
Government of the District of Columbia



Metropolitan Police Department

Testimony of
Cathy L. Lanier
Chief of Police

United States Senate Hearing on
“Deadly Synthetic Drugs”

Committee on the Judiciary
The Honorable Chuck E. Grassley, Chairman

June 7, 2016

Dirksen Senate Office Building
Room 226
Washington, DC 20510

Good morning, Chairman Grassley, Ranking Member Leahy, Members of the Committee, and members of the public. I am Cathy Lanier, Chief of the Metropolitan Police Department (MPD), the primary police department in the District of Columbia. I am pleased to be here today, although regrettably to discuss the dangerous impact of New Psychoactive Substances (NPS), commonly known as synthetic drugs, in the nation's capital. Numerous District of Columbia government agencies and federal criminal justice partners are working together to pursue a comprehensive strategy to combat NPS drugs, comprising regulatory and criminal enforcement, information gathering and sharing, and public education.

New Psychoactive Substances in the District of Columbia

Unfortunately, as the Chief of Police, I have seen the impact of the NPS drugs first hand. Because some of the NPS drugs have been selling at very low prices, they have become a drug of choice for many of the poorest individuals with substance abuse issues in the District, such as the homeless. Many of the users have prior substance abuse issues and would likely be using some other drug such as alcohol or marijuana if the NPS drugs were not available. However the NPS drugs have a higher impact than other drugs frequently used on the street. The changing chemical components make them unpredictable, with user reaction ranging from a catatonic state – what some people categorize as the zombie reaction – to extreme anxiety, paranoia, panic attacks, psychotic episodes, and hallucinations. These users may become very violent and reactive, such as is frequently seen with PCP users. These physical side effects may contribute to a heightened risk of death in police custody due to excited delirium. In other words, if officers have to struggle to control someone using NPS drugs – whether for the individual's safety or for the safety of others – there is a risk that it will trigger Excited Delirium syndrome, which is “a serious and potentially deadly medical condition involving psychotic behavior, elevated temperature, and an extreme fight or flight response by the nervous system.”¹

While it is perhaps easy for many of those hearing about the NPS drugs and the impact on users to dismiss the topic because neither they nor their family or friends are users, this drug has a much broader impact on the public health and safety infrastructure than we have seen from other commonly used drugs. It frequently takes multiple police officers and paramedics on a scene to get someone overdosing into an ambulance and to a hospital for treatment. Once at the hospital, numerous resources are again required to keep patients restrained and safe during a treatment that can last nine hours. Now imagine these scenes multiplied by the thousands. In 2015, the District of Columbia's Department of Fire and Emergency Medical Services (FEMS) responded to more than 3,800 calls for service and provided at least 3,500 transports related to suspected synthetic cannabinoid use. Over the course of the year, the Department averaged more than nine NPS related transports per day with a high of 20 per day during the month of September. Officers of the Metropolitan Police Department were on most of those scenes. This is an immense use of public resources detracting from other critical public health and safety needs. If for no other reason than this alone, the proliferation of these drugs needs to be taken very seriously.

¹ Roach, Brian, MD, Kelsey Echols, MD, and Aaron Burnett, MD. “Excited Delirium and the Dual Response: Preventing In-Custody Deaths.” Federal Bureau of Investigations Law Enforcement. July 2014.

Enforcement

In the beginning of this wave of NPS drugs, law enforcement was playing catch up against new drugs for which there were no laws and no tests. In 2011, the U.S. Drug Enforcement Administration (DEA) and in 2012, the District government, began scheduling chemical components of the NPS drugs under the federal Controlled Substances Act as well as District drug schedules. Police resources have been focused on street level, retail, and trafficking operations. I am proud of the work of MPD officers and their federal partners that have led to the seizure of more than 450 kilograms – or half a ton – of synthetic drugs since 2013.

Of course, drug seizures alone are not sufficient to interrupt the current trend for long. Moreover, there have been several unique challenges to enforcement against the NPS drugs, not just in the District, but nationally and internationally. Both the methods and the resources to positively identify NPS drugs have lagged behind its proliferation. The criminal and regulatory tools to address illegal narcotics have historically been predicated on an ability to positively identify a drug. Even after the drugs were scheduled in legislation, MPD could seize the drug and sometimes arrest an individual, but prosecutions were lacking because of the time lag in the federal testing of the product.

Because of this hurdle, MPD worked with the District Department of Consumer and Regulatory Affairs (DCRA) to develop a regulatory framework that was not based solely on arrests and the positive identification of the drug. In April 2014, the District became one of the first jurisdictions to develop a regulatory ban on commercial sale of these products based on packaging, marketing, and pricing. These regulations allowed the District to treat potpourri or bath salts – common cover products for synthetic drugs – selling for \$20 a gram with a label that would not ordinarily be found on the product, as a synthetic drug. However, the penalties were neither swift nor certain, and small businesses such as gas stations and convenience stores continued to sell synthetic drugs. The District's strategy then evolved to give the Chief of Police the authority to immediately close any business selling synthetic narcotics for up to 96 hours, and DCRA the ability to revoke the license of these stores for subsequent violations.

The legislation has acted as a strong deterrent to any licensed business that might consider selling synthetic drugs. The threat of immediate closure and the imposition of an initial fine of \$10,000 ensure that the penalties for selling synthetic drugs cannot simply be absorbed as a cost of doing business. MPD and DCRA have conducted more than 400 store inspections, and MPD has made 51 arrests at these stores. And since the legislation was enacted 11 months ago, five stores have been shut down. While this may not sound like many, we have found that the public discussion, media coverage, and visible enforcement have pushed these small businesses to stop selling NPS drugs.

Unfortunately, the demand still exists, and the dealers have moved more to street operations. Combatting street dealing remains challenging, and makes the District's other efforts all the more important.

Information Gathering and Sharing

While criminal and regulatory enforcement against synthetics is critical, information gathering and sharing among non-law enforcement partners is equally important. Over the past three years, the District and our regional partners have established a multi-disciplinary approach to NPS to ensure that involved parties – from the criminal justice system to FEMS and hospitals – are collecting and sharing reliable information to support our efforts to stop the proliferation of NPS drugs.

In the District, drug testing of all arrestees and individuals on parole and probation is conducted by the federal Pretrial Services Agency for the District of Columbia (PSA). Anecdotally and based on PSA analysis, we know that individuals in the District's criminal justice system are using synthetic narcotics and that its use is correlated with negative outcomes.

One factor driving the rapid rise in the use of these drugs is the unintended consequence of the courts, supervision agencies, and employers testing people for drugs. Addicts under supervision reported turning to synthetic drugs because they knew urine samples were not universally tested for them. That is why I asked PSA to expand its testing for synthetic drugs. Individuals under supervision may be less likely to choose this unpredictable and dangerous drug if they know they will be tested and locked up. Because of this and as part of the broader effort to combat NPS, PSA launched universal testing for synthetic cannabinoids in October 2015. The agency had previously been testing samples only when they had a strong suspicion that the subject was taking synthetic cannabinoids.

Studies conducted by PSA last year identified several notable findings. In July 2015, they conducted their first wide scale, non-targeted testing of 136 individuals arrested for violent crimes. The results showed that 20 percent were positive for synthetics, including 44 percent of those arrested for Assault on a Police Officer and 36 percent of those arrested for robbery. This was the highest positive rate except for marijuana, which shows it had overcome cocaine as the drug of choice in the District.

In addition, an analysis of known synthetic drug users suggested that they are at greater risk of failure on PSA's two primary benchmark outcomes: re-arrest during the pretrial period and failure to appear for court appearances. Specifically, PSA found that known users of synthetics were 20 percent more likely to be arrested during the pretrial period and 4 percent less likely to make all scheduled court appearances. These results affirm the need for PSA to establish a comprehensive in-house synthetics testing program, using available state-of-the-science technology to mitigate the risk posed by users of these substances. In addition, establishment of an in-house synthetic testing program will allow PSA to conduct more in-depth testing. This will enable PSA to provide critical trend information, which will not only support their mission to enhance public safety, but will also provide information that will be of use to the District of Columbia criminal justice system as a whole.

The District is also working to gather information on individuals using NPS who are not in the criminal justice system. In 2015, prompted by the significant spike in emergency transports associated with NPS drugs, the Department of Health (DOH) implemented an emergency ruling requiring hospitals to collect urine or blood specimens for patients treated for suspected NPS use in emergency rooms and hospitals. The samples are tested for the presence of synthetic cannabinoids by the District's Chief Medical Examiner. Results have shown that approximately 57 percent of all samples tested positive for either synthetic cannabinoids alone or in combination with other scheduled substances.

Of course, what is important to note for all of these tests is that they may just represent the tip of the iceberg. With the chemical compounds for synthetics constantly evolving, testing programs at the federal and local level continue to lag behind. In order to fight NPS drugs, local governments need assistance at the federal level to ensure testing is as comprehensive as possible.

Public Education

Lastly, the District is working to educate the public about the real dangers of NPS. When synthetic cannabinoids first appeared, users turned to the drug as an alleged substitute for marijuana that was not yet illegal and would not be identified in private or government drug testing programs. Initial users may have paused if they realized the extreme dangers posed by NPS drugs. They are

known to cause increased heart rate and blood pressure, chest pains, black outs, seizures and even death. Use also is associated with anxiety, extreme paranoia, hallucinations, delusions, and violent behavior.

To educate the public about this risk, the District's Department of Behavioral Health (DBH) has two public information campaigns targeting youth and adults. The DBH Mobile Assessment and Referral Center van and recovery teams are circulating campaign materials in neighborhood corridors and in areas where people gather. The most recent campaign targeting adults is also visible with advertisements on Metro buses, online, and on popular radio stations. As the agency's director has noted, we know that the drugs can have immediate harmful effects, but we do not know the possible long-term impact of synthetic drugs on mental and physical health.

Conclusion

Over the past year, the District has seen a reduction in several leading indicators of NPS use in the District. The number of emergency transports rose from just over 100 in April 2015 to a high around 600 per month last August, September, and October, or about 20 transports per day. The number of transports dropped in November through February to less than 5 per day, but has begun rising since then. PSA has also seen a drop in positive tests. However, we do not know whether these reductions are a result of the efforts to stop the spread of the drug, seasonal changes in drug use patterns, changing chemicals for which we may not yet be testing, or a combination of these and other factors. We are certainly not ready to claim success against NPS drugs. Unfortunately, it is likely that criminal enterprises have only just begun to explore the possibilities of manufacturing and distributing New Psychoactive Substances. Federal and local governments must continue to work together to develop new testing, gather information, educate the public, and of course target criminal enterprises distributing these dangerous drugs so that they do not overwhelm local public health and safety resources.

In closing, I would like to thank you for convening this hearing and providing the opportunity to discuss NPS drugs today. Your attention to the issue can only help to elevate public awareness and focus government resources, important elements of our effort to protect the public health and safety.

Chief of Police Cathy L. Lanier

Cathy L. Lanier was first appointed Chief of Police for the District of Columbia's Metropolitan Police Department in 2007. After assuming leadership of the Metropolitan Police Department on January 2, 2007, Cathy L. Lanier was unanimously confirmed as the Chief of Police by the Council of the District of Columbia on April 3, 2007.

Since then, she has accomplished much for the Metropolitan Police Department (MPD) in the past ten years. The cornerstone of Chief Lanier's leadership lies in the belief that strong relationships fostered with partners in the community and criminal justice system ultimately helps reduce crime. It is through this belief that the District of Columbia has seen a decrease in violent crimes during her tenure, including most notably, a significant decrease in homicides. A key to this success was convincing all partners that MPD could prevent the next homicide through immediate and coordinated action. Strengthened police-community ties have opened avenues of communications, giving victims and witnesses the courage to share valuable information that helps law enforcement capture criminals.

Under Chief Lanier's direction, various modes of communication also have been expanded for the Department to better connect with the public in implementing the idea of community policing. Consistent with Chief Lanier's vision to foster better community relations, MPD has increased its use of social media to include tools like Facebook, Twitter, YouTube, and Pinterest to be able to engage and interact with the community. Furthermore, Chief Lanier was the first to establish a text/tip line for MPD to accept anonymous text tips to help solve crimes. Since 2008, when the text tip line was first deployed, the number of tips submitted by community members has increased by nearly 600 percent. And for those that call or text in tips, MPD's reward program recognizes the concerned community members who have made contributions in reducing violent crimes.

Beginning in 1990, Chief Lanier has spent her entire law enforcement career with the Metropolitan Police Department. Much of her career has been in uniformed patrol, where she served as Commander of the Fourth District, one of the largest and most diverse residential patrol districts in the city. She also served as the Commanding Officer of the Department's Major Narcotics Branch and Vehicular Homicide Units.

For four years as Commander of Special Operations Division (SOD), Chief Lanier managed the Emergency Response Team, Aviation and Harbor Units, Horse Mounted and Canine Units, Special Events/Dignitary Protection Branch, and Civil Disturbance Units. She also established the agency's first Homeland Security/Counter-Terrorism Branch and created an agency-wide chemical, biological, radiological response unit known as the Special Threat Action Team in her role. In 2006, Chief Lanier was then tapped to become the first Commanding Officer for MPD's newly created Office of Homeland Security and Counter-Terrorism (OHSCT) where she took the lead role in developing and implementing coordinated counter-terrorism strategies for all units within the MPD, and launched Operation TIPP (Terrorist Incident Prevention Program).

Chief Lanier is a graduate of the FBI National Academy and the federal Drug Enforcement Administration's Drug Unit Commanders Academy. She holds Bachelor's and Master's Degrees in Management from Johns Hopkins University, and a Master's Degree in National Security Studies from the Naval Postgraduate School in Monterey, California. She is a certified technician in Hazardous Materials Operations.