

Testimony

Before the Subcommittee on Crime, Terrorism, and Homeland Security, Committee on the Judiciary, House of Representatives

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DRUG REHABILITATION CLINICS

Illegal Drug Activities Near Some District of Columbia Clinics Undermine Clinic Services and Patient Rehabilitation

Statement of Robert J. Cramer, Managing Director Office of Special Investigations



Mr. Chairman and Members of the Subcommittee:

I am pleased to appear before you today to summarize the results of our investigation, performed at your request, of street narcotic sales in the vicinity of certain drug rehabilitation clinics in the District of Colombia. To obtain an overview of the problem, we conducted physical surveillance of five clinics in the District of Columbia and interviewed clinic personnel and law enforcement officials. In brief, we found that a significant amount of illegal drug trafficking activity takes place around these clinics. Patients frequently must navigate their way through a virtual bazaar of illegal drug dealing when they enter and exit the facilities.

Background

From April 2003 through June 2004, criminal investigators from the Office of Special Investigations (OSI) at the U.S. General Accounting Office conducted surveillance at and around five drug rehabilitation clinics in the District of Columbia—the OASIS Clinic at 910 Bladensburg Rd., NE; the D.C. General Hospital at 1900 Massachusetts Ave., SE; the Model Treatment Program at 1300 First St., NE; the United Planning Organization Comprehensive Treatment Center at 333 N St., NE; and the Department of Veterans Affairs Substance Abuse Program at 40 Patterson St., NE. The OSI criminal investigators who conducted these surveillances have many years of experience in the investigation of criminal activity, including illegal street sales of narcotics. Most of these clinics are located in nonresidential areas and are surrounded by parking lots, vacant lots, warehouses and some stores. On a daily basis, clinics in the Washington, D.C. area treat thousands of patients for a variety of substance abuse problems. We also interviewed personnel at three of the five clinics, detectives from the major narcotics branch of the Metropolitan Washington D.C. Police Department (MPD), and prosecutors from the U. S. Attorney's office in the District of Columbia. We conducted our work in accordance with quality standards for investigations as set forth by the President's Council on Integrity and Efficiency.

Drug Trafficking Observed at Drug Rehabilitation Clinics

Certain typical patterns of street activity are commonly associated with illegal street sales of drugs. Such activity includes, for example, a group of people, consisting of one or more drug dealers and their associates, who loiter in a particular area day after day. Typically, individuals who act as "lookouts," to protect the dealers from possible law enforcement interdiction or even territorial encroachment by rival drug dealers,

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occasionally walk away from the group and later walk back to re-join it. In addition, customers walk up to such groups and exchange money for drugs in hand-to-hand transactions, or walk away with someone in the group to complete a drug transaction in another location, or circle their vehicles near locations where the group congregates, slowing down to make contact with narcotics sellers. To the untrained eye, such contacts may appear to be innocent encounters between acquaintances, but in reality, the participants are engaging in illicit transactions involving exchanges of money for drugs.

During more than 50 visits to these clinics, investigators observed these types of activities and others that are indications of drug trafficking. For example, the investigators saw groups of individuals who were loitering in parking lots or near banks of telephones, stores, and at bus stops in the vicinity of the clinics. During our visits, we observed some of the same people on repeated occasions. Individuals who appeared to serve as lookouts would wander away from a group and later re-join it. In addition, people driving vehicles would circle the locations where these groups congregated, slowing down to speak with people on the street. The investigators observed people from the street groups repeatedly entering and exiting vehicles that pulled up to them, meeting other people on the street and engaging in hand to hand contact, or walking away with them, sometimes entering a store with them and subsequently leaving the store without any visible sign that either person had made a purchase in the store. Some of the drug dealers at these locations were brazen about their activities. For instance, on three occasions, dealers approached an OSI investigator and asked if he wanted to buy drugs.

On one occasion, our investigators observed an individual walking back and forth on the streets near a clinic, stopping to engage in conversation with many different people. Over a period of approximately 45 minutes, the investigators observed the same individual continue this activity on several streets with various people who were walking on the street, or who stopped to speak with him as they were driving by in automobiles. Before leaving the area that day, the investigators observed this individual open a door of a parked automobile, pull out a small brown paper bag, and hand it to another person who gave him cash. The investigators then observed this individual count the money that had been handed to him.

One clinic is located in an isolated area near a bus stop. There are no stores, residences, or other businesses in the area other than the clinic. We learned from local police officials that the bus stop is known as a place at

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which illegal drug activity frequently takes place. We viewed a videotape made by local police of a drug transaction that took place at the bus stop, in which an undercover officer purchased narcotics. The officer made the purchase from someone who, while appearing to be waiting for a bus, sold drugs to the officer from a bag she carried. When OSI investigators observed the bus stop, approximately eight to ten people were sitting at the stop and appeared to be waiting for a bus. When a bus pulled up to the stop, however, none of the people who were sitting there got on board. As the investigators continued to watch, they observed other people approach the individuals who were seated at the bus stop, engage in conversation followed by hand-to-hand contact, and then walk away.

Adjacent to another clinic is a McDonald's restaurant that is known as the "McPharmacy" to local law enforcement officials who have reported that there is a high level of illegal drug activity in its vicinity. Local police detectives reported that the area surrounding the restaurant and clinic is a magnet for persons throughout the metropolitan Washington, D.C. area seeking to buy and sell narcotics. As a result, local police, federal law enforcement agencies, and police departments in Maryland and Virginia cooperate in investigating illegal drug sales in the area. In fact, a "sting" operation conducted in the area last year resulted in the conviction of several drug dealers. On repeated visits to this location, investigators saw many vehicles in the parking lot of the restaurant with tags from several different states and the District of Colombia. However, most of the vehicles' occupants remained in the lot and were not observed to enter or leave or otherwise do business with the restaurant. Also, investigators observed numerous individuals who stood around a bank of pay telephones near the restaurant. As the individuals stood there, various people walked up to them or drove up in cars. Investigators saw that many of the people who approached the individuals near the telephones handed something to, and received something back from, these individuals. Although the investigators were unable to observe what these people exchanged, on one occasion they observed that cash was exchanged for a small bag. This activity is consistent with the typical patterns of street-level illegal narcotics sales that I discussed earlier.

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Clinic Personnel Confirm That Significant Drug Trafficking Takes Place Near Clinics

We also interviewed personnel at three of the clinics who confirmed that there is extensive illegal drug dealing activity in the vicinity of their clinics. A director at one clinic stated that he receives at least one complaint each day from patients who are solicited by drug dealers outside the clinic. The director reported that it is especially difficult for these patients, who are struggling with addiction, to resist the temptations offered by the drug dealers who confront them on a daily basis outside the clinic. To alleviate this situation, the clinic changed its hours of operation so that more patients can enter and leave the clinic early in the day when drug dealers are less likely to be outside. Additionally, the clinic's program director does not permit patients to remain for more than 15 minutes outside the clinic. The program supervisor at another clinic told us that each month, at least one patient reports being assaulted in the vicinity of the clinic and robbed of methadone.

Concluding Remarks

In conclusion, significant drug trafficking takes place in the vicinity of the drug clinics we visited. Although these clinics are intended to help those in need of rehabilitation, patients who seek treatment must navigate their way to and from the clinics in an environment in which illegal sales of narcotics are daily occurrences. The efforts of patients who are seeking rehabilitation, and clinic professionals who serve them, are significantly undermined by the criminal activity that surrounds them.

Mr. Chairman, this concludes my prepared statement. I would be pleased to respond to any questions that you or the other Members of the Subcommittee may have at this time.

Contact Information and Acknowledgments

For further information regarding this testimony, please contact Robert J. Cramer at (202) 512-7455 or George Ogilvie at (202) 512-9226.

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