

# Boston authorities clearing homeless encampment despite protests by ACLU, public health experts

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Last month, Boston's acting Mayor Kim Janey began clearing an encampment of homeless people near the intersection of Massachusetts Avenue and Melnea Cass Boulevard, commonly known as "Mass. and Cass." Around 300 people stayed in tents in the area at its peak, with many accessing nearby addiction treatment services.

Janey's office has claimed that it "is committed to maintaining a public health approach in confronting this complex challenge ... focused on connecting individuals to shelter, providing substance use disorder and mental health services, expanding low-threshold housing, providing safe road and sidewalk access, and enforcing laws against those who prey on the vulnerable, or present a danger to themselves or others." However, news reports, statements by public health experts and a lawsuit from the state affiliate of the American Civil Liberties Union (ACLU) reveal that the constitutional rights of Mass. and Cass residents are being infringed upon while their access to life-saving treatment is being interrupted.

The Massachusetts ACLU's filing notes that after the mayor's executive order declaring that tents would no longer be allowed on city sidewalks, "the City and its agents began dispersing people encamped at Mass & Cass under threat of arrest, and destroying many of their possessions, contrary to basic constitutional guarantees."

While some homeless people have been referred to shelters, the ACLU notes that many shelters are not equipped for people with certain medical conditions or family situations. Moreover, during a pandemic, throwing more people into congregate settings risks deadlier outbreaks.

Pine Street Inn, to which people have been referred, said it would be "offering beds if available. Once those are filled, we will provide mats in our lobbies and chairs in our dining room."

For those who are not enticed by the prospect of sleeping in a chair in a homeless shelter's dining room, the city has a protocol in place to allow for arresting people for the crime of disorderly conduct, that is, refusing to leave Mass. and Cass.

The threat of criminal prosecution, either for failing to leave one's belongings with a city worker in the hope that they are returned upon exiting a shelter or for outstanding warrants, some for petty crimes like drug possession, hangs over people's heads and can make them reluctant to seek out needed services.

The city has convened a special court, nominally to direct people with warrants into treatment. However, public defenders and the prosecutor, Suffolk District Attorney Rachael Rollins, both say that this court has sent more people to jail than to treatment.

The *Boston Globe* noted: "Of the nine people in the court's first three days, only two went to treatment, according to court officials. Four others were jailed and sent to jurisdictions that had outstanding warrants on them. They included a 33-year-old Gardner man sent to a Worcester jail experiencing a COVID-19 outbreak—over the objections of the prosecutor as well his public defender."

Dr. Benjamin Linas, who teaches medicine at Boston University and is an infectious disease physician at Boston Medical Center, and Dr. Joshua Barocas, who teaches medicine at the University of Colorado, wrote an opinion column in the *Globe* revealing that their statistical models, published in *Clinical Infectious*

*Diseases*, indicate that the clearing of Mass. and Cass, far from helping those who currently live there, will be a public health disaster.

While some in the short term will receive treatment, either voluntarily or because it is court-ordered, it will represent a disruption for everyone who has been living at Mass. and Cass. Such disruptions decrease access to necessary services, including harm reduction programs and addiction treatment.

Some who are currently receiving medication for opioid use disorder will have their treatment interrupted, leaving them vulnerable to an overdose. Others who receive mandated care often cease receiving care when they are no longer required to, likewise leaving them vulnerable to an overdose, particularly because their tolerance has been lowered.

Linás and Barocas project an immediate 20–40 percent overdose increase due to the clearing, a 12 percent increase in overdose mortality in the year following and fewer people receiving treatment for opioid use disorder. Hospitalizations are projected to increase by double digits for endocarditis and for overdoses, a staggering 46 percent in the latter case.

Other public health experts have also criticized the clearing of Mass. and Cass. The Public Health & Human Rights for Mass and Cass Coalition, which includes the Massachusetts Society of Addiction Medicine, Boston Medical Center’s Grayken Center for Addiction Medicine and the FXB Center for Health and Human Rights at the Harvard T.H. Chan School of Public Health, among others, issued a statement declaring, “Public health crises require public health solutions.”

Thoughtfully pointing to the stakes involved, the statement continued, “We support a plan that treats people with dignity, that meets people’s stated needs in the short and long term, and that relies on evidence-based practices of low threshold housing, voluntary treatment, and harm reduction, not involuntary commitment and criminalization which risk even more death.”

Dr. Sarah E. Wakeman, who is the medical director for substance use disorders at Mass General Brigham hospital, told a news conference near Mass. and Cass, “It is my medical opinion that displacing people, offering them ultimatums that include only congregate shelters, medically supervised withdrawal or being

funneled into a correctional setting, will worsen the public health crisis that we are seeing,” leading to more overdoses and HIV infections.

Cassie Hurd, executive director of Material Aid and Advocacy Program, which advocates for homeless people, told the same news conference about the limitations of shelters and their “warehouse and jail-like environment.” She also noted, according to the *Globe*, that earlier in the pandemic the city and state rented hotel rooms for quarantining purposes, and that the same could be done in this public health crisis.

Hotel rooms would give residents of Mass. and Cass some autonomy and dignity while they can access services if desired, although property owners near hotels have objected, leaving the proposal stillborn. New York City, which had a similar program, has canceled it and moved thousands from hotel rooms into crowded shelters and the streets.

The situation at Mass. and Cass is a microcosm of the social crisis across the US and internationally. Even as a few hundred vulnerable people are forced off the streets in a crackdown and shuttled off to jails or crowded shelters, the Boston area has seen a bonanza in wealth in the pharmaceutical and technological industries during the pandemic. The rising stock price of Cambridge-based Moderna, which is jealously guarding intellectual property rights to its mRNA COVID-19 vaccine, has minted many millionaires, while restaurant payment processor Toast’s initial public offering turned two of its cofounders into billionaires.



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