Testimony

of

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New York City Council Committee on Mental Health, Disabilities and Addiction

on

Opioid Overdoses Among NYC’s Homeless Population

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Good morning, Chair Levin, Chair Ayala, and members of the committees. I am Dr. Gary Belkin, Executive Deputy Commissioner of the Division of Mental Hygiene at the New York City Department of Health and Mental Hygiene. On behalf of Commissioner Bassett, thank you for the opportunity to testify on the opioid overdose epidemic in New York City.

Nationally, we are in the midst of a drug overdose epidemic driven by both prescription and illicit opioids, primarily heroin and fentanyl. In New York City, drug overdose is the leading cause of unintentional injury death for all New Yorkers, and the leading cause of death among New Yorkers aged 25 to 34. In 2016, there were 1,374 overdose deaths from all drugs in New York City—the highest on record. A New Yorker dies from a drug overdose every seven hours. This is more than the number of deaths from homicides, suicides, and motor vehicle crashes combined. Opioids were involved in more than 80% of all drug overdose deaths in 2016, with the vast majority involving heroin and/or fentanyl.

The opioid crisis affects every neighborhood in New York City, but drug overdose death rates are highest in Staten Island and the South Bronx. If the South Bronx were its own state, it would have the sixth highest drug overdose rate in the nation. Similarly, if Staten Island were its own state, it would be in the top ten. The largest numbers of overdose deaths were among Bronx residents followed by Brooklyn residents.

The overdose epidemic affects all racial groups in New York City. In 2016, the rate of opioids overdose deaths was highest among White New Yorkers, followed closely by Latino New Yorkers, and then Black New Yorkers. However, death rates among Black New Yorkers increased 85% between 2015 and 2016 — more than double the rate increase among White and Latino New Yorkers.

Specific to today’s hearing, people who are homeless or unstably housed are at particular risk of drug overdose or harms related to drug use. The homeless account for 1% of New York City population, but in 2016 they accounted for 7% of drug overdose deaths. As you’ll soon hear from Commissioner Banks, drug overdose is the leading cause of death among homeless persons.

We have found that the stigma associated with drug use and addiction remains one of the biggest barriers to people seeking help. Especially for low income communities – particularly those of color – that were targeted by the War on Drugs. It is not enough to increase the availability of treatment and social services. We must also break through the stigma, identify community voices and leadership, and provide harm reduction services. This Administration strongly believes in a public health approach to ending overdose deaths; one that works alongside our criminal justice partners, not in conflict.

To address the opioid epidemic, the Administration is undertaking a number of new and expanded initiatives that focus on both the geographic areas and populations most severely affected—including people who are homeless or unstably housed. In March 2017, the Mayor launched HealingNYC: a comprehensive response to the opioid overdose epidemic. HealingNYC, building off the key principles for public health action for mental health of ThriveNYC, aims to
reduce opioid-related overdose death by 35 percent over five years by focusing efforts on four goals. These are:

- **Prevent opioid overdose deaths** by distributing naloxone—a life-saving drug that can reverse opioid overdose—to communities and social networks where risk of drug overdose is highest;

- **Prevent opioid misuse and addiction** by investing in prevention and education, as well as by providing counseling and linkages to care for individuals who use opioids or who recently experienced an overdose;

- **Protect New Yorkers with effective drug treatment** by making investments into our health care system in order to increase capacity to provide medications for addiction treatment, which are the most effective form of opioid use disorder treatments; and

- **Protect New Yorkers by reducing the supply of dangerous opioids** through data-driven law enforcement strategies.

The Health Department is leading the implementation of seven of the twelve strategies outlined in HealingNYC. A few of our achievements to date include:

- Distributed over 45,000 naloxone kits to registered Opioid Overdose Prevention Programs as of January 31, 2018, putting us ahead of schedule to meet our goal of 100,000 naloxone kits distributed per year.

- Launched Relay, a nonfatal overdose response system, in five hospital emergency departments. Relay deploys trained peer advocates into hospitals where they meet with individuals immediately following an overdose to provide naloxone, overdose risk reduction support, and connections to other services and care.

- Trained and provided technical assistance to over 630 prescribers on buprenorphine. Along with methadone, buprenorphine is the most effective treatment for opioid use disorder and protects people from dying of overdose.

- Awarded funding to seven organizations to implement the Buprenorphine Nurse Care Manager initiative, which will expand access to buprenorphine in primary care settings across 14 individual geographic sites. These sites are all Federally Qualified Health Centers in safety net settings serving people who are public insurance beneficiaries, uninsured or underinsured in all five boroughs. When fully operational, these initiatives will have the capacity to serve over 2,500 patients.

- And, we launched a new outreach team called Rapid Assessment and Response, which allows us to use real-time data to identify neighborhoods experiencing adverse health consequences associated with drug use. To date, the team has been deployed to five New York City neighborhoods where they have educated people who use drugs, substance use treatment programs, and other community members on overdose prevention and harm
reduction strategies. These neighborhoods include Crotona/Tremont, High Bridge/Morrisania, Hunts Point/Mott Haven, Lower East Side/Union Square, and East Harlem.

The Health Department is working closely with many of our sister agencies on this important work – including the Department of Social Services. Because of the high risk of overdose among people who are homeless or unstably housed, we have partnered with the Department of Homeless Services and community-based organizations on several key HealingNYC initiatives that address this population. Commissioner Banks will be addressing these efforts in his testimony.

Turning now to the suite of bills that are being heard pre-considered today. The Health Department supports the intent of this legislation. We share the Council’s goals to ensure the distribution of naloxone and provide adequate training and education to New Yorkers on this important public health issue. Much of this work is already underway through HealingNYC and we look forward to discussing with you further.

For example, the Health Department has been providing free naloxone to syringe exchange programs since 2009. Since then over 42,000 naloxone kits have been distributed through these lifesaving programs. Syringe exchange programs have a long history in New York City and are on the front line of this epidemic. I am hopeful that you will hear from some of them today. We trust in the expertise of syringe exchange program leadership to train their own staff to distribute naloxone. In fact this has been one of the core functions of syringe exchange programs in New York City for the past decade.

In addition, our “I Saved a Life” citywide media campaign is currently running on social media, in transit centers, local newspapers, subway cars, and bus shelters throughout the City. The campaign features stories of six heroic New Yorkers who have used naloxone to save the lives of family members, friends, neighbors and others. It also directs the public to call 311 or to our website for more information on where to get naloxone as well as other resources.

We look forward to discussing the legislation with the City Council further.

I want to thank the Mayor and First Lady for their unprecedented support to this topic. And thank you to Speaker Johnson, Chairs Levin and Ayala and the members here today for your partnership and voices. Together we will change the course of the opioid epidemic.

I am happy to take your questions.