Commission on Disability Meeting
Minutes for February 20th, 2018, 4:30PM
Worcester Historical Museum
30 Elm Street
Worcester, MA 01609

Attendance:

Members Absent: Elizabeth Myska, Lindsey Silva

Staff: Dawn E. Clark

Guests: Dr. Mattie Castiel, Commissioner of Worcester Health & Human Services; Susan Ceccacci, Preservation Worcester

Welcome, Call to Order & Introductions
Chairperson Prochilo introduced William Wallace, Executive Director of the Worcester Historical Museum. Mr. Wallace welcomed the Commission to the museum saying “this is the story of all of us and we hope you will find yourself in this museum. If you don’t you will ask yourself why not and you will come and ask questions about Worcester. This museum is for all of us.”

The Chairperson called the meeting to order. Commissioners introduced themselves. Steve Stolberg was raise to full member for this meeting.

Approval of January 16th, 2018 Minutes
Commissioner Garr-Colzie moved approval and Commissioner Keister seconded the motion. The Commission unanimously approved the January 16th, 2018 minutes as written.

Cut in WRTA Service
Commissioner Keister raised the issue that WRTA was planning to significantly cut back on service including Saturdays and would hinder his getting around. Associate
Commissioner Gleason said there is a demonstration being planned outside City Hall on March 2th to oppose the cut backs. Staff noted WRTA will be having a series of hearings at which time the Commission may want to comment.

**Planning for COD 40th anniversary celebration (D. Karuna)**
Associate Commissioner Karuna shared the composite of Commissioners thoughts on the Commission’s 40th Anniversary Celebration Event. The preferred site is Union Station on a Saturday in October (excluding Columbus Day Weekend) with components such as a power point, speaker(s), historic timeline and significant achievements. Easels and conversations around the room with tables with local and state allies would provide education and reminiscing of the past activities and future opportunities. Entertainment and food were high on the list.

The Commission agreed on the time for the event to be 12 noon to 3PM

A three member ad hoc Celebration Committee was suggested: D. Karuna, John Gleason and Steve Stolberg volunteered.

Nancy Garr-Colzie and John Gleason volunteered to be greeters.

**Art Week**
Jack Peacock spoke about Art Week on behalf of Commissioner Elizabeth Myska who was unable to attend. Art Week is April 29th thru May 5th, 2018 and is statewide. There are a number of activities planned in the Southern Worcester area and Commissioner Myska and Mr. Peacock are working to have an activity at Elm Park and invite the Commission to sponsor an activity at the venue. Working with Representative Mary Keefe, they were thinking of having a mobility walk along Elm Street on May 5th from 1-3PM with information about the historic architecture along the way. The Commission may want to do a walk/stroll from Pleasant Street to Elm Street and join the walk down Elm Street at 1:00PM

There will be people painting in Elm Park all week to be available on Saturday for people to view in the Park.

The Chairperson will scout out the possibility of doing a mobility walk/stroll between Pleasant and Elm Streets starting at noon on Saturday May 5th.

**Opiate presentation (Dr. Mattie Castiel)**
Dr. Mattie Castiel is the City’s Commissioner of Health and Human Services. Dr. Castiel worked with a power-point as she gave her presentation. One of the activities she has been working on is the opiate epidemic in the city. She has been making educational presentations for the community to explain the problem of addiction. Often people believe that people become addicted because they want to, and if they wanted to stop, they could. She began by showing how the brain works as it relates to addiction and the physiology behind addiction which makes stopping the drug very hard to do. A survey of the group showed all of us know someone who had an addiction.

Often, we see police or fire personnel helping a young person on the street who has overdosed but we don’t realize that person started to use drugs as a kid. Addiction is a childhood disease. One of the things that happens when a person uses cigarettes, alcohol or marijuana is that it re-wires the brain and it affects the reward pathways of the brain and the prefrontal cortex. The prefrontal cortex does not fully develop till the age of 25. It’s the reason why these drugs (alcohol, cigarettes and marijuana) cause changes in young brains and predisposes them to addiction. The pre-frontal brain is where decisions are made, and this is where impulsivity and inability to properly cope with situations take place.

The brain produces the chemical dopamine through the reward pathway of the brain. A normal baseline level of dopamine is 80. One wakes up in the morning and feels ready to go to work when they have a normal dopamine level. If the dopamine level was at 50, one would not feel like going to work. When someone is withdrawing from drugs their dopamine level is around 20 after using drugs for a while. Therefore, they want to continue to use drugs because they need to get their dopamine level to a normal level, but then it quickly drops again. Therefore, they are constantly looking for their next fix.

When one eats one feels better and the dopamine is elevated and if one eats a donut the level would go to 100 for example. In people who use Cocaine, the level of dopamine goes to 350. Remember the base line is 80. Heroin can reach 800 and amphetamines can go as high as 1200. This is why people use drugs. It makes them feel good.

When someone overdoses they have taken too much of the drug and in the case of opiates it stops their respiration and they need to be reversed with the drug Narcan. When they come to after they were given Narcan, their dopamine level is 20. At 20
one cannot move or think. So, when that person is in the emergency room the staff does not help them find treatment, and they give the person a card with places the person can go for help. What they are missing is if their dopamine level is 20 they are not capable of doing that, just like at 50 we don’t feel well and may decide not to go to work. This is the time they can give them medically assisted treatment with suboxone and get them into treatment as either an inpatient or outpatient treatment. Suboxone replaces their dopamine that they are lacking.

We know that addiction has been stigmatized. Physicians find it difficult to provide care. In the mental health field there is a shortage of people to provide treatment because of decreased reimbursements, and for physicians they find the patients difficult and therefore would not like to treat patients who are suffering with addiction.

How does one become addicted? Remember addiction is a childhood disease. There are three predisposing predictors to addiction: trauma and how it is dealt with; genetics often family addiction is not routinely asked by physicians (50% chance of being passed on to children.); and use of drugs, at a young age.

In 1990 a study of 17,000 people was surveyed for adverse childhood experiences. In a study done at Kaiser Permanente in California, people were asked if they had suffered with family divorce, abuse, neglect incarceration, suicide, depression just to name a few.

The results are as follows:

<table>
<thead>
<tr>
<th>Household dysfunction</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse</td>
<td>27%</td>
</tr>
<tr>
<td>Partial separation/divorce</td>
<td>23%</td>
</tr>
<tr>
<td>Mental illness</td>
<td>17%</td>
</tr>
<tr>
<td>Battered mother</td>
<td>13%</td>
</tr>
<tr>
<td>Criminal behavior</td>
<td>06%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abuse</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological</td>
<td>11%</td>
</tr>
<tr>
<td>Physical</td>
<td>20%</td>
</tr>
<tr>
<td>Sexual</td>
<td>21%</td>
</tr>
</tbody>
</table>
Neglect  
  Emotional  - 15%  
  Physical  - 10%

What they showed is that most families have at least 1ACE’s and it doesn’t matter what race, where you live, or what income. Although increased poverty is associated with increased ACE’s.

The following is an example of adverse childhood experiences (ACE):  
A male child with an ACE score of 6 when compared to a male child with an ACE score of 0, has a 46-fold (3,600%) increase in the likelihood of becoming an injection drug user sometime later in life.

Likelihood of Future Diseases:
- Chronic pulmonary lung disease increases 390 percent
- Hepatitis, 240 percent
- Depression, 460 percent
- Suicide, 1,220 percent

Nearly two-thirds of adults have at least one ACE. Though there is relatively little difference in moderate levels of ACE exposure by income, prevalence of 4+ ACEs in low income populations is substantially greater.

Considering how alcohol affects the brains of teens, 40% of teens who begin drinking at the age of 15 will become alcoholics. Why? - because alcohol will rewire the brain. 7% who begin drinking at 21 will become alcoholics.

Treatment of mental health is of utmost importance. 53% of those using and receiving treatment are not getting the mental health services they need for depression, anxiety, trauma etc. Of 1.6 million people who are addicts only 21% receive treatment. Imagine if these people accessed treatment, we don’t have the infrastructure to provide treatment for all.

One of the projects we did in Worcester in 2015 was a needle exchange program with Aids Project Worcester. This was a way to make contact with the person who is suffering with addiction. The idea is if you bring your used syringes and they will give you a new syringe. This exchange not only brings
the person in contact with a provider but also helps in preventing Hepatitis and HIV. After a while the hope is that trust will be built because of the contact. The Massachusetts Medical Society wants to start a safe injection site with qualified people watching the people injecting themselves so that if there is a problem help there are people to assist and provide Narcan. This treatment process happens in Europe and Canada and is supported by Dr. Castiel, although she feels we have a lot to do before that and that is to get physicians to start treating patients with addiction. We have the medicines for it and the treatment we just need to start using it. At present only 3% of the physicians are certified to give these medications and we need everyone to be trained to do it. This training is an 8-hour certification. Fear of the new has always been with us. We did not know much about HIV, but we learned how to take care of these patient. We need to do the same for addiction.

Addiction is nothing new. It has been happening for many years. Fentanyl now is causing people to overdose. We need to understand that mental health disease is one of the causes and we need to start treating early for this. Mental health services are needed. We need to bring this information and services into the schools.

She shared Worcester data as follows: at age 8 children starting using marijuana, cigarettes, alcohol and peaks at age 13. There is a more potent component of marijuana called THC on the streets today and it is marketed to kids as brownies, candies etc. This is even more worrisome now that we have legalized marijuana.

Dr. Castiel asked that the Commission members remember what she said. “Addiction is a childhood disease” and introduced Nicole Bell –wife, mother and person in recovery. Ms. Bell shared her story as a recovering alcoholic, beginning with trauma in childhood and her experience with addiction, prostitution, human trafficking and rehab. She provides encouragement and support for the addicted community.

Chairperson thanked Dr. Castiel for her informative presentation and Ms. Bell for sharing her story and wished her the best as she continues her recovery.
Invitation from Susan Ceccacci (Preservation Worcester) for collaboration with Jane Week 4/29/18

Susan Ceccacci, Education Director at Preservation Worcester was introduced. She explained that Preservation Worcester is one of multiple groups involved with Jane Week (April 29th thru May 5th, 2018). Jane Week is named after Jane Jacobs, a New York City urban planner who believed a healthy urban environment takes everyone to be involved in their city. The purpose of this year’s Worcester Jane Week is to introduce Worcester - its ability to be a community, its urbaneness and to enjoy the joys of living in the city. This means getting to know neighbors, walking, biking, knowing what is going on in the neighborhoods.

Plans include a walk with each district Counselor in their district informing participants about what is happening in the district. Quinsigamond Village has been chosen as the focus neighborhood where much of the activity will occur. For example there will be a bike ride from Worcester center to the Village sponsored by Walk Bike Ride Worcester, the District Councilor with be doing a walk pointing out what is happening in the neighborhood, Preservation Worcester will be doing a walk emphasizing the neighborhood’s architecture.

Ms. Ceccacci invited the Commission to suggest activities/ways that people with disabilities could be included in Worcester’s Jane Week.

Earlier this evening the Commission heard about Art Week which is the same week as Jane Week. We know there is a White Cane Walk and we are considering a Wheelchair Stroll form Pleasant to Elm Street joining up with the White Cane Walk down Elm Street.

Commissioner Gar-Colzie asked if a modified mobility walk could be done and delay the planned spring walk to August?

Ms. Ceccacci will send the date by which all Jane Week activity would need to be published. The Chairperson thanked Ms. Ceccacci.

Update on Accessible Transportation Initiative

Commissioner Bilotta informed the Commission the REDD group and Easter Seals have met twice working to see additional accessible transportation options available to people with disabilities in the city. They have met with State Representative James O’Day and it is felt the time has come to meet with WRTA about options and
suggestions particularly a pilot program with Uber like Uber has with MBTA. Commissioner Bureau suggested a member of this Commission be part of this Committee. Commissioner Bilotta and Associate Commissioner Stolberg already attend these meetings. Commission Bilotta did not have specific wording for a motion, he did offer a general motion that the Commission send a statement of support for additional accessible transportation options for Worcester’s disabled population when appropriate. Commissioner Bureau seconded the motion. All approved.

**Recommendation for sidewalk snow ordinance**
The current ordinance does not include snow removal for the split-level sidewalks. The Commission voted unanimously to advise the City Manager that the Snow Ordinance needs to be changed to include removal of snow and ice from city split-level sidewalks.

**Announcement: Spring wheelchair stroll**
The chairperson explained that he planned three strolls Between May and September 2018:

1. North Worcester-West Boylston Street (Wild Willy’s and Shaw’s Grocery)
2. Grafton Hall (St. Stephen to Union Station)
3. Vernon Hill (old St. V’s hospital to Kelley Square).

He would have to review the area between Pleasant and Elm Streets. This would make four walks this year.

**Election for Vice Chairperson**
Commissioner Bilotta has resigned. No one was nominated. This item was tabled to the March meeting.

**Notice: MOD ADA Municipal Grant FY18 - Worcester proposal not funded**
The City’s proposal for funding for the Stearns Tavern was not selected for funding.

**Review of AAB notices and applications:**
Notice of Hearings: 486 Chandler Street, Docket # V17 302
Decision of the Board: 551 Main Street, Docket # V18 004; 52 High Street, Docket # V08 128; 64 – 72 Water Street, Docket # V18 012
Suggestions for upcoming agenda items
Coes Pond Task Force has acquired a beach chair for Coes Pond Beach. They would like the Commission on Disability to participate in a dedication of the chair.

Announcements:
WRTA Transportation Planning Advisory Meeting: March 21th, 2018, 1-2:30pm, WRTA HUB, 60 Foster Street
REDD (Rights, Equality and Dignity for the Disabled) March 6th, 2018, 4:00 – 5:30PM, YWCA, Members Lounge
Audio Journal, Accent on Ability Radio Program: March 8th, 2018, 5-6pm, http://www.audiojournal.net/
Emergency Preparedness Meeting: May 9th, 2018 at 9:00 am at 2 Coppage Drive.
Next Commission on Disability meeting: March 20th, 2018 4:30pm.

Adjournment
The meeting was adjourned.