

August 23, 2018

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Dear Secretary,

I write you today, as the Executive Director of the Newmarket Business Association, representing over 200 business owners and 20,000 employees working in the Newmarket District of Boston.

Newmarket is truly the face of a crisis out of control. There are dozens of people standing on our street corners trading pills, shooting up heroin, and panhandling passersby. There are drug dealers populating our restaurants and street corners and on any given day, there are tremendously impaired individuals, falling into the street or swaying into traffic. MANY OF THESE INDIVIDUALS HAVE SOUGHT LONG TERM RECOVERY...SADLY THERE IS A SEVERE SHORTAGE OF LONG-TERM TREATMENT BEDS IN THE COMMONWEALTH. THIS HAS TO CHANGE!

Our goal is the growth of recovery treatment services in Boston and the Commonwealth of Massachusetts commensurate with the magnitude of the current opioid crisis and to create a recovery atmosphere of dignity and respect for those suffering from addiction that focuses not only on recovery but also on long term stability.

Our current quantity and breadth of addiction services is not enough to handle the crisis of addiction that we are faced with in the Commonwealth. We need to create a more holistic approach surrounding the treatment of the addicted by providing a safe environment in which they can manage their health, work to overcome addiction, and manage any mental illness.

Boston Mayor Martin Walsh has proposed, and the 200+ business owners who are members of the Newmarket Business Association support, a state-of-the-art comprehensive treatment facility on Long Island in Boston Harbor.

After a thorough examination of potential sites, we are completely convinced that this facility should be developed on Long Island, where there is currently significant infrastructure and buildings in place, available land for expansion, and the clearest pathway for the addicted to thrive in treatment without outside distractions and temptations.

The question becomes, how do we transport individuals to the island? The ONLY logical answer is by rebuilding the bridge from Squantum (Quincy) MA to Long Island. While a costly venture, it is LOGICALLY the best choice by far.

Quincy city officials would like us to believe that running ferries over to Long Island is the answer instead of rebuilding the bridge. This is truly an example of the "Not In My Backyard" mentality that has led to the warehousing of the addicted in certain areas that we deal with today.

The Newmarket District is ground zero for the opioid epidemic in Boston today. It did not become that way overnight. It did, however, become that way because communities, like Quincy, refused to do their part to combat the issue, have treated it as a stigma and pushed their addicted to Boston.

## Utilizing ferries as the sole means of accessing Long Island just makes no LOGICAL sense.

- 1. The success of treatment programs is contingent on the ability to get those who are ready to recover to a facility as seamlessly and quickly as possible. The idea of transporting them first to a bus for the ride to the ferry terminal and then onto a ferry for another trip to the Island, (particularly when they are in various states of mind) is like a doctor telling someone addicted to cigarettes to go home and throw them out but it's okay to run some errands for a couple hours first. The chance of changing your mind or getting persuaded not to give them up becomes that much greater with each stop.
- 2. The City of Boston has determined that developing, operating, and maintaining suitable facilities to support sole access ferry service to the public health recovery campus on Long Island would not only be detrimental to the overall operational success of the facility but that it would also come at a MUCH HIGHER COST in the long-term analysis than the cost of rebuilding the bridge.
  - a. On a life cycle basis, ferry service was determined by Boston to be significantly more expensive than bridge superstructure replacement when capital cost of vessels; other equipment; siting, development and operation of ferry ports; around the clock ferry staffing; and maintenance are considered during the expected 75-year lifetime of the restored Bridge.
- 3. Use of the ferries would have significant environmental impacts that far outweigh any impacts brought about by rebuilding the Long Island bridge.
  - a. New docking facilities would be needed both on Long Island and on the mainland. Each docking facility would need to be adequately sized to accommodate a ferry capable of transporting all vehicle types needed to support public health recovery campus operations.
  - b. The docking facilities would require dredging on an ongoing basis to support safe operations, and would also require development and operation of parking, roadway access and utility services.
  - c. Operation of a ferry service across Boston Harbor would also create air and greenhouse gas emissions for the life of the service.
  - d. Boston has designed an approach to replacing the Long Island Bridge superstructure that uses barges to float bridge spans into place on the existing bridge piers and abutments. This approach will have only very limited environmental or community impacts.
- 4. In addition to the above reasons that solely utilizing ferries for transportation to/from the Long Island facility, weather or other considerations would from time to time prevent navigation and therefore patients and staff would occasionally be unable to get to a hospital on the mainland during a health emergency. Delivery of needed supplies or transport of patients to or from the public health recovery campus could also be interrupted during extended bad weather events such as hurricanes, blizzards, or extreme cold.

## IN OUR VIEW, IT IS IMPERATIVE THAT THE BRIDGE TO LONG ISLAND BE REBUILT AS SOON AS POSSIBLE.

We need to stem the tide of this addiction crisis in Massachusetts and the rebuilding of this bridge is a CRITICAL first step!

Addiction in the Commonwealth today, affects EVERYONE. We have seen the exponential increase in addiction and addiction related deaths over the past few years. We need to reverse this process. REBUILDING THE BRIDGE is not the solution to stopping addiction from happening, however, it is the conduit by which we can insure that those who are addicted have the best chance at recovery.

If you have any questions, please contact me at 617-233-7565.

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Susan L. Sullivan Executive Director