May 30, 2017

Hon. Corey Johnson
New York City Councilmember
224 West 30th Street, #1206
New York, NY 10001

Dear Council Member Johnson:

I write regarding recent news that the largest share of City funding for Mayor Bill de Blasio’s new initiative to combat the opioid epidemic, HealingNYC, is slated to be allocated to the New York Police Department (NYPD).¹ I respectfully request that the New York City Council Committee on Health hold a public hearing on this funding allocation as well as the City’s attempt to pair a public health approach to problematic drug use with increasingly aggressive law enforcement tactics.

As Chair of the Committee on Health, you have been a leader in the fight to protect the health and wellbeing of New York City’s most vulnerable residents, most notably those in our jails on Rikers Island. You have also taken this city forward with funding for the Department of Health and Mental Hygiene to study safe injection facilities for intravenous drug users.

The opioid epidemic is among the most deadly forces in our city today, warranting a strong response from policymakers. I appreciate that Mayor de Blasio is spearheading an effort to expand the use of life-saving naloxone kits and medication-assisted treatment, as well as other important initiatives to reduce the stigma of addiction and mental illness. However, I am concerned this important work could be undermined by regressive law enforcement strategies that further marginalize, stigmatize and ultimately criminalize the very people the Administration seeks to support. Indeed, earlier this week, Crain’s reported that “nearly half of the $143.7 million budgeted for HealingNYC through fiscal year 2021 will go to the NYPD, mostly to step

up arrests of drug dealers.” Much of the funding provided to the police will reportedly be used to investigate overdoses with the goal of bringing criminal charges against people alleged to have supplied the drugs.2

There is a growing recognition among policymakers of all parties, many of whom may struggle with addiction themselves or have friends or family members who struggle with addiction, that criminalization is an ineffective and, in fact, often very dangerous approach to drugs. These dangers are only heightened as police and prosecutors here and across the country pursue homicide-like charges or other very serious charges against alleged suppliers when overdoses do occur. Among many other serious risks, experts have noted that increased enforcement can discourage people who witness overdoses from calling 911 because suppliers are often close acquaintances and may even be the witnesses, themselves.

Even if a greater investment in law enforcement efforts against suppliers were an effective approach, the Council should consider whether it makes sense for those funds to come from HealingNYC or rather be diverted from other NYPD functions. For example, the most common drug arrest charge in 2016 was low-level marijuana possession, with 18,136 arrests. The disproportionate impact of these arrests aggravates racial and economic inequality in our society, undermines trust in our criminal legal system, and contravenes the beliefs of the majority of Americans (60 percent), who support full legalization of marijuana.3 Moreover, research funded by the National Institute on Drug Abuse found that legally protected marijuana dispensaries were associated with reductions of 16 to 31 percent in opioid overdose deaths.4 (HealingNYC seeks to reduce opioid deaths by 35 percent over the next 5 years.) Other experts have argued that the criminalization of marijuana led to the over-prescription and over-use of opioids and eventually the epidemic that we are struggling to address today. Simply put, marijuana seems to be a safer alternative to opioids in pain management, but criminalization undercuts that benefit.

At the Committee on Public Safety’s Executive Budget hearing on Monday, NYPD Chief of Detectives Robert Boyce said of the Department’s response to the epidemic: “Our focus is not on the individual addict. Our focus is on the street level as well as interdictions coming into the country.” Arrest data provided by the New York State Division of Criminal Justice Services does not support this statement. After low-level marijuana possession, the next most common NYPD drug arrest charge, or fifth most common arrest overall, in 2016 was low-level non-marijuana drug possession, or Criminal Possession of a Controlled Substance in the 7th Degree, with 16,630 arrests. The most common drug sale arrest charge was Criminal Sale of a Controlled Substance in the 3rd Degree, with 5,628 arrests, or approximately one-sixth of the number of low-level drug possession arrests.

We believe a public hearing on this critical subject would help to evaluate the efficacy of the different components of HealingNYC and facilitate greater transparency and accountability in our City’s overall approach to drug use.

2 Ibid.
Because City administration and agency officials generally are permitted to testify first at Council hearings, I ask in advance that the Council request testimony from NYPD with research to support the use of scarce public funds to disrupt the supply chain of heroin, fentanyl or other drugs.

Thank you for your consideration of my request.

Sincerely,

Lisa Schreibaerdorf
Executive Director
Brooklyn Defender Services