

DRUGS LEAD TO DEADLY VIOLENCE

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Author: STEPHEN FRANKLIN and JACK KRESNAK , e Press Staff Writers

The dark-red pool of blood thickens and spreads outside the small, ramshackle hut in northeast Detroit as the narcotics officers rip apart the hut's insides, hunting for guns and **drugs** .

The blood pours from the arm of a hefty, muscular teenager, wearing a T-shirt and new, expensive sneakers. His arm was deeply gashed when he tried **to** leap through a glass window as the gun-carrying narcotics officers -- screaming, "Police! . . . search warrant!" -- yanked off the hut's iron door and burst in.

No anger. No fear. His face is frozen blank. He ignores the police hurrying **to** stop his bleeding and stares away from the three other teens, handcuffed, shaking, face-down in the high, green grass outside.

Only a few minutes before, they had sold a tall, hippy- looking undercover cop five packs of Good brand heroin for \$55.

FINALLY A HIT for the narcotics squad after three straight, no-luck raids in two days. Four cheap guns, so-called Saturday Night Specials, and 22 packs of heroin stuffed in a teenager's T-shirt. Not a bad way **to** start the night: another dope house shut down, at least temporarily.

But it doesn't really make a difference. Police could work around-the-clock seven days a week, and it wouldn't stop Detroit's deluge of **drugs** .

Detroit is a city held captive by **drugs** , a city with a \$2.5 million-a-day **drug** habit and 50,000 heroin users, a city that with every day loses a little more in its tired fight against **drugs** and the problems they breed.

The statistics on Detroit's **drug** problem do not count the human price the city pays, a price paid disproportionately by its poorest neighborhoods, a price residents of the city's higher-income areas and the suburbs can barely fathom.

It is a humiliating price for members of the Shiloh Baptist Church in the heart of the Brewster housing projects at 557 Benton. On their way **to** Sunday services, parishioners are stopped by pushers hawking **drugs** , said the Rev. W. H. Crews.

Mr. Crews repeatedly has complained **to** police. He said: "I don't see the enforcement. I wonder if they (police) have said, 'If it has **to** be endured, then why not there?' "

YET, **DRUGS** are not just a nuisance: **Drugs** kill.

And violent crime in Detroit more than ever is tied **to drugs** , police say. **Drug** pushers arm themselves with guns. They enforce their own laws, protect their turf and punish their enemies with guns. In their quest for money, junkies need guns, and stolen guns are quick cash. And many **drug** abusers use guns as tools of their trade, street stickups.

To get Detroit unhooked, a nine-month Free Press investigation here and in other cities shows that the city needs:

- * **To** begin a well-financed and well-planned campaign that shows **drug** use as an ugly death wish instead of a fancy escape. It has **to** eliminate the dealers' market. It must co-ordinate its efforts, reaching teachers and social workers who see youngsters on their way **to drug** problems.
- * **To** focus on the **drug** dealers, the narcotics bankers, the movers and shakers in Detroit, New York, Europe and the Middle East who keep Detroit high and waste the time of police who fight the frustrating, daily **drug** skirmishes.
- * **To** convince state and federal officials that Detroit's **drug** problem has become so acute and expensive in the lives and futures it costs that officials cannot ignore it or keep trimming the budgets of programs **to** fight it.
- * **To** persuade court and prison officials that major **drug** pushers cannot be allowed **to** traipse by, convinced the criminal justice system is too overloaded **to** stop them.

Caught in this quagmire are the heroin users, whose ranks exploded in the early 1970s and continue **to** nudge upward. **Drug** - related deaths continue **to** climb, especially among blacks. The rate of **drug** -related deaths in Detroit for blacks is four times higher than for whites, according **to** the Detroit Health Department.

The U.S. **Drug** Enforcement Administration (DEA) ranks Detroit first nationwide in the illicit use of prescription **drugs** and second **to** New York City in heroin abuse. Last year, Detroit ranked fourth in the nation in the number of people treated at hospitals for cocaine abuse, according **to** the National Institute of **Drug** Abuse.

It has affected the city's very image of itself. When 20,000 Detroit residents were asked last year what could be done about Detroit's **drug** problem, "an overwhelming majority said nothing" could be done, said Dr. Marcia Anderson, a Wayne State University nursing professor who conducted the study.

THE BEST WAY to fight **drug** abuse, many experts now say, is **to** stop it before it begins.

Nationally, **drug** treatment programs have been plagued by high dropout rates and little proof that those who graduate stay off **drugs** , according **to** a recent study by Rand Corp.

Indeed, Dr. John Waller, director of the Detroit Health Department, has concluded that "treatment programs are chancey, at best."

In the last few years, Waller has diverted some of the \$18 million spent annually on the city's **drug** problems from methadone plans **to** prevention efforts. Six years ago, the city was spending 90 percent of its **drug** treatment money on methadone programs but since has reduced that **to** about 57 percent.

Still, Detroit spends only about eight percent of its yearly **drug** treatment budget on prevention. And the supply of city and federal money that keeps the programs going is in jeopardy. A change in federal funding for **drug** programs has meant a loss of nearly \$4 million in **drug** treatment money for the city since 1978, according **to** Waller.

Waller believes it is better **to** reach youngsters before they get hooked.

"You know how Pepsi is targeted toward the young," he said. "Well, they (pushers) do the same thing with **drugs** . And the climate for the social structure that entraps young blacks, all the things that provide the proper situation for **drug** use are here.

"More police, more prisons, more courtrooms are not the answer."

PEER PRESSURE also can be used positively, as it has in some anti-smoking programs, according **to** the Rand Corp. study.

The programs teach youngsters how **to** resist peer pressure and realize smoking's long-term dangers -- and reinforce that message by stressing that smoking is not stylish among teenagers. **Drug** prevention programs might copy the approach.

Dr. James Sall, director of Detroit's Office of Substance Abuse, believes that programs that help youngsters with personal problems and teach families how **to** face their children's troubles would short-circuit Detroit's **drug** abuse.

Ozzie Rivera, 30, a counselor at LaCasa, the city's only **drug** treatment program for Hispanics, is hopeful.

"You have **to** educate people **to** what the reality of **drugs** is, not just the high," said Rivera, who works for the southwest Detroit program. "The sad reality is that getting buzzed is common today."

Proof of the need for prevention is a recent Health Department report that showed that one-third of all adult heroin users in treatment in Detroit started on heroin before they were 18.

And in 1980-81, there were 573 youngsters suspended or excluded from Detroit's schools because of **drug** use, according **to** the report.

The report urged that parents be drawn into treating youths' **drug** problems, that more residential care be made available and that programs be expanded beyond the minority of addicted youngsters.

Most importantly, the report found, **drug** treatment should be linked with the schools, courts or state agencies.

STATISTICS SEEM **to** indicate that significant inroads into the **drug** problem could be made by thwarting abuse among youngsters. Detroit's heroin users are young, mostly between 18 and 25, according **to** Health Department, police, **drug** rehabilitation, prosecutor's and court officials. Getting hooked early is common -- more than a third of Detroit's users were on heroin before they turned 17. One of every four people arrested last year by Narcotics Section officers was younger than 20.

About 66 percent of Detroit's heroin users are black; most of the rest are white, and a small percentage are Hispanics. Three of four are men. Only a few who go **to** the city's treatment programs, about 16 percent, are regularly employed, and that figure has dwindled steadily as Detroit's unemployment woes have grown.

About 20 percent of the 12,000 criminal cases that shuffle yearly through Detroit Recorder's Court are narcotics-related, according **to** the Wayne County Prosecutor's Office.

To Assistant Wayne County Prosecutor David Highbe, 34, the courts are not the answer **to** halting Detroit's **drug** connection.

"We keep bringing in the little people. We don't make an impact," says Highbe. "We just control it. And the judges are frustrated. Some react that it's not worth the time. They'd rather be spending more time on murders or rapes or robberies. There's a volume of cases, and that adds **to** the frustration."

FROM BEHIND his Recorder's Court bench, Judge Justin Ravitz watches and wonders how the narcotics officers put up with it.

"I see officers whom I've known for 10 years still playing out the same game," he says. "They come into court once, twice a week. They see half of their cases fold up and another quarter are pled out. Occasionally they see somebody go **to** the joint, but they are out in a hot minute."

It is almost, he says, "an undeterred game between dopers and narcs at a tremendous expense **to** the public."

Detroit Narcotics Section Inspector Ray Murray feels the same frustration.

"I'm tired of this revolving door stuff," he says. "We are always sending our guys out **to** lock up the same man. It looks like we are not doing our jobs."

Of the 2,312 Narcotics Section cases that went **to** court last year, 53 percent resulted in a conviction. Twenty percent went **to** prison, 31 percent got probation, and the rest were fined or given suspended sentences.

"If you are an undercover officer, and you risk your life **to** make an undercover buy, and the guy walks off with probation, that is frustrating, and there is nothing you can do about it," Murray says. ". . . All we can do is go out and make **drug** cases."

ON A HOT night last summer night, Sgt. Denny Barton, 41, a cautious officer who has participated in more than 1,400 raids, led 10 officers and one narcotics-sensitive police dog on a raid of a small brick house in a northeast Detroit neighborhood.

The raid is a ritual where a mistake can mean death. The police cars slowly snake through the streets and pull up at the house. Car doors fly open. The officers, dash across the lawn, vaulting a knee-high fence. One man hits the door. Guns drawn, the others follow.

Barton's crew finds several dozen doctors' prescriptions, some blank, for **drugs** selling for a good price on the streets. After combing nearly every inch of the house, however, they find no **drugs** .

They are baffled because an informant had bought **drugs** there the day before. "You'll see, tomorrow, they'll be selling **drugs** from here," one officer snaps.

After the raid, Barton, a tall, thin man, looked exceptionally drained.

Maybe it was from the night's tension; maybe from the years of one-day battles in a never-ending **drug** war.

It doesn't make a difference that nothing big turned up, he insists.

In Detroit's daily **drug** battle, it had a deeper meaning. It was a show of strength, a symbol **to** citizens and pushers that no matter how bad things have gotten, the police have not given up, that they are still fighting back.

"It was not just another raid tonight," he explains, leaning against a file cabinet at police headquarters. "They (neighbors) had some relief tonight. They saw we are not afraid."

Caption: Photo Color MANNY CRISOSTOMO

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