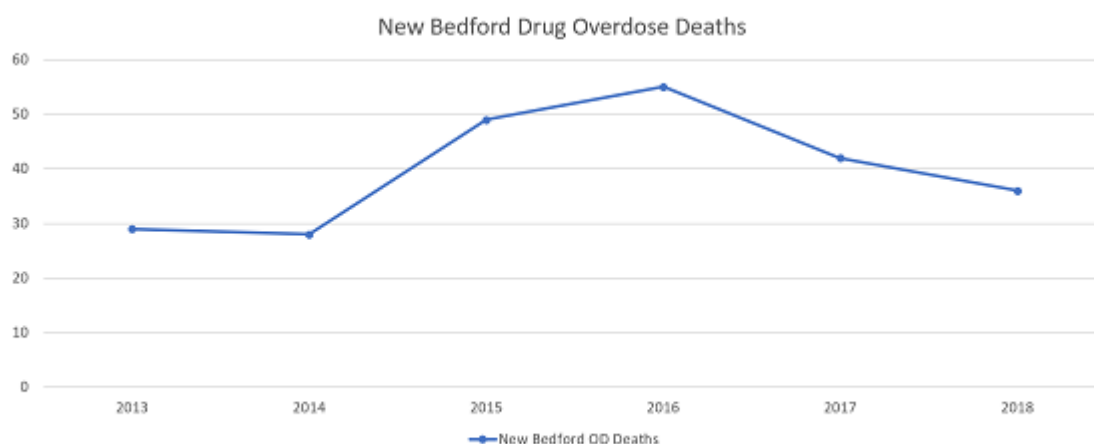
In collaboration with the Legislature, the Administration continues to implement two major pieces of legislation that build on a public health approach of prevention, intervention, treatment, and recovery. Last August, Governor Baker signed the second major legislative effort to address the opioid crisis which included the creation of new treatment pathways in emergency departments and county Houses of Correction; expansion of the municipal naloxone bulk purchasing program; removal of barriers for individuals accessing naloxone at pharmacies by creating a statewide standing order; and an expansion of the use of recovery coaches. In the fall of 2019, the Administration first filed legislation to develop a pilot program with input from many Massachusetts police departments interested in a regional, multi-agency approach to fentanyl interdiction and crime displacement. While the original bill was not passed by the end of the last legislative session, the proposal is now before the Legislature in a supplemental budget.

For more information on the Commonwealth's response to the opioid epidemic as well as links to the latest data, visit www.mass.gov/opioidresponse. To get help for a substance use disorder, visit www.helpline.ma.org or call the Massachusetts Substance Use Helpline at (800) 327-5050.

New Bedford sees 15% decrease in overdose deaths in 2018

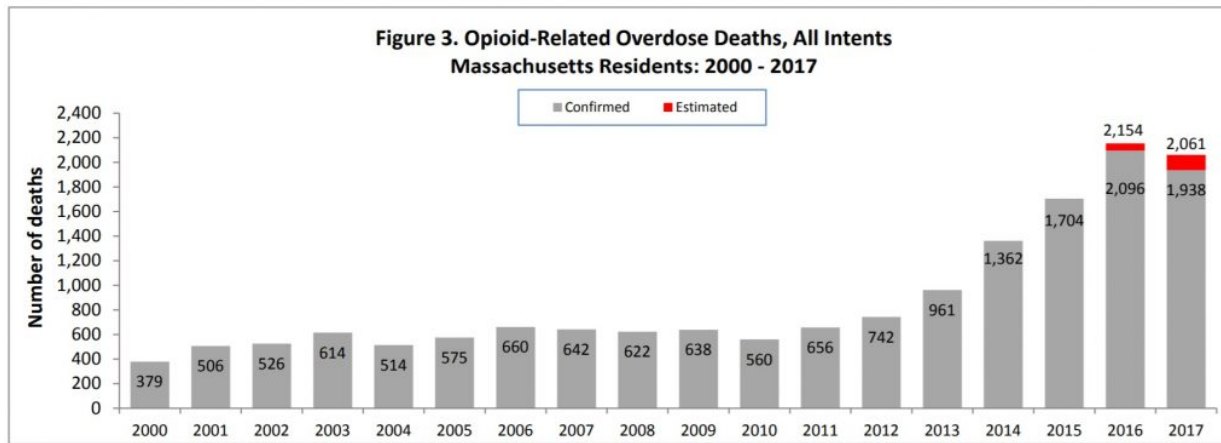
Of the 563 drug overdoses that New Bedford police responded to in 2018, 36 were fatal compared to 42 in 2017 – a 15% decrease. The decrease in the total number of fatal overdoses can likely be attributed to the widespread use of Narcan – the life-saving drug that has a high rate of success in saving overdosing persons.

Overdose deaths in New Bedford have now declined for two straight years from the high of 55 in 2016.



According to New Bedford police data, they responded to 563 total drug overdoses in 2018, up from 553 in 2017 – a 1.8% increase year over year. **New Bedford Fire Department records** show that firefighters responded to 602 overdoses in New Bedford in 2018, up from 548 in 2017 – a 10% increase year over year. Firefighters responded to **698 overdoses in 2016**.

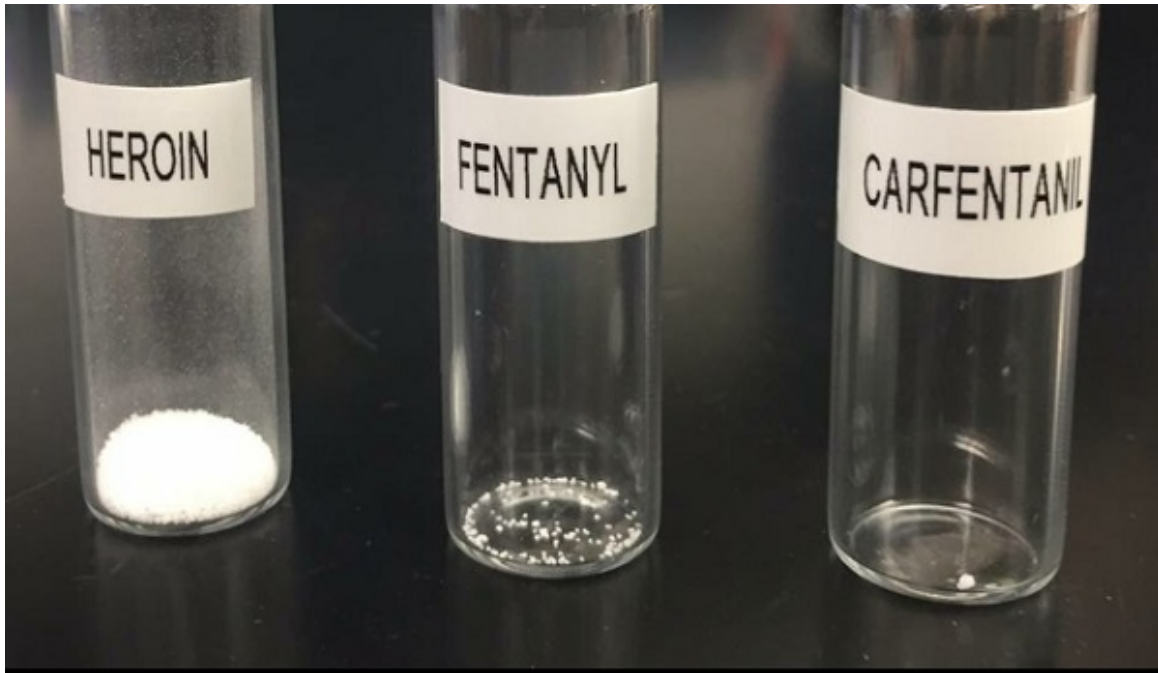
Here's the data for drug overdoses in Massachusetts per the **Massachusetts Department of Health's records on fatal overdoses (2012-2016)** and the New Bedford Police Department records (2017 and 2018). **Massachusetts has seen an overall decrease for 2016 and 2017:**



“The efforts of our Greater New Bedford Opioid Task Force to reach out to those in need, along with the Police Department’s work in apprehending dealers, are paying off. But the work is far from over, and with the proliferation of fentanyl, it is in some ways becoming more difficult,” said Mayor Jon Mitchell. “No matter what, we are committed to the work of saving the lives of those affected by addiction.”

The rise of Fentanyl mixed into heroin and now cocaine caused the increase in overdoses in New Bedford and Massachusetts. Fentanyl was found in 75 percent of the 1,374 opioid deaths in Massachusetts in 2016 and **carfentanil, a drug 10,000 times more potent than morphine and used on elephants, found its way into Massachusetts** a few years ago. Carfentanil is approximately 100 times more potent than Fentanyl, which can be lethal in the 2-milligram range. These two drugs are likely to be the main cause of most drug overdoses going forward and even causing overdoses in first-responders.

Here’s a look at a fatal amount of each drug:



This image shows the lethal (deadly) amount of each drug shown

Have overdoses peaked in New Bedford and Massachusetts? Let's hope so.

New Bedford firefighters drug overdose response up 10% in 2018

According to New Bedford Fire Department records, firefighters responded to 602 overdoses in New Bedford in 2018 – up 10% over 2017. In 2017, firefighters responded to 548 overdoses and **689 drug overdoses in 2016.**

New Bedford Guide has a request in with the New Bedford Police Department for their official overdose numbers.

Two overdose at the same time at same North Front Street apartment

On Jan. 10 at 8:07pm, New Bedford police officers responded to a report that a 38-year old male and 39-year old female had overdosed the same North Front Street apartment. Both received medical attention at the scene and were transported to St. Luke's for further evaluation. Thirty minutes later, New Bedford police responded to another overdose at a Ruth Street apartment.

These overdoses follow the worst overdose period in New Bedford so far in 2019 where **four overdoses occurred over a 20 hour period last Tuesday and Wednesday**. Three of the four overdoses were at the same South First Street address.

If you have a problem with addiction visit <https://helpline.ma.org/> or call 800.327.5050.

New Bedford Guide's Top Stories of 2018 (#21-25)

As 2018 winds down, we will countdown New Bedford Guide's top 30 stories of 2018 based on traffic to our website. Our top story had over 30,000 readers. You can read 26-30 **here**. Here's 21-25:

20. 10 Things to Know About South Coast Rail

10 Things to Know About South Coast Rail

21. Woman overdoses, crashes vehicle with 3-year old in car in Wareham

Woman overdoses, crashes vehicle with 3-year old in car in Wareham

22. Opinion: Resident disgusted with new luxury cars in New Bedford public housing

Opinion: Resident disgusted with new luxury cars in New Bedford public housing

23. New Bedford police investigating homicide of 34-year old woman

New Bedford police investigating homicide of 34-year old woman

24. Fairhaven's Top Ten (Almost) Forgotten Landmarks

Fairhaven's Top Ten (Almost) Forgotten Landmarks

25. Police arrest 15 in prostitution sting in New Bedford's north end

Police arrest 15 in prostitution sting in New Bedford's north end

U.S. Attorney in Massachusetts Issues Warning to Opioid Prescribers

As part of a comprehensive response to the opioid epidemic, the U.S. Attorney's Office in the District of Massachusetts has warned a number of medical professionals that their opioid prescribing practices have been identified as a source of concern.

In a letter sent this week, United States Attorney Andrew E. Lelling informed a number of prescribers that a data review identified them as having prescribed opioids to a patient within 60 days of that patient's death or to a patient who subsequently died from an opioid overdose. The letter reminds physicians that although prescriptions may be medically appropriate, the law prohibits prescribing opioids without a legitimate medical purpose, substantially in excess of the needs of the patient, or outside the usual course of professional practice.

"The opioid crisis is killing tens of thousands of people a year, including thousands in Massachusetts," said U.S. Attorney Lelling. "One source of opioids – used for both legitimate and illegitimate purposes – is medical professionals, who have an obligation always to act in patients' best interests. In the midst of an opioid epidemic, that obligation is more important than ever before. Through this effort, we're trying to educate prescribers who may be improperly dispensing these drugs, stem the flow of opioids to the public and, ultimately, save lives and reduce opioid addiction rates."

In 2017, approximately 2,000 Commonwealth residents died of opioid-related overdoses and, in the first six months of this year, there were 657 confirmed opioid-related overdose deaths in Massachusetts. While the amount of opioids prescribed and sold in the U.S. has quadrupled since 1999, the overall amount of pain reported by Americans during this period has not changed; the opioid epidemic was caused, in part, by the widespread over-prescription of opioid-based medications.

The Department of Justice is committed to reducing the numbers of opioid deaths and new addictions by monitoring prescription practices. Through this effort and others, the Department aims to reduce the impact of this crisis in our communities by notifying prescribers that their patients have died either as a result of or close in time to receiving an opioid prescription. By doing so, we reduce the risk of unused prescriptions being diverted for non-medical use by those whom the prescription was never intended. At this point, the Department has made no determination that the prescribers receiving these letters have violated the law; the goal is to induce these medical professionals to take stock of their prescribing practices and make any necessary adjustments.

**Faces Of New Bedford #180:
Megan Abdullahi**

Meet Megan Abdullahi, 35-year-old center manager at CleanSlate. Megan grew up on Cape Cod and after schooling immediately went into work in human services, as it has always been in her nature to help. She started working at group homes and after some time, she started managing them.



Megan moved to New Bedford and instantly fell in love with everything it has to offer, from the culture to the history. When she saw an open position for the Center Manager position at CleanSlate, a medication-assisted outpatient facility for those suffering from substance abuse issues, she knew she wanted to make a change in her career. Having dealt with family members who have had issues with drugs and alcohol, she knew that it was a position that would be more than a job.

Since her start at CleanSlate, she has heavily involved herself in the fight against opioids in the city. Although CleanSlate offers alternatives for those addicted, such as Suboxone and Vivitrol, her job doesn't stop there. She and her staff work with their clients to get them to a life free of drugs, offering counseling services and connecting them to services that also assist. Along with her position at CleanSlate, she is also a member of the New Bedford Opioid Task Force, joining with other members of the community, comprised of police officers, social workers, and religious leaders, who make home visits to recent victims of drug overdoses in an attempt to get them on the path to recovery.

Faces of New Bedford is a project by Colton Simmons. If you

are interested in booking a shoot or getting prints from the series email all inquiries to colton@coltonsimmons.com. Follow Colton on Instagram: <https://instagram.com/simmonscolton>

Read more of the Faces of New Bedford series [here](#).

1st Annual Bristol County Alliance on Opiate Abuse Conference Slated for November 7th

Community leaders and stakeholders from around Bristol County who are in the fight to end the opioid crisis are convening at the Holiday Inn, Taunton for a half-day forum on November 7th from 8:30am to 1:00pm. The Bristol County Regional Alliance is a coalition of individuals and organizations who are working on the issue of opioid prevention, harm reduction, treatment and recovery. The Alliance is coming together on November 7th to share ideas, address common challenges and create new collaborations to reverse the deadly trend of opioid overdoses plaguing our nation and county.

According to the State Department of Public Health, 233 people died in Bristol County last year from a fatal overdose. "Opioid-related fatalities are devastating families and communities throughout the County, we need to strengthen our efforts to reduce this trend.", said District Attorney Thomas Quinn one of the program's organizers. "There is terrific work going on in the county to address the crisis, but we need to come together to do more."

The Alliance was established in 2017 as a partnership between the Bristol County District Attorney Thomas M. Quinn III's Office, Southcoast Health and Coalitions from throughout the county to foster communication and collaboration. This Bristol County Alliance's 1st Annual Conference on November 7th is open to the public but advance registration is required.

The program will feature a host of speakers and workshops on all aspects of the crisis from prevention to recovery. The program will open its doors at 8:30am for registration and resources, and the program will begin promptly at 9:00am with opening remarks from District Attorney Quinn, Southcoast Health CEO Keith Hovan and a Representative from the US Drug Enforcement Agency. The program will continue with various workshops on items like Medically Assisted Treatment, Self-Care, Workforce Development and much more.

To register and find out how to get involved visit our website at www.AllianceBristolCounty.org or call 508-979-1580.

12 Massachusetts Programs Awarded Over \$8.4 Million in Federal Grants to Combat Opioid Crisis

The Department of Justice is awarding over \$8.4 million to 12 Massachusetts programs that are working to combat the opioid crisis through prevention, treatment and enforcement.

On the first day of National Substance Abuse Prevention Month, Attorney General Jeff Sessions announced that the Department

of Justice is awarding nearly \$320 million in federal funding to help those most impacted by the deadliest drug crisis in American history. Of that, the Justice Department's Office of Justice Programs (OJP) is awarding \$8.4 million to 12 Massachusetts programs.

"In 2017, over 2,000 Massachusetts residents died from drug overdoses," said United States Attorney Andrew E. Lelling. "The opioid crisis is an unprecedented public health crisis in the United States, but we are committed to the President's plan to end the epidemic through prevention, treatment and enforcement. With over \$8 million in federal grant funding, programs in Massachusetts can expand to serve larger populations, increase services, and support those who are most impacted by this deadly epidemic. I applaud the grant recipients for their commitment to serve their communities in this way."

Among the recipients is Plymouth County Outreach (PCO), which was awarded \$496,650. PCO is an opioid prevention and recovery coalition made up of 27 municipal police departments in Plymouth County, along with the Bridgewater State University Police, District Attorney Timothy Cruz and Sheriff Joseph McDonald. PCO partners with healthcare, treatment and recovery agencies, local coalitions, faith-based organizations and hospitals to connect at-risk persons with treatment and recovery options in advance of an overdose. PCO will be honored for their work by the International Association of Chiefs of Police's (IACP) Leadership in Community Policing Award on Oct. 9th in Orlando, Fla.

In addition, Wayside Youth and Family Support Network was awarded \$481,428. Wayside's Trauma Intervention Services will use the funding to provide counseling and advocacy to children and families who have suffered due the opioid crisis in Worcester, Norfolk and Middlesex counties.

Other recipients of federal grant funding in Massachusetts

include:

The Middle District Attorney's Office awarded one grant of \$360,000 and one of \$500,000;

Boston Police Department awarded \$305,362;

City of Holyoke Police Department awarded \$448,025;

Massachusetts Administrative Office of the Trial Court awarded \$1.5 million;

Advocates for Human Potential awarded \$1.55 million;

City of Worcester awarded \$744,668;

Plymouth County District Attorney's Office awarded \$541,300;

Franklin County Sheriff's Office awarded \$1,000,999; and

LUK Crisis Center awarded \$500,000.

The complete list of grant funding is available **here**.

October marks two important anti-drug events: Red Ribbon Week and National Prescription Drug Takeback Day. Red Ribbon Week (link is external) takes place every year between October 23-31 and encourages students, parents, schools, and communities to promote drug-free lifestyles. The Drug Enforcement Administration's (DEA) National Prescription Drug Take Back Day on October 27 provides a safe, convenient and responsible means of disposing of prescription drugs, while also preventing drug addiction and overdose deaths. DOJ expanded on DEA's Drug Takeback Days and collected more than 2.7 million pounds of expired or unused prescription drugs since April 2017.

OPINION: How about we ban

banning?

There has never been a time in America – for as long as I can remember – when there have been more calls or demands for placing a ban on someone or something. Some people feel so powerfully about the object or person that they don't even want anyone else to see or hear it – whether that person cares or not.

We could get bogged down for pages on the mentality or psychology behind it and mention a whole range of well-meaning intentions (protecting children being the most popular) and bad ones like not liking someone, having hurt feelings, not want to hear other opinions or even narcissistic based reasons. That's beyond the scope of this article and draws in a sense of subjectivity to which will likely be objected.

Instead, let's use a more scientific approach. Let's look at what happens when something is banned. Let's say that everyone was in agreement about something – society, in general, said "This is bad. It needs to disappear – let's ban it." It wasn't a small segment of the population or a limited few, but most.



Would a ban work because the vast majority wanted it? When has banning something been effective or so effective that the hated object or person was made to disappear and be a problem no longer? History has shown that banning something can have no effect or even just backfire and have to opposite effect. That's not to say that bans can't work – history has shown that they can absolutely work – it's just that there has to be a desire by most of the population to put the ban in place **and** very little dissent or organized resistance.

Let's take a little stroll down history lane.

National Prohibition

As most Americans know, the most famous case of banning something was the ratification of the 18th Amendment in 1919 that created the National Prohibition on alcohol. The movement led by a very large portion of women in America spearheaded by groups like the Woman's Christian Temperance Union who felt that it would "...protect families, women, and children from the effects of alcohol abuse." As a whole, the proponents felt that it would in the best interest of society to do away with alcohol and with it public drunkenness, mental illness, physical altercations and other crimes, even poverty.



Now, if you think I'm going down the road that declares "Prohibition was repealed, therefore the ban didn't work – but it would have." you'd be wrong. What it does show is that when you ban something you alienate an unknown number of people that don't want the ban and they will make it known. The prohibition **did** initially work and the well-meaning women that helped make the amendment happen turned out to be right: state mental health hospital admissions, cirrhosis (disease of the liver) death, and public drunkenness rates dropped. When the repeal was enacted, those rates went right back up.

That's pretty impressive, especially considering that estimates were that 30-50% of Americans followed the alcohol ban. That means the other half of the country did not care what the law was and wanted access to their booze. What sprung up were a different set of laws to be broken and arrests in many other areas – an exchange of one set of crimes for a different set. In addition, an entire sub-culture sprung out of the ban: speakeasies, a rise in organized crime, bootlegging, and rum runners. Criminal activity simply went underground, or...er...behind closed doors or in backyards.

Sadly, the other unintended effect was that it led to the

death of many aspects of Americana including the saloon, for example. As happens with anything that becomes taboo, e.g. tattoos, piercings, genres of music, etc. it attracted a segment of the population that wanted to attach themselves to the taboo. This sentiment entered popular culture in movies, music, and books. As stated in the US National Library of Medicine's National Institutes of Health database "Prohibition was transformed from progressive reform to an emblem of a suffocating status quo." The Anti-Saloon League, one of the organizations that promoted zero tolerance and wanted law enforcement to use a heavy hand on alcohol users and bootleggers was compared to the Ku Klux Klan by those against the ban. *



Believe it or not, one of the largest groups of "new drinkers" – those that picked up the taboo once it was made taboo – were from the very demographic that helped get the prohibition enacted: women. The death of the saloon was a blow to macho-ism and emboldened women so much so, that women considered it a badge of feminine strength to be seen in public as thumbing their noses at "John Law." Remember, this was an era when women weren't allowed to have many jobs and a police department was a men's club. Now, one of the groups that

helped make Prohibition happen were opposing it, but they were now one of the scores of organizations and groups actively opposing the prohibition and demanding the Amendment be repealed.

With such a large portion of the population actively breaking the laws by either manufacturing alcohol, selling it or buying it, visiting speakeasies, etc. the court system came bogged down with cases, certainly mirroring what is going on in this country with marijuana now.

Finally, another big blow to the economy was through its impact on liquor importation and exportation which *"...crippled American ocean liners in the competition for transatlantic passenger service, thus contributing to the ongoing decline of the US merchant marine, and created an irritant in diplomatic relations with Great Britain and Canada. Contrary to politicians' hopes that the Eighteenth Amendment would finally take the liquor issue out of politics, Prohibition continued to roil the political waters even in the presidential seas, helping to carry Herbert Hoover first across the finish line in 1928 and to sink him 4 years later."*

Ouch. These things are just the tip of the iceberg in a backfire of monumental proportions.



Needs Society's Support, To Be Sensible; "Assault Weapons" Ban
Demonstrating that a ban has to have overwhelming social support to work and it has to be sensible, is the contemporary desire to either ban certain guns, or all of them. America tried this from 1994 to 2004 with President Bill Clinton's Federal Assault Weapon Ban which had little to no effect, so Congress let it die. Too large a section of the population felt that if you take a gun away, someone will use a car, knife or explosives and mass killings – one of the primary reasons for anti-gun or gun-control advocates to institute some sort of ban on "assault [sic] weapons."

Multiple studies have shown that there is no correlation between gun ownership and crime. The places that have the toughest gun laws or where they are outright banned still have gun deaths and mass killings, e.g. Brazil, Mexico, El Salvador, Chile, et al.

Inversely, countries like Switzerland which almost every citizen owns one or more guns has some of the lowest gun death rates and mass killings. A deviant, criminal mind has no care about laws in place and a decent, morally upright society

doesn't need gun laws to tell them it's wrong to use them for evil. Take their guns away they'll use knives like in Britain.

Perhaps most important of all is that calling for a ban will not work if it will not actually eliminate the behavior that is related to it. In other words, will banning or eliminating guns eliminate suicides, homicides, and mass killings? The answer is no – people will continue to commit suicide, murder people, commit mass killings and if you also restrict the magazine capacity people will simply choose another tool or method to achieve their end goal.

Certainly, inanimate objects have no mind of their own and require a user and this commonsensical stance is one of the biggest reasons why gun bans and heavy gun control laws struggle in America today, will continue to struggle and why guns will not be going anywhere even if you take all the guns away from the law-abiding populace.



Backfires, Streisand Effects, Tipper Gore and the PMRC

Which brings up another very salient point about bans or even

simply bringing them up: they often backfire. One aspect of this backfiring is colloquially referred to as the Streisand Effect. *"...the phenomenon whereby an attempt to hide or remove a piece of information has the unintended consequence of publicizing the information more widely, usually facilitated by the Internet. The term is a modern expression of the older phenomenon that banning or censoring something often makes that item or information more desirable, and leads to it being actively sought out to a greater extent than it would have otherwise been."* – Wikipedia

Remember when Tipper Gore and the PMRC tried their darndest to get censor certain artists or albums in the 80s? If your memory is faulty or perhaps you are a lot younger, every artist hoped they could get that sticker because it was guaranteed to boost your albums sales. Royal backfire.

China, India, many European nations have banned or heavily taxed plastic bags, yet it's done virtually nothing to eliminate these street tumbleweeds from being everywhere in these nations and has backfired. China's ban on their importing them along with other plastics has had global consequences. From the journal "Science Advances": *"...studies [show] that only 9 percent of all plastic ever produced has been recycled, and the majority of it ends up in landfills or the natural environment. About 111 million metric tons of plastic waste is going to be displaced because of the import ban through 2030, so we're going to have to develop more robust recycling programs domestically and rethink the use and design of plastic products if we want to deal with this waste responsibly."*

The Smithsonian said "China's ban on importing foreign plastic could cripple global recycling programs and lead to 111 million tons of homeless plastic." The ban is causing ripples in the U.S. recycling industry and is one we know all too well here in New Bedford with all the recent drama we've had between the city and ABC Disposal.



War On Drugs, How A Ban CAN Work, Portugal's Progressive Example

A ban that has been going on for decades that has little to no effect in actually working is the ban on drugs here in America – called the "War On Drugs." After spending tens of billions of dollars on the so-called war, have we made any headway? Nope. Still costing tens of billions of dollars a year, drugs are still being produced and manufactured in record numbers, and there is certainly no slowing down.

The problems with most bans is that the responsibility for being a decent, law-abiding person or cleaning up some segment of society is passed to someone agency or someone else in society. It's the passing of the proverbial buck to avoid having to take responsibility for the actual behavioral issue at hand.

Often, there is a cognitive dissonance or blindness due to social mores of the Zeitgeist that prohibit many people from actually stating what the actual causes are so they can **really** be addressed. You can put a square tire on a car and making a stronger engine or more powerful fuel won't ever make those tires make sense, be practical or efficient. You must address

the shape of the tire, it can't be ignored.

This is what Portugal did when instead of seeing drug use as a criminal issue and maintaining a ban on it, they saw drug use as a public health issue and decriminalized the possession of drugs in 2001. What were the consequences of that genuinely progressive – not paying lip service to the term, but actually thinking progressively instead of “Ban, ban, ban!!”?

They went from a nation that had one of the European Union's (comprised of 28 nations) highest addiction and overdose rates and drug-related AIDS deaths and to now having a death rate that is five times lower than the other 27 nations, a drastic reduction in overdoses, spread of infectious diseases, and a host of other positives. You can see a full report and “magic” that Portugal worked with it's progressive idea here.



Scandinavia's Penal System

Taking Portugal's progressive idea even further are the Scandinavian nations who have created “No security” prisons

for select criminals, instead of banishing prisoners using America's "Get them out of my sight." mentality. A mentality that comes with an absurdly high recidivism rate and turns mediocre criminal minds into very efficient, better criminals before unleashing them back into society. That means we are increasing our own danger.

"No security" means no fencing, no gates locking you in, no guards to stop you from leaving. While inmates are there, they receive training and skills: they learn language and social skills, anger management, meet with outside experts in a variety of fields, rehabilitation, drug treatment, etc. In addition, they have free access to sports and exercise, a library, computers, a community kitchen, and a bunch of other perks. The recidivism rate is like America's....just in the opposite direction and society benefits.

Instead of taking a simple, outdated, lazy, and archaic idea like just banning something so it will go away, what is needed are more progressive ideas and discussions that revolve around solutions. There's nothing wrong with wanting something to go away, but what is wrong is thinking that banning solves the problem. It simply allows the problem to persist, alienates large swaths of the population, and simply doesn't work without majority agreement on the **specifics** of the ban or control.

Like Portugal has demonstrated, an honest discussion on a ban must include the possibility that perhaps a ban is not what is needed. The problem with all the ban talk that is so popular these days in America is that people are stifling, preventing, shaming, boycotting and censoring anyone and everyone that just wants to have a discussion about solutions.



The sad part is that the censoring of the “opposing” party is actually censoring an ally because the person they are shaming, censoring or hushing wants the same thing and is just coming at it from a different angle. When you take the stance “I know what is best and don’t need anyone else’s opinion.” you tell a massive segment of the population that you don’t give a rat’s a** what they think and that they are unimportant. That’s exactly how fascism works, not America.

Together we can come up effective solutions to society’s issues. Separated we’ll just stagnate and paralyze ourselves. If one side is allowed to ban what it dislikes without considering the rest of America, fascism rules. Society has behavioral problems and solving the problems in society begins with honest, open, civil discussion between **all** sides, by fellow Americans, by **us**.

Honest, open, civil discussion...does anyone remember that?