

Overdose Prevention Centers' Effects on Crime: Recent Research from New York City

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The drug overdose crisis has been a recurrent challenge in the U.S., including the state of Connecticut. As states experiment with different interventions, several jurisdictions have moved from punitive measures to a treatment and harm reduction approach—one contentious aspect of which is the establishment of overdose prevention sites, also known as safe or supervised injection sites. Public opinion is not yet overly supportive of overdose prevention sites, often questioning whether they will lead to increases in neighborhood crime. Recent research¹ examining the effects of New York's first two legally sanctioned facilities provides important insights for policymakers who want to fight overdose in their communities while assuaging residents' and their own concerns about crime, violence, and blight.

Mitigating Fatal Overdose Risks; Lacking Public Support

Overdose prevention sites provide services to people who use drugs, such as syringe exchange programs, in-house clinical and health services, and drop-in assistance (meals, showers, and laundry). A distinctive feature of these sites is that they allow individuals to consume pre-obtained illicit substances under the supervision of trained staff, effectively mitigating the risk of fatal overdoses. Notably, there has been no reported overdose-related death within these sites.² Despite their life-saving potential, these facilities still lack public support in the U.S., where only one in three Americans endorse their legalization.³ This lack of support often stems from concerns that these sites might encourage illegal activities in the community.⁴ However, my recent study, coauthored with Aaron Chalfin of the University of Pennsylvania and Brandon del Pozo of Brown, sheds light on the potential impact of overdose prevention sites on neighborhood crime dynamics.

Early Results from New York City: Decreased Arrests, No Increases in Reported Crime

In November 2021, New York City made the groundbreaking decision to officially open two government-sanctioned overdose prevention facilities in East Harlem and Washington Heights, utilizing sites that has previously housed syringe exchange service facilities. From 2019 to 2021, prior to their conversion to overdose prevention sites, the facilities had more than 1,800 crime-related emergency calls yearly (seven times more than the average citywide trend) within a six-block

¹ Chalfin, A., Del Pozo, B., & Mitre-Becerril, D. (2023). Overdose prevention centers, crime, and disorder in New York City. *JAMA network open*, 6(11), e2342228-e2342228.

² Kral, A. H., Lambdin, B. H., Wenger, L. D., & Davidson, P. J. (2020). Evaluation of an unsanctioned safe consumption site in the United States. *New England Journal of Medicine*, 383(6), 589-590.

³ McGinty, E. E., Barry, C. L., Stone, E. M., Niederdeppe, J., Kennedy-Hendricks, A., Linden, S., & Sherman, S. G. (2018). Public support for safe consumption sites and syringe services programs to combat the opioid epidemic. *Preventive medicine*, 111, 73-77.

⁴ Barry, C. L., Sherman, S. G., Stone, E., Kennedy-Hendricks, A., Niederdeppe, J., Linden, S., & McGinty, E. E. (2019). Arguments supporting and opposing legalization of safe consumption sites in the US. *International Journal of Drug Policy*, 63, 18-22.

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radius of their locations. Moreover, these sites experienced 214 drug-related and 12 weapon-related arrests in a year (more than ten times larger than the city trend).

After opening the overdose prevention sites:

- **Arrests for drug and weapons possession decreased in the immediate vicinity**
- **No significant increases in reported crime, disorder complaints, or related 311 and 911 calls occurred**

My colleagues and I compared changes over time between the overdose prevention sites and a control group consisting of 17 state-authorized brick-and-mortar syringe service sites throughout New York City. We further tested these results against two alternative control groups with similar levels of violent crime and drug arrests. All the results lead to the same conclusions: After the overdose prevention sites opened, **nearby arrests for drug and weapons possession decreased by 82.7% and 56.5%** relative to the control group. Likewise, **criminal court summonses decreased by 87.9%** in their immediate vicinity. Furthermore, the operation of the sites **did not increase crime as measured by reports to the police or 911 and 311 calls for service**. This metric is reassuring in that, while police have some discretion in recording and enforcing calls for disorder and low-level misdemeanors (so decreases in that metric might reflect policy behaviors and not actual crime reductions), they have less discretion when citizens report such incidents. Finally, criminal trespass, medical request emergency, and homeless-related calls decreased after opening the overdose prevention facilities.

Support from Law Enforcement and Community Engagement is Fundamental for Success

These reductions in arrests and crime reports have bolstered Mayor Eric Adams' pronounced support for the overdose prevention sites and intention to open additional facilities. But it is important to maintain a nuanced interpretation of our study; it may be that rather than a literal decrease in arrestable offenses, the changes in law enforcement we observed may reflect local law enforcement's desire not to deter clients—particularly those fearing arrests for narcotics possession—from visiting these facilities. Furthermore, the facilities and their staff may have absorbed and mitigated some behaviors that otherwise would have been handled by law enforcement. Overdose prevention sites may not be a panacea for eliminating serious neighborhood crime. Ideally, our study will encourage further research to measure changes in residents' perceptions of safety and disorder over time.

But overall, recent evidence on the impacts of the first two government-sanctioned overdose prevention sites provides encouraging insights and policy recommendations. A collaborative relationship between law enforcement and these facilities is fundamental to enhancing life-saving interventions without compromising community safety. Clearly, they do not bring more serious criminal activity to the community, and they may be taking in behaviors that otherwise would have been handled by the criminal justice system. Their successful operation represents a marked shift towards a harm-reduction approach that warrants ongoing investigation and support.