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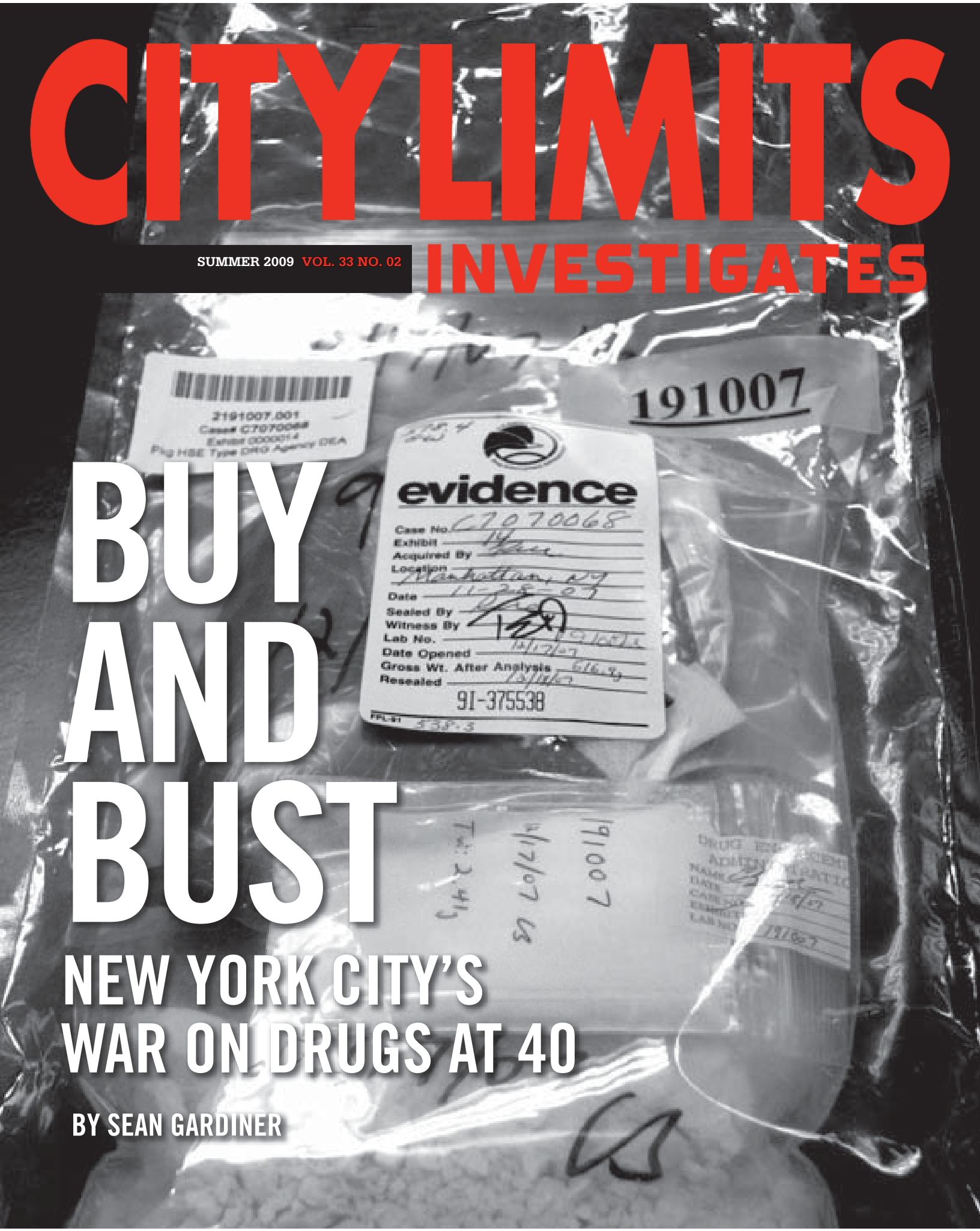

BUY AND BUST

NEW YORK CITY'S WAR ON DRUGS AT 40

BY SEAN GARDINER

The DEA says that by targeting foreign drug cartels' pipelines of cash out of the United States, they have slowed the cocaine trade. *Photo: DEA* **Cover: Cocaine seized** by the DEA. *Photo: Lizzie Ford Madrid*

PUBLISHER'S NOTE

Forty years ago this month, Richard Nixon's Justice Department took the first steps in what he would later declare the "war on drugs"—proposing legislation to stiffen penalties for LSD and marijuana possession, permit "no knock" narcotics warrants and extend U.S. jurisdiction to non-citizens suspected of drug manufacturing.

Four decades, countless new laws and millions of arrests later, the only things that have been changed by this "war" are the amount of money our city, state and nation have spent prosecuting it and the growing number of lives caught up in the crossfire.

One of the most striking revelations in this issue of *City Limits Investigates* is the remarkable constancy of New Yorkers' drug use. Author Sean Gardiner's report from the local front of America's "drug war" shows that while there have been some shifts in the fashionable drug of the moment and a significant increase in the potency of the drugs New Yorkers take, the population of drug users demonstrates a stubborn steadiness over decades. The number of estimated heroin users in New York has remained in the area of 150,000 to 200,000 for more than 30 years, and cocaine use, after peaking in the early 90's, decreased marginally and has since remained flat. Our habit seems all but immune to a variety of policing stratagems.

The costs of this "war" are staggering. In January 1969, the annual federal budget for drug treatment, education, research and law enforcement was reported to be $81.4 million or, in today's dollars, $473 million. In 2009 it's estimated that same federal funding basket will cost northward of $20 billion. In New York City alone, the yearly governmental costs broadly associated with arrests for drug crime could be as much as $1.7 billion.

The most disturbing costs are the human ones. As arrests for nonviolent drug offenses skyrocket, drug treatment programs scramble for funding and alternatives to incarceration programs disappear, we are criminalizing vast numbers of citizens. Since 2002 more than 250,000 of our fellow New Yorkers have been arrested for the *lowest marijuana offense in the penal code*. Little mentioned, too, in the debate are the scores of police officers around this country and the hundreds in Mexico who lose their lives battling drugs and drug violence every year.

And our resistance to attacking drug abuse as a public health issue costs us dearly in missed opportunities. When the hysteria finally ebbed around the use of needle exchange as a tool to slow HIV/AIDS transmission, did a whole new generation of addicts suddenly appear, drawn by the sudden availability of fresh works? No, the percentage of intravenous drug users with AIDS dropped precipitously. One has to wonder what might happen if every level of government and law enforcement looked upon addiction and drug abuse as a public health crisis first, before it becomes a criminal matter.

Perhaps the first step to a more sensible drug strategy is an overdue change in terminology. Ellis Carver, one of the "good police" in *The Wire*, David Simon's epic TV drama about the impact of the drug trade, said it best: "You can't even call this shit a war. Wars end."

—Andy Breslau,
Publisher

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Postmaster: Please send address changes to:

City Limits
120 Wall Street–fl. 20 | New York, NY 10005
T: (212) 479-3344 | F: (212) 479-3338
E: investigates@citylimits.org

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HOOKED

Four decades of drug war in New York City

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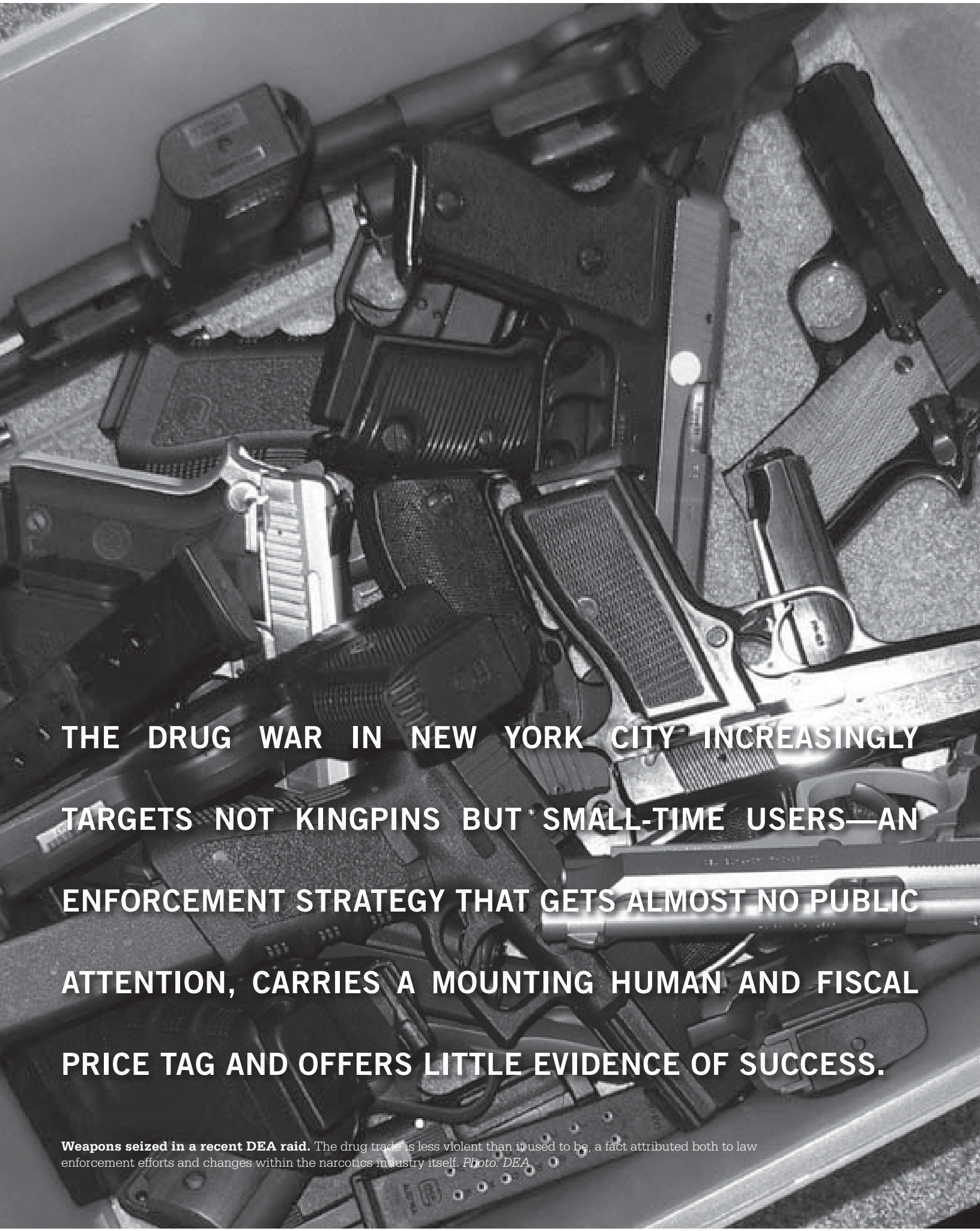


THE DRUG WAR IN NEW YORK CITY INCREASINGLY TARGETS NOT KINGPINS BUT SMALL-TIME USERS—AN ENFORCEMENT STRATEGY THAT GETS ALMOST NO PUBLIC ATTENTION, CARRIES A MOUNTING HUMAN AND FISCAL PRICE TAG AND OFFERS LITTLE EVIDENCE OF SUCCESS.

Weapons seized in a recent DEA raid. The drug trade is less violent than it used to be, a fact attributed both to law enforcement efforts and changes within the narcotics industry itself. *Photo: DEA*

I. WAR

war [wor] n.: 1) conflict carried on by force of arms 2) a state or period of armed hostility or active military operations 3) a struggle

Long gone are the days of casually smoking a joint while walking down the streets of New York City without the slightest care of being arrested.

There are no more blatant open-air drug markets and very few nodding addicts sitting against the sides of buildings, their heads wedged between their propped-up knees, "sucking their own dicks," as Harlem heroin kingpin Frank Lucas used to describe the position back in the 1970s.

It's a rare occasion today that you see a single discarded crack vial, let alone the deluge of tiny tubes that regularly littered the streets of neighborhoods all over the city in the late 1980s and early '90s. Also gone are the "corner boys" perpetually hanging out slinging rock, the drug dens known as crack houses and the desperate army of oft skeletal "chickenheads" or "scotties"—crack addicts lining up for that next hit. And it's even approaching a decade since the rave scene and the use of Ecstasy peaked.

Gone too are the days when politicians and law enforcement officials made daily vows to wipe out the scourge of illegal drugs and the industry that sold them. No longer does talk about crack babies or Colombian drug lords dominate the nightly news. In 2009, the tabloids do not chronicle every drug-land slaying or undercover score.

But just because the drug trade and the law enforcement crusade against it aren't as obvious as they were in the past doesn't mean drugs and the war against them have disappeared from New York.

In fact, 40 years after President Nixon announced a 10-point anti-narcotics plan that later became known as the war on drugs and 36 years after New York State made its first earnest efforts to join that battle by passing the strictest drug laws in the country, the city's drug war, while able to claim success in some skirmishes, is about as far away from real "victory" as ever. There are about as many hard-core drug users now as during New York's "bad old days." Drugs remain readily available in the city. And the number of drug arrests in New York last year was near an all-time high.

That doesn't mean nothing has changed. The billions spent enforcing drug laws and the resulting 2.6 million drug-related arrests by the NYPD since 1973 have caused some of the targeted "enemies" of the drug war to change tactics. Smaller organizations of family and friends have replaced the traditionally more violent "corporate-style" crews. Dealers have moved from brazen, outdoor, hand-to-hand sales to a more discreet, sophisticated indoor model that takes advantage of today's communications technology to limit detection.

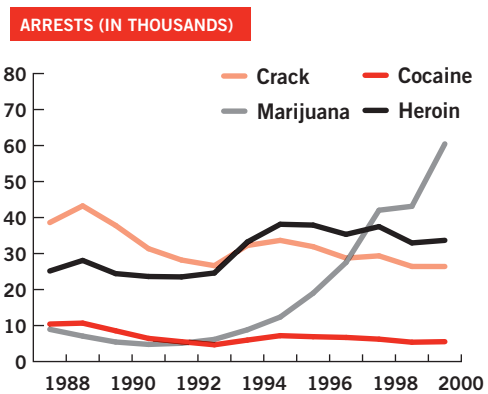
Yet for all the time, energy and money spent trying to eradicate drugs in New York, the major aspects of the city's drug trade are the same as they ever were: where most drugs come from, how they get here, how addicts are treated and the skin color of the people who are disproportionately getting busted. Perhaps what has changed the most over the past four decades is that the drug war in New York increasingly targets not kingpins but small-time users—an enforcement strategy that gets almost no public attention, carries a mounting human and fiscal price tag, and offers little evidence of success.

Indeed, almost every kind of drug is still available somewhere in New York today, and in copious amounts, if you have the cash. PCP, or angel dust, is showing "signs of increased use," according to one recent study, which also notes the "date-rape" drug Rohypnol and Ecstasy "could be easily obtained in dance clubs." The veterinary anesthetic and human hallucinogenic ketamine, also called special K, vitamin K or cat valium, also is readily available. Pharmaceuticals like Oxycontin, Xanax, Elavil, Percocet, Dilaudid, Klonopin and Catapres are for sale on the streets. Methadone diskettes can also be had, one for $15 or two for $25, and even Tylenol with codeine can be copped for two bucks a pill.

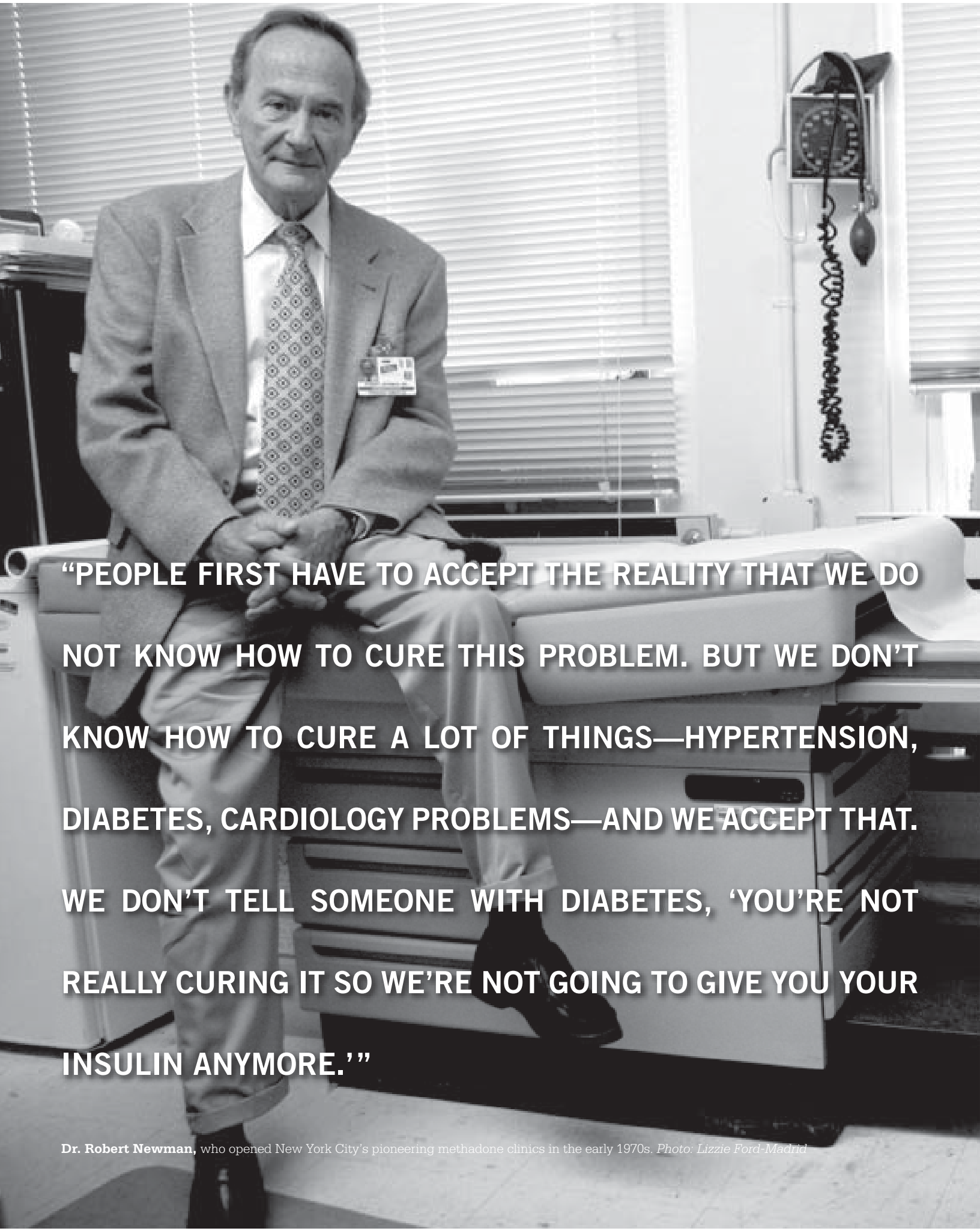
But the favorite drugs of New Yorkers, now and dating back decades, remain heroin, powder cocaine, crack and marijuana—each of which has dominated an era of the city's drug war and produced its own generation of soldiers, enemies, prisoners and casualties.

REEFER MADNESS

In the 1990s marijuana arrests went from a minor aspect of enforcement to a dominant factor in New York City.



Source: NYPD



“PEOPLE FIRST HAVE TO ACCEPT THE REALITY THAT WE DO NOT KNOW HOW TO CURE THIS PROBLEM. BUT WE DON’T KNOW HOW TO CURE A LOT OF THINGS—HYPERTENSION, DIABETES, CARDIOLOGY PROBLEMS—AND WE ACCEPT THAT. WE DON’T TELL SOMEONE WITH DIABETES, ‘YOU’RE NOT REALLY CURING IT SO WE’RE NOT GOING TO GIVE YOU YOUR INSULIN ANYMORE.’”

Dr. Robert Newman, who opened New York City’s pioneering methadone clinics in the early 1970s. *Photo: Lizzie Ford-Madrid*

II. HEROIN

"Ah, when the heroin is in my blood, and that blood is in my head,
then thank God that I'm as good as dead." —*"Heroin," the Velvet Underground*

America's long-running drug war has its roots in a real armed conflict, the Civil War. It was after that crisis that addiction to an opiate called morphine, which had been used as a painkiller and anesthetic for wounded soldiers, became a noticeable social problem in the country as its use moved from the battlefield into civilian society. Opium, the poppy product from which both morphine and heroin are derived, was the first drug that the U.S. legislated against, in an 1890 act of Congress that imposed taxes on opiates.

It was also the drug at the heart of the problem that President Nixon cited in 1969, when he laid out a 10-point plan for reducing illegal-drug use—an effort for which New York was the proving ground. "New York City alone has records of some 40,000 heroin addicts, and the number rises between 7,000 and 9,000 a year," Nixon wrote in his July 14, 1969, message to Congress. "These official statistics are only the tip of an iceberg whose dimensions we can only surmise." Two years later, Nixon also cited New York's drug problem when he pledged that "America's public enemy No. 1 in the United States is drug abuse. In order to fight and defeat this enemy, it is necessary to wage a new all-out offensive." In other words, a war.

Local officials echoed the president. By 1978, New York City special prosecutor Sterling Johnson announced that Harlem was the "drug-trafficking center of the nation," where dealers openly sold "to the blacks who walked into the streets and the whites who never got out of their cars." And that had been the case for nearly a decade.

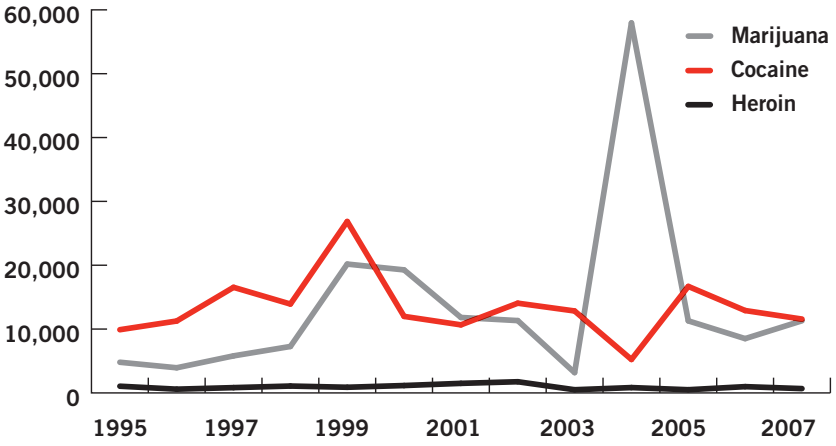
In the early 1970s, Phillip Panzarella worked as a patrol officer in Harlem's 30th Precinct and later in the NYPD narcotics units that were assigned uptown. A Washington Heights native who retired as a lieutenant after a legendary 40-year career in the NYPD, Panzarella was known to other cops as "Sundance" after the movie Butch Cassidy and the Sundance Kid. He says people came from five states to buy heroin in Harlem. "There were a lot of good, hardworking people who wanted drugs off the streets, but it was just a losing battle. There was so much of it," says Panzarella, chewing on his trademark cigar butt one day in May as he sprayed the lawn of his suburban Long Island home to get rid of a horde of bugs. "It just drained the lifeblood out of Harlem, where there was no money to be made except off drugs."

At the time, flashy-dressing and high-living superdealers like Earl Foddrell, Frank Lucas (of "American Gangster" fame) and, most infamously, Nicky Barnes ruled the roost and became street idols. "Barnes is, police say, one of the biggest heroin dealers in the country," a 1977 New York Times Magazine article titled "Mister Untouchable" stated. "In his home base, Harlem, the center of the New York City drug traffic, he is regarded as perhaps the biggest. But he is more than that. To the police, to the drug community and to an extent in the uptown drug-related subculture, Nicky Barnes is a current legend ... his name alone inspires awe because of a spit-in-your-eye, flamboyant lifestyle that is perceived by the street people as Barnes' way of thumbing his nose at officialdom."

Heroin from southwestern Asia, mainly Pakistan and Afghanistan, often routed through Marseilles, France, was what most of the approximately 200,000 New York addicts were shooting in the early 1970s. John Gilbride, special agent in charge of the New York office of the Drug Enforcement Administration, says that back then the heroin was only about 3 percent pure, which was very low compared with the 50 to 70 percent purity

THE BIG SCORE

Each year, the NYPD seizes tons of illegal drugs. Much of the haul is shipped to an out-of-state incinerator that contracts with the city.



Source: Mayor's Management Report

levels that the drug went up to over the ensuing three decades.

Gilbride, a middle-aged man of average build who looks far more like a professor or banker than the state's top drug cop, says after law enforcement took down all the "big-personality drug dealers" like Barnes and Lucas, the city's heroin peddlers assumed a much lower profile. Along with their style, the source of their smack also changed. In the mid-'70s and early '80s, heroin from Southeast Asia, aka the Golden Triangle, that was sometimes referred to as "China white" was brought in by Chinatown gangs and dominated the New York heroin scene. During this period, the heroin market softened. According to the admissions records of treatment programs monitored by New York State drug officials, heroin was the primary drug of 92 percent of those treated for addiction in 1970, peaked at 95 percent in 1972, then slid to 46 percent by 1978. As the New York State Division of Substance Abuse Services reported back then, "There is a strong consensus that heroin activity is declining and new drugs of choice are emerging, such as PCP, cocaine and several other illicit substances." But while heroin use seemingly declined, the number of arrests for possessing or selling it increased, going up 24 percent from 1975 to 1978, 61 percent of which were felonies.

By 1990, the world's foremost cocaine traffickers, the Colombians, wanted in on the lucrative New York heroin market. Back then, a kilogram of cocaine could fetch anywhere from $30,000 to $65,000, while a kilo of heroin was going for about $150,000 wholesale, according to DEA records. Using the smuggling network and transportation routes they had already established to ship huge amounts of cocaine into this country, the Colombians made their first foray into the New York heroin market by giving their cocaine dealers samples of their super powerful heroin and telling them to simply give it away to their coke customers, Gilbride says. And once the demand was established, the Colombians flooded New York with heroin that was so cheap and high in purity that they owned the heroin market virtually overnight. "They basically created a market for their heroin in New York City," Gilbride says.

Some shipments were close to being 90 percent pure, meaning that very few chemical agents were used to "cut" the product to dilute it so dealers could sell more hits and increase their profits. The purer the heroin, the stronger the high (and the danger).

In fact, the heroin the Colombians originally brought into New York was so powerful that it not only made loyal users out of veteran addicts but also attracted a whole new crowd because it was so pure that they could snort it. This removed both the physical and psychological barriers of injecting heroin with a hypodermic needle, a line many recreational drug users refused to cross. "Snorting heroin does not have the stigma of putting a needle in your arm," Gilbride says. The fallacious thinking was, "snorting made them less of a drug user than injecting," he explains.

This less invasive way to use heroin lured college kids and hipsters in New York into trying it and reversed the decline in the city's heroin indicators. Treatment admissions to state-funded programs for those listing heroin as their primary addiction had been relatively stable between 1986 and 1990 but started to increase in 1991, rising 16 percent by 1994. Emergency-department cases involving heroin tripled during that same time frame. According to a state report by the Office of Alcoholism and Substance Abuse Services (or OASAS, the successor to the aforementioned State Division of Substance Abuse Services), heroin-involved deaths jumped from 557 in 1990 to 793 in 1993.

If there was a law enforcement response to the rebirth of heroin, the crack-obsessed media didn't record it. In fact, the heroin story of the 1990s was ignored, by and large, until it became so popular that some among the white celebrity set (like model Kate Moss, rocker Kurt Cobain and actor River Phoenix) developed addictions that subsequently received a good deal of publicity. (In 1993, Phoenix fatally overdosed while mixing heroin and cocaine, a practice known as speedballing, as did Saturday Night Live comedian Chris Farley four years later.) Eventually, Madison Avenue seized on the trend with its "heroin chic" look, as fashion ads featured strung-out-looking models.

The heroin-chic trend was so prevalent that President Clinton commented on it during a May 1997 meeting of mayors at the White House to discuss a plan to combat drug trafficking and

HIGH TIMES

A timeline of the policing, politics and culture of drugs in New York and elsewhere.

1890
Congress passes its first anti-narcotics law, imposing a tax on opium and morphine, which had become more popular after the Civil War.

1906
Assemblyman Al Smith introduces a New York State law restricting cocaine availability.

1914
The Harrison Narcotics Tax Act, which gives the federal government broad power to tax the sale and manufacturing of opiates, is passed.

1918
New York State establishes a network of morphine maintenance clinics.

use. "The glorification of heroin is not creative. It's destructive," the New York Times quoted Clinton as saying. "It's not beautiful. It's ugly. And this is not about art. It's about life and death. And glorifying death is not good for any society."

The heroin-chic look eventually faded away, as did the attendant publicity, but New York's heroin scene has soldiered on since with a remarkable low-key consistency.

According to Daliah Heller, assistant commissioner of the city's Bureau of Alcohol and Drug Use Prevention, Care and Treatment, the number of heroin or opiate users in New York has remained somewhere in the area of 150,000 to 200,000 since the early 1970s.

The state's Office of Alcoholism and Substance Abuse Services says that since the late 1990s, intranasal use of heroin has remained more popular than injection of it, with hospital admissions showing that about 61 percent of those who sought medical treatment for heroin snorted the drug. But OASAS's Street Study Unit has found anecdotal evidence that more heroin users under 30 might be turning to the needle these days.

Medical admissions show that heroin users are "overwhelmingly male (77 percent), older than 35 (76 percent), more likely to be Hispanic (49 percent) than Black (27 percent) or White (19 percent), and likely to report cocaine as a secondary drug of abuse (46 percent)." Heroin admissions to treatment programs increased 30 percent between 1995 and 2004 but have leveled off since, OASAS reported.

"REGULAR USERS REPORT THAT THEY WOULD BE ABLE TO PURCHASE HEROIN WITHIN A 10-MINUTE WALK FROM ANYWHERE IN THE CITY."

Since peaking when the Colombians took over the market, there has been a decline in purity levels and price over the past 10 years, according to DEA testing. In 2000, a kilo of heroin sold for between $64,000 and $80,000, and purity levels were somewhere in the area of 81 percent. In 2009, a kilo goes for between $48,000 and $70,000, and the purity level has dropped to 69 percent.

Most people buy the drug in small glassine envelopes, each containing about a tenth of a gram, for $5 to $12 apiece. One disturbing trend that Hezi Allen, a drug counselor at ACI—the nation's oldest private drug treatment center, in midtown Manhattan—says he has seen is an increase in the number of clients being treated for both heroin and pharmaceutical drugs like Oxycontin and Xanax. He says that some dealers are cutting their heroin with these crushed pills to make it stronger. In some cases, he says, these dealers aren't telling their customers what they're doing. So in addition to increasing the likelihood of an overdose, Allen says, this new mixture also makes it harder to kick the habit, because pharmaceuticals take longer to get out of a person's system than heroin does.

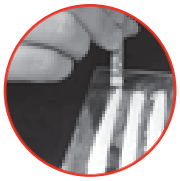
Allen says it takes about a week to detox from heroin, which is usually followed by a week or two of rehabilitation therapy and counseling. Most of this is done on an outpatient basis, whereas years ago, inpatient treatment was dominant. Insurance used to cover 60 days of recovery; now it covers 28, he says.

And if you can't go cold turkey, there's methadone.

Dr. Robert Newman and Gordon Chase were a strange pair to pioneer the city's use of methadone to treat addiction. Newman says he had "zero training in addiction" and "zero experience in methadone" when Chase hired him in 1970 to run the city's first methadone maintenance program. And Chase, even though he was the New York City Health Services Administration commissioner, had previously served as an assistant to the national security adviser in both the Kennedy and Johnson administrations but had no health care experience whatsoever.

Methadone is a liquid that the user drinks, usually mixed with juice. A synthetic form of morphine, it was in-

1929
President Hoover says violators of the Harrison Act make up 33 percent of inmates at major federal prisons—more than twice the number of Prohibition violators.

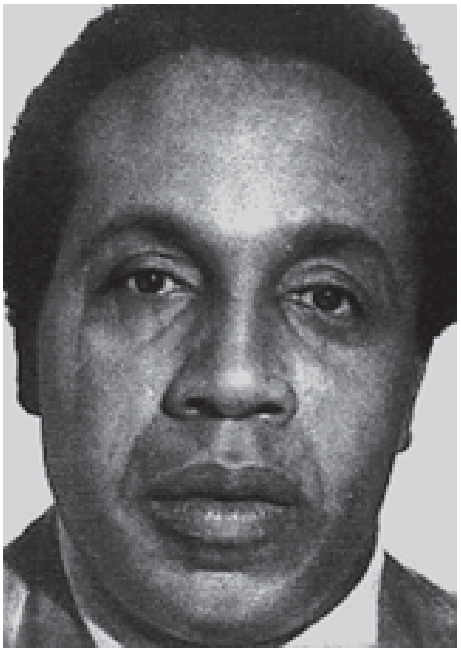


1930
The Mayor's Committee on Drug Addiction reports there is no cocaine problem in New York.

1936
The movie Reefer Madness, aka Tell Your Children, is released.

1937
The Marijuana Tax Act—which doesn't make the herb illegal but does allow the feds to tax it—becomes law.

1940
FDR vetoes a bill that would have deported aliens convicted of drug possession, writing, "Addiction to narcotics is … a lamentable disease, rather than a crime."



Frank Lucas moved heroin from Southeast Asia to the streets of Harlem. *Photo: U.S. government*

vented by the Germans during World War II as a palliative for wounded troops and was introduced in the United States as a painkiller in the late 1940s. But in 1964, Dr. Vincent Dole and Dr. Marie Nyswander of the East Side's Rockfeller Institute found that methadone blocked the effects of heroin—suppressing withdrawal symptoms and reducing cravings.

With heroin addiction rampant, Chase hired Newman (who is now the head of a hospital consortium that runs Beth Israel Medical Center and St. Luke's–Roosevelt Hospital Center) to start methadone programs in the city.

Newman admits that the clinic system was flying by the seat of its pants at first, but by 1974, it had more than 32,000 patients receiving methadone in New York City. The number would eventually reach a high of about 38,000. Currently, there are roughly 35,000 people in the city receiving methadone. Most people in the city receive their doses at methadone clinics, with the treatment funded by the state and Medicaid. According to the National Drug Intelligence Center, methadone stays in the body from 24 to 36 hours, meaning that people have to get a dose every day.

That's one reason that some believe methadone is no better than heroin. In 1973, three years after the city started methadone treatment, Gov. Nelson Rockefeller had already grown tired of the new program. "Let's be frank," he told the state legislature a month before passing his famously harsh anti-drug laws. "We have achieved very little permanent rehabilitation. We have found no cures."

Twenty-five years later, Mayor Rudy Giuliani would take what he claimed was a "moral" and "decent" stand by trying to gradually phase the patients receiving methadone at city hospitals into abstinence programs. Giuliani said that opponents of his plan had "surrendered" and opted to "deal with heroin addiction by making people addicted to methadone, which maybe even is a worse drug addiction."

Though Giuliani later abandoned the plan after a five-month experiment showed that only 21 of 2,100 patients quit methadone, he's not alone in his thinking. Methadone itself is categorized as a controlled substance under the Federal Controlled Substances Act, just like heroin. People get addicted to it and even overdose. (One study showed that between 1999 and 2004, methadone-related deaths jumped 390 percent nationwide, though illegal use of the drug accounted for a large chunk of that.) And it is true that most people on methadone are trading one habit for another.

But Newman says that argument completely misses the point.

"People first have to accept the reality that we do not know how to cure this problem," Newman says. "But we don't know how to cure a lot of things—hypertension, diabetes, cardiology problems—and we accept that. We don't tell someone with diabetes, 'You're not really curing it, so we're not going to give you your insulin anymore.' "

Instead, methadone, which doesn't produce the stupefying effects of heroin, allows opiate addicts to live somewhat normal lives and, studies show, reduces crime, the doctor says. Newman also believes that the city's health department, which he commended as being "enlightened" for its strict anti-tobacco campaign, is "seemingly ignoring the heroin addiction problem." He called for the department to reach out to heroin users through an aggressive public service campaign that will show them how and where to receive treatment.

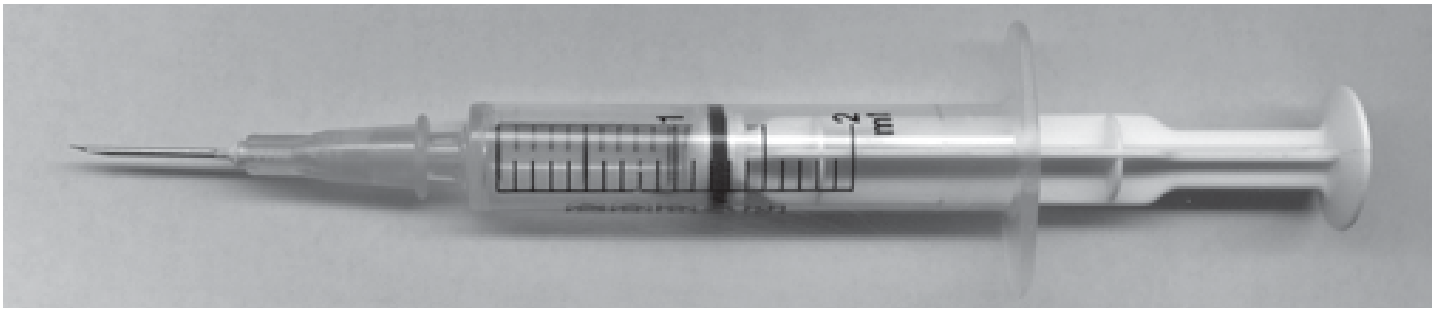
The health department's Heller does agree that "there is a level of dependence that's not being addressed" when it comes to heroin addiction. But instead of a public service campaign, the health department is concentrating on educating physicians on a new alternative to methadone: buprenorphine.

Buprenorphine comes in pill form and can be prescribed by private doctors, offering a different way to reach addicts who are hesitant to be part of a methadone treatment program. But though the pill has been legal to prescribe since 2002, only 1,000 doctors in the city have attained the certification (which requires an eight-hour course) to prescribe it, and only about 100 of those physicians are regularly prescribing the drug, Heller says.

Buprenorphine is a semi-synthetic opiate that was invented by the British pharmaceutical company Reckitt & Colman in 1982 as a painkiller. Congress cleared it for use in the United States in 2000, and in 2002, the FDA approved it under the names of Subutex and Suboxone. The drug works in the same manner as methadone, blocking the brain receptors that produce the craving for heroin and limiting the withdrawal symptoms. Each pill lasts between 24 and 60 hours.

Buprenorphine can be addictive, especially in those who aren't already addicted to opiates, but is far less so than methadone. Buprenorphine also has been shown to cause fewer overdoses than methadone does, but for those addicts who have built up a high tolerance, buprenorphine is not as effective a treatment as higher doses of methadone are, according to the health department.

Heller says she believes the main reason more doctors aren't prescribing the drug is that they haven't received



One of the few medical successes against the health effects of illegal drugs was the hard-fought acceptance of needle exchange programs, which reduced HIV rates dramatically among intravenous drug users. *Photo: Fifo*

enough training to be able to detect signs of drug use and generally aren't comfortable talking to their patients about substance abuse issues. To remedy that, Heller's office sent bulletins to 127,000 doctors and nurse practitioners in June as a way "to raise awareness among healthcare providers about the importance of talking about drug use with their patients."

Health care experts interviewed for this story say buprenorphine is the only new drug used in addiction therapy since the war on drugs began—which reflects the fact that the focus of American anti-narcotic policies is enforcement (where billions have been spent and myriad new agencies, task forces and laws have been employed) rather than treatment. So little attention has been paid to the health care aspect of the narcotics problem that prior to buprenorphine, the major medical achievement in drug treatment was the slow, begrudging acceptance of needle exchange programs.

In 1992, after a 12-year fight by activists like Jon Parker, a former addict turned Yale public health student who challenged the law criminalizing needle exchange by claiming that passing out clean needles saved lives, New York State finally authorized needle exchange programs, though possession of hypodermic needles was still illegal. Eight years later, the same activist forces, which included ACT UP, were able to win another needle exchange battle when they persuaded legislators to pass a law allowing pharmacies to sell needles without a prescription and permitting people to possess 10 or fewer of them. Since needle exchange began, statistics show the share of drug users in New York with HIV dropped from 52 percent to 6 percent, in 2006, according to Allan Clear, head of the Harm Reduction Coalition.

Nevertheless, the NYPD continued to arrest addicts as they walked into needle exchange facilities on possession charges for the trace amounts of narcotics found in the used needles, until a state appeals court judge ordered a stop to the practice in 2002. Two years later, Mayor Michael Bloomberg's administration quietly began allowing addicts to check their needles at the door of homeless shelters and then retrieve their "works" when they leave, Clear says.

According to his 2007 book "Mr. Untouchable: My Crimes and Punishment," Nicky Barnes, who received his heroin from members of the Lucchese crime family, cleared $5 million a year at the top of his game. That was before being hit with a life sentence for racketeering in 1978, which he shortened to 21 years by ratting on the other members of his organization, known as "the Council."

A small piece of that fortune came from the pockets of James Howard, who first tried heroin when he was 15, in 1968—"just experimenting"—when he was living in the Johnson Houses at 112th Street and Lexington Avenue, right in Barnes' territory. In no time, he was hooked. Out of the approximately 50 users he knew in and around the Johnson Houses, "there's only seven of us left." It could have easily been six.

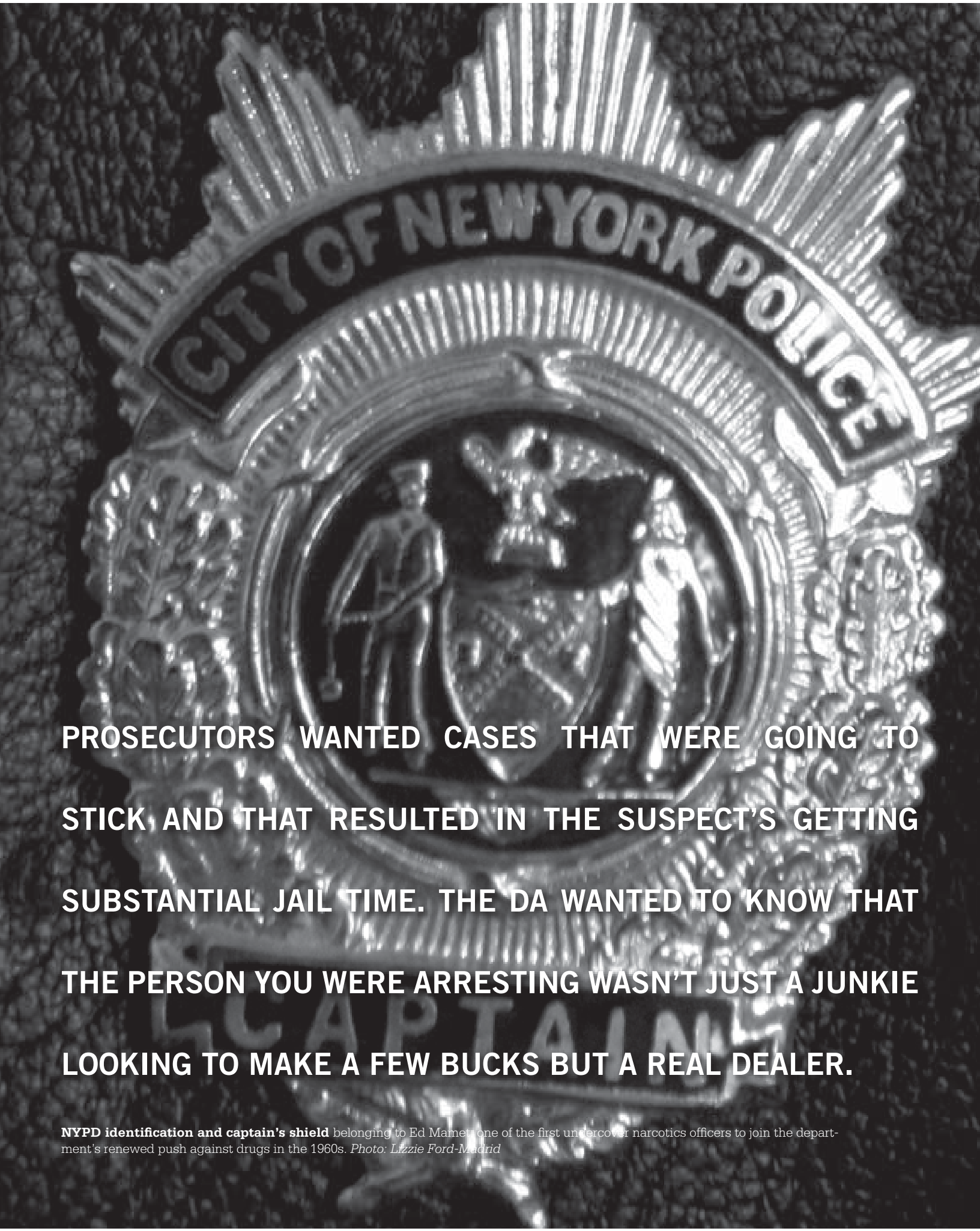
"The stronger it was, the more you wanted it," says Howard, a polite 56-year-old man with "been there" eyes and a big laugh who teaches computer skills at the Bowery Mission these days. "People would die from this stuff, and you'd be like, 'Where did they get that?' Instead of running away from it, you'd be running toward it."

Dealers often stamped their products with fatalistic names like Black Death or Could Be Fatal or Black Out.

Howard remembers his final time using heroin. "I was 17. We was chasing this guy with this superdrug all day long for about six hours, all over the place. We finally found him," Howard says. The next thing Howard knew, he woke up in the hospital after overdosing. "Turned out I was chasing death all day long," Howard says. That's when he went straight.

Drug dealers today rarely stamp their glassine bags of heroin with brand names—a move to avoid bringing attention to their operations. But those operations persist. "Heroin in New York City continues to be highly available, and the demand for heroin continues to be high," the OASAS report states. "Regular users report that they would be able to purchase heroin within a 10-minute walk from anywhere in the city."

Most heroin used in New York is still grown in Colombia, shipped to Mexico and driven across the border in trucks or cars. The DEA's Gilbride says his agents have not recently seen much heroin from Afghanistan in New York.



PROSECUTORS WANTED CASES THAT WERE GOING TO STICK AND THAT RESULTED IN THE SUSPECT'S GETTING SUBSTANTIAL JAIL TIME. THE DA WANTED TO KNOW THAT THE PERSON YOU WERE ARRESTING WASN'T JUST A JUNKIE LOOKING TO MAKE A FEW BUCKS BUT A REAL DEALER.

NYPD identification and captain's shield belonging to Ed Mamet, one of the first undercover narcotics officers to join the department's renewed push against drugs in the 1960s. *Photo: Lizzie Ford-Madrid*

III. COCAINE

"He says, 'No. I wouldn't touch cocaine, I might form a habit.' Well, this friend of his says, 'Well, you know, it's the loveliest sensation in the world. It's perfectly grand. …There isn't anything as wonderful as the sensation that cocaine gives you.'" *—President Franklin Roosevelt, comparing the mind-clouding effects of cocaine to the problem of inflation, Oct. 19, 1943*

To look at Nancy Lopez—a short woman with graying hair and glasses—you could never guess that this unassuming-looking 56-year-old was at one point a "Colombian" drug dealer herself. Though she isn't Colombian, she took over that role in the early 1980s when her boyfriend, a real Colombian drug lord, was locked up.

"He told me I had to take over the business, and I did it," she says. "I became a big drug dealer."

Lopez was a wholesaler, and for the most part, it was an easy way to make a lot of money. Though some of the people she dealt with were armed, it never struck her as overly dangerous. Her boyfriend's connection provided her with the cocaine, and she passed it on. "There were only two or three Colombian women I had to make contact with," she says.

Lopez comes from a typical middle-class family and grew up in Rego Park, Queens. Some of her brothers knew what she was up to, but no one made a big deal about it. She stayed away from doing coke herself, and with the money that poured in, she bought expensive jewelry, clothes, a Mercedes and a BMW. She went clubbing and did whatever she wanted. "It was a very luxurious life, a lot of power, a lot of money," she says. "It was the good life, I'll tell you. I lived the good life."

That is, until her connection made a deal with an undercover cop in 1985, leading to Lopez's arrest. She eventually pleaded out, served four years in state prison and was on parole for another three. At Bedford Hills prison, Lopez says, a huge majority of the women she did time with had drug problems. "I've got to say, that made me feel guilty, seeing all these people locked up because of drugs," she says.

Since getting out of prison 20 years ago, Lopez has worked with the Fortune Society, helping prisoners get jobs and housing and obtaining other services to help them re-enter society. "That's just how it happened," she says. "No excuses. It was my decision, just the wrong decision."

According to the DEA website, sometime in 1975, Colombian drug dealers, who were already well established in the world's marijuana market with their high-grade Colombian Gold, wrested control of the cocaine importation business from Cuban crime organizations operating in Florida and New York. By then, cocaine was making inroads into heroin's dominant yet declining market position in New York City. But cocaine had not yet attained the sinister status it would in subsequent years, especially when it was used to make crack, a derivative that had a predominantly black user population.

"Pinstriped Wall Street lawyers take it from 14-karat gold spoons at elegant parties. Ghetto kids huddle in tenements and sniff it off matchbook covers," a 1977 Newsweek article titled "The Cocaine Scene" read. "Graduates of a North Miami high school hold a reunion every December to take it at a 'White Christmas' bash, and a California corporate president dishes it out as a holiday bonus to his favorite secretaries. Some aficionados use nothing but silver straws from Tiffany & Co. while others sniff it through rolled up $100 bills. Cocaine—'the Cadillac of drugs'—was once known as the plaything of jazz musicians, kinky movie stars and the dissolute rich. No longer. To the delight of some and the alarm of others, cocaine is regularly bought, used and lavishly praised by hundreds of thousands of Americans."

In a tone that seems ironic given the war-on-drugs rhetoric that would soon dominate any public discourse on drugs, the Newsweek article continued, "Taken in moderation, cocaine probably causes no significant mental or physical damage and a number of researchers have concluded that it can be safer than liquor and cigarettes when used discriminately." The article went on to say that cocaine has become "the recreational drug of choice for countless Americans" and that there was even "growing pressure to lessen penalties for its use—and some arguments to de-criminalize cocaine altogether."

Those halcyon memories of cocaine use in the city usually involve stories about Studio 54 with its mix of celebrities, disco and sex, and its sign depicting the man on the moon lifting a cocaine spoon to his nose.

As late as 1978, cocaine use was on such a small scale that those tracking narcotics in New York City devoted but a single paragraph to it in the state's Division of Substance Abuse Services 1978 report on drug use in New York over the preceding three years: "Cocaine sales have recently increased in New York City, with Jackson Heights, Queens, being the major trafficking center," it read, adding that "the Jack-

Veteran cop Ed Mamet says police department procedures made it hard for narcotics officers to go after big dealers rather than small-time peddlers. *Photo: Lizzie Ford-Madrid*

son Heights area has been the scene of several angry protests by local residents and the businesses who accuse the law enforcement agencies of failing to halt the cocaine dealing in numerous bars and social clubs." Back then, the NYPD was making fewer than 1,600 arrests for cocaine a year.

Through the early 1980s, cocaine was shipped by small planes from Colombia to the Bahamas (and later, when law enforcement caught on, from Jamaica to the Bahamas) where air-dropped cargo was fished out of the ocean and loaded onto speedboats. These boats then sped under the cover of night, with running lights off, to South Florida. These were the "Scarface" days of the Mariel boatlift and the spectacularly public turf wars of the "cocaine cowboys" in Miami. It was a time when Colombia's biggest drug czars, the Ochoas, Pablo Escobar, Carlos Lehder and Jose Gonzalez Rodriguez Gacha were consolidating their forces to form what law enforcement dubbed "cartels" that some estimate came to make tens of millions of dollars a day.

New York received its supply from that chain either from people driving the powder up I-95 from South Florida or putting it in a suitcase or bag and jumping on a flight from Miami or Fort Lauderdale to JFK or LaGuardia.

In the U.S., the Colombian wholesalers generally gravitated toward using other Colombians or Dominican drug dealers to distribute the contraband, perhaps because they were more comfortable with other Spanish speakers, the DEA's Gilbride says. In addition, Dominican gangs were already active on the streets of Washington Heights near the George Washington Bridge—a conduit for drug deliveries to the city—making them attractive business partners. The cocaine would be cut then resold, cut and resold until it reached the riskier jobs of hawking the drugs on the street, which tended to fall to either young Latino or black men.

Around the time that Lopez started her life as a "Colombian" drug dealer, President Reagan was reviving the war on drugs. Soon after taking office in 1981, Reagan established the South Florida Task Force, which charged a host of federal law enforcement agencies like the DEA, the Bureau of Alcohol, Tobacco and Firearms, Customs and the FBI, as well as the military, with putting a stop to drug trafficking.

This heavy law enforcement attention forced the Colombians to change their shipping routes from the Bahamas to Panama, then Puerto Rico and the Dominican Republic, and finally to Mexico—shifting the main narcotics entry point into the U.S. market to the southwest border.

In the early 1980s, the Colombian drug cartels controlled nearly every aspect of cocaine supply, from the grow fields to the conversion labs to smuggling it into the country to selling it, wholesale, to middleman drug dealers in America. But things changed in Mexico, where the Colombians hooked up with Mexican drug trafficking organizations, or DTOs, already smuggling heroin and marijuana into the U.S. Over time, instead of paying these Mexican drug organizations cash to smuggle their cocaine, the Colombians gave them the option of taking a percentage of the cocaine shipment, Gilbride says. This arrangement allowed the powerful Colombian cartels to further insulate themselves from the riskier business of smuggling and distribution in the U.S. and set up the Mexican DTOs to become the predominant narcotics transporters in America, Gilbride says.

By the late 1980s, the number of annual NYPD arrests for cocaine had grown to more than 10,000. By then the cocaine fad had started to fade for white New Yorkers, who were found to make up only 19 percent of all those treated for cocaine addiction, and had become the drug of choice of blacks, who made up 61 percent of treatment admissions for the drug.

The southwest border of the U.S. remains the main entry point for cocaine coming to New York these days. The number of cocaine arrests appears to have dwindled—it was at 5,500 when the NYPD last reported detailed statistics, in 2000. The NYPD seized 11,600 pounds of coke in 2007.

The health department's Heller says that by some estimates, cocaine use appears to have been about 20 percent higher in the early 1990s than today. But since about the mid-1990s, the estimates have remained consistent; roughly 100,000 New Yorkers use powder cocaine regularly. Among the city's total of 71,918 drug treatment admissions in 2008, 56 percent involved cocaine as a primary, secondary or tertiary problem, the OASAS report states.

Treatment admissions records show that 40 percent of the people treated for snorting powder cocaine (as opposed to smoking crack) in 2007 were black, 35 percent Hispanic and 20 percent white. Of that, the statistics show that 30 percent had no income source. Allen, the drug counselor, says cocaine, like most drugs, offers equal opportunity when it comes to addiction. "It's a mixed bag," he says of the people ACI treats. "You have working people, people who don't work, white-collar, blue-collar. Just name the job."

The OASAS analysis reports that in recent years, "many cocaine indicators, which had been stable, are beginning to show an increase" and that "in general, the drug still accounts for major problems in New York City." OASAS's Street Study Unit reported in 2008 that the overwhelming majority of cocaine users snort, noting that "the old street name 'nose candy' is starting to reemerge," and those who inject the drug usually do so in combination with heroin.

The Street Study Unit, a group of former addicts who gather street-level drug trend intelligence for the state, reports that these days, powder cocaine "buying and selling continues at a stable pace. ... Cocaine prices can fluctuate, as sellers vary the purity of the product and offer several different size packages." An ounce in 2007 sold for between $650 to $1,450, with the price at $80 to $160 for an eighth of an ounce, or "eight ball"; up to $80 for a gram; and $5 to $20 for a small bag, according to the report. Most people buy a quarter-gram package for $25, and more often than not, dealers wrap it up in aluminum foil, the

ROCK REALITIES

The risks of reform

On May 8, 1973, Gov. Nelson Rockefeller signed into law what he called "the toughest anti-drug program in the nation" and then congratulated himself and the legislators who stood fast "against this strange alliance of vested establishment interests, political opportunists and misguided soft-liners who joined forces and tried unsuccessfully to stop this program." Pushed by reporters to identify this "strange alliance," the governor included the state's district attorneys and some police officials as having opposed the new laws.

Thirty-six years later, some of those onetime opponents are among the staunchest defenders of what's left of the Rockefeller drug laws, which the state legislature and Gov. David Paterson reformed in early 2009 for the third time in five years.

The judges, district attorneys and law enforcement agencies aligned against Rockefeller in 1973 were concerned that his laws, which imposed harsh mandatory minimum sentences on drug offenders and limited plea bargains, would clog the court system and hamper efforts to turn small-time pushers against bigger narcotics traffickers. At the same time, the more traditional "soft-liners," like the New York Civil Liberties Union, worried about the fairness of mandatory sentencing for most drug charges—especially the proposed life sentences for the most serious offenders, which, as a New York Times editorial pointed out, treated "a drug dealer more harshly than a murderer."

The most draconian of the Rockefeller measures were removed in 2004 and 2005, when the legislature erased life sentences for nonviolent drug felons, reduced the minimum penalty for the most serious drug offenses and doubled the weight of drugs required to convict defendants of the top charges.

The newest set of reforms, passed into law in March, will give judges in the state's drug courts total discretion—in cases involving most felony drug charges—to place nonviolent defendants in court-approved treatment programs instead of prison as long as it is the defendant's first or, in some cases, second offense. Offenders facing charges for property theft and other nonviolent crimes that are determined to have stemmed from their addictions are also eligible for diversion programs. Some people already in prison on drug charges can apply for new sentences under the reforms.

In the past, the prosecutors' offices alone got to choose which defendants would be eligible to participate in drug court. Now judges have that power in a wide swath of cases. And that's what has the opponents of this latest reform upset: the idea of prosecutors' authority being usurped.

"Why would you take away our power?" asks Richmond County District Attorney Daniel Donovan, who is also president of the New York State District Attorneys Association. "There are going to be times when the judges are not going to know what we know about somebody, but we're not allowed to talk about it in open court," like, he says, a guy arrested for drugs who is also a suspect in two homicides. "The people in the best position to be able to identify who should go into treatment and who deserves jail are the prosecutors."

Donovan says the district attorneys' association's "biggest fear" is that drug dealers are going to finagle their way into treatment, sidestep prison sentences and quickly return to their illegal activities, with the net result of a resurgence of violent crime in the city. Other law enforcement officials echo those fears.

The predictions of a crime explosion are not new. Gabriel Sayegh, director of the State Organizing and Policy Project at the Drug Policy Alliance Network, a nonprofit drug law reform organization, says anti-reform legislators and law enforcement types tried playing the fear card during the debate over the 2004 reforms to the Rockefeller laws. The reforms passed. "It was the same type of 'There's going to be hell to pay' stuff, but of course, nothing happens," says Sayegh. Approximately 1,000 inmates were eligible for resentencing in 2004 and 2005. About half of them were released, and the recidivism rate turned out to be only 2 percent. Crime continued to decline. *—SG*

street research showed.

The DEA estimates that the price of cocaine has almost doubled over the past two or three years. In December 2006, a kilogram was selling for between $13,000 and $26,000. By December 2007 it had gone up to between $20,000 and $28,000. And nowadays it goes for between $24,000 and as much as $40,000.

Gilbride says he thinks the price increase has a "direct relationship" to the Mexican government's trying to crack down on drug dealers, coupled with "good investigative work on the U.S. side." Gilbride says for the past four or five years, the DEA has focused not only on making arrests and seizures but in stopping the flow of cash back to the drug lords. Typically, the drug dealers take loads on consignment and don't get another shipment until they pay off the last one. So if you cut off the cash, you might cut off the next drug shipment.

But Richard Curtis, an anthropology professor from John Jay College of Criminal Justice who studies drug trends in the city, is skeptical. "There's an increase in the price of cocaine here, but it's not clear to me that it's because of anything that [law enforcement has] done," Curtis says. "It could be that it's being sent to Europe instead, where they fetch higher prices for it." The U.N.'s 2008 World Drug Report notes that "most of the global increase of cocaine use over the last decade can be attributed to rapidly rising cocaine consumption in Europe" and that North America's share of global cocaine seizures went from 36 percent in 2000 to 24 percent in 2006.

The price of coke might also have been inflated by today's more costly transportation. Instead of the huge multi-ton smuggling attempts of the past, like the more than 10,000 pounds the DEA discovered in a warehouse near the Queensboro Bridge in 1989, loads being secreted into the country today are smaller—15 to 25 kilos at a time—and there are more of them. But for every drug smuggling attempt that is detected, more than nine others get through untouched.

Once in the U.S., the traffickers compartmentalize their tasks, putting someone in charge of initially storing the drugs and someone else in charge of delivering them to the middleman, who usually keeps them in a warehouse until the shipment is broken down and distributed to dealers. Another person is designated to collect the money. The cash is usually sent back hidden in the same tractor trailer that delivered the drugs. Each link in this chain knows only who his next contact is, making it very difficult for law enforcement officials to get to the "Mr. Bigs"—the guys in charge—Gilbride says.

How to get the Mr. Bigs—and even deciding whether it's worth trying to—has been a challenge to narcotics detectives in New York City for decades.

When Ed Mamet joined the NYPD's Narcotics Bureau in 1962, it was part of a push to increase the number of undercover drug detectives by a whopping 50 percent. "There was an increase in narcotics [use], and at the time, there were only eight undercovers for the entire city," says Mamet, an old-school cop whose gravelly voice and tough-guy persona would make him a perfect character in one of his cousin David Mamet's plays. "So I went in with three others to increase it to 12."

At the time, cocaine, which was sold in capsules, was very rare and very expensive, Mamet recalls. Heroin was the most popular drug on the street and had been since after World War II—"It was all over the place," Mamet says—followed by marijuana and LSD.

Back then there were no "buy and busts," the favored law enforcement technique for making drug cases today, in which an undercover makes a drug buy and, within minutes, backup cops swoop in and make the arrest. Back then, Mamet says, prosecutors wanted cases that were going to stick and that resulted in the suspect's getting substantial jail time. "The DA wanted to know that the person [you were arresting] wasn't just a junkie looking to make a few bucks but a real dealer," Mamet says.

"Usually we would go out with someone who was arrested, who wanted to work off a case [reduce their sentence], a low-level junkie," says Mamet, who now serves as a police training and investigations consultant. "The standard buy procedure was he [the cooperator] would introduce us to the seller. We'd make at least two buys, sometimes three, if we really wanted him bad. And sometime later, other detectives would make the arrest, and that's how you preserved your [undercover] identity."

But there were inherent problems

1942
The Opium Poppy Control Act makes it illegal to raise poppies in the U.S. without a license.

1951
A landmark report on organized crime by Sen. Estes Kefauver finds that the Mafia is involved in peddling illegal drugs.

1953
The CIA, in a quest to find an ideal truth serum, begins the MK-ULTRA experiments, in which subjects, some unwitting, are given LSD.

1959
William S. Burroughs' novel "Naked Lunch"—which revolves around experiences with heroin, morphine and other drugs—is published.

1962
NYPD detectives and federal agents seize more than 100 pounds of heroin with a street value of $34 million in the French Connection bust.

with the multiple-buy technique. A lot of times, Mamet says, the guy you made a buy from would subsequently disappear. He also says there were so many dealers turned informants that they all seemed to know one another. So when one of the informants would bring an undercover around, most of the other drugs dealers knew the new face was a cop.

NYPD policy also made it difficult to catch the big fish. "We were limited in money because the city didn't want to spend too much," Mamet says. "We could buy $3 bags and $5 bags and sometimes a $10 bag. But if we worked our way up to the larger cases, we had to get the feds involved."

These procedural problems were compounded in 1972, when the Knapp Commission on police corruption issued a report that excoriated the NYPD—and singled out the narcotics division for its harshest criticism: "The complicity of some policemen in narcotics dealing—a crime considered utterly heinous by a large segment of society—inevitably has a devastating effect on the public's attitude toward the Department."

The corruption that the Knapp Commission attributed to the NYPD's narcotics cops included planting drugs on suspects, "padding" or adding more drugs to narcotic seizures to change a misdemeanor charge to a felony, robbing drug dealers and then selling their drugs, tipping off targeted dealers about pending cases—even kidnapping witnesses to prevent them from testifying against drug dealers.

"THE POLITICIANS STARTED WITH THIS BULLSHIT OF 'LET'S GET THE BIG GUYS.' WELL, THE BIG GUYS WERE NOT THAT EASY TO GET."

The Knapp Commission's recommendations included increased supervision and stricter evidence collecting and reporting procedures. It spurred a sea change in the focus of the NYPD's narcotics investigations. The commission's final report, issued on Dec. 27, 1972, recommended that the NYPD's narcotics enforcement efforts "be directed away from indiscriminate drug loitering arrests and toward making good cases against high-level drug distributors."

Five months later, Gov. Rockefeller pushed through what he boasted were the toughest drug laws in the country. But by then, the NYPD, still smarting from the harsh and very public criticism meted out by the Knapp Commission, had put out an unofficial directive to most of its cops: Don't make drug arrests.

"What resulted was a hands-off policy by the New York City Police Department and the introduction of the 'Mr. Big' strategy of drug control, an approach that focused on arresting major traffickers, but allowed street-level drug markets to grow unchecked," according to a 2002 drug study headed by Curtis of John Jay College.

Phillip Panzarella, who was working at that time in the Narcotics Division's "weight team," which concentrated on making bigger cases, recalls Knapp's impact. "The politicians started with this bullshit of 'Let's get the big guys.' Well, the big guys were not that easy to get. I got news for you—they weren't standing on the corners selling dope. They were well, well insulated." Panzarella says he couldn't remember any official directive from NYPD brass about shying away from street-level drug arrests. But he says the Knapp Commission proceedings "absolutely" had a chilling effect when it came to patrol cops and other officers assigned to non-narcotics units making drug busts. "Nobody wanted to be accused of being a bad cop just because you were making narcotics arrests," he says.

Statistics bear out that post-Knapp narcotics arrests went way down. In 1971, the NYPD made 36,672 drug arrests. In 1973, the year that the Rockefeller drug laws went into effect and the year after the final Knapp report came out, that number dropped to 14,704. Despite a continued supply of heroin and a mass infusion of powder cocaine into the New York drug scene, it would be another 10 years until the police again made as many as 36,000 drug arrests in a year. By then, the police faced a new drug enemy.

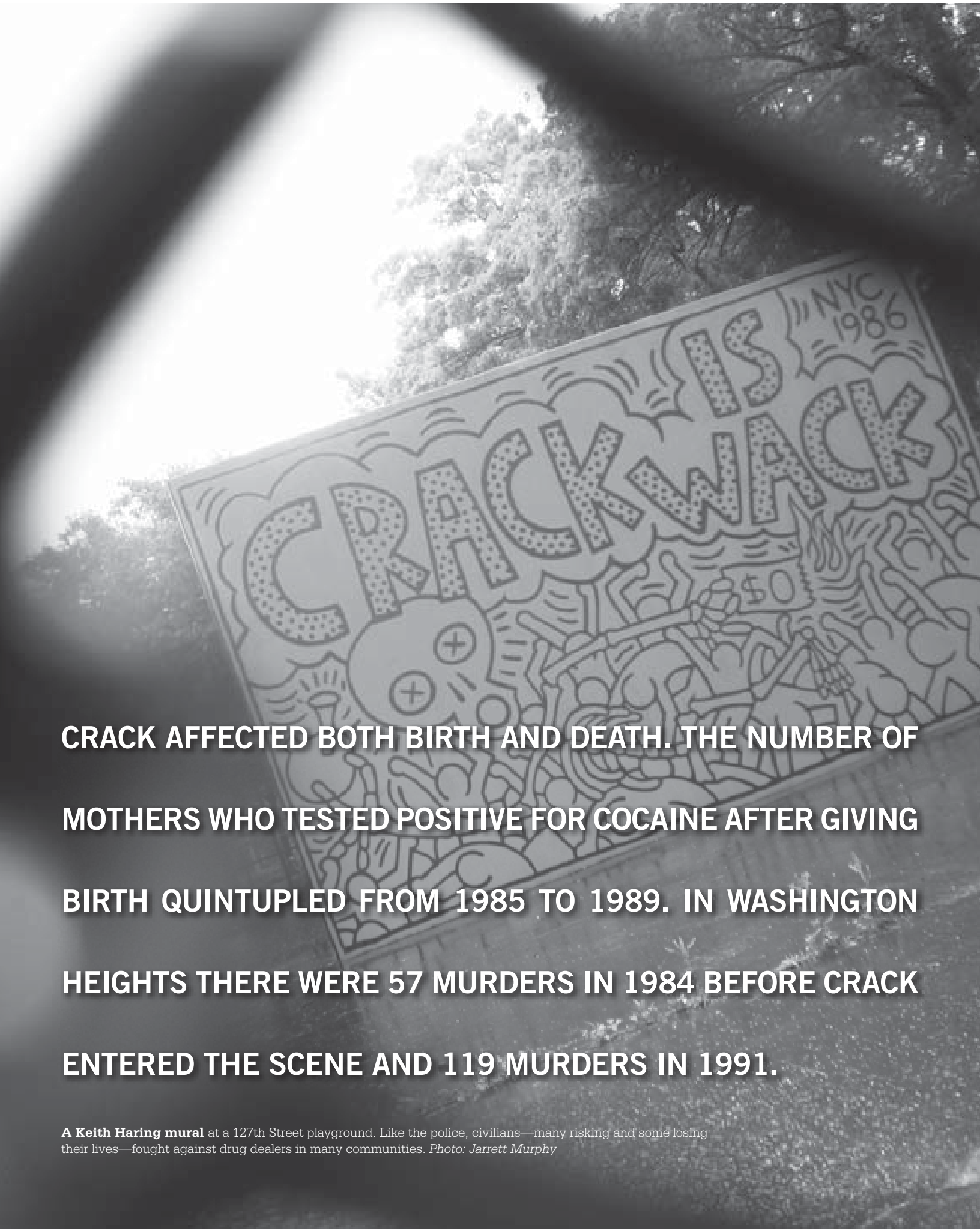
1964
Doctors at Rockefeller University in Manhattan begin a test program for the use of methadone to treat addiction.

1967
Velvet Underground's song "Heroin" is released.

1968
R&B star Frankie Lymon ("Why Do Fools Fall in Love") dies of a heroin overdose in Harlem.

1969
President Nixon unveils a 10-point plan for dealing with narcotics, "this growing menace to the general welfare of the United States."

1970
Elvis Presley meets Nixon after asking to be appointed as a "federal agent at-large" in the war on illegal drugs.



CRACK AFFECTED BOTH BIRTH AND DEATH. THE NUMBER OF MOTHERS WHO TESTED POSITIVE FOR COCAINE AFTER GIVING BIRTH QUINTUPLED FROM 1985 TO 1989. IN WASHINGTON HEIGHTS THERE WERE 57 MURDERS IN 1984 BEFORE CRACK ENTERED THE SCENE AND 119 MURDERS IN 1991.

A Keith Haring mural at a 127th Street playground. Like the police, civilians—many risking and some losing their lives—fought against drug dealers in many communities. *Photo: Jarrett Murphy*

IV. CRACK

"This is crack cocaine seized a few days ago by drug enforcement agents in a park just across the street from the White House. It's as innocent-looking as candy, but it's turning our cities into battle zones, and it's murdering our children. Let there be no mistake: This stuff is poison."
—President George H.W. Bush, Sept. 5, 1989

A U.S. News & World Report story in August 1991 made the claim that William Hopkins was the first official to spot crack in New York City. Hopkins, a former Bronx narcotics officer, was heading a state research unit that monitored drug trends on the street level and reported its findings to police. The article has Hopkins overhearing a mention of crack during a ride through the Tremont section of the Bronx in 1983:

> *They said it was "rock cocaine." It was almost another year before Hopkins got a firsthand look at a man who was smoking it. "I learned for the first time it was done with baking soda, not ether," says Hopkins. "And I examined what he had, and it was in vials. I knew we had something new on the market." Within a year, crack had saturated the city.*

That same article—entitled "The Men Who Created Crack"—largely attributes the introduction of crack in New York to "a canny street tough named Santiago Luis Polanco-Rodriguez."

Polanco-Rodriguez grew up in Washington Heights and, by the age of 20, was involved in a pretty successful cocaine business, selling the powder in small glassine envelopes he stamped with "Coke Is It," a tongue-in-cheek adaptation of the Coca-Cola slogan. Sometime in early 1985, "Yayo," as Polanco-Rodriguez was called, started hustling crack. A Nov. 29, 1985, article was the first time that the New York Times wrote about this new drug.

"A new form of cocaine is for sale on the streets of New York, alarming law enforcement officials and rehabilitation experts because of its tendency to accelerate abuse of the drug, particularly among adolescents," the article read. "The substance, known as crack, is already processed into the purified form that enables cocaine users to smoke—or 'free-base'—the powerful stimulant of the central nervous system."

News articles only speculate how Polanco-Rodriguez was introduced to crack. One theory held that the Jamaican gangs he was involved with in the cocaine business introduced him to crack soon after it first arrived in Los Angeles in the summer of 1985. "Another," the Times wrote, "is that the Medellín cartel in Colombia recognized Mr. Polanco-Rodriguez's marketing talents and taught him how to cook the drugs."

In any event, along with his mother, sister and three brothers, Polanco-Rodriguez is credited with starting what law enforcement officials called the first large-scale, organized crack operation in the city. He called his business Based Balls.

In his book "New York Murder Mystery: The True Story Behind the Crime Crash of the 1990s," John Jay College of Criminal Justice sociologist Andrew Karmen wrote, "Crack was an immediate success."

"It could be marketed in smaller, less expensive units that seemed deceptively affordable to a younger, lower income clientele—who unfortunately had weaker commitments to conventional lifestyles, less to lose, and fewer resources at their disposal to help them cope with drug-induced problems," Karmen added. "As the pleasurable practice caught on largely among the most vulnerable and marginal of inner city residents, especially in New York, Los Angeles and Miami, the news media likened crack smoking to a 'plague' that emanated from the netherworld and threatened to invade and destroy suburban sanctuaries. This imagery was reinforced nightly as news broadcasts featured action clips of narcotics squads raiding crackhouses, busting down doors, and carting off young black and Hispanic men in chains."

According to a 1987 indictment, Yayo employed as many as 100 workers and each day hustled up to 10,000 red-capped vials of crack for $10 apiece ($20 for the "jumbos"), mostly in Washington Heights and Kingsbridge Heights in the Bronx. The group was said to offer buy-one-get-one-free specials to keep addicts loyal to their product. Employees passed out business cards with "Based Balls" and "Cop and Go" that listed the locations to buy, or "cop," their crack.

Officials estimated that the family made somewhere in the vicinity of $36 million a year. Employing a full-time accountant, Polanco-Rodriguez used a wire transfer store, a pharmacy and a nightclub as fronts to launder his drug money through a finance company in his native Dominican Republic. He ruled his crack empire through violence; his organization was connected to at least five murders of rivals and out-of-line employees over a two-year span.

By the time the feds finally brought the ring down in July 1987, Polanco-Rodriguez had fled to the Dominican Republic, never to return despite the minor international incident it caused when the D.R. refused to allow him to be extradited to the United States to stand trial for his alleged crimes. Even

Casimiro Steven Torres, who was arrested some 67 times during his years as an addict. During short stints in prison he became addicted to new drugs. He's been clean since 2005. *Photo: Lizzie Ford-Madrid*

though Yayo was gone, the damage had been done. Polanco-Rodriguez, officials say, had established the standard model by which crack gangs were to be run throughout the city.

Lorenzo "Fat Cat" Nichols already had just such an organization up and humming along smoothly in southeast Queens. In 1980, he hooked up with a cocaine dealer named Ronnie Bumps who was buying cocaine from Colombian drug dealers who had moved into Jackson Heights. When Bumps went to prison on a federal case, Nichols became the top man in the crew. According to late Daily News reporter Mike McAlary's book "Cop Shot," once Nichols took over, "he figured, what with so much profit to be made, there was no sense dying in a drug war. So Nichols called a meeting with some of the other drug dealers in the area." After a night of partying with Nichols, the most prominent drug dealers in southeast Queens decided to amicably split up the turf, reported McAlary, but "everyone answered to Fat Cat," who soon took on a "Robin Hood of the hood" reputation for treating kids to ice cream and candy and helping out people in the neighborhood who needed cash.

Things began falling apart for Nichols when an informant, who was subsequently murdered, set the Cat up in the summer of 1985. A raid on his storefront headquarters nabbed guns, six ounces of high-grade heroin, two ounces of cocaine, 10 pounds of marijuana and $180,000 in cash. The Cat was able to post the $70,000 bail, but his parole

CASUALTY OF WAR

One addict's saga of punishment

Behind the tough-on-crime speeches, the statistical spins and the overblown media coverage, it is possible that New York City's war on drugs has long been about chasing sad-sack addicts like Casimiro Steven Torres once was (photo opposite).

By his own count, Torres piled up 67 arrests for a variety of petty and not-so-petty crimes. Out of those six dozen arrests, only three resulted in state prison sentences, the longest of which was three years for a robbery committed when he was 20. But the more typical punishment was anywhere from a night in city jail to 45 days on Rikers, after which he went back out on the streets, literally. Every single crime he committed, he says, was to pay for one type of drug or another.

Torres grew up poor with an alcoholic mother, abandoned by his father. During periods when his mother was hospitalized for her habit, her nine children were sent to state-run facilities where, Torres claims, he suffered mental, physical and sexual abuse. He turned to drugs (pot, LSD and cocaine) before puberty and at 15, after a suicide attempt and an escape from a psychiatric ward, he was arrested for the first time, for possession of marijuana.

Torres, going by the nickname "Casey," yo-yoed between the streets and group homes (where, he claims, the abuse continued) for a couple of years, until the state couldn't legally hold him anymore. His mother died when he was 17, and a day after her funeral, he was arrested for a robbery that landed him in a juvenile detention center. After he was released, he says, "I just became a street person." Hanging out mostly in Times Square and Hell's Kitchen, sleeping on top of the lockers at Penn Station and in subway tunnels he started smoking crack and stealing and robbing to pay for it. "I never shot anybody or stabbed anybody or anything like that," he says. "Not to say I didn't get violent once in a while."

In 1989, when he was 20, he landed in state prison for the first time, after committing a robbery in order to buy crack. "The minute I was released, the first time I got off the bus at Times Square, I immediately got high," Torres says. "I had no intention of doing anything else." As in all his subsequent jail or prison terms, he says, he received no substance abuse treatment while he was locked up.

Not only did he never receive drug treatment while incarcerated but "prison is where I picked up a heroin addiction," Torres says, adding that he later became hooked on Vicodin while locked up too. "Drugs are plentiful in prison."

On July 27, 2005, Torres was arrested for the last time. He does not recall why. After doing 45 days on Rikers Island, he checked out the Fortune Society, a nonprofit inmate services agency that another former inmate recommended, and he began substance abuse treatment.

Feeling the need to "reinvent" himself, he started calling himself "Caz." Whereas Casey couldn't go more than a few weeks without using, Caz has been sober for nearly four years, has a wife and daughter, and works as a drug and HIV-AIDS counselor. Now 43, he is not sure why he has been able to stay away from drugs this time, except to say, "All of a sudden I just wanted to live more than I wanted to die." —*SG*

1971
NYPD detective Frank Serpico is shot during a drug bust at 778 Driggs Avenue in Brooklyn.

1972
The Knapp Commission reports on widespread corruption in the NYPD, especially in narcotics units.

1973
New York Gov. Nelson Rockefeller signs the nation's harshest drug laws, requiring prison time for almost all drug felons.

1977
Studio 54, a club destined to be as famous for its drug use as its dancing, opens.

1978
The NYPD arrests 18,000 people on drug charges during the year.

officer, Brian Rooney, determined that Nichols had violated the parole he was on for a previous armed-robbery conviction, sending Nichols back to jail. Three months later, Rooney was ambushed and assassinated by members of Nichols' gang on orders from the Cat.

Then, on Feb. 26, 1988, members of Nichols' gang murdered a 22-year-old rookie police officer named Edward Byrne, who was sitting guard in a patrol car outside the home of a witness who had been threatened by Cat's boys. After that, things were different.

Even before Byrne's death, law enforcement strategies had already been evolving. During the years of Polanco-Rodriguez and Nichols' ascendancy, the NYPD's narcotics officers began to shake off the hesitancy they'd felt since the Knapp Commission report. Operation Pressure Point, started in January 1984, brought the NYPD back into the narcotics enforcement game. "Our objective is to retake the streets from the drug possessors," said Police Commissioner Benjamin Ward, then just starting his third week on the job. "We plan to take and keep these streets with a uniformed force. And if they move, we will follow them."

Ward's use of the word "possessor" was telling: The NYPD's first concerted street-level enforcement operation in more than a decade was not focused on Mr. Big. "I'm not kidding myself," Ward said. "The drug problem is a national problem, and we will not stop the flow of drugs into New York City. But I can't not do anything. I must do something."

Some 231 officers, both undercover and uniformed, were deployed on the Lower East Side and in Alphabet City with the mission, as the Associated Press wrote, of "arresting buyers and sellers, stopping suspicious cars and pedestrians, and strictly enforcing traffic and disorderly conduct laws." By the day's end, Ward's effort to "do something" resulted in 110 arrests, 10 times the usual daily number, and confiscations of 683 envelopes of heroin, 68 of cocaine, 60 of marijuana, a bottle of methadone, 78 pills, 107 hypodermic needles, $6,000 in cash, a car, nine knives and two swords, the AP reported.

The NYPD's Ward responded to rising drug crime with mass arrests. *Photo: nih.gov*

Three weeks later, Ward testified before the City Council Public Safety Committee and reported that there had been 1,362 arrests made during Operation Pressure Point's first 18 days. He told the committee members that the drug dealers had been driven out of the area. When asked where they went, Ward replied, "I hope they go to New Jersey."

Ward was being facetious, but his answer nevertheless got at the root of the so-called "saturation arrest" strategy of policing. The drug dealers and addicts don't disappear; they just relocate. Nevertheless, in one form or another, the saturation arrest approach has remained, since 1984, the NYPD's de rigueur strategy when it comes to narcotics enforcement.

If the mass arrests had an impact on reducing crime, it was a delayed one at best, according to the statistics. As drug arrests during the last five years of Mayor Ed Koch's tenure climbed from 55,906 to 94,243 (a 69 percent jump), homicides went up 38 percent (from 1,392 to 1,927), robberies increased 17 percent, shootings and other serious assaults went up 40 percent, and total felonies went up 4 percent. But, as Ward said, at least police had been doing "something."

When Byrne was killed, the police had to do something more. Despite what would appear to be a lack of statistical evidence of any success through the strategy's first four years, Koch and Ward went straight back to the mass-arrest playbook—but on steroids.

Just weeks after the officer's murder, on March 7, 1988, Ward announced the creation of a state and federal initiative called the Tactical Narcotics Team, or TNT, to focus on one block at a time until the 22-square-mile area of southeast Queens was rid of drug dealing. Once again, Ward did not profess any confidence that the tactic would succeed. "We can't guarantee it will work," he said, but added, "The inability to do everything shouldn't be an excuse to do nothing."

It did work, at least for a while, says Panzarella, who by then was in the homicide bureau and served as one of the supervisors on Byrne's murder investigation. In the short run, the TNT operation in southeast Queens "shut the drug markets down completely," he says.

The strategy had its critics. The Citizens Crime Commission of New York City, a watchdog organization, criticized Koch and Ward, saying that instead of relying on combating drugs and attempting to reduce overall crime by arresting street dealers, special police and prosecution teams should be created to concentrate on taking down the most violent and best-organized drug gangs in the city. The commission also called for increased financing of rehabilitation programs for drug addicts and programs that teach schoolkids about the dangers of drugs.

In November 1988, Koch announced plans to expand TNT into six more neighborhoods around the city. Carlton "Chucky" Berkley was part of the first Manhattan North TNT squad. "Oh man, I'm telling you, it was bad," recalls Berk-

ley, a stocky guy with a thick, muscular neck and forearms like Popeye's who lives in the same Harlem brownstone where he grew up. "As soon as I got out of the car, I had [dealers] coming right to me, 'Hey, how ya doing, brother? What do you need?' Sometimes I didn't even have to get out of the car. It was so easy. As an undercover, it was like being a kid in a candy store."

Berkley spent five years, from 1988 to 1993, in TNT. At first, the drugs were being sold so openly on the streets—even in wintertime—that dealers even slung rock to U.S. Attorney Rudy Giuliani and Sen. Al D'Amato, who were in disguise as part of a silly 1986 publicity stunt. Back then, being a ghost (the undercover who watches the undercover buyer's back) was relatively easy, Berkley says. All he did was observe from a distance and radio to his back-ups the descriptions of the guys the undercover was dealing with. A short time after the buy, the backups would make the bust.

But within three or four months after he started working on TNT, Berkley says, the deals moved off the streets into lobbies, which vastly increased the dangers to the undercover buyer. Those indoor hand-to-hand deals then gave way to a system in which the dealer would bring the buyer inside, tell a runner how much the buyer wanted and the runner would go into an apartment somewhere in the building to retrieve the desired amount of drugs. That way, the dealer wouldn't be caught holding large amounts.

After police upped patrols inside buildings, the drug dealers starting utilizing a system of multiple apartments and radios to complete their deals. "They got sophisticated," Berkley says. This same cat-and-mouse game is played out between cops and dealers today.

Berkley says the goal was always to get Mr. Big, but they rarely did. "We really wanted to get the mother lode on the big men, but nine times out of 10, we wouldn't get the big men—we'd get the little ones," Berkley says. But by "big" he means the guys heading the operation in a particular building or project. When their cases led to the truly big men—the guys actually bringing the drugs into the neighborhoods—they were told by supervisors to leave the big stuff to the FBI and DEA, he says "which to me was a crock of shit. If the NYPD wants to stop something, they can do it. We have the resources."

Though he harbors some frustrations, Berkley, who is running this year for a Manhattan City Council seat, still believes that TNT made a difference during his years in the unit. "Back then, people were afraid to call police because they thought the drug dealers would get them if they found out, and they were afraid of getting shot just walking down the street if these gangs started having a turf battle," he says. "It was a real catch-22, and I think we definitely made a difference."

Of course, crack hasn't disappeared from New York City. It's estimated that there are about 18,000 regular crack smokers in town. According to OASAS, 69 percent of those treated for crack cocaine addiction in 2007 were black. Forty-one percent had no income source. Crack cocaine users, as a whole, are what they call an aging population, with most over 35 years of age these days. Thirty-four percent of those treated for crack were women as compared with 25 percent of powder cocaine abusers. Crack remains most prevalent, according to recent drug studies, in the city's poorer neighborhoods, especially in large-scale housing projects within those communities.

And according to the latest report by OASAS, "Crack users report that crack continues to be highly available," with most people still buying $5 and $10 rocks. "Crack selling operations tend to be clustered in and around public housing developments and street corners," the report reads. But it continues, "Because of law enforcement targeting crack sellers and selling locations, selling techniques are less overt. There has been a substantial decline in 'open air' market activity."

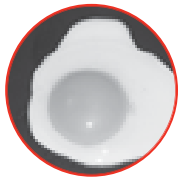
It's difficult to separate the actual impact that crack cocaine has had on the city from the drug's hype. In the book "Crack in America: Demon Drugs and Social Justice," sociology professors Craig Reinarman and Harry Levine coin the phrase "drug scare" (akin to "red scare") to describe "periods when anti-drug crusades have achieved great prominence and legitimacy." The period

1979
Shortly after being released from Rikers Island after an assault charge, Sex Pistols bassist Sid Vicious overdoses in a Greenwich Village apartment.

1982
In answer to a question from a California elementary school student, first lady Nancy Reagan introduces the phrase "Just Say No."

1983
The film "Scarface," telling the story of a Cuban refugee's rise to the top of a drug empire, is released.

1986
U.S. Attorney Rudy Giuliani and Sen. Al D'Amato wear disguises to participate in a drug bust in Harlem. Some of the "crack" they buy is phony.



1987
The "This is your brain on drugs" commercial airs.

from 1986 to 1992 was in many ways the most intense drug scare of the 20th century, and at its center was crack.

But the truth is, the professors argue, most people who tried crack did not continue to use it, perhaps because its devastating effects were hard to ignore. It was used heavily only by a small percentage of even the people who used cocaine and never became a popular or widely used drug in the U.S. or anywhere else in the world. But politicians and the media, for self-serving reasons, continually portrayed crack "as the most contagiously addicting and destructive substance known," using words such as "epidemic" and "plague" to describe crack use. Because of this, everyone seems to know that crack is to blame for all the city's crime problems in the late 1980s and early 1990s, even if the rise in crime—there were 1,800 murders in 1981, well before crack made its debut—and its subsequent fall do not neatly coincide with the arrival and disappearance of crack from the city.

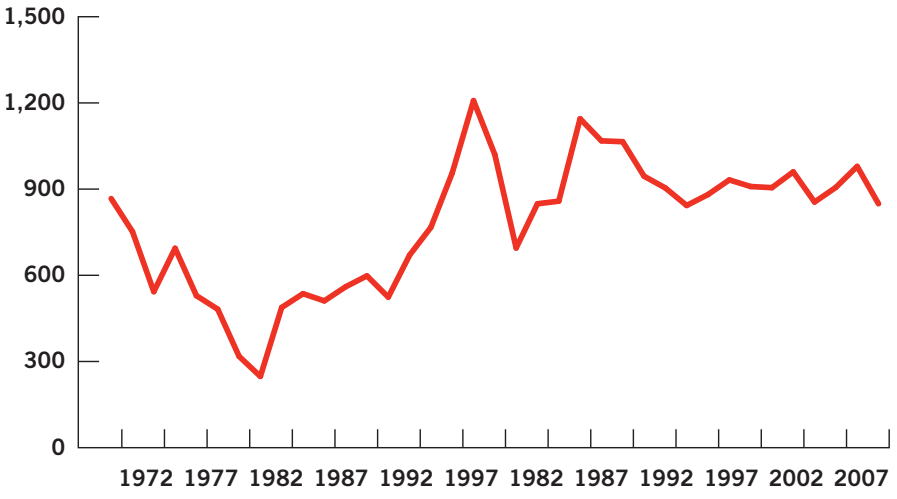
At the same time, while most New Yorkers were not affected by the drug directly, there is no denying that in the poorest sections of New York, the impacts of crack and its sale were severe. It affected both birth and death.

The number of mothers who tested positive for cocaine after giving birth quintupled from 1985 to 1989.

In Manhattan's predominantly Hispanic neighborhood of Washington Heights, there were 57 murders in 1984, before crack entered the scene, and 119 murders in 1991. Brooklyn's East New York, a 5.6-square-mile neighborhood on the border with Queens, had 55 murders in 1986 but averaged 111 from 1991 through 1993, when it posted what is still considered the record for a precinct, 126 homicides. Yet while East New York was struggling to stanch the flow of blood in its streets, the Upper West Side recorded only one murder, and the Upper East Side had none. One study by doctors at Cornell University Medical College found that of the 4,298 homicides they studied between 1990 and 1991, "87 percent [of victims] were African American or Latino."

DYING FOR IT

The number of deaths directly attributed to drug use rose in the late 1980s, the period when crack cocaine took hold in some New York City neighborhoods. A narrow measure of drugs' impact, it has remained more or less constant since the mid-1990s, despite increases in city population.



Source: NYC Department of Health and Mental Hygiene

According to Karmen of John Jay, by 1988, when crack had come to dominate the narcotics market in the city, police were reporting that about half of the 1,915 murders (958) were drug-related and of those, 481 were related to crack cocaine. A rise in other serious crime in the city at least seems to have coincided with the crack era, as robberies and assaults (crimes that, like murder, are typically associated with the drug trade) gradually increased from 1985 to 1990, when there were a record 573,813 felonies committed in the city, according to police records.

But how much the NYPD's mass narcotics arrest policies helped reverse the crime trend remains unclear. During TNT's most active years, 1988 to 1993, the relationship between drug arrests and overall crime was all over the map. Some years, drug arrests went up and so did overall crime. Other years saw fewer busts and less crime. And sometimes an increase in arrests accompanied a drop in crime.

The police, however, weren't the only ones fighting crime. In drug-plagued neighborhoods and public housing complexes, civilians organized themselves to try to oust the drug peddlers, sometimes at great risk.

In January 1987, five members of a mosque used a pump-action shotgun and pistol to threaten a man they believed was selling drugs out of an apartment in their Bedford-Stuyvesant neighborhood. "We told the police, if you close [the crack houses] down, we'll keep them closed," the imam of the mosque said. "That was the deal." Though two of the Muslims were eventually convicted on weapons charges, the posse was applauded for its anti-drug stance, even by the NYPD, and soon other Muslim patrols followed suit in other parts of the city and on Long Island.

Scores of community anti-drug organizations also popped up during crack's heyday, groups like Hispaños Unidos de Woodside in Queens, Lower East Side Drug-Free Zone and People

United Against Drugs in the Bronx. For two years, Maria and Carlos Hernandez waged their own personal war against neighborhood drug dealers in Bushwick, Brooklyn, not being scared off even after Carlos was shot and then stabbed for confronting dealers. On Aug. 8, 1989, some of those dealers tried to send a message by shooting into the window of the Hernandezes' apartment building. The bullets struck Maria in the head, killing her.

THE PERIOD FROM 1986 TO 1992 WAS IN MANY WAYS THE MOST INTENSE DRUG SCARE OF THE 20TH CENTURY, AND AT ITS CENTER WAS CRACK.

In 1992, former El Diario–La Prensa journalist Manuel de Dios Unanue met a fate similar to that of Maria Hernandez, gunned down in a Jackson Heights restaurant in retaliation for his exposés on Colombian drug trafficking to New York.

The dual pressure from the police and neighbors didn't go unnoticed by the drug dealers. A 2002 study by John Jay's Richard Curtis called "We Deliver" reported "the virtual disappearance of street sales" in the East Village by 1999 and noted that the favored technique for dealing drugs had become the more discreet use of delivery services. Also, Curtis found that the "corporate-style distributors"—the type of large-scale, structured drug organizations like Fat Cat Nichols ran—had been replaced by smaller organizations that eschewed the violence of their predecessors.

Along the same lines, today, "roaming" dealers have replaced yesterday's "corner boys." Instead of hanging out on the corners and drawing the ire of neighborhood residents, many dealers now walk a set route, passing by the same places at regular hourly intervals. When they arrive, the buyers approach them, and the deal is quickly consummated on the stroll. "The sellers tend to keep on the move in order to not attract attention," reads a 2008 report by OASAS.

As the TNT operation was fading and the crack scene was cooling down, new worries about NYPD corruption arose. In 1992 came the arrest of Michael Dowd and five other NYPD cops who called themselves the Loser's Club and ran a Brooklyn-to-Long Island cocaine ring. Dowd later admitted that he provided protection for Brooklyn drug dealers and even helped set up a rival drug dealer for assassination. Mayor David Dinkins impaneled the Mollen Commission to see if the problems went deeper than Dowd. After a two-year investigation, the commission concluded in 1994 that while there was nothing like the pervasive corruption of Knapp Commission days, "in every high-crime precinct with an active narcotics trade that this Commission examined, we found some level of corruption to exist."

Even today, most of the instances of police corruption that become public are narcotics-related. Four police officers from the Brooklyn South narcotics unit were arrested last year on charges of stealing cocaine out of evidence lockers and using it to pay off their informants having sex with female informants, and stealing cash from drug dealers. The scandal forced the district attorney's office to dismiss more than 200 pending drug cases. In March, one of the accused cops, Jerry Bowens, shot and killed his girlfriend and wounded her friend. Bowens, who had pleaded guilty to the corruption charges and was set to testify against his fellow officers, was found unfit to stand trial for the slaying for psychiatric reasons in May. Police officials called the Brooklyn South corruption incident an isolated case.

Even as worries about dirty cops resurfaced in the early 1990s, the city was changing. Crime was falling. The crack market was stabilizing. And there was a different—and far less deadly—top drug target for the NYPD to pursue.

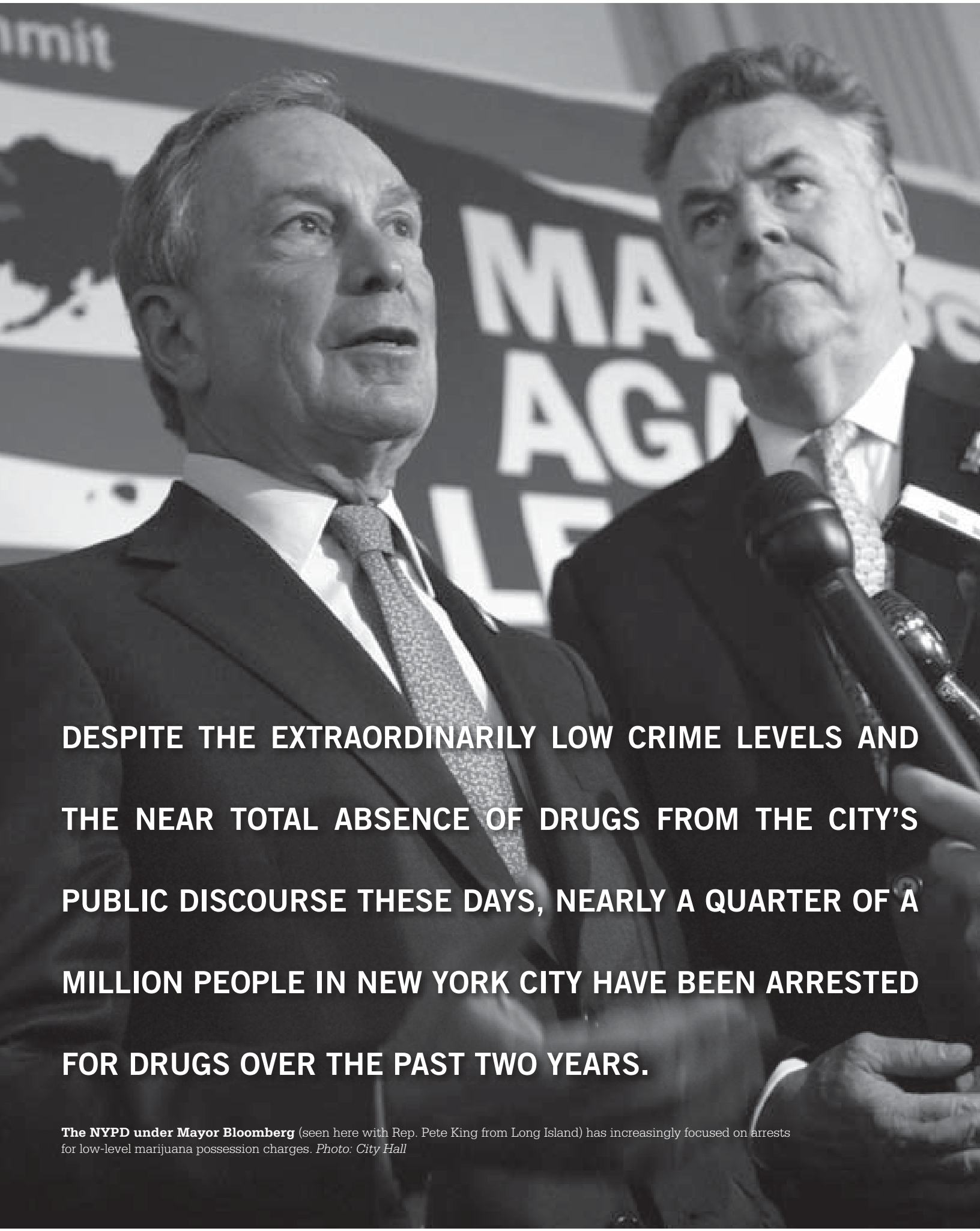
1988
Officer Edward Byrne is killed sitting in his patrol car in Jamaica, Queens, while guarding the house of a witness who'd been threatened by a drug gang.

1989
The NYPD arrests 94,000 people on drug charges—more than quintupling the number of drug arrests made during Mayor Koch's first year in office, 1978.

1990
Washington, D.C., Mayor Marion Barry is busted on cocaine charges.

1991
New Jack City, a film chronicling life among New York's drug lords, opens.

1993
Colombian cocaine lord Pablo Escobar is killed in a shoot-out in Medellín, Colombia.



DESPITE THE EXTRAORDINARILY LOW CRIME LEVELS AND THE NEAR TOTAL ABSENCE OF DRUGS FROM THE CITY'S PUBLIC DISCOURSE THESE DAYS, NEARLY A QUARTER OF A MILLION PEOPLE IN NEW YORK CITY HAVE BEEN ARRESTED FOR DRUGS OVER THE PAST TWO YEARS.

The NYPD under Mayor Bloomberg (seen here with Rep. Pete King from Long Island) has increasingly focused on arrests for low-level marijuana possession charges. *Photo: City Hall*

V. MARIJUANA

"Marihuana is that drug—a violent narcotic—an unspeakable scourge—
The Real Public Enemy Number One!" *—Introduction to "Reefer Madness," 1936*

With drugs having, for the most part, moved off the streets and crime having reached lows not seen in this city since the early 1960s, it might be logical to think that mass NYPD drug arrests—like the nodding heroin addicts, skeletal crackheads and full-scale street-level enforcement operations—are also a thing of the past.

In fact, that is far from the case. Despite the extraordinarily low crime levels and the near total absence of drugs from the city's public discourse these days, nearly a quarter of a million people in New York City have been arrested for drugs over the past two years.

This surge in drug arrests is unlike police operations of the past. Operation Pressure Point and the creation of TNT were highly publicized efforts amid rising violent crime to, at the very least, present the appearance of action being taken, but the latest surges in New York's war on drugs have been waged in near silence amid an era of record low criminality. And where in the 1980s and 1990s the underlying objective was to stop the pushers of highly debilitating heroin or take down violent crack gangs, drug policing in New York over most the first decade of the new millennium has targeted people who use marijuana.

To some extent, that recent focus reflects a long-term trend in how the city has policed drugs.

The first year Ed Koch was mayor, 1978, saw 18,000 drug arrests—about as many as cops had averaged during the term of his predecessor, Abe Beame. But by Koch's 12th and final year in office, 1989, the number of drug arrests had quintupled, to 94,000. Koch's tenure is recalled as a time when a heroin "epidemic" gave way to a cocaine "epidemic," which eventually morphed into the ultimate "epidemic" of our time, that of crack. That led Mayor David Dinkins to promise an even tougher approach on drug crime. During Dinkins' one term in City Hall, cops made fewer overall narcotics arrests but more arrests for top-level drug charges than under any mayor before or since.

But six months after he moved into Gracie Mansion, Dinkins was forever—and some think unfairly—stamped as soft on crime by the unforgettable New York Post headline "Dave, Do Something!" as homicides hit a record 2,262 in 1990. Crime began to fall during the remainder of Dinkins' term, as his administration implemented the Safe Street, Safe City program to increase the manpower of the NYPD. But the 1993 election ushered in a drastically different strategy for fighting crime in general and the war on drugs in particular.

Mayor Rudolph Giuliani's drug strategy resulted in approximately 886,000 people being arrested for drugs during the eight years he was in charge, an astounding average of nearly 111,000 per year, or more than 300 a day. The cornerstone of that drug policy was the use of sweeps that focused on street-level users, which was consistent with Giuliani's belief in the "broken windows" theory—that if the police ignore smaller crimes, it leads people to commit bigger ones down the road. A full third of those drug offenders arrested during Giuliani's years as mayor (almost 295,000 people) were charged with the lowest-level narcotics crime, criminal possession of a controlled substance in the seventh degree, a misdemeanor, for having very small amounts of drugs. And during Giuliani's second term, the NYPD began mass arrests of marijuana users, nabbing some 160,000 for the lowest-level marijuana crime—criminal possession in the fifth degree, also a misdemeanor.

The NYPD's shift to arresting more low-level drug users intensified under Giuliani. *Photo: Giuliani archives*

Given the current crime trends and recently passed changes in drug laws, Giuliani's legacy is probably safe as the mayor whose police department locked up the most New Yorkers for drug offenses in a single year. But should Michael Bloomberg win a third term, the distinction of running the administration that locked up the most total drug offenders will undoubtedly belong to him—a leader who enthusiastically admitted before being elected that he himself had inhaled.

"You bet I did," he proclaimed. "And I enjoyed it."

So do a lot of people. According to the U.N. Office on Drugs and Crime's 2008 World Drug Report, "The

THE METH MYTH

The drug that's always on its way

This past October, the New York Post ran a story headlined "Crystal Meth Replacing Cocaine in N.Y.," premised on the fact that Drug Enforcement Administration agents in the city saw a spike in crystal meth seizures from four kilograms in 2007 to 14 kilos last year.

The story did not mention that in 2008, the DEA in New York seized 1,481 kilograms of cocaine, more than 100 times their claimed haul of meth. Also left out was the fact that the drug agency captured 1,540 kilos of meth nationwide, or more than 100 times what they seized in the five boroughs, America's supposed drug capital. Nor did the DEA or the Post note that, nationwide, the feds confiscated 50,000 kilos of cocaine last year—nabbing 32 kilos of coke for every one kilo of meth—or publicize the fact that crystal meth appears to be on the decline both nationally and in the city.

Even the 14 kilos of meth seized in New York was less than it seemed: The DEA now says that last year's haul ended up weighing no more than nine kilos.

Crystal meth has been touted as the next great U.S. drug epidemic since 1986, and it was speculated as early as 1989 that New York City would soon feel the devastating effects of this new scourge. In 2004, Sen. Charles Schumer announced that crystal meth was "quickly becoming the new crack." The senior senator told reporters that "it's 1984 all over again," adding, "Twenty years ago, crack was headed east across the United States like a Mack truck out of control, and it slammed into New York hard because we just didn't see the warning signs."

Yet, like riding mowers or line dancing, meth—whether called "ice," "tina," "crank" or any of its dozen other names—has never really caught on in New York City.

Travis Wendel, a drug researcher conducting a meth study funded by the National Institutes of Health, says methamphetamine has never been widely popular here, perhaps because other drugs have always been more readily available and cheaper in New York than in other parts of the country. The role of a discount-priced drug of choice, he says, "is amply filled by crack and heroin."

Meth, says Wendel, "is here, but it's a pretty hidden subculture." The majority of crystal meth in New York is used as a sex drug for gay men, sometimes for anal application before sex (a practice known as a "booty bump"). Wendel believes the other predominant use of crystal meth in the city is as an additive to cocaine; meth makes a coke high last longer. In many instances, he believes, this mixing is being done unbeknownst to the cocaine purchaser.

But there is very little evidence of any substantial crystal meth use in New York City. A 1999 city youth survey found that 2.9 percent of New York's kids had ever tried meth. By 2007, the statistic had fallen to 1.8 percent. By comparison, 12.4 percent had used pot in the past 30 days.

Nationally, the latest available data from the National Survey on Drug Use and Health show what it terms a "statistically significant decrease" in the rate of methamphetamine use among young adults, from 0.6 percent in 2006 to 0.4 percent in 2007.

Even the cops here aren't concerned. The National Drug Threat Survey reports that the percentage of police departments in the New York–New Jersey region reporting methamphetamine as the "greatest drug threat" is zero.

Yet the myth of "crystal meth as the new crack" persists, despite the fact that crank is about 80 years older than crack. Methamphetamine was invented at the turn of the 20th century, and the crystallized version of it was created in 1919. It was legally prescribed until 1966 in the United States for conditions like narcolepsy. It was first identified as a possible "epidemic" in 1986, and in 1989 was the focus of a Senate Judiciary Committee hearing presided over by current Vice President Joe Biden, called "Drugs in the 1990s: New Perils, New Promise."

Fifteen years after that Senate hearing, in a bid to gain millions of dollars in federal funding for New York City, Schumer depicted crystal meth as a sinister new threat. But the fact is, whatever meth threat there is to the Empire State exists outside the city. From 2006 through 2008, there were 29 methamphetamine-related arrests in all of New York State, according to the state Department of Criminal Justice Services. None of those 29 arrests occurred in the five boroughs. —*SG*

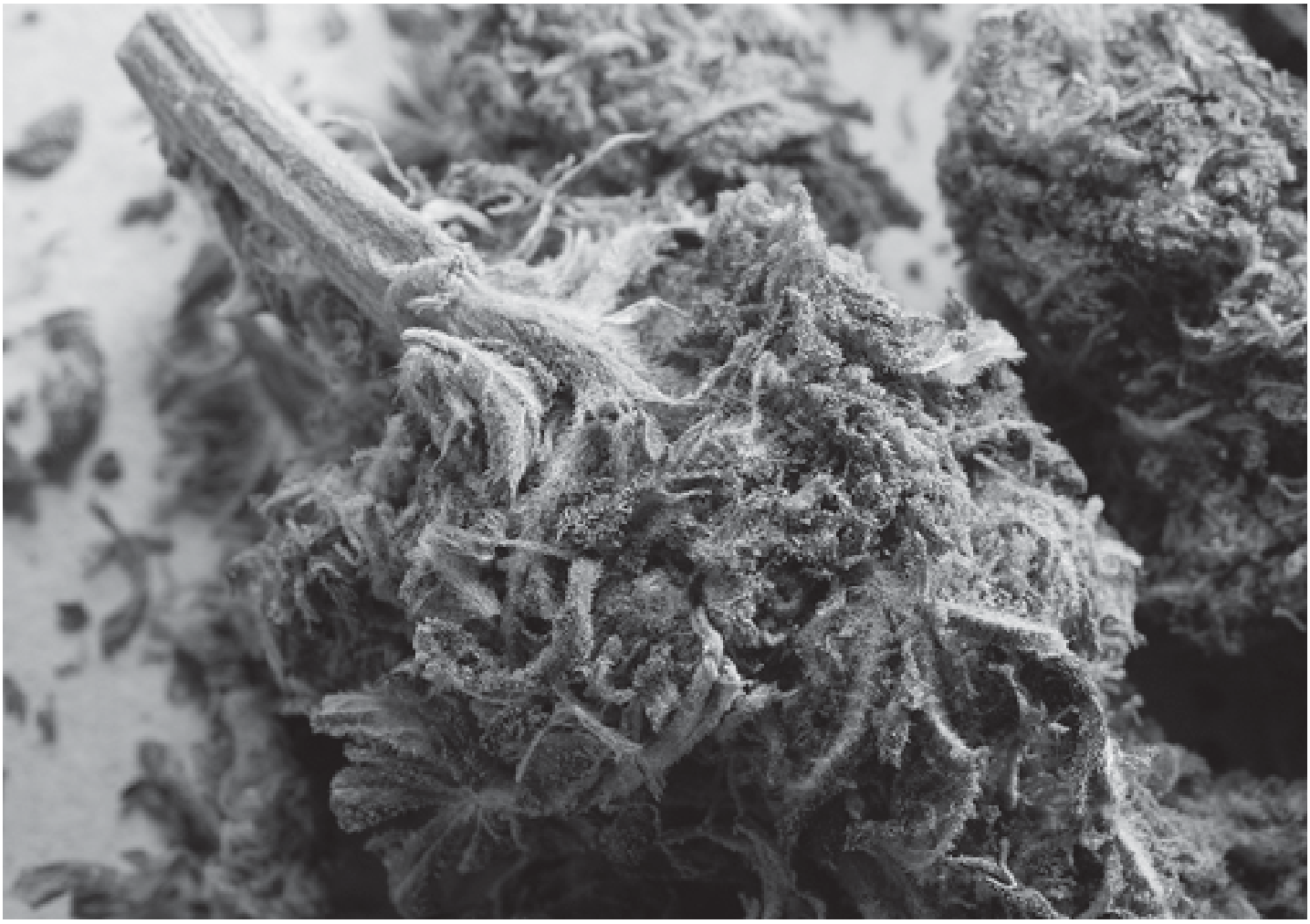
consumer market for cannabis dwarfs those for the other drug groups." It estimated about 166 million people worldwide, roughly 4 percent, use marijuana. In North America, the report states, the estimates are that as much as 10.5 percent of the population smokes pot. New York health officials say a recent conservative estimate was that 6.8 percent of city residents aged 12 or older—or about 416,000 people—are regular marijuana users.

The number of admissions to drug treatment programs by people listing marijuana as their primary addiction has risen astronomically in the city, from 1,374 in 1991 to 17,323 in 2007, an elevenfold increase. "Marijuana continued to be widely available and in high demand," according to OASAS's 2008 report.

Mexico leads the world in marijuana production, with most of it being grown and cultivated on the Pacific coast, followed by the U.S. and Canada, according to the World Drug Report.

The DEA says pot is cheaper now that it was a decade ago. Drug dealers pay between $400 and $1,500 a pound these days compared with $900 to $1,800 in 2000. However, hydroponic marijuana—highly potent weed that is grown indoors using semi-sophisticated water, lighting and fertilizer systems—sells for up to $7,000 a pound. According to OASAS's Street Study Unit, most people buy pot by the ounce, paying $65 to $125 for commercial weed and $300 or more for an ounce of "hydro."

But the ready availability of pot did not make it an obvious focus of city policy eight years ago, when Bloomberg took office months after the Sept. 11 attacks, when terrorism and the budget gap were the city's top concerns. Crime appeared to be well in hand. The number of murders was the lowest it had been in the city since 1963, and New York had the lowest overall crime rate of any of the country's large cities. Over the past seven years, the crime rate has continued to drop in each successive year.



Marijuana has gotten cheaper in New York in the past decade. An estimated 416,000 city residents smoke it. *Photo: DEA*

Still, despite the fact that the number of NYPD police officers was down 5,000 from just a few years back and while a significant number of cops have been diverted to anti-terrorism duties, statistics show that locking up drug addicts and low-level dealers has been a top priority of the NYPD and Bloomberg's police commissioner, Raymond Kelly. From 2002 through 2008, 703,732 people were arrested on drug charges in the city, or about 100,500 a year, according to statistics obtained from the state's Division of Criminal Justice Services.

Whereas the NYPD under Giuliani specialized in targeting those addicts possessing a tiny bit of cocaine, heroin or other narcotics, Kelly's NYPD has specialized in zeroing in on marijuana—and on arresting people for the least serious criminal marijuana offense on the books.

Between 2002 and 2008, 261,151 New Yorkers were arrested for possessing marijuana. That works out to more than 37,000 per year or 100 per day. Of that amount, an astounding 252,485 (or almost 97 percent of all marijuana possession arrests) involved the lowest marijuana offense in the penal code, the misdemeanor of criminal possession in the fifth degree.

What could make this policing strategy especially disturbing, according to Harry Levine, a sociologist at Queens College who has published a study on marijuana arrests in New York City, is that many of the people arrested for that misdemeanor charge over the past 12 years probably didn't commit any crime.

The state's Marijuana Reform Act of 1977 made possession of up to 25 grams of pot a noncriminal violation, akin to a speeding ticket, punishable by a summons and a fine of up to $100 for a first offense. Levine says that reform law was passed after parents—whose "white, middle-class college kids upstate" had been busted and were facing criminal records—started a campaign to decriminalize small amounts of marijuana.

So from 1977 on, if police found less than 25 grams of pot (about 25 to 50 joints' worth) in a person's pocket, it was a noncriminal violation—not a crime. But last year, NYPD cops arrested 40,384 people for the crime of marijuana possession in the fifth degree. At the same time, they only is-

COURTROOM DRAMA

Drug courts face a big test

The details of how the latest Rockefeller reforms will affect the state's 175 drug courts are still up in the air, but what happens every day in Brooklyn Treatment Court might be the model.

People arrested in Brooklyn for felony drug possession or sale who meet a list of eligibility criteria for the treatment court are chosen by the district attorney's office to participate. They are given the option of pleading guilty to a reduced misdemeanor charge and entering a court-approved drug treatment program. The defendants who comply with the court-mandated treatment have their charges dismissed. The average graduate typically takes about 18 months to finish.

From June 6, 1996, when the treatment center opened, to June 30, 2008, 3,809 people arrested for drug felonies in Brooklyn have participated in the program and about half graduated and had their cases dismissed. Thirty-five percent failed and had sentences imposed, and another 5 percent stopped attending treatment and had warrants issued for their arrest. Nine percent were still receiving treatment as of last June.

The court operates as a "collaborative team" including the judge, prosecutor, defense attorney, clinical staff and even court officers. There are also eight social workers, a doctor who does health screening, an employment coordinator and a computer learning center.

On March 31, Brooklyn Treatment Court alternately resembled a toned-down episode of Judge Judy and a Narcotics Anonymous meeting. After each case was called, Judge JoAnn Ferdinand greeted the defendants and asked how they were doing, as she scanned the defendant's urinalysis, treatment attendance and discipline records on the court's computer system. "Are you taking your medicines?" "Tell me about this curfew violation." "You have not been truthful about your employment, have you?"

A guy who hadn't showed up to treatment in four months and had been arrested in the interim was sent to prison for 18 months. But for the most part, it was a positive day in drug court: A 20-year-old said he is starting his second semester at Kings College; a woman received a certificate from Ferdinand for being drug-free for four months; Richard Martino, perpetually on the verge of having the judge send him off to prison, appeared to have finally turned the corner. "You should have given up on me a long time ago, but you didn't," Martino told the judge.

While drug reformers see drug courts as preferable to prison, the courts do have critics. Drug courts can be extremely selective in choosing defendants. In 2007, the city's drug courts were referred a mere 7 percent of drug cases, and some 40 percent of those referred were rejected by the courts as unfit for treatment.

Each court has its own restrictions. In Brooklyn, for instance, the DA won't allow anyone into the program who has previous arrests for "offenses against public order," which include loitering. The Bronx and Queens drug courts are for misdemeanants only, while Staten Island's is exclusively for felony offenders. It remains to be seen if the drug courts' capacity and criteria can handle what the Rockefeller reforms are about to throw at them. —*SG*

sued 695 summonses for all narcotics violations, according to the Mayor's Management Report.

Why so many arrests despite decriminalization? Officially, after the 1977 law, there were only two ways to be busted for the crime of possession of marijuana in the fifth. You could be caught with more than 25 grams but less than the two-ounce threshold for a more serious marijuana charge. Or you could possess a small amount of marijuana but be seen "burning" it or displaying it "open to public view."

Levine's study offers another explanation: "Police have invented this trick so they can skirt the law. They stop you and they know they're not supposed to be going in your pockets without probable cause. [But] they say, 'We're gonna have to search you, go through all your pockets. If you have anything you're not supposed to have, take it out and show it to us,' and they promise if it's not too bad, they'll let them go. Almost everyone will pull out their joint or small baggie of pot." But by pulling the marijuana out of their pocket to show the officer, the person has gone from a violation to committing a crime, because they have unwittingly put the pot into "public view."

This tactic does not uniformly affect New York's pot smokers. According to Levine's study, which used data from the state, 52 percent of people arrested in the city for possession of marijuana in the fifth degree were black and 31 percent were Hispanic, while just 15 percent were white, despite the fact that national drug surveys show that whites smoke marijuana at higher levels than members of other races.

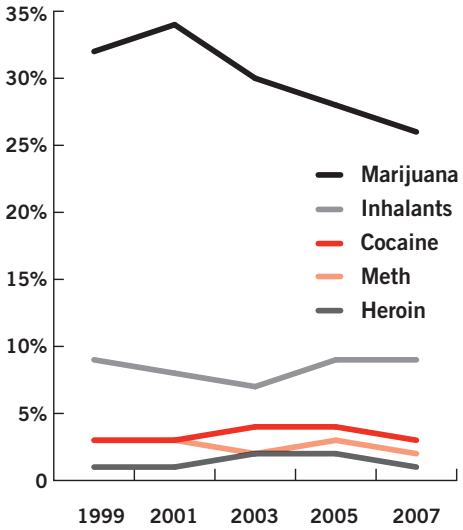
While the number of drug arrests has remained sky-high, the type of low-level arrests that have become common under Bloomberg have not taken drug addicts and dealers off the streets for very long. Because the majority of people arrested on drug charges in the city are booked on the lowest misdemeanor offense, the only jail time most do is in the lockup awaiting arraignment.

So if this policing strategy isn't actually getting drug users and dealers off the street, what's the point of making so many low-level arrests? In his study, Levine speculates that low-level drug arrests allow police supervisors to document productivity while giving cops the chance to book overtime or, if they're rookies, on-the-job training without exposing themselves to unnecessary risk. It also allows the NYPD to acquire information on people—getting their photographs, fingerprints and, increasingly, DNA samples into databases to be used to solve future crimes.

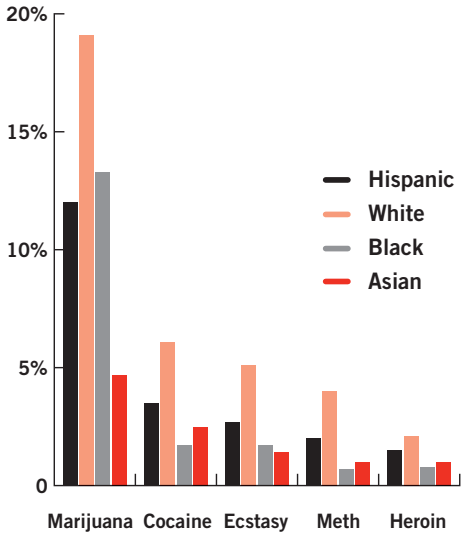
"The irony is, as crime has continued to fall, arrest numbers have continued to rise," says Robin Steinberg, executive director of the Bronx Defenders, who reports that her organization has defended an increasing number of people in recent years who have been arrested for petty drug crimes. "What you're seeing is policing of poor communities of color in New York City that targets misdemeanor and nonviolent crime." She adds, "We see an infinitesimal number of cases where you

ARE THE KIDS ALL DOING IT?

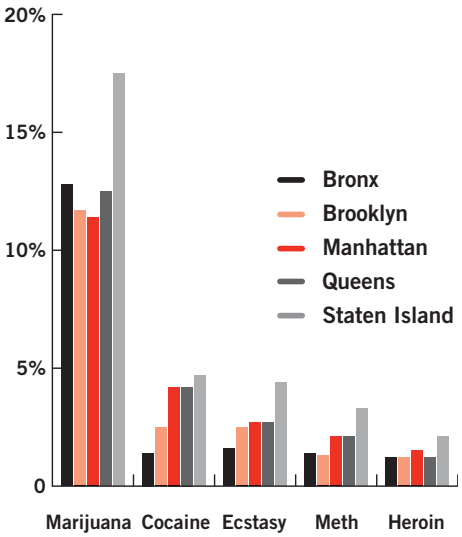
Recent city youth surveys show a slight dip in pot use and indicate that other drugs are substantially less popular.



The 2007 survey revealed that white youths are more likely to use drugs than kids of other races or ethnicities…



…and that a greater percentage of Staten Island kids use drugs than in the other boroughs.



Source: NYC Department of Health and Mental Hygiene

would see any evidence that this person was a real dealer."

Paul Browne, the NYPD spokesman, did not respond to requests for comment or to provide information about the department's current policing strategy and philosophy. When stories were printed about Levine's study in April 2008, Browne said that crime in the city had declined about 60 percent over the 19-year period that Levine cited. "Attention to marijuana and lower-level crime in general has helped drive crime down," Browne contended. He also attacked Levine as being "an advocate for marijuana legalization" and a dupe of the New York Civil Liberties Union, which sponsored the study.

"Smoking marijuana in public does contribute to a sense of a neighborhood veering toward being out of control, where you have public disregard for the law," says Heather MacDonald, a fellow at the Manhattan Institute. "There is an argument for being concerned about open marijuana use."

If Browne's assertion is correct, however, that the mass marijuana arrests are a driving factor behind the decline in citywide crime, the NYPD and mayor have kept curiously quiet about it. All told, drug arrests have accounted for fully a third of the 2.1 million arrests made between 2002 and 2008. Yet no "attaboy" press conferences were called by the NYPD or mayor to talk about the strategy; no praise was given to the anti-narcotics units for their contribution to the overall crime reduction. In fact, on the NYPD's CompStat sheets, which track the city's crime rate, there are no categories showing any NYPD narcotics statistics, such as arrests or seizures, nor is the narcotics unit even mentioned on the NYPD's official webpage. In his annual budget statement to the Council this year, Commissioner Kelly didn't mention drugs.

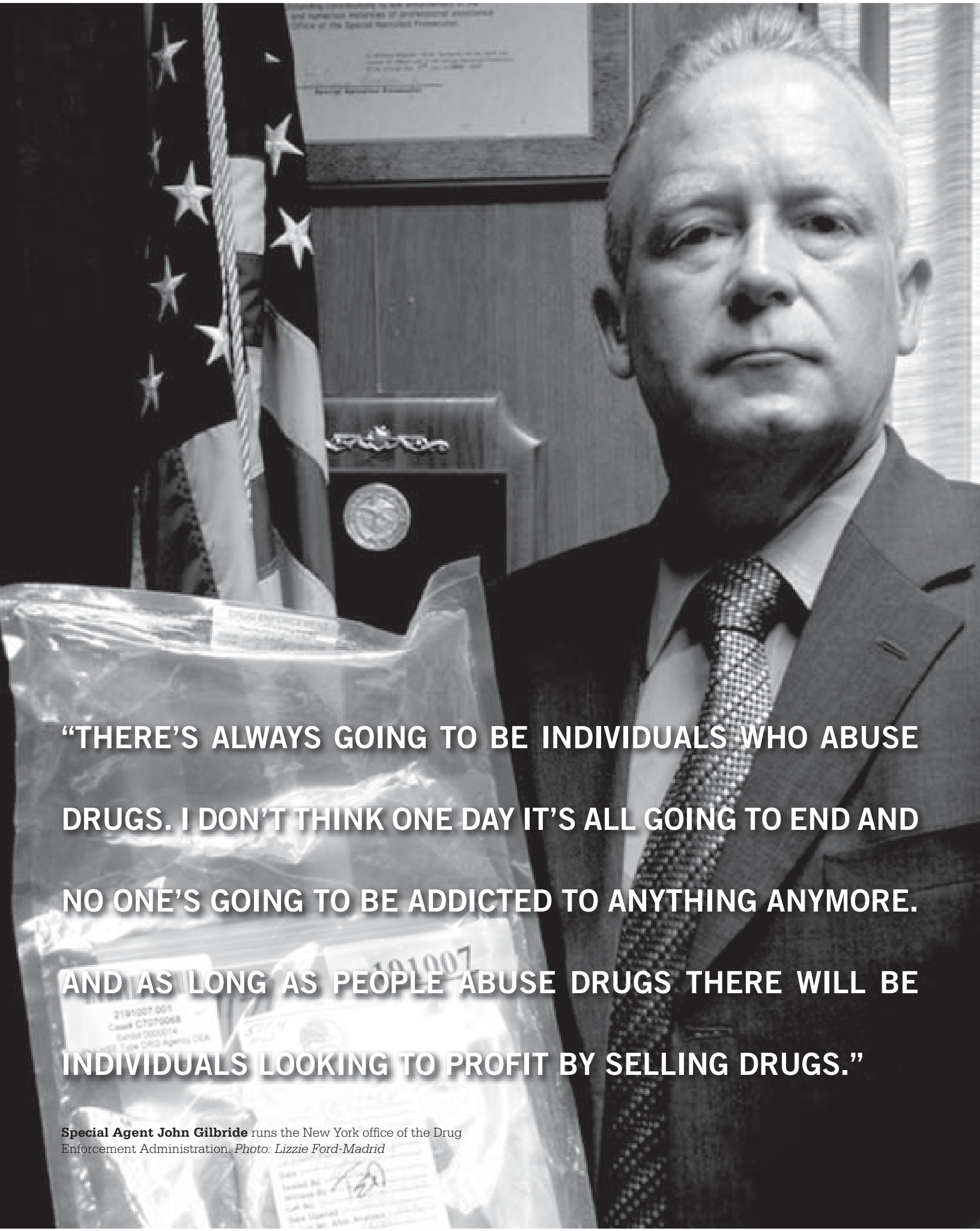
1994
The Mollen Commission reports that corruption remains rife in the NYPD, particularly in narcotics units.

1995
New York State's first drug treatment court opens in Rochester.

1996
California voters approve Proposition 215, permitting the medical use of marijuana.

1998
Mayor Giuliani and the NYPD drive the Million Marijuana March out of Washington Square Park.

2000
Patrick Dorismond is shot dead after scuffling with undercover NYPD officers who, under a new anti-drug initiative called Operation Condor, had asked him for crack.



“THERE’S ALWAYS GOING TO BE INDIVIDUALS WHO ABUSE DRUGS. I DON’T THINK ONE DAY IT’S ALL GOING TO END AND NO ONE’S GOING TO BE ADDICTED TO ANYTHING ANYMORE. AND AS LONG AS PEOPLE ABUSE DRUGS THERE WILL BE INDIVIDUALS LOOKING TO PROFIT BY SELLING DRUGS.”

Special Agent John Gilbride runs the New York office of the Drug Enforcement Administration. *Photo: Lizzie Ford-Madrid*

VI. STALEMATE

"There is no instance of a country having benefited from prolonged warfare." —*Sun Tzu*

Over the past decades, illegal drugs have made their way into New York City in every conceivable fashion. Human couriers called swallowers or mules choke down condoms filled with heroin or cocaine and pray the "pellets" don't rupture inside their intestines. Drugs are hidden in aerosol cans, sewed into the lining of purses and suitcases, taped around stomachs, hidden in the bottom of cages carrying animals, pressed into bread shapes, sliced to look like Pringles potato chips. Drugs are placed in automobile tires, hidden in toys like Lego boxes, put inside banana peels, hidden in shoes, made to look like furniture, liquefied and soaked into clothing then extracted through a complex chemical process. Heroin dealer Frank Lucas bragged that he smuggled heroin into the city in the coffins of soldiers killed in Vietnam. And in one particularly unique and cruel smuggling attempt, drug dealers even surgically implanted three kilograms of liquid heroin into purebred puppies, then shipped the dogs to the city.

But while it's the unusual smuggling attempts that get the headlines, most of the drugs New Yorkers consume regularly—marijuana, cocaine and heroin—arrive in a very mundane way: They're driven in. "Tractor trailers," says the DEA's Gilbride, "and passenger vehicles using hidden compartments or traps."

About 90 percent of today's drugs come to the city through the U.S.-Mexico border, Gilbride says. The feds try to stop it, but it's a numbers game whose odds overwhelmingly favor the traffickers. According to federal statistics, last year nearly 84 million personal vehicles, 4.9 million trucks, 2.7 million buses and 10,262 trains entered the United States through the Mexican border. Short of shutting the border down, there is no way to stop the flood of narcotics into this country and subsequently into its drug capital, New York City, Gilbride says.

That is why in recent years, DEA officials like Gilbride have shied away from the term "war on drugs."

"It's antiquated, if it was ever an accurate term," Gilbride tells City Limits Investigates. "A war indicates there is going to be a beginning and an end. There's always going to be individuals who abuse drugs. I don't think one day it's all going to end, and no one's going to be addicted to anything anymore. And as long as people abuse drugs, there will be individuals looking to profit by selling drugs," Gilbride says. "Our job is to try to stop drug trafficking, but it's also drug awareness, it's drug education. Those things don't have an end."

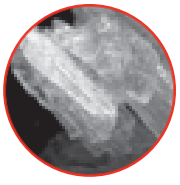
The Rockefeller drug law reforms passed in March (*see "Rock Realities," p.15*), have wiped out some of New York's most punitive anti-narcotics measures and ostensibly started a dialogue about rethinking the current strategy of addressing drug addiction with a pair of handcuffs instead of treatment. Some celebrate the reforms as a first step toward a cease-fire in the long-running offensive that President Nixon declared in 1969 and a move to a more sensible balance of law and medicine for dealing with addiction and the impact of the drug trade.

But others believe that the drug war in New York City has never really been about reducing drug abuse or the drug trade. Instead of concentrating on the large suppliers or those causing violence, as the police once did, local drug enforcement in New York increasingly has concentrated on the least serious offenders. With no public case being made for these arrests and no rationale given for their steady increase, it is unclear whether they will level off or if—like a junkie—the NYPD will simply do more and more.

The costs of New York's war on drugs add up at an astounding rate every day. City Limits Investigates estimates that the yearly cost to government for investigation, contraband seizures, arrests, judicial processing, incarceration,

2001
In a post–Sept. 11 speech, British prime minister Tony Blair refers to the Taliban as "a regime founded on fear and funded on the drugs trade."

2002
The George W. Bush administration opposes changing the 100-to-1 sentencing disparity between crack and cocaine possession.

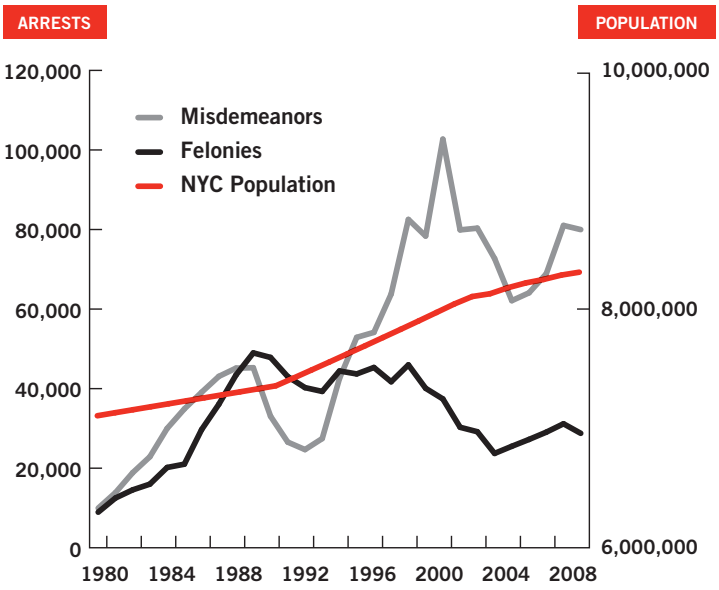


2004
Sen. Charles Schumer declares crystal meth "the new crack."

2005
The U.S. Supreme Court rules that federal anti-drug laws trump state medical-marijuana measures in places like California.

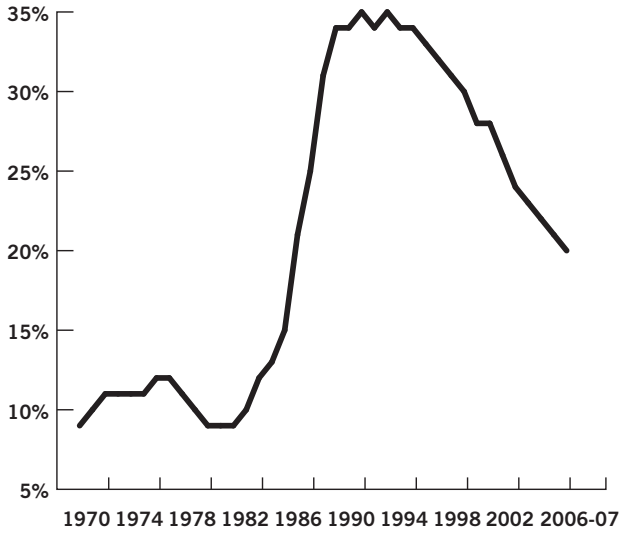
AIMING LOW

The pattern of narcotics arrests in New York City has shifted dramatically since 1980, with the number of misdemeanor arrests swamping those for more serious, felony crimes.



DOING TIME

In 2008, 12,000 people were incarcerated in New York State on drug charges. Over the past 40 years the share of state prison cells occupied by drug convicts soared, then steadily declined.



Source: NYS Division of Criminal Justice Services

parole hearings and probation services for all those arrested in drug cases in New York City could run somewhere between $825 million and $1.7 billion.

Of course, there are other costs, generated both by the war on drugs and the drug trade itself: the teenager whose drug arrest keeps him from finishing high school or makes him ineligible for college loans, the mother whose night in jail costs her a job, children who grow up without their father, people who waste their lives behind bars, inmates who return to society with no job skills or employment contacts, junkies who droop on park benches and nervous parents who pull their children down the sidewalk away from the dealers wearing "Stop Snitchin" T-shirts suggesting that no one should cooperate with the cops.

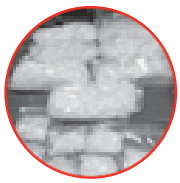
A few years removed from the frontlines now, Casimiro "Caz" Torres, the longtime addict turned drug counselor, still can't figure out what the point is of a drug war that plays catch-and-release with addicts like him—unless you subscribe to some controversial theories.

"I don't know about conspiracies but there are certain financial reasons for people to maintain the system like it is. I know that people (upstate) have to live, that their economy is built around these prisons and they need the jobs," he says. "But we have to come up with another alternative to this."

In the Bedford Park section of the Bronx, there are crosses hanging from light poles. They read, "Drugs Crucify." They're old, weather-beaten. Some are broken. But even after 40 years, it does not quite feel like the time has arrived to take them down.

2006
"Killer heroin," which combines the opiate with the painkiller fentanyl, is linked to hundreds of deaths nationwide.

2007
The NYPD makes 112,123 drug arrests, the highest number under Mayor Bloomberg and one of the biggest yearly hauls in the drug war.



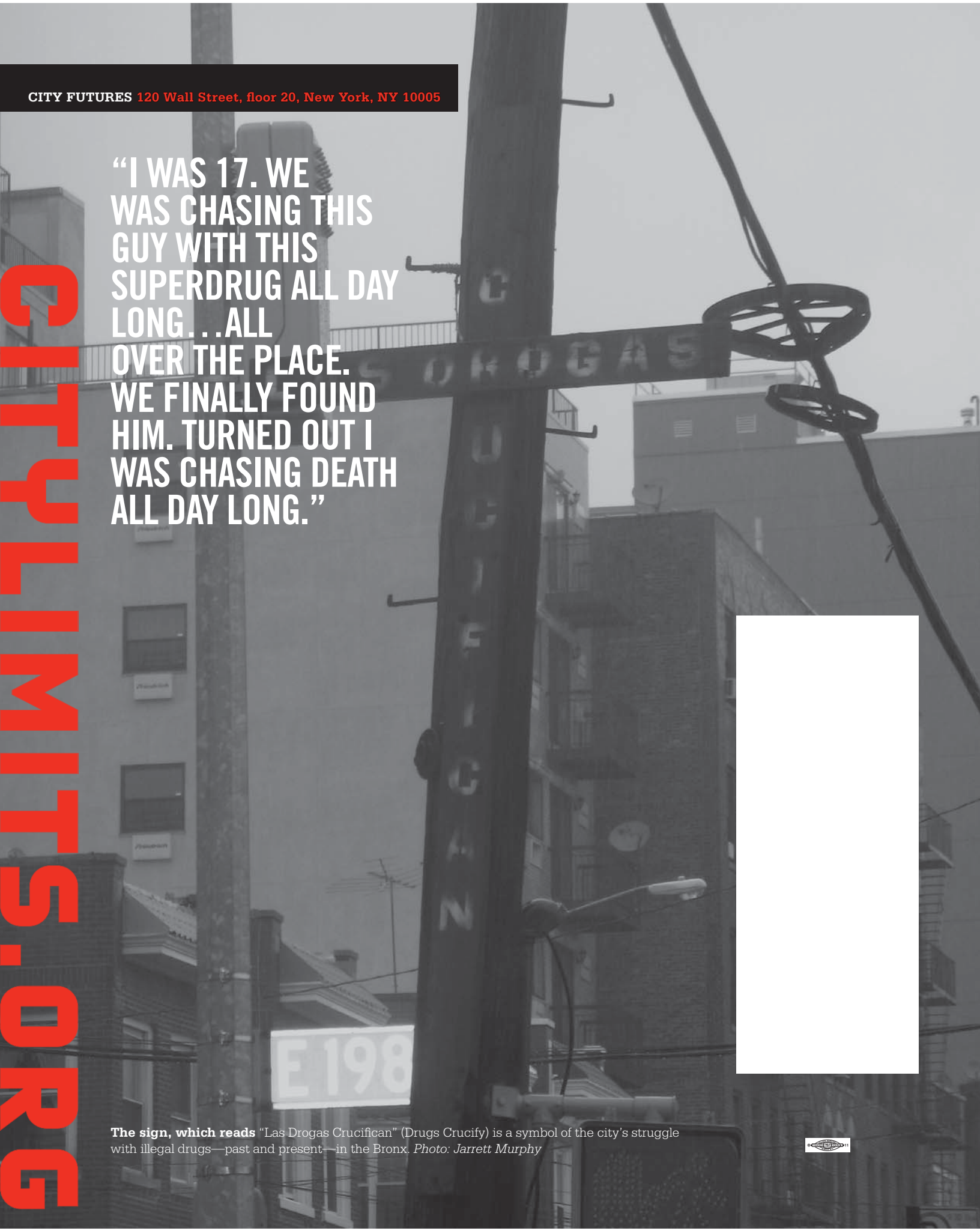
2008
The National Drug Intelligence Center reports that Mexican drug-trafficking organizations "represent the greatest organized crime threat to the United States."

2009
For the third time in five years, New York State reforms the Rockefeller drug laws—this time to permit first-time B-felony defendants to get treatment in lieu of prison.

Photos: U.S. government, AP, Chicago Daily News, 20th Century Fox, 20minutos, Hendrike, D. MacDonald, DEA, ChinaDaily, Wikimedia

Arresting low-level drug offenders is not cheap: It costs the city at least $184 for every day they spend in jail. *Photo: Jarrett Murphy*

"I WAS 17. WE WAS CHASING THIS GUY WITH THIS SUPERDRUG ALL DAY LONG. . .ALL OVER THE PLACE. WE FINALLY FOUND HIM. TURNED OUT I WAS CHASING DEATH ALL DAY LONG."



The sign, which reads "Las Drogas Crucifican" (Drugs Crucify) is a symbol of the city's struggle with illegal drugs—past and present—in the Bronx. *Photo: Jarrett Murphy*