



Look to Portugal to address the opioid crisis

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August 13, 2019

In the 1990s, Portugal faced a staggering opioid crisis. Roughly 1 in 10 individuals was using heroin; 1 percent of the population was addicted. Portugal's prisons brimmed with those convicted of drug-related crime. High-risk behaviors produced public health crises, exploding HIV and hepatitis infection rates, homelessness and violent crime. One person I spoke to there described the period as "nightmarish."

Since 2001, bold decriminalization and harm reduction measures have turned Portugal's opioid crisis around. The United States, and Maine particularly, can learn from their approach.

As Gov. Janet Mills stated at July's state Opioid Summit, there is no "silver bullet" to solve this crisis. Though 2018 saw declining drug overdose deaths, we're still losing a Mainer nearly every day.

The Mills administration and Maine's Legislature deserve praise for confronting the crisis: expanding MaineCare to enable access to medication-assisted treatment; increasing access to the overdose-prevention medication Naloxone; and coordinating efforts of health care, law enforcement and the recovery community under the state's first director of opioid response.

When Portugal faced a far more severe crisis, the government transformed its approach. In 2001, after years of intensified rhetoric and harsher enforcement the government decriminalized possession of all drugs, from cannabis to heroin, for personal use (roughly a 10-day personal supply).

In Portugal, those possessing small quantities of drugs receive a summons, and appear before a "dissuasion commission" consisting of lawyers, social workers and mental health workers. Though they can levy fines or revoke professional licenses, the goal is assessing individual and community risk and making treatment accessible for those seeking recovery. Over 60 percent of such summons are for low-risk marijuana use; individuals get information about dangers, but usually no sanction.

Portugal's shift happened because harsh enforcement measures simply weren't working. A 2009 report from the Cato Institute states that "decriminalization was driven not by the perception that drug abuse was an insignificant problem, but rather by the consensus view that it was a highly significant problem, that criminalization was exacerbating the problem and that only decriminalization could enable an effective government response."

Portugal's previous "war on drugs" approach had been costly. Decriminalization freed up resources that funded massive public health interventions aimed at harm reduction. Outreach

workers canvassed areas where drug users congregated. They distributed clean syringes and sanitary supplies, ensuring drugs were consumed more safely. And reintegration programs enabled those in recovery a means to transition to paid employment and overcome addiction's social stigma.

In 2017, the Portuguese opened supervised drug consumption facilities, building upon mobile outreach methods. Here, health professionals provide a safe, hygienic space to consume drugs and can rapidly intervene in case of complications or overdose.

Portugal's results have been striking. From 2001 to 2015, overdose deaths decreased by 80%. During the same period, the prevalence of people who use drugs among new HIV/AIDS infections fell from 52 percent to 6 percent. And from 1998 to 2011, the number of individuals in treatment increased by over 60percent. Decriminalization did not increase drug consumption; Portugal's prevalence of drug use is among the lowest in the European Union.

I spent six weeks in Portugal this year initiating a travel study program. University of Maine students will soon learn about drug use as a policy issue, while also observing the innovative Portuguese approach firsthand. I remain struck by the ways that Portugal crafted pragmatic and highly effective policies, while affirming the humanity of drug users.

Maine has a well-earned reputation as a public policy leader and so many community members and organizations are already building a statewide harm reduction network. Numerous promising bills embodied this approach last legislative session. Here, too, is an area where Maine can live up to its motto, Dirigo, implementing its own pragmatic, humanistic policy approach to drug use.