

NATIONAL HIDTA DIRECTORS' ASSOCIATION

A Sustainable Solution to the Evolving Opioid Crisis: Revitalizing the Office of National Drug Control Policy

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Committee on Government Reform

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Chairman Gowdy, Ranking Member Cummings, and distinguished members of the Committee:

It is an honor to appear before you today to discuss the Administration's FY 2019 proposal that would transfer the High Intensity Drug Trafficking Areas (HIDTA) Program from the Office of National Drug Control Policy to the Drug Enforcement Administration and about revitalizing the Office of National Drug Control Policy.

I come to you today as a representative of the National HIDTA Directors Association, which is comprised of the Executive Directors and Deputy Directors of the now 29 HIDTAs.

I have more than 47 years of law enforcement experience, including 23 years in drug law enforcement, ranging from investigating drug crimes to leading the Maryland State Police Bureau of Drug Enforcement and 24 years as the Executive Director of the Washington/Baltimore (W/B) HIDTA. My colleagues in the NHDA and I collectively represent more than 1,500 years of law enforcement experience.

I also come with a sense of *déjà vu* since I testified in front of this Committee on a similar proposal 13 years ago this month. That proposal was rejected by the Congress, and I urge you to do the same with this iteration.

The Administration's stated rationale for the proposed transfer is to improve coordination of drug enforcement efforts among Federal, State, and local law enforcement agencies in the United States. I submit the coordination the proposal claims to seek already exists in the HIDTA Program and in each designated HIDTA.

How the HIDTAs Operate

Over the years, the HIDTA Program has developed distinctive features that separate it from other Federal grant programs and State and local assistance programs administered by Federal law enforcement agencies.

The most significant feature of the HIDTA Program is the long-standing policy, codified into law in 2006, that each HIDTA is managed by an Executive Board comprised of senior federal law enforcement agents and State/local/tribal law enforcement executives from the HIDTA's designated area. Moreover, voting power on the Board must be equally divided between the two types of representatives –Federal and State/local/tribal. Other programs may combine Federal, State, and local law enforcement agencies into a single task force, but the work of those task forces is directed by a single agency, not a balanced group as with the HIDTA Executive Boards. As a result, those task forces are usually extensions of a single agency. In 2017, the composition of the HIDTA Executive Boards included 102 State, 239 local, and 301 Federal law enforcement administrators.

Second, the Executive Board in each HIDTA has virtually unlimited discretion over the HIDTA's activities. Every year, HIDTA Executive Boards assess the drug trafficking threats in their defined areas, develop strategies to address those threats, design initiatives to implement the strategies, and allocate the funding needed to carry out the initiatives. This level of local control and discretion ensures that each HIDTA Executive Board can tailor its strategy and initiatives to local conditions and can respond quickly to changes in those conditions. It also leads to wide-ranging and creative approaches to counter the drug traffickers operating in the United States.

In 2017, HIDTAs funded 825 initiatives. These initiatives included:

- 641 Enforcement Initiatives that investigate, disrupt and dismantle, and prosecute drug trafficking and money laundering organizations;
- 57 Intelligence and Information Sharing Initiatives that furnish intelligence, perform deconfliction services, collect and disseminate information, and provide other analytical support for HIDTA initiatives;
- 27 Prevention Initiatives that work to reduce drug use and deter new users through a variety of evidence-based programs;
- 12 Treatment Initiatives that support drug treatment services to help individuals, particularly those with criminal histories, to stop using drugs and lead more productive lives;
- 32 Training Initiatives that provide investigative, analytical, administrative, and demand reduction classes for HIDTA participants; and
- 21 Support Initiatives that provide funding for forensic laboratories, information technology, and technical support.

At the operational level, collocated task forces that include Federal law enforcement agents and State/local officers carry out HIDTA-funded initiatives. These task forces are led by a local, State, or Federal agency or often jointly led by more than one agency. The

interaction among the task force members is heightened by the Program's policy of requiring the task force members to be housed and commingled at the same location to facilitate a close, barrier-free work arrangement. In 2017, more than 22,000 federal, state, local, and Tribal agents, officers, analysts, and other staff participated in 825 HIDTA initiatives. This number included 10,695 from local agencies, 5,197 from state agencies, 6,230 from federal agencies, 69 from Tribal enforcement agencies, and three representatives of foreign law enforcement agencies.

As a result of the discretion afforded the Executive Boards, the make-up of the Executive Boards, and the top-to-bottom commitment to interagency cooperation, the individual HIDTAs have established a track record of quickly devising and implementing creative and effective responses to changing drug threats.

HIDTA Accomplishments

I said earlier that I had a sense of *déjà vu* today since I testified in 2005 about a similar proposal from the George W. Bush Administration. I would like now to provide a brief overview of what the HIDTAs have accomplished since that proposal was rejected.

Since 2005, HIDTAs have:

- Disrupted or dismantled an average of 2,882 drug trafficking and money laundering organizations each year, more than 60% of which were part of an international or multi-state operation;
- Dismantled almost 17,000 methamphetamine labs;
- Taken more than 7,700 tons of drugs off the street, including 959 tons of cocaine, 185 tons of methamphetamine, 39 tons of heroin and fentanyl, and more than 5 tons of prescription opioids;
- Seized \$8.5 billion in cash and \$3.7 billion in real property from traffickers; and
- Provided training for 556,000 agents, officers, analysts, and other staff.

As impressive as these statistics are, they do not tell the whole story of HIDTA accomplishments. The following examples illustrate the ability of the HIDTAs to implement creative and effective responses to drug threats as they emerge.

Heroin Response. HIDTAs developed the Heroin Response Strategy (HRS), the first multidisciplinary approach to combatting the heroin and opioid epidemic. The HRS initiative brings public health and public safety partners together at the Federal, state, and local levels to reduce drug overdose fatalities and disrupt trafficking in illicit opioids.

The foundation of HRS is the Public Health and Public Safety Network (PHPSN). The PHPSN comprises cross-disciplinary teams of drug intelligence officers (DIOs) and public health analysts (PHAs) within each state. These teams are designated as "points of light" within their state, tasked with communicating information and collaborating across agencies and with other states in the HRS.

The HRS began in 2015 with five HIDTAs and now has 10 HIDTAs along the Atlantic seaboard and in the Midwest that encompass 22 states.

I think it is important to note that in a recent review of the HIDTA Program, the GAO wrote: As demonstrated through its management of programs like HIDTA's HRS, an agency like ONDCP is uniquely positioned to collaborate with its law enforcement and public health counterparts to lead a specific review on ways to improve the timeliness, accuracy, and accessibility of fatal and non-fatal overdose data that provide critical information to understand and respond to the opioid epidemic. Such a review should expand on and leverage the findings from previous federal studies. It should also assess the benefits and scalability of ongoing efforts to leverage data systems, such as the Washington-Baltimore HIDTA's ODMAP program, and examine ways in which laws that restrict access to public health data to protect patient privacy have exemptions for law enforcement entities that could be more widely leveraged while appropriately protecting patient privacy.

Overdose Detection Mapping Application Program (ODMAP) Tool. A major obstacle to dealing with the opioid crisis has been the lack of a shared methodology to track overdoses, both fatal and non-fatal, in real time and across jurisdictions. This tracking capability is necessary to mobilize a capable public health response to these issues.

In 2017, the Washington/Baltimore HIDTA developed ODMAP, implemented a software application that first responders can use to enter overdose-related information and generate real-time overdose surveillance data across jurisdictions.

ODMAP sends first responders' input data to a mapping tool that tracks overdoses and issues alerts to enrolled public safety and health agencies about detected spikes in overdoses across an area. The real-time data input and immediate notification of ODMAP facilitates strategic analysis of overdose patterns. More than 30,000 overdose incidents have been reported using ODMAP and over 100 spike alerts issued. More than 650 teaming agreements have been signed with federal, state, and local public safety, health, and policy groups, including the Substance Abuse and Mental Health Services Administration (SAMHSA), ONDCP, the Center for Disease Control, and other HIDTAs.

Domestic Highway Enforcement (DHE). The DHE is a strategy to reduce criminal activity and enhance public safety on the country's major transportation corridors. DHE works to improve information sharing among the HIDTAs and between HIDTAs and their respective state and local law enforcement agencies. The initiative's efforts help identify interior corridors of drug movement and deny drug traffickers the use of the U.S. highway system.

The DHE strategy incorporates both regional and transportation corridor models to encourage the gathering, reporting, analysis, and sharing of intelligence regarding criminal activity and threats to public safety. The network developed through the DHE activities enables the information to be shared quickly and efficiently.

In 2017, HIDTA-funded DHE operations removed approximately 22.3 tons of marijuana, 1.5 tons of cocaine, 2.2 tons of methamphetamine, and almost a half a ton of heroin from the market and seized more than \$1.7 million in cash.

What Makes This Possible?

I believe the discretion, balance, and independence of the Executive Boards is a direct result of the HIDTA Program being administered by the Office of National Drug Control Policy. As I know you are well aware, ONDCP is charged by law with preparing a National Drug Control Strategy that establishes the nation's plan to reduce drug use and its consequences. This Strategy is required to address the nation's needs with evidence-based programs, policies, and practices so that it can achieve its measurable short- and long-term goals and objectives. Key to ONDCP's strength is its ability to coordinate the formulation of the President's drug control budget, which is critical to the successful implementation of the National Drug Control Strategy. ONDCP's responsibilities cross the entire spectrum of drug activities – enforcement, treatment, and prevention, and we believe those responsibilities give ONDCP the perspective to recognize, encourage, and accept a variety of approaches to our Nation's drug problems. Given the severity of the opioid epidemic and conclusive evidence that cocaine and methamphetamine use are becoming significant contributors to overdose deaths, it is more urgent today than ever before that ONDCP be authorized to continue its mission.

HIDTA Executive Directors and the members of their respective Executive Boards unanimously agree that the HIDTA Program should remain part of ONDCP. Some of the reasons for that view are:

- The HIDTA Program has been extremely efficient and effective under ONDCP. There is no evidence that demonstrates any benefits from moving HIDTA out of ONDCP.
- The neutrality of the HIDTA Program is a key ingredient for its success in the partnerships developed over the years. This neutrality is attributed to the fact that the program is in ONDCP, which does not have a competing operational program or anyone sitting on any of the HIDTA executive boards.
- The U.S. Department of Justice administers five agencies (DEA, FBI, ATF, BOP, and U.S. Marshal's Service) that participate in HIDTAs and compete with each other, other federal agencies, and our State and local partners for limited resources and funds. It would be difficult for DOJ to remain neutral and objective should they become the parent agency over HIDTA.
- Non-DOJ representatives have expressed concerns about moving the HIDTA Program to DOJ. They believe a DOJ department cannot

operate as a neutral broker as well as ONDCP. They believe that the priorities and management practices of the Justice Department would, in time, overtake the HIDTA Program.

- The success of DOJ is determined by how well each of its agencies fulfills the mission assigned it by the Attorney General. The success of the HIDTAs is determined by how well the local initiatives carry out the assignments of the multi-agency executive Board.
- The HIDTA Program gives ONDCP real-time and direct access to some of this Nation's top criminal justice experts for input on threats, strategies, and policy. This is a critical asset to the ONDCP director and leadership who are responsible for this nation's drug policy.

Conclusion

I know the Congress recognizes how effectively the HIDTAs work; the funding appropriated for the program in times of resource constraints clearly demonstrates Congressional support. Given the demonstrated success of the HIDTAs, what would be gained by the dramatic restructuring envisioned in the 2019 Budget?

Moreover, with an opioid epidemic claiming an average of 115 lives per day and Congress likely to authorize and appropriate billions of dollars in response, what would be gained by diminishing the capacity of the Office of National Drug Control Policy? The National HIDTA Directors Association believes HIDTA and the Drug Free Communities Support Program should remain in ONDCP. We also believe that now is the time to reauthorize and strengthen ONDCP and empower it to develop and coordinate an aggressive opioid strategy.

I thank you for this opportunity to express the views of the National HIDTA Directors Association and look forward to working with the Committee on these issues.

Thomas H. Carr

Thomas H. Carr is the Executive Director of the Office of National Drug Control Policy's (ONDCP) Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA) Program, a position he has held since 1994. He also serves as Executive Director of the University of Baltimore's Center for Drug Policy and Enforcement.

Mr. Carr has designed and implemented more than 150 drug task forces, 18 drug treatment/criminal justice task forces and five drug prevention task forces during the last 23 years. He currently administers 34 drug task forces and a regional intelligence center that supports more than 150 federal, state and local law enforcement agencies in Maryland, Washington, D.C., Virginia, and West Virginia.

As chairperson of the Performance Management Process Committee, Mr. Carr established metrics to measure the efficiency and effectiveness of drug control efforts in the fields of drug law enforcement, criminal intelligence, treatment and prevention for the HIDTA Program. HIDTA's Performance Management System electronically collects outcome performance data from 28 HIDTAs and shares this information with Congress on an annual basis. He was awarded the ONDCP Director's Award for his work in performance management.

In response to the nation's opioid epidemic, Mr. Carr is working with other HIDTAs and the Office of National Drug Control Policy on the Heroin Response Strategy (HRS). This strategy resulted in the creation of a public health-public safety partnership supported by the Centers for Disease Control and Prevention, and the hiring of 22 drug intelligence officers and 22 public health analysts. The HRS has led to the interdisciplinary sharing of opioid data between law enforcement and public health agencies.

Mr. Carr spearheaded the development of the ODMAP, a real-time overdose syndromic surveillance system used to identify spikes in fatal and non-fatal overdoses. In July 2017, Mr. Carr and the ODMAP development team received the Special Achievement in GIS award from Esri Corporation.

Mr. Carr is the lead designer for HIDTA's Case Explorer system. Case Explorer is not only a case management system, but is also an event and target deconfliction system in use nationwide by law enforcement agencies at all levels of government.

In addition, Mr. Carr was an antiterrorism instructor for the U.S. Department of State's Antiterrorism Assistance Program. He is the principle author of seven terrorism courses dealing with terrorist financing, intermediate and advanced intelligence, task force management, and criminal investigation that are now delivered worldwide.

Prior to accepting his position with the Washington/Baltimore HIDTA, Mr. Carr was a Lt. Colonel with the Maryland State Police and retired as chief of the Bureau of Drug Enforcement. He graduated with honors from Towson University and was first in his class at the Maryland State Police Academy, class of 1971. He attended the FBI National Academy, the DEA Drug Commanders School and the Federal Executive Institute. He served as an adjunct instructor with the University of Maryland from 1993 to 1999. Mr. Carr and his family reside in Round Hill, Virginia.