

Boston College High School

Model UN Conference

XXXIII



Letter from the Chair

My name is Cristian Vélez and I am a Senior here at BC High. I have been involved in Model UN since my freshman year of high school and it is an honor to be able to chair my own committee. Being in Boston, we see the crisis of homelessness and addiction unfold before us every day, on the sidewalks we walk, at the stations we pass, and in the headlines we skim. Too often, society turns a blind eye, reducing these individuals to statistics or, worse, treating them as problems rather than people. The world criminalizes their struggles, stripping them of the dignity they deserve. Conversations about policy can feel distant, but for those living it, this crisis is deeply personal and immediate.

This committee has not only deepened my understanding of the issue but has also made me more aware of my own perceptions and reactions. It's easy to walk past, to assume, to look away. But in learning about the systemic failures and personal hardships behind every face we see on the streets, I've realized that awareness is only the first step. My hope is that, beyond understanding, we also develop empathy. Real, active empathy that challenges us to think differently and act intentionally. The reality is that change doesn't happen overnight, and no one person can fix a crisis this complex. But each of us has the ability to shift how we engage with the world around us. It starts with questioning assumptions, advocating for policy that prioritizes people over punishment, and supporting the organizations already doing the work.

I look forward to chairing this committee and seeing what you bring to the ongoing discussion regarding the homelessness and addiction crisis in Boston. I also encourage each of you to be thoughtful and empathetic.

Cristian Vélez '25

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Letter from the Co-Chair

My name is Charlie Hamblet and I am a Junior at BC High. I am thrilled to be able to co-chair this committee and welcome you all to Boston College High School Model United Nations Conference XXXIII. While the issue that will be tackled during the course of debate may be a serious one, I hope that all of you will experience great joy through your resolutions and discussions.

I have been involved in Model UN since sixth grade, and have participated as a delegate in a handful of conferences. In addition, I have been a part of the past two BC High MUN conferences, working as crisis staff and a co-chair. Over the last three years in Model UN, I have had the amazing opportunity to travel to Los Angeles for Bruin MUN, Washington D.C. for NAIMUN, and Norfolk, VA, for ODUMUN. While our conference may not have the same size as those, it is my sincerest wish that the debates will be just as, if not more, lively and insightful as any other.

Outside of Model UN, I am active in both the school's Mock Trial and Youth and Government clubs, as well as the JV Tennis team. I have learned a variety of skills relating to discourse, public speaking, and leadership that I hope to be able to convey over the course of the conference. Also, this fall, I was lucky enough to attend the School for Ethics and Global Leadership in London, a semester school that teaches students from across the country leadership skills, critical thinking, and ethical decision making, all areas in which I am sure you delegates are well-versed. I cannot wait to see what resolutions you come up with, what insightful comments you make, and, most importantly, how you will all work together to tackle this issue.

Charlie Hamblet '26

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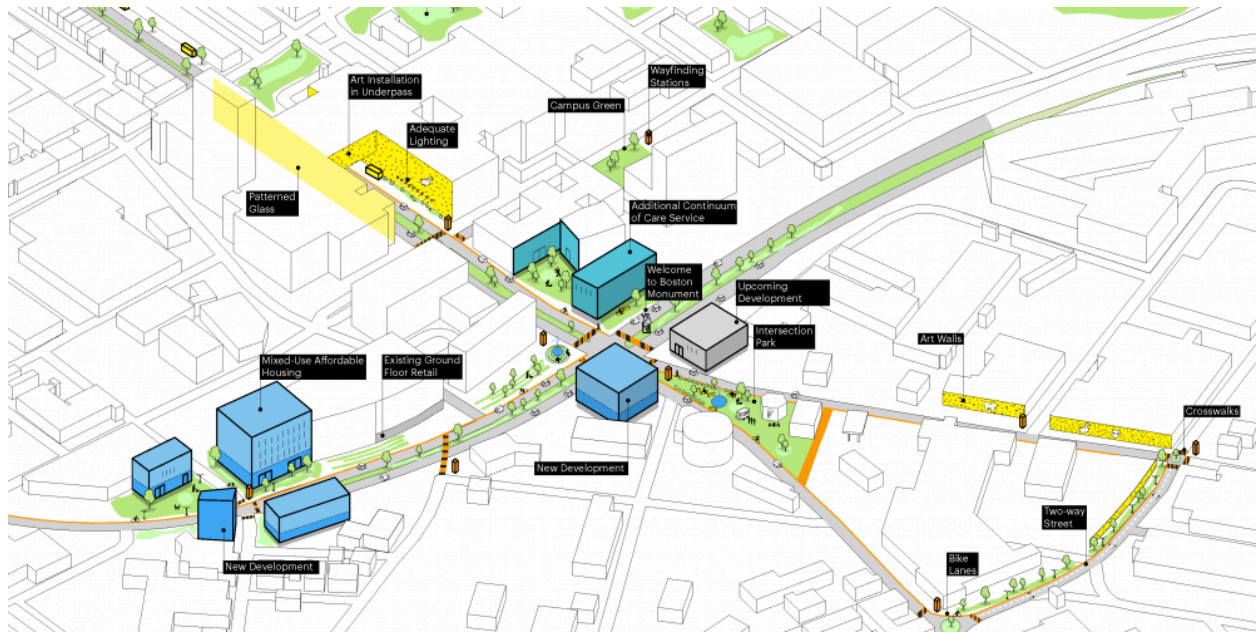


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Mass and Cass: Drug Addiction and Homelessness Crisis

Introduction

- a. The Massachusetts Avenue and Melnea Cass Boulevard area in Boston, colloquially referred to as “Mass & Cass” or “Methadone Mile,” epitomizes the complex and interrelated crises of homelessness, substance use disorders (SUDs), and public health. This urban hotspot serves as a microcosm of broader societal challenges, where rising housing costs, systemic inequities, and inadequate mental health resources converge to create a humanitarian crisis. The prevalence of open drug use, tent encampments, and strained community relations demands comprehensive, multi-sectoral response.

Delegates tasked with addressing the crisis must consider the underlying causes, assess current policies, and propose innovative solutions that reconcile the rights and dignity of unhoused individuals with the legitimate concerns of local residents and businesses. Drawing from international best practices and evidence-based strategies, this guide provides a detailed



overview of the Mass and Cass crisis and offers a foundation for meaningful policy deliberations.

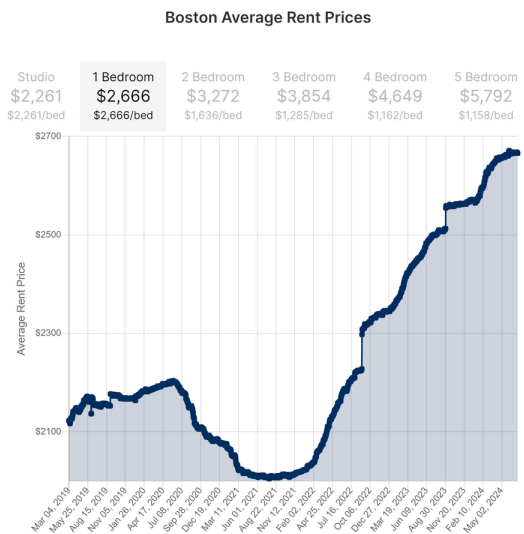
An encampment of tents and shelters lined Atkinson Street in the area known as Mass. and Cass
(*Boston Globe*, 25 Aug. 2023)

Historical Context and Current Situation

Boston's homelessness and substance use crisis has deep roots in systemic economic, social, and public health challenges. Key historical factors include:

- **The Opioid Epidemic:** The introduction of prescription opioids in the 1990s, followed by the proliferation of illicit drugs like fentanyl, has had devastating effects nationwide. Massachusetts has consistently ranked among the states hardest hit by opioid overdose deaths (Massachusetts Department of Public Health, 2023).
- **Affordable Housing Shortages:** Boston's housing market is among the most expensive in the United States. A 2023 study by the Joint Center for Housing Studies at Harvard University revealed that over 50% of renters in Boston are cost-burdened, spending more than 30% of their income on housing.
- **Mental Health Care Gaps:** Deinstitutionalization in the mid-20th century reduced inpatient mental health care capacity without sufficient investment in community-based services. This has left many individuals with untreated mental health conditions living on the streets.

As of 2023, Massachusetts reported over 18,000 individuals experiencing homelessness, with Boston accounting for a significant proportion. The Mass and Cass area has become a visible concentration point for these challenges, with a sharp rise in tent encampments and public drug use creating public health and safety concerns.



Courtesy of Boston Pads.

Key Issues and Challenges

Housing Insecurity

- **Skyrocketing Costs:** A lack of affordable housing is a principal driver of homelessness in Boston. The median rent for a one-bedroom apartment in Boston is \$2,800 as of 2024 (Zillow, 2024).
- **Limited Transitional Housing:** Emergency shelters and transitional housing options remain insufficient, leading to prolonged street homelessness.

Substance Use Disorders (SUDs)

- **Opioid Overdose Crisis:** Opioid-related deaths in Massachusetts rose by 8.8% in 2023, with fentanyl involved in 93% of cases (Massachusetts Department of Public Health, 2023).
- **Barriers to Treatment:** Despite the availability of evidence-based treatments like medication-assisted treatment (MAT), stigma, logistical barriers, and insufficient program capacity hinder access.

Mental Health Challenges

- **High Prevalence of Co-occurring Disorders:** Approximately 30-50% of individuals experiencing homelessness have both a mental health condition and a substance use disorder (National Alliance to End Homelessness, 2023).
- **Service Fragmentation:** A lack of integrated care models means many individuals receive disjointed treatment, if any at all.

General Health Challenges

- **People experiencing homelessness are increasingly likely to contract Covid 19.** Estimated contraction of the virus is 35 percent. (National Institute of Health).

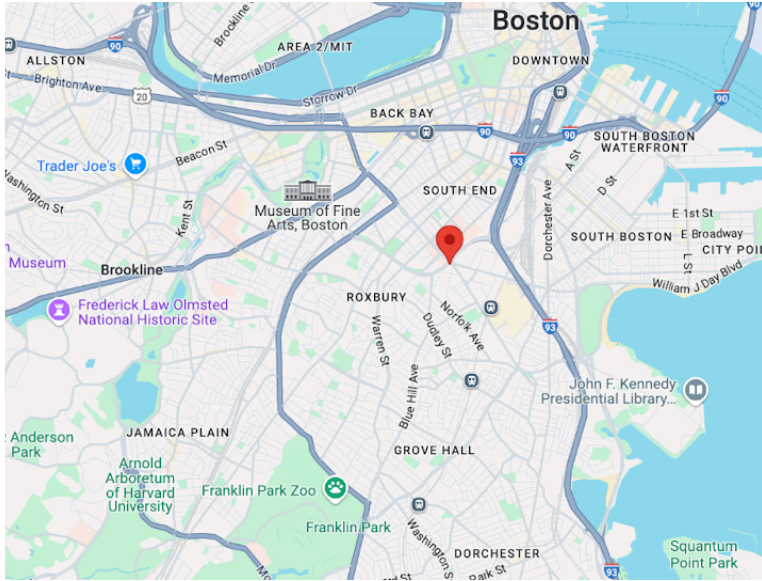
- Contraction of HIV is 3.84 times higher in unhoused populations compared to the average. (National institute of public health)
- Lack of separation: Due to the lack of area given to homeless encampments, the areas become cramped and overcrowded. This allows for diseases like Covid-19 to spread quickly

Public Safety and Urban Impact

- Community and Business Concerns: Rising crime rates, public health hazards, and the strain on local infrastructure have fueled tensions between community members, businesses, and the unhoused population.
- Encampment Evictions: Sweeps of tent encampments often displace individuals without addressing root causes, perpetuating cycles of homelessness and addiction.



The tent encampment on Atkinson Street, Jan 2022



Location of Mass and Cass on a map in the City of Boston

Potential Solutions and International Best Practices

1.) Housing-First Policies

- Case Study: Finland's Housing-First Model: Finland has nearly eradicated street homelessness by providing permanent housing without preconditions.
- Wraparound support services, including mental health care and job training, ensure stability (Housing First Europe Hub, 2023).
- Applicability to Boston: Expanding housing-first initiatives in Boston could address the root causes of homelessness while reducing the burden on emergency shelters and hospitals.

2.) Harm Reduction and Public Health Strategies

- Supervised Consumption Sites: Vancouver's Insite program, North America's first legal supervised injection



site, has significantly reduced overdose deaths and HIV transmission (British Columbia Centre for Disease Control, 2022).

Legal supervised injection site, Vancouver Canada

- Decriminalization and Treatment Access: Portugal's decriminalization of drug possession, coupled with robust treatment programs, has halved overdose deaths and reduced drug-related crime (Transform Drug Policy Foundation, 2021).

3.) Integrated Care Models

- One-Stop Centers: Co-locating addiction treatment, mental health care, and primary health services can improve accessibility and coordination of care. For example, Montreal's Old Brewery Mission successfully combines housing and healthcare services for vulnerable populations.
- Mobile Outreach Teams: Deploying multi-disciplinary teams to provide on-the-spot care can bridge gaps for those reluctant to seek help in institutional settings.

4.) Collaborative Governance and Funding

- Public-Private Partnerships: Partnerships between governments, non-profits, and private sector stakeholders can leverage diverse resources. For instance, Denver's Social Impact Bond program funds housing and support services for chronically homeless individuals while reducing taxpayer costs.
- Community Engagement: Involving local residents and businesses in policymaking fosters trust and ensures that solutions address diverse perspectives.

- The District of Columbia is currently considering a bill that would institute a tax on 7 figure employers. All of the revenue from this tax would go towards a community housing fund.

Conclusion

The Mass and Cass crisis reflects the intersection of multiple systemic challenges, including homelessness, addiction, and urban inequity. Solving this crisis will require bold, collaborative approaches that prioritize human dignity while addressing immediate public safety concerns. By learning from international best practices and fostering multi-sectoral cooperation, Boston has the opportunity to lead by example in creating sustainable, humane solutions for some of its most vulnerable residents.

Guiding Questions for Delegates

1. How can Boston adapt successful housing-first models from other cities to its unique socio economic and political landscape?
2. What are the most cost-effective public health interventions to reduce overdose deaths and improve long-term outcomes for individuals with SUDs?
3. How can policymakers ensure that public safety measures respect the rights and dignity of unhoused individuals while addressing legitimate community concerns?
4. What role should private sector stakeholders play in funding and implementing solutions to the Mass and Cass crisis?



A theme to keep in mind: respect the dignity of those affected by drug addiction. Sep 2021

Positions

People

1. Michelle Wu, Mayor of Boston
2. Martin Walsh, ex-mayor of Boston
3. Maureen Weaver, Esq. Board Chairperson, Boston Continuum of Care:
4. Boston Public Health Commission: Includes the Homeless Services Bureau and the Recovery Services Bureau - Bisola Ojikutu MD MPH
5. Dr. Alastair Bell, MD, MBA Boston Medical Center: Invests in community partnerships to provide access to affordable housing

6. Stan McLaren Boston Health Care for the Homeless Program (BHCHP): Provides access to health care for people experiencing homelessness -
7. Tania del Rio, Boston City Coordinated Response Team (CRT): Works to improve services for people experiencing homelessness and substance use disorder -
8. Sheila Dillon, Mayor's Office of Housing: Provides transitional and permanent housing resources
9. Shin-pei Tsay, Mayor's Office of New Urban Mechanics: Supports new approaches to government and civic life
10. Luc Schuster, Executive Director Boston Indicators: A research arm of the Boston Foundation that studies homelessness in the region
11. Nancy Cooper, Executive Director, Lend A Hand Society: Provides a comprehensive look at homelessness in Boston
12. Michael Dennehy'87, Public Works Department: Provides sanitation services
13. Paul F. Burke, Boston Fire Department: Provides fire prevention and control, and overdose response
14. Arthur DePinho, Boston Police Department Street Outreach Unit: Provides client engagement and law enforcement
15. Michael A. Cox, Boston Police Chief
16. James Hooley, Boston EMS Chief
17. Karen LaFrazia, St. Francis House
18. Dr. Anthony Hollenberg, Yawkey Center at BMC
19. John Yazwinski, Fr. Bill's Quincy
20. Jay D. Livingstone, State Representative from Back Bay

21. Nick Collins, State Representative from Dorchester
22. Governor Maura Healy of Massachusetts
23. Ex-governor Charlie Baker of Massachusetts
24. Danielle Johnson, Office of Housing Stability
25. Kevin Hayden, Suffolk County District Attorney

Delegates are *encouraged and expected* to integrate aspects from multiple positions to develop innovative, holistic solutions all while respecting and honoring the dignity of the homeless community.

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