



Tulsa Police Department

STATEMENT OF

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BEFORE THE

**SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON ENERGY AND COMMERCE
U.S. HOUSE OF REPRESENTATIVES**

FOR A HEARING ENTITLED

**“EXAMINING THE GROWING PROBLEMS OF PRESCRIPTION DRUG
AND HEROIN ABUSE: STATE AND LOCAL PERSPECTIVES”**

PRESENTED ON

MARCH 26, 2015

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Before the Energy and Commerce Subcommittee on Oversight and Investigations
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Introduction

Chairman Murphy, Ranking Member DeGette, and Members of the Committee, on behalf of Chief Chuck Jordan and the Tulsa Police Department (TPD), thank you for the opportunity to discuss prescription opioid abuse, heroin abuse, and heroin trafficking.

I have been a Tulsa Police officer for approximately 17 years, and have spent the majority of my career investigating drugs and/or drug related crimes. Of my 17 years as a Tulsa Police officer, I have spent approximately 12 of them in an undercover capacity, with nearly 10 of those years spent as a supervisor of a narcotics unit within the Special Investigations Division. My training and experience includes being the Honor Graduate of the Bureau of Alcohol, Tobacco, and Firearms New Professional Training Academy, completion of the Oklahoma State Bureau of Investigations Clandestine Laboratory Basic Safety and Site Safety courses, the DEA Basic Narcotics Investigators School, and Advanced Undercover Techniques and Survival, among other courses. I have been involved in over 1000 drug trafficking investigations, and have been the affiant on over 300 search warrants, primarily dealing with the distribution and/or manufacture of dangerous drugs.

Testimony of Corporal Michael Griffin
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U.S. House of Representatives
March 26, 2015

Background

According to data from the Drug Enforcement Administration (DEA), the number of heroin users nationwide almost doubled between 2007 and 2013 to an estimated 681,000. Data from the Centers for Disease Control (CDC) show that heroin overdose rates in 28 U.S. states increased more than twofold between 2008 and 2012, accounting for almost 19 percent of drug-related overdose deaths nationwide in 2013.¹

Although heroin abuse and trafficking in Tulsa lags far behind the abuse and trafficking of methamphetamine, heroin is trafficked into Tulsa in the same manner as methamphetamine and cocaine, and its abuse leads to similar related criminal activity, ranging from petit larceny to armed robbery and even murder.

Heroin Use among Prescription Drug Abusers

According to the DEA, heroin use is 19 times higher among former abusers of prescription drugs, with 80% of new heroin abusers first being abusers of prescription

¹ DEA Intelligence Bulletin dated February 13 – 17, 2015

Testimony of Corporal Michael Griffin
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U.S. House of Representatives
March 26, 2015

drugs. The reasons given for this increase in heroin abuse are availability, price, and OxyContin reformulation.²

Narcotics investigators assigned to the Special Investigations Division within the Tulsa Police Department know from their training and experience that a large majority of individuals currently addicted to heroin began their drug abuse by abusing prescription opioids.

Prescription Drug Investigations in Tulsa

The Tulsa Police Department currently has 751 sworn police officers. The Tulsa Police Department believes the focus of drug investigations should be on those individuals who are responsible for trafficking drugs into and throughout our community, rather than on those individuals who are merely addicted to drugs. This is because of our belief that resources are best utilized at the source of the problem, rather than on the symptoms of a problem. With that goal in mind, of the 751 sworn police officers working for TPD, one investigator is assigned to investigate prescription drug cases within the City.

² DEA Domestic Strategic Intelligence Unit: Trends in Heroin Abuse and Trafficking

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

Tulsa Police officer Joe Gho, a 29 year veteran of the Tulsa Police Department, has spent the last 20 years investigating prescription drug cases. He believes that Oklahoma has one of the best Prescription Monitoring Programs (PMP) in the United States. Oklahoma's PMP is real-time and allows doctors and pharmacists to quickly access an individual's prescription drug history to evaluate if they are possibly doctor shopping to gain access to prescription drugs.

Officer Gho stated the two prescription drugs most abused in Tulsa are Hydrocodone and Oxycodone, both of which are opioids. Through his training and experience, he knows that individuals get addicted to these drugs for numerous reasons, to include beginning with a real medical need for the drugs as well as to doctors over-prescribing them at times. Once a person is addicted to opioids, it is not long before they realize that obtaining prescription opioids are harder to access (due to Oklahoma's PMP) and more expensive (up to \$30/Oxycodone pill) than heroin. Because these individuals are already addicted to opioids, the transition to heroin is easier and cheaper.

Heroin Investigations in Tulsa

Heroin trafficking in Tulsa is operated by Mexican Drug Trafficking Organizations. A typical heroin trafficking operation in Tulsa has a dispatcher who takes calls from

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

an individual wishing to purchase heroin. That dispatcher takes the order from the individual wishing to purchase heroin, then tells the individual they will return their call shortly. Shortly thereafter, the dispatcher returns the call to the individual wishing to purchase heroin and tells the customer where to meet the dealer and the type of vehicle the heroin dealer will be driving. Those individuals meet near a major intersection in Tulsa, and the customer follows the heroin dealer into a nearby neighborhood. Once in the neighborhood and comfortable that they are not being followed by law enforcement, the heroin dealer will pull to the side of the road and allow the customer to enter his/her vehicle. The two of them will then drive through the neighborhood, conducting the drug transaction in the vehicle, all the while watching for law enforcement. If they do not observe law enforcement, the heroin dealer returns the customer to his/her vehicle, and they part ways. Heroin in Tulsa sells for approximately \$250-\$300 per gram. In Tulsa, a dosage unit of heroin, which is typically 1/10th of one gram sells for \$40.

The individuals selling the heroin to the customers in Tulsa usually receive a small place to stay, possibly a vehicle, and a daily allowance for their efforts. Their job consists of the distribution of the heroin, collection of the money, and securing the money until it can be sent back to Mexico.

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

According to the DEA, the same Mexican Drug Trafficking Organization that is operating this type of heroin trafficking operation in Tulsa also operates in the same manner in multiple cities throughout the United States.

Similar to other drug investigations conducted at the local or state level, the individuals most often arrested and prosecuted are the local dealer and/or operation leader, however the individual profiting the most from the illegal distribution of heroin resides in Mexico and is usually beyond prosecution at the state level.

Additionally, and still consistent with other drug investigations, when the individuals at the local or state level are arrested, the Mexican Drug Trafficking Organization simply replaces those individuals with other low-level people within the organization, therefor the DTO is able to continue distributing drugs within a community almost uninterrupted.

Correlation between Drugs and Crime

According to the Department of Justice, as many as 83 percent of incarcerated people are past or current drug abusers, with more than 51 percent of those individuals reporting substance abuse while committing the offense which led to their

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

incarceration.³ The state of Oregon reported in 2009 that 78% of property crimes that occurred in that state were committed by drug addicts stealing to pay for their addiction.⁴

Data confirms that drug abuse not only provides a demand for drugs to be trafficked into and throughout the United States, but also that drug abuse and distribution leads to other crimes occurring in a community. An approach targeting drug trafficking without taking into account a need to prevent drugs from entering the United States is short-sighted.

Prior efforts by law enforcement agencies and state legislatures to prevent drug crimes and crimes that occur because of drug dependence and/or distribution have shown to be successful. For example, reducing the availability of pseudoephedrine has proven to reduce the number of methamphetamine labs operating in Oklahoma and other states with similar legislation. This legislation has not only reduced the number of methamphetamine labs operating within a state, sometimes up to 96%, but has also shown to significantly lower associated criminal activity.⁵

³ 1999 National Drug Control Strategy – Office of National Drug Control Policy

⁴ http://www.doj.state.or.us/about/pdf/annual_report_2009.pdf

⁵ <http://www.oregondec.org/pse.htm>

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

United States Border with Mexico

The United States border with Mexico is the primary entry point for the vast majority of marijuana, cocaine, heroin, and methamphetamine smuggled into the country. At the U.S. – Mexico border, Mexican DTOs use numerous methods to smuggle drugs into this country, to include aircraft, horses and mules, tunnels, vehicles, and even people walking across the border.

According to the Federal Bureau of Investigation (FBI), no other country in the world has a greater impact on the drug situation in the United States than Mexico. The FBI states that each of the four major drugs of abuse – marijuana, cocaine, heroin, and methamphetamine – are either produced in or transported through Mexico before reaching the United States. The FBI has further identified Mexico as the number one foreign supplier of marijuana and methamphetamine, and the major transportation corridor for cocaine and heroin.⁶

⁶ <http://www.fbi.gov/news/testimony/drug-trafficking-violence-in-mexico-implications-for-the-united-states>

Testimony of Corporal Michael Griffin
Special Investigations Division, Tulsa Police Department
Before the Energy and Commerce Subcommittee on Oversight and Investigations
U.S. House of Representatives
March 26, 2015

Data provided by the DEA shows that the supply of heroin coming from Mexico has increased over the past five years. According to the DEA, heroin seizures at the Southwest Border are on the rise:

- Heroin Seizures on the Southwest Border (2009-2014)
 - 2009 – 802
 - 2010 – 1,068
 - 2011 – 2,660
 - 2012 – 2,294
 - 2013 – 2,070
 - 2014 – 2,181

Part of the increase in heroin seizures on the southwest border may be due to the decrease in U.S. demand for Mexican marijuana, which has led Mexican drug farmers to increasingly plant opium poppies in lieu of marijuana.⁷

⁷DEA Intelligence Bulletin dated February 13 – 17, 2015

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Conclusion

It is clear that prescription opioid abuse and the related heroin abuse are issues that affect communities across the United States. Without a comprehensive approach to these issues, many people across the country will continue to be effected by these drugs. The Tulsa Police Department recommends a continuation of the comprehensive approach to drug trafficking currently in place, which relies on coordination among law-enforcement agencies, community-oriented policing, intelligence and information sharing, improved technology, as well as additional federal efforts made to prevent drugs of all kinds from finding their way into communities across the United States.