



# Drugs and Crime

## City Profile

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U. S. D E P A R T M E N T O F J U S T I C E



Photo:NDIC

# New York

## Overview

Cocaine and heroin pose the greatest drug threats to New York City. Marijuana distribution and abuse are widespread. MDMA is one of the fastest-growing drug threats to the city. Other club drugs and diverted pharmaceuticals pose significantly lesser threats than most other illicit drugs. The methamphetamine threat to New York City is negligible.

New York City serves as a national transportation hub for many illicit drugs. Most of the cocaine, heroin, marijuana, and MDMA available in New York City are smuggled into the city either directly from drug source countries or indirectly through transit countries in Latin America, Europe, and the Caribbean. Large quantities of cocaine often are transported into New York City overland in commercial and private vehicles. However, significant quantities of cocaine also are smuggled aboard maritime vessels and on commercial aircraft from source and transit countries. Couriers aboard commercial aircraft smuggle most of the heroin and MDMA that is available in the city. Marijuana typically is transported from southwestern states

## Fast Facts

<b>Population</b>	8,008,278 residents 1,940,269 residents under 18 years of age 312,600 single-parent households
<b>Land area</b>	303 square miles
<b>Boroughs</b>	Brooklyn, Bronx, Queens, Manhattan, and Staten Island
<b>Interstate highways</b>	87, 95, 278, 295, 478, 495, 678, and 695
<b>Major airports</b>	John F. Kennedy (JFK) and La Guardia
<b>Major seaports</b>	The Port of New York/New Jersey
<b>Rail service</b>	Passenger: Amtrak (Pennsylvania Station is the East Coast hub) Freight: Norfolk Southern and CSX
<b>Mayor</b>	Michael R. Bloomberg
<b>Police Commissioner</b>	Raymond W. Kelly

and Florida in private vehicles and trucks, via package delivery services, and by couriers or in cargo shipments on commercial aircraft. Pharmaceuticals generally are obtained within the state through diversion techniques including improper prescribing practices, prescription forgery, and doctor shopping (visiting numerous doctors to obtain multiple prescriptions).

Colombian, Dominican, and Mexican drug trafficking organizations (DTOs) and criminal groups are the primary transporters of cocaine into New York City. Colombian and Dominican DTOs and criminal groups are the dominant wholesale-level distributors of powdered cocaine within the city, while Dominican DTOs and criminal groups and African American, Jamaican, and Puerto Rican criminal groups are the dominant wholesale-level distributors of crack. Colombian DTOs and criminal groups control the transportation of South American heroin into New York City and are the dominant wholesale-level distributors. They increasingly rely on Dominican DTOs and criminal groups and occasionally Mexican criminal groups to transport South American heroin into the city. Dominican criminal groups are the dominant retail-level distributors of cocaine and heroin. Jamaican criminal groups are the most prominent transporters as well as wholesale- and retail-level distributors of marijuana in New York City; however, no specific organization or group controls the transportation or distribution of marijuana. Israeli and Russian DTOs and criminal groups control the smuggling of MDMA into the city. These DTOs and criminal groups as well as Colombian and Dominican DTOs and criminal groups, Eastern European and Asian criminal groups, members of traditional organized crime, and outlaw motorcycle gangs (OMGs) distribute wholesale quantities of MDMA in New York City. Various criminal groups and local independent dealers distribute retail quantities of MDMA in the city. Caucasian local independent dealers are the primary distributors of LSD, GHB and its analogs, ketamine, and diverted pharmaceuticals in New York City.

## Drug Abuse Indicators

The adverse consequences of illicit drug abuse in New York City are significant. According to the New York State Office of Alcoholism and Substance Abuse Services (OASAS), there were 134,287 treatment admissions to alcoholism and substance abuse treatment facilities in New York City in 2000, the most recent year for which these data are available. Approximately 75 percent of these admissions were male. Over 44 percent of the admissions were African American; 33 percent were Hispanic; and over 20 percent were Caucasian. Nearly 62 percent of the admissions involved individuals aged 35 or older. Drug Abuse Warning Network (DAWN) data indicate that there were 52,055 drug-related emergency department (ED) mentions in the New York metropolitan area in 2001, the most recent data available. The rate of drug-related ED mentions (623 per 100,000 population) in the New York metropolitan area was higher than the national rate (460 per 100,000 population) that year. DAWN mortality data indicate that there were 924 drug deaths in the New York metropolitan area in 2000, the most recent data available. Of these, 713 were drug-induced (overdoses). Arrestee Drug Abuse Monitoring (ADAM) Program data indicate that 79.9 percent of adult male arrestees in New York City tested positive for abusing at least one illicit substance in 2000, the most recent data available.

## Cocaine

The distribution and abuse of cocaine, both powdered and crack, pose the greatest drug threat to New York City. More ED mentions, deaths, and federal sentences are associated with cocaine than with any other illicit drug. Further, crack cocaine is the drug most often associated with violent crime in New York City.

Treatment, ED, mortality, and arrestee data indicate that cocaine commonly is abused in New York City. The total number of primary cocaine admissions to state-funded and nonfunded treatment programs in New York City remained high but decreased 12

percent from 15,913 in 1999 to 14,059 in 2000, according to OASAS data. There were 7,212 cocaine admissions in the first half of 2001, the most recent OASAS data available. Sixty-five percent of the admissions in the first half of 2001 reported smoking (crack cocaine) as the primary method of administration, while 32 percent reported inhalation (snorting of powdered cocaine) as the primary method of administration. DAWN data indicate that there were 13,898 cocaine ED mentions in the New York metropolitan area in 2001, more than for any other illicit drug. The rate of cocaine ED mentions per 100,000 population in the New York metropolitan area (166) exceeded the rate per 100,000 population nationwide (76) that year. DAWN mortality data indicate that there were 492 cocaine-related deaths in the New York metropolitan area in 2000, more than for any other illicit drug. Of these, 123 were cocaine-induced (overdoses). ADAM Program data indicate that 48.8 percent of adult male arrestees in New York City tested positive for abusing cocaine in 2000.

Cocaine is readily available in New York City. The New York Police Department (NYPD) Narcotics Division seized 3,113 kilograms of powdered cocaine and 81 kilograms of crack in 2002; in 2001, the Division seized 3,705 kilograms of powdered cocaine and 51 kilograms of crack, according to Narcotics Investigation and Trafficking of Recidivist Offenders (NITRO) Unit data. NYPD also made 31,781 cocaine-related arrests in New York City in 1999 and 31,919 in 2000, the most recent data available. In FY2001, 64 percent of the drug-related federal sentences in the Southern District of New York and 41 percent in the Eastern District of New York were powdered or crack cocaine-related, according to the U.S. Sentencing Commission (USSC). The percentage in the Southern District was significantly higher than the national percentage (43%) that year, while the percentage in the Eastern District was slightly lower. Powdered cocaine sold for \$15,000 to \$31,000 per

kilogram, \$613 to \$950 per ounce, and \$29 to \$45 per gram in New York City in the third quarter of FY2002, according to the Drug Enforcement Administration (DEA) New York Division. DEA also reports that crack cocaine sold for \$28,000 to \$30,000 per kilogram, \$1,000 to \$1,500 per ounce, \$27 to \$45 per gram, and \$7 to \$10 per rock in New York City during that same period.

New York City serves as a national-level transportation hub for significant quantities of cocaine. Colombian, Dominican and, increasingly, Mexican DTOs and criminal groups are the primary transporters of cocaine into New York City. However, Puerto Rican and Jamaican criminal groups also transport cocaine into the city. Cocaine available in New York City often is smuggled across the U.S.–Mexico border and then transported in commercial and private vehicles to transshipment points, such as Los Angeles, Phoenix, Houston, and El Paso, and then to New York City. Cocaine also has been smuggled across the U.S.–Mexico border and subsequently into the city via railcar. On January 28, 2003, DEA officials arrested four individuals—three Mexican nationals and a Dominican national—and seized approximately 4,000 pounds of cocaine that had been transported across the U.S.–Mexico border into New York City in the walls of a railroad tanker car carrying vegetable oil. Cocaine also is smuggled via commercial maritime vessels and aircraft directly from South America into New York City and indirectly from South America through Miami and other areas. Cocaine often is transported in commercial and private vehicles from Miami to the city.

Large quantities of cocaine, often concealed in shipments of fruits, vegetables, or other perishable items, frequently are transported in tractor-trailers from southwestern states and Florida to New Jersey where the drugs are unloaded and stashed. Much of this cocaine subsequently is transported overland from New Jersey to New York City in small quantities.

## New Jersey Stash House Used by Cocaine Distributors in Manhattan

On February 8, 2003, officers with the Morris County (NJ) Police Department and NYPD arrested five individuals and seized a total of 675 kilograms of cocaine and \$10,000 cash. Most of the cocaine (575 kilograms) was seized in the basement and garage of a residence in Madison, New Jersey; however, the remainder (100 kilograms) was seized as a result of a traffic stop in the Washington Heights section of Upper Manhattan. The house in Madison was used as a stash location for cocaine destined for distribution in Washington Heights. In Madison officers arrested three individuals, one from Mexico and two from California. In Washington Heights officers arrested two individuals, both from New York City. The cocaine had been concealed in white plastic tubs of fruit preserves and smuggled across the U.S.–Mexico border to a warehouse in California before being transported to the residence. Once at the residence, the cocaine was extracted from the white plastic tubs.

Source: Morris County Prosecutor's Office; Morris County Police Department; NYPD.

New York City serves as a national-level distribution center for significant quantities of cocaine. Colombian and Dominican DTOs and criminal groups are the primary wholesale-level distributors of powdered cocaine in New York City. Colombian DTOs and criminal groups usually are based in the Jackson Heights area of Queens, while Dominican DTOs and criminal groups typically are based in the Washington Heights section of Upper Manhattan. These Colombian and Dominican DTOs and criminal groups supply powdered cocaine to criminal groups for distribution throughout the region and to cities as far away as Boston, Chicago, and Atlanta. In addition, Mexican criminal groups are distributing wholesale quantities of powdered cocaine at an increasing rate in New York City. Dominican DTOs and criminal groups and African American, Jamaican, and Puerto Rican criminal groups are the dominant wholesale-level distributors of crack cocaine in the city.

Dominican criminal groups are the primary retail-level distributors of powdered and crack

cocaine in New York City. Nationally affiliated street gangs such as Ñeta, Latin Kings, Mara Salvatrucha, and Bloods also sell retail quantities of powdered and crack cocaine in New York City. Retail quantities of cocaine typically are sold at open-air drug markets; however, distributors increasingly are moving sales indoors. Powdered cocaine in New York City usually is packaged in aluminum foil, glassine bags, and crisp dollar bills or sometimes is wrapped in plastic wrap knotted on both ends. Crack usually is packaged in small plastic bags or plastic wrap knotted at both ends, or the drug is sold as individual rocks. According to the NYPD Narcotics Division, dealers increasingly are concealing crack rocks in their mouths to avoid law enforcement detection.

## Heroin

Heroin poses a significant drug threat to New York City. The total number of primary heroin admissions to state-funded and nonfunded treatment programs in New York City increased 4 percent from 20,879 in 1999 to 21,616 in 2000 and was higher than for any other illicit drug during each of these years, according to OASAS data. There were 10,988 heroin admissions in the first half of 2001, according to the same data. DAWN data indicate that there were 10,644 heroin ED mentions in the New York metropolitan area in 2001. The rate of heroin ED mentions per 100,000 population in the New York metropolitan area (127) was dramatically higher than the rate per 100,000 population nationwide (37) that year. DAWN mortality data indicate that there were 194 heroin-related deaths in the New York metropolitan area in 2000; none of these deaths were heroin-induced (overdoses). ADAM Program data indicate that 20.5 percent of adult male arrestees in New York City tested positive for abusing heroin in 2000. Further, the OASAS Street Studies Unit reported in 2002 that needle-sharing and heroin administration by injection was increasing, while heroin administration by snorting was decreasing.

Heroin is readily available in New York City. The NYPD Narcotics Division seized over 302 kilograms of heroin in New York City in 2002 and



nearly 843 kilograms in 2001, according to NITRO Unit data. According to NYPD, local law enforcement officials made 32,949 heroin-related arrests in New York City in 1999 and 33,665 in 2000. In 2001, 27 percent of the drug-related federal sentences in the Southern District of New York and 36 percent in the Eastern District of New York were heroin-related, significantly higher than the national percentage (7%), according to USSC data.

South American heroin is the most prevalent type available in New York City; Southeast Asian heroin and Southwest Asian heroin also are available. Mexican black tar heroin and brown powdered heroin rarely are available—in 2002 Mexican black tar heroin appeared in the Bronx for the first time in over a decade. Heroin sold for \$60,000 to \$80,000 per kilogram, \$2,100 per ounce, and \$10 to \$14 per bag in New York City in the third quarter of FY2002, according to the DEA New York Division. The OASAS Street Studies Unit reports that although bags of heroin generally continue to sell for \$10 and the quality of the heroin remains relatively unchanged, each bag now contains less heroin than in the past.

New York City serves as a national-level transportation hub for significant quantities of heroin. Colombian DTOs and criminal groups control the transportation of South American heroin into New York City; however, they increasingly rely on Dominican DTOs and criminal groups and occasionally Mexican criminal groups to transport South American heroin into the city. Couriers aboard commercial aircraft smuggle most of the heroin available in New York City. Some couriers travel directly from South American countries, while others travel indirectly, typically transiting Brazil, the Dominican Republic, Ecuador, Haiti, Jamaica, Panama, Puerto Rico, and Venezuela. Some couriers smuggle heroin into the Miami International Airport and other locations and then take flights to New York City; however, some of the heroin that arrives by aircraft in Miami is transported into New York City via private and commercial vehicles. Heroin also is transported into the city using

package delivery services. The DEA New York Division reported that the typical amount of heroin smuggled per shipment via package delivery services is 5 to 8 kilograms, an increase over the historic range of 1 to 3 kilograms.

Colombian DTOs and criminal groups are the primary wholesale-level distributors of heroin in New York City, particularly in the Jackson Heights section of Queens; however, Dominican DTOs and criminal groups sell wholesale quantities as well, usually from the Washington Heights section of Upper Manhattan. On September 26, 2002, a grand jury in New York City indicted 20 alleged drug dealers, mostly Dominicans, for distributing significant quantities of heroin, cocaine, and marijuana daily along West 171st Street in the Washington Heights section of Upper Manhattan. Eight of these individuals were part of Gordo's Crew, a group of street gang members that distributed the drug from 171st Street and Broadway, and 10 were part of Flecha's Crew that sold primarily cocaine on the corner of 171st Street and Amsterdam Avenue. The remaining two were independent dealers. Both crews stashed illicit drugs in nearby apartments where the drugs were processed, weighed, and packaged for retail distribution.

Dominican criminal groups are the dominant retail-level distributors of heroin in New York City. Retail quantities of heroin most commonly are packaged in glassine envelopes, bags, or bundles (10 bags). Heroin is sold primarily indoors and less commonly at open-air drug markets and through call-and-deliver services.

## **Marijuana**

Marijuana is the most widely abused illicit drug in New York City. The total number of primary marijuana admissions to state-funded and nonfunded treatment programs in New York City increased 9 percent from 10,219 in 1999 to 11,151 in 2000, according to OASAS data. There were 6,582 marijuana admissions in the first half of 2001, according to OASAS data. DAWN data indicate that there were 3,501 marijuana ED mentions in the New York

metropolitan area in 2001. The rate of marijuana ED mentions per 100,000 population in the New York metropolitan area (42) was slightly lower than the rate per 100,000 population nationwide (44) that year. ADAM Program data indicate that 40.6 percent of adult male arrestees in New York City tested positive for abusing marijuana in 2000.

Marijuana is the most readily available illicit drug in New York City. The NYPD Narcotics Division seized 5,626 pounds of marijuana in New York City in 2002 and 13,901 pounds in 2001, according to NITRO Unit data. According to NYPD, local law enforcement officials made 43,122 marijuana-related arrests in New York City in 1999 and 60,455 in 2000, more than for any other illicit drug during each of these years. Some marijuana distributors increasingly are engaging in violent crimes—primarily because historically violent cocaine and heroin distributors now also distribute marijuana. Law enforcement officials often seize numerous weapons during marijuana seizures in New York City, according to the DEA New York Division. In 2001, 4 percent of the drug-related federal sentences in the Southern District of New York and 14 percent in the Eastern District of New York were marijuana-related, compared with 33 percent nationwide, according to USSC. Commercial-grade marijuana in New York City sold for \$600 to \$2,000 per pound and \$100 to \$200 per ounce in the third quarter of FY2002, according to the DEA New York Division. Hydroponically produced marijuana sold for \$3,000 to \$5,000 per pound and \$300 to \$1,200 per ounce during that same period.

Most marijuana available in New York City is transported from southwestern states and Florida in private vehicles and trucks, via package delivery services, and by couriers or in cargo shipments on commercial aircraft. Jamaican criminal groups are the most prominent transporters as well as wholesale- and retail-level distributors of marijuana in New York City; however, no specific organization or group controls the distribution of marijuana. Retail quantities of marijuana usually are packaged in small bags—of clear plastic, manila, or paper—or

sold as joints. Marijuana typically is sold from street corners, apartments, and other dwellings in New York City. Marijuana increasingly is sold through call-and-deliver services in the city.

## MDMA

MDMA poses one of the fastest-growing drug threats to New York City. DAWN data indicate that there were 172 MDMA ED mentions in the New York metropolitan area in 2001, a dramatic increase from 41 in 1997. Nonetheless, the rate of MDMA ED mentions per 100,000 population in the New York metropolitan area (2) was equal to the nationwide rate in 2001. DAWN mortality data indicate that there were five deaths in which club drugs—a category that includes MDMA—were a factor in the New York metropolitan area in 2000. The number of MDMA abusers who also abuse other substances, including Viagra, cocaine, and heroin, in New York City has increased, according to DEA. In 2002 the OASAS Street Studies Unit reported that in Brooklyn powdered MDMA mixed with powdered cocaine was smoked in blunts (hollowed-out cigars), the first reporting of MDMA abused in this manner in the city.

Israeli and Russian DTOs and criminal groups control the smuggling of MDMA into New York City. MDMA usually is smuggled into John F. Kennedy (JFK) International Airport from Europe by couriers who conceal MDMA in false-bottomed luggage or on their person, via package delivery services, and in air cargo shipments.

New York City is a significant distribution hub for MDMA in the United States. Israeli, Russian, Colombian, and Dominican DTOs and criminal groups, Eastern European and Asian criminal groups, members of traditional organized crime, and OMGs often distribute wholesale quantities of MDMA in New York City. Various criminal groups and individuals distribute retail quantities of MDMA in the city. Caucasian local independent dealers, principally males, are the primary distributors of MDMA in nightclubs and on university campuses. Dominican criminal groups in the Washington Heights section of New York City and African

American criminal groups in Harlem usually distribute MDMA from street corners and increasingly indoors. MDMA most frequently is distributed in tablet form stamped with a logo. MDMA sold for \$1.50 to \$13 per tablet at the wholesale level and \$20 to \$38 per tablet at the retail level in New York City in the third quarter of FY2002, according to the DEA New York Division.

## Other Dangerous Drugs

Other dangerous drugs (ODDs) including club drugs such as LSD, ketamine, and GHB and its analogs and diverted pharmaceuticals such as benzodiazepines (Xanax), hydrocodones (Vicodin), hydromorphones (Dilaudid), methadone, codeine, HIV treatment drugs, steroids, and methylphenidate (Ritalin) pose significantly lesser threats to New York City than most other illicit drugs. Caucasian teenagers and young adults are the primary abusers of most club drugs and Ritalin in New York City, and individuals of various ethnic backgrounds and ages abuse other diverted pharmaceuticals. PCP, typically a street drug, is also available at raves and nightclubs in New York City. DAWN data indicate that there were 203 PCP, 62 LSD, 24 ketamine, and 15 GHB ED mentions in the New York metropolitan area in 2001, representing slight decreases from 2000 with the exception of ketamine, which increased slightly. DAWN data indicate that there were 1,918 benzodiazepine ED mentions in the New York metropolitan area in 2001, a slight increase from 1,753 in 2000. Drugs such as dronabinol (Marinol) and megestrol acetate (Megace), which are used to treat wasting syndrome associated with HIV infection, are diverted and abused at an increasing rate in New York City, according to the OASAS Street Studies Unit.

The DEA New York Division reported that PCP sold for \$40 to \$50 per gram; LSD sold for \$0.50 per dosage unit at the wholesale level and for \$3 to \$5 at the retail level; ketamine sold for \$40 to \$50 per dosage unit; and GHB sold for \$10 a bottle cap in New York City in the third quarter of FY2002. Pricing data for other ODDs distributed illegally in the city are unavailable.

Caucasian local independent dealers are the primary distributors of most ODDs in New York City. Club drugs typically are available at concerts and all-night dance clubs, while diverted pharmaceuticals generally are available through acquaintances and from drug abusers at methadone treatment clinics; diverted steroids are sold at body-building gyms.

## Methamphetamine

Methamphetamine poses a low drug threat to New York City. DAWN data indicate that there were 31 methamphetamine ED mentions in the New York metropolitan area in 2000. (Methamphetamine ED data for 2001 are incomplete.) DAWN mortality data indicate that there were three methamphetamine-related deaths in the New York metropolitan area in 2000. NYPD did not report any methamphetamine-related arrests or seizures in 2002 or 2001. In 2001, 0.2 percent of the drug-related federal sentences in the Southern District of New York and zero percent in the Eastern District of New York were methamphetamine-related, significantly lower than the national percentage (14%), according to USSC. The DEA New York Division reported that methamphetamine sold for \$1,700 to \$2,100 per ounce and \$150 per gram in the third quarter of FY2002. Methamphetamine occasionally is available at dance clubs, according to the OASAS Street Studies Unit.

## Drug Money Laundering

Drug money laundering poses a significant threat to New York City. The Department of Homeland Security Border and Transportation Security Directorate reports that \$4 to \$8 billion generated from illicit drug sales is laundered in the New York metropolitan area each year. Colombian and Dominican DTOs and criminal groups are the primary illicit drug money launderers in New York City. Illicit drug proceeds are laundered through various means such as commingling of drug proceeds with revenue generated by legitimate businesses, using money remittance companies, structuring bank deposits and money order purchases, and purchasing property and vehicles. The precious metals and gems trade,

the securities industry, underground banking systems, and offshore banking also are used to launder illicit drug proceeds. Further, currency generated through illicit drug activities often is consolidated and transported in bulk from New York City.

## Changes/Emerging Trends

- Most DTOs, criminal groups, and gangs that used to distribute only one type of drug in New York City now distribute multiple drugs, according to NYPD.
- Mexican criminal groups increasingly are transporting and distributing illicit drugs, particularly cocaine and heroin, in New York City.
- The September 11, 2001, terrorist attacks affected the movement of illicit drugs into New York City. According to federal, state, and local law enforcement officials, postal services, trains, and buses increasingly are used to transport illicit drugs into the city.
- DEA reports that when cocaine and heroin are transported within a single shipment, the ratio of cocaine to heroin is often equal whereas in the past the ratio was one kilogram of heroin to hundreds of kilograms of cocaine.
- The DEA New York Division reported that, in at least one incident, raw opium was refined into heroin in New York City in the third quarter of FY2002.
- According to the DEA New York Division, there was at least one organized counterfeit prescription ring operating in New York City in 2002; it used professional printers and possibly computers to produce high quality prescription pads. In response to this type of prescription fraud, state officials adopted an official triplicate prescription form.

## Impacts and Impediments

### Impacts

NYPD operates a program known as CompStat, an electronic mapping system and analysis tool that was developed to improve law enforcement operations and strategic planning, specifically with regard to resource allocation. NYPD attributes dramatic decreases in felony crime rates over the past several years at least in part to the use of CompStat. CompStat was so effective that similar mapping systems were established to monitor all city services. Police departments across the country are modeling the CompStat program due to its success in New York City.

NYPD operates mobile Tactical Narcotics Teams (TNT) and Neighborhood Stabilization Teams (NST) to disrupt drug distribution activities. TNTs are deployed on a short-term basis to areas of the city identified as “hot spots” to make daily drug arrests and force drug distribution indoors by targeting both distributors and abusers. NSTs replace TNTs on a long-term basis to prevent recurrences of drug distribution activities.

NYPD operates a Model Block Program to prevent drug distribution in areas identified as “high risk.” Emergency service vehicles equipped with halogen lights illuminate select streets from dusk to dawn and law enforcement officials place barriers at both ends of select blocks to prevent entry. Uniformed officers stop and question anyone attempting to gain access to these blocks. Only residents and individuals with legitimate business are granted access to these areas—and only with police escort.

NYPD operates the North Manhattan Initiative (NMI) to promote information sharing among federal, state, and local law enforcement officials in New York City and surrounding counties. This initiative was instrumental in the February 8, 2003, seizures of 675 kilograms of cocaine in Madison, New Jersey, and Upper Manhattan.



NYPD proactively enforces the Nuisance Abatement Act to stop drug distribution. Landlords of properties where drug distribution is identified are held accountable even if just peripherally involved and are not permitted to rent their properties for 6 months. Under this act, police officers also are empowered to padlock storefronts from which drugs or drug paraphernalia are sold. Smoke shops, which had proliferated throughout the city, no longer exist because of proactive enforcement of this statute. (See text box.)

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### **Enforcement of the Nuisance Abatement Act**

On February 7, 2003, the New York State Supreme Court ordered the closure of two Manhattan nightclubs—The Sound Factory and Exit—for allowing college-age students to distribute drugs such as MDMA and ketamine on the premises. At Exit, undercover officers from the Narcotics Division of NYPD, the office of the Special Narcotics Prosecutor, and the NYPD Civil Enforcement Unit purchased illicit drugs and witnessed open illicit drug use at the club. At The Sound Factory, undercover law enforcement officers purchased MDMA, ketamine, methamphetamine, cocaine, and marijuana and observed open drug use.

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In 2002 New York State began placing photos of convicted drug distributors along with the amount of time each will serve in prison in known drug distribution territories to deter others from engaging in similar activities. In November 2002 photos of the leader of a violent drug gang—Thief David’s Crew—and his enforcers were posted throughout the Bronx; each photo included crew members’ prison sentences (totaling 120 years) and the caption “Don’t be Next!”

In 2002 NYPD formed a partnership with New York City schools entitled Operation Safe Schools to combat crimes, including drug distribution, in

schools. The operation entails training 300 safety agents and installing state-of-the-art surveillance cameras in hallways.

On January 1, 2001, New York State began an Expanded Syringe Access Demonstration Program (ESADP) to increase the availability of “clean” hypodermic needles and prevent the spread of needleborne illness such as AIDS (Acquired Immunodeficiency Syndrome). There were 122,758 adult and pediatric AIDS cases in New York City in 2000, according to OASAS data. Forty-five percent of the adult AIDS cases involved heterosexual injecting drug users (IDUs). Forty-seven percent of the 1,975 pediatric AIDS patients in New York City in 2000 involved mothers who had injected drugs; 16 percent involved mothers who were sex partners of IDUs, according to OASAS data. The ESADP allows licensed pharmacists and healthcare professionals specifically registered with the State Department of Health to sell 10 hypodermic needles or less to individuals aged 18 or older without a prescription. An independent evaluation was submitted to the governor and the legislature on January 15, 2003, to assess the impact of the program on issues such as needle-sharing, substance abuse, and syringe disposal; however, published results have yet to be released.

### **Impediments**

The September 11, 2001, terrorist attacks have resulted in a reallocation of resources—from counterdrug to counterterrorism efforts—in New York City. In addition, local law enforcement officials report that a significant number of officers who serve in the National Guard or military reserve units have been called to active duty, further diminishing the resources available for counterdrug programs, initiatives, and operations.

## Sources

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### State and Regional

#### New Jersey

Morris County

Police Department

Prosecutor's Office

#### New York

City of New York

New York Police Department

Civil Enforcement Unit

Gang Unit

Intelligence Division

Laboratory

Major Case Units

Major Narcotics Unit

Organized Crime Control Bureau

Narcotics Division

Drug Enforcement Task Force

Narcotic Borough Queens Major Case Unit

Narcotics Investigation and Trafficking of Recidivist Offenders Unit

Organized Crime Investigation Division

Office of the Special Narcotics Prosecutor

New York State

Division of Criminal Justice Services

Office of Alcoholism and Substance Abuse Services

Street Studies Unit

Supreme Court

#### New York/New Jersey

New York/Regional Task Forces

Organized Crime Drug Enforcement Task Force

New York/New Jersey

Port Authority of New York and New Jersey

### Federal

Executive Office of the President

Office of National Drug Control Policy

High Intensity Drug Trafficking Areas

New York/New Jersey

U.S. Department of Commerce

Census Bureau

U.S. Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration  
Office of Applied Studies  
Drug Abuse Warning Network  
Treatment Episode Data Set

U.S. Department of Homeland Security  
Border and Transportation Security Directorate  
Bureau of Customs and Border Protection (formerly U.S. Customs Service)  
New York Division  
Coast Guard  
New York City

U.S. Department of Justice  
Drug Enforcement Administration  
Diversion Unit  
New York Division  
New York Police Department/Drug Enforcement Administration Task Force  
Federal Bureau of Investigation  
New York Field Office  
National Institute of Justice  
Arrestee Drug Abuse Monitoring Program  
U.S. Attorney's Office  
Eastern District  
Southern District

U.S. Department of the Treasury  
Financial Crimes Enforcement Network  
High Intensity Money Laundering and Related Financial Crime Area  
New York/New Jersey

U.S. Postal Service

U.S. Sentencing Commission



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