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**TRANSCRIPT: MAYOR DE BLASIO, FIRST LADY MCCRAY ANNOUNCE PLAN TO
FIGHT OPIOID EPIDEMIC IN SOUTH BRONX**

First Lady Chirlane McCray: Good morning, everyone.

Audience: Good morning.

First Lady McCray: Thank you all for being here. And thank you, Terrell, for your generous sharing of your story – your honest and generous sharing and for emphasizing that there is no one-size-fits all for what we are faced with right now, and that it's so important that people be treated with dignity.

Terrell's story resonates with so many New Yorkers – too many New Yorkers. Here in the Bronx, nearly everyone has been touched by the opioid epidemic in some way. For every person who lives with a substance use disorder, there are family members, friends and neighbors, many of who have been a part of that person's life as it spiraled out of control and are touched deeply by their struggles.

Addiction is terrible a disease, a terribly common disease and treatable, but too often deadly — especially when people are exposed to the dangerous synthetic opioid, fentanyl.

Last year, our city lost someone to an overdose every six hours. But there is good news – addiction is also treatable. Prevention is possible. And in Spanish –

[First Lady McCray speaks in Spanish]

In New York City, we are using every tool we have to save lives, connect people to treatment, and prevent substance use disorders from developing in the first place. We have distributed the overdose-reversing medication, naloxone, to New Yorkers in the highest-need neighborhoods, including thousands of kits in the Bronx. We have expanded methadone and buprenorphine treatment options for people in need. We are addressing the mental health challenges that often go hand-in-hand with substance use disorders because we want to treat the whole person, not just their addiction. Our neighborhood outreach teams are trained to connect people to a wide range of mental health and social services.

And today, as we take new actions to double down on our response to the opioid epidemic in the Bronx, we are asking New Yorkers to help. We know that expanding services is not enough.

We will work with trusted community partners to embed services into the fabric of the hardest-hit communities of the Bronx, so that there is no wrong door – so that people can find help wherever they are.

The people who gather in this beautiful church every week, have so much power to change the culture of shame that prevents people from seeking help, and support them. We all do. We all have that power. We need everyone in neighborhoods all across this city to do what they can.

That's why we launched ThriveNYC. We are all touched by addiction and mental illness, and we can all be part of the solutions. I can't say that enough. That anyone can learn more about addiction and the mental illnesses that often cause people to self-medicate to relieve their pain by taking a free Mental Health First Aid Course. Anyone can learn to save a life and carry naloxone.

And anyone can call 1-888-NYC-WELL for information or to talk with a trained counselor or peer counselor for free. Anyone who seeks help for addiction or a mental health challenge or anyone who cares about a loved one will not be turned away. So please, everyone here spread the word. This information is important to have every day, but especially important as we enter the holiday season, which is such a difficult time for so many. If we all do our part, people in communities like this one all across the city, will know there is always hope, and help is all around them. And that is because of the terrific, caring team working on this – all these folks who are sitting at this table with me today – and the man on my side is leading the way. It is my pleasure to introduce Mayor Bill de Blasio.

[Applause]

Mayor Bill de Blasio: Thank you very much, Chirlane. I want to amplify something you said and this is why it's so important to understand that the Thrive initiative, the focus on mental health goes hand-in-hand with our efforts to address substance misuse. This is all one common battle. Because for a long time people didn't know where to turn and there's still a lot of people in this city that are struggling to figure out what to do about addiction in their family or someone in their lives or even in their own life. They don't know where to turn. Because of Chirlane's efforts and everyone involved with Thrive you now can call a single number – 888-NYC-WELL. You can get connected to treatment, you can get connected to naloxone, you can get connected to mental health services. It was not so easy, it was not so clear in the past but the Thrive initiative brought that to us all. And there is no one in New York City who should feel that they can't access the help they need. We got to get that word out there and all that is possible because of the extraordinary efforts of our First Lady and her team – let's thank her.

[Applause]

Now, we're all up here, we're all in public service in one way or another. But Terrell, you have a distinction. You are a literally a life saver. That one story that Terrell told, that street corner in

East Harlem – he saved that life, and he walks the streets of the Bronx, looking for that moment where someone may need him. Terrell is a very modest guy about his achievements, but I think his achievements are gargantuan. I think what he has done to fight his way back, and recovery is a lifelong process and I know a lot of people in recovery and I admire them deeply, I admire you Terrell for all you've done. But you have not just worked so hard on your own recovery, you have worked to bring so many other people in the right direction. So I think – we've got a lot public servants up here but we also have an angel walking among us. Terrell, thank you.

[Applause]

You're going to hear from some of my colleagues in a moment, I also want to acknowledge and thank for really exceptional work all of it related to what we're talking about today. I want to thank our Acting Health Commissioner, Dr. Oxiris Barbot for the great work of her and her team, I want to thank – let's give them a round of applause.

[Applause]

From the NYPD, representing the borough command in the Bronx. I want to thank Deputy Chief Timothy McCormack, thank you – to you and all your team.

[Applause]

From the Sanitation Department, I want to thank Inspector Peter LaMarche, and to all the good folks in Sanitation who are important to what we're talking about today as well today.

[Applause]

Of course, we should remember where we are today. And I want to thank our host Father Francis Skelly for having us here today, thank you so much.

[Applause]

And a special thank you acknowledgment to everyone behind me here who is part of doing this work at the community level, and making sure the people get the help they need. These are some New York heroes right here, let's thank them.

[Applause]

So, we're in the middle of a battle, we're in the middle of a battle against opioids. This has gotten harder, not easier over recent years, especially because of fentanyl. But what this city decided to do was to take this battle head on. We saw what was happening around the city, we saw what was happening around the nation. There was a surge of opioid overdose deaths. It was unacceptable, it had to be confronted. But I have to be honest with you. The old ways of addressing this crisis weren't going to work. We had seen the previous approach, it was well meaning, it was important. It just wasn't going to work in the context of an escalating crisis.

The old way of doing things was to have a lot of services available but folks suffering from addiction had to go seek them out. And it wasn't always where they lived, it wasn't always in a place they felt comfortable or with people who spoke their language or understood them. So there were a lot of good people and a lot of good programs but not enough people got the help that they needed. That was true even before this crisis escalated. But when the crisis escalated put this all in sharp, sharp perspective.

We realized that the past approach wasn't going to work and we needed something much more aggressive. We had to bring a treatment to the people that needed it. We had to bring the preventative efforts to the people who needed it. We had to help people heal right in their own community, right on their own block. So, that was the underlying idea behind the HealingNYC initiative. We knew we had to innovate, we knew we had to change. We knew we could save hundreds of lives if we got it right.

We announced it last year, \$60 million effort. And the whole idea was to see if we could crack the code, to see if we could figure out how to reach people in a way that actually stuck. To reach them in a way that would actually move them to change. I want to be clear that we are still in the midst of this crisis, unquestionably we are still in the midst of the battle. But the surge we saw before, that horrible surge in deaths, that horrible sense that things were spinning out of control – that has ended. I am happy to say that in this city we are fighting the battle and we are starting to win.

For this last year we saw, finally, a leveling off in the number of overdose deaths. After the horrible reality we experienced in 2016 – I want to remind people, in 2016 overdose deaths jumped up 51 percent compared to the previous year. In 2017, there was a small increase and every single human being we lose is a tragedy, but in 2017, the number of deaths barely moved compared to 2016. That showed us that change was possible. But it also became clear we had to do a lot more. And we had to learn from what worked and what we saw was a place where there was some actual, tangible good news that showed us the way forward. That was Staten Island. A lot of you were with us on Staten Island that last time we gathered to talk about our efforts. We now know that overdose deaths went down in Staten Island in 2017 compared to 2016. And we know that that was because of extraordinary outreach efforts that reached deep into the Staten Island community.

Some of the folks you see behind me are faith leaders. It worked in Staten Island because faith leaders were front and center. It worked in Staten Island because hospitals were front and center, because community leaders, elected officials, everyone understood they had to reach whole families, they had to find the person that someone trusted, that they would listen to, that they would feel comfortable with. It was a community wide effort. And although the battle is far from over in Staten Island it proved to us that there was a model that we needed to use everywhere. But it also was clear to us that the challenges in the Bronx were the toughest in the entire city. And there is some real objective reasons why. I'm sure we will talk about it but I want to name upfront. In the Bronx, obviously a lot of folks for whom English is not their first language. In the Bronx there is a lot of folks who happen to be immigrants, including folks who in the last couple of years because they happen to be undocumented, often don't feel comfortable coming forward for the help they need. The Bronx has a history of dealing with some of the toughest challenges

in this city but not getting the support it deserved. And that is part of why we still have a lot of work to do here.

But what we saw work in Staten Island, can certainly work here. And so we have had resources in reserve waiting to apply to a strategy that actually worked. We have found a strategy that's starting to work and now we are moving those resources to the Bronx immediately and we are announcing today the Bronx Action Plan to make a difference in the communities of this borough.

[Applause]

It will work when we get deep, deep into each neighborhood. It will work when we find folks who before were not willing to engage in any way. It will work when every hospital is fully in partnership with us, where the emergency room is a place where we can engage people at the point of contact. It obviously will work if we do a lot more distribution of naloxone and buprenorphine because we know that those medications work. We can save lives and then we can do the painstaking work of helping people to recover. Imagine a lot more people like Terrell – who not only come back but then turn around to help others. If you want to visualize where the strategy aims to go, just look right there at that gentleman, turning peoples' lives around, reaching deeper into communities.

We also are, as part of this plan, going to deal with some of the honest, hard, truths that come from this crisis. One of the things we have seen in the Bronx – and some of my colleagues have raised this, particularly Council Member Ayala, very, very intensely – is we see some parks in this community that have way too many syringes in them. A single syringe is way too many obviously but we see some parks that are really suffering and we are going to do a lot more to secure those parks, to address the needs of the individuals who desperately should be in treatment and also to make sure those are clean, safe places for the community.

So there's a lot to do in this borough. And Lord knows there is a lot to do all over this city and all over this country – we still have to stop physicians from over prescribing opioids. That is still the way too many New Yorkers end up hooked.

[Applause]

And Dr. Palacio, Dr. Barbot are very focused on this effort and we've made progress but we've still got work to do. We are still suing the big pharmaceutical companies that created so much of the opioid crisis to begin with.

[Applause]

And we are not suing them just to express our anger, we are suing them to get resources from them to get some of those ill-gotten gains and turn them back to provide treatment for people who are suffering.

[Applause]

I'll conclude and turn to my colleagues as saying I've said this several times and I'm going to keep saying it, if we really stick to our goal of the next four years of being the fairest big city in America, it means recognizing where problems are and addressing them in a fourth right manner and being open and honest about them. There's a challenge here in the Bronx, it must be addressed, it can be addressed. This is an epidemic that can be defeated. But we are only going to do it with the people of the Bronx, we are only going to do it if we get deep, deep into each community. And that's what we aim to do. A few words in Spanish –

[Mayor de Blasio speaks in Spanish]

With that I want to turn to some of the folks who really are on the front line of this, starting with our Deputy Mayor and she's going to give you some more specifics of the plan, she's been leading the way on HealingNYC, my pleasure to introduce Dr. Herminia Palacio.

[Applause]

Deputy Mayor Herminia Palacio, Health and Human Services: Thank you very much Mr. Mayor and First Lady for your unwavering dedication and support in this important issue. Thank you to Dr. Barbot, my colleague in arms here, and to Council Members Ayala and Salamanca, and District Attorney Clark for your leadership here in this great borough. And a special thanks to Terrell for sharing your story and for reminding us about the pain but also about the triumph that we can see every day as we tackle this issue.

As the Mayor and First Lady mentioned we are indeed encouraged by some of the progress that we're seeing in Healing – from HealingNYC initiatives. HealingNYC has brought many innovative programs to prevent overdose and to connect people to care. That is in fact how we have begun to bend the curve, even here in the Bronx. Even here in the Bronx we have slowed the increase in overdose death rates from 30 percent increase in 2016 to a nine percent increase in 2017. But an increase is unacceptable and we just haven't slowed rates in the Bronx as much as we have in other parts of the city and that's why we're here today to double down our efforts and to make sure that we bring resources and we track resources to where the need is.

There are two maps here that show you the services in the Bronx before and after HealingNYC but we know that we have much more to do. We're just not bending the slope as fast as we need to. The Bronx still has the highest rate and number of overdose deaths in the city. There were a total of 363 people – individuals – real people, not just a number, mothers, daughters, sons, sisters, cousins, real people who died last year unnecessarily. The South Bronx has two times the citywide rate. Helping the Bronx is important to me as a City official, but I have to admit, as a native Bronxite, it holds a special place in my heart. As a native Bronxite I know that the people of the Bronx are resilient. I know that as much as the Bronx suffers hardships, there are tremendous community assets here. A tremendous power and will to survive, even when it seems that the odds are stacked against you, our role as City government is to tap into this boroughs incredible strength, it's incredible connectedness to change the course of this epidemic, not for community, but as you've heard the Mayor and the First Lady say, with community.

As part of HealingNYC the city is now analyzing data on overdose deaths much faster so that when we see a neighborhoods increase we can deploy assets rapidly and equitably in response to these trends. Specifically as you heard we're investing in new partnerships with community and creating more support networks for people who use drugs. Let me walk you through some of the ways in which we're going to be doing that. Health workers will be going to neighborhoods of high need and meeting with people and giving them education and naloxone kits, you've heard how important it is for real people, average people, who do extraordinary things. Ordinary people doing extraordinary things, when we give them the tool, people rise to the occasion.

We call this program the Rapid Assessment and Response. So today we are expanding that program in the Bronx to go even deeper. Our health reach out workers are going to be going to bodegas, to barber shops, to houses of faith, wherever people spend time. And we need to continue to work even more closely with community, so I want to highlight a couple of initiatives that we've already begun. We're proud to fund Radical Health, a Bronx based organization, to engage people who use drugs but whom we in the city have not been able to reach yet. Radical health will help us provide education, will help us learn from people who are suffering how we can best help them. Radical Health will also work with other community leaders and businesses to engage them in conversation about overdose death risk in the Bronx. And with the help of the First Lady's ThriveNYC initiative, we're supporting another new group very appropriate to the place we're sitting here, Faith and Harm Reduction a partnership of Bronx faith leaders and health organizations working together to educate people about harm reduction.

[Applause]

Helping people reduce stigma, helping people learn about naloxone, helping people be able to use naloxone to help their neighbors, their loved ones, their friends, helping connect people to treatment. Public education at large remains a key, fentanyl as you know is a very potent drug that is driving this terrible increase in overdose deaths. The City is working on a new awareness campaign to make sure that we keep the scourge of fentanyl front and center. This campaign will appear in barber shops and billboards all over the Bronx. As we work to more deeply engage the community, we're also expanding an array of services – of other services for people who use drugs. In the past, you've heard the Police Commissioner say we can't arrest our way out of this issue. That is the old way. That is not the way that this administration under the leadership of Mayor de Blasio is addressing this public health and medical issue.

So today we are announcing that our first responders, like police, like fire, now have a new health only resource that they can dispatch when responding to calls about individuals with mental health and substance use issues. We call these Heat Teams and they deploy one social worker and a peer advocate, someone like Terrell with lived experience -

[Applause]

- Someone who knows what it is to be in the throes of addiction, a medical condition, who knows what it is to seek treatment that is appropriate for them, who knows what the power of dignity and respect can do to your ability to heal. These teams will find people and meet them where

they are when they need assistance and connect them to health and social services. Two of these teams will be available in high need areas right here in the Bronx.

You may also be familiar with our Relay Program which addresses people at that moment when they have had a near fatal overdose. When they have actually survived an overdose and are at a moment where they have just had a close brush with death. They're in the Emergency Department processing what just happened and as part of Relay we can dispatch peers to have a conversation with them at that very scary moment in time in somebody's life but it's a moment that is both scary but offers hope. It offers the promise of a second chance and we have peer advocates who can work with them, who can teach them about naloxone, who can provide harm reduction, who can follow up with them for up to three months to continue to make sure that they are connected to the types of drug treatment and supportive services that are right for them as individuals. Relay is currently available at six private hospitals across the city including two here in the Bronx and today we are announcing a third one that will be up and running at Bronx Care in the new year.

In addition, Health and Hospitals has launched a first consult for addiction treatment and care in hospitals or CATCH teams at Lincoln Hospital to connect patients who are admitted with substance use disorder to medications for addiction treatment and other substance use outpatient care. And last but not least, as you've heard the Mayor mention, we have heard complaints about discarded syringes in our streets and we're here to tell you we hear you loud and clear. Today we're expanding the work of Parks – with the Parks Department to clean up syringes from public spaces in the South Bronx. I believe that these measures coupled with our ongoing initiatives will go a long way to changing the course of the opioid epidemic here in my home borough. Thank you and I too will say a few words in Spanish.

[Deputy Mayor Palacio speaks in Spanish]

[Applause]

Mayor: Thank you Dr. Palacio and now I want to follow through on the comment that Dr. Palacio made and she quoted Jimmy O'Neill when he said, we can't arrest our way out of this problem. Our law enforcement community is looking at the opioid crisis with a whole new approach and a whole sense of partnership with all the other parts of government and the community. One of the leaders in that effort and someone who knows the challenges of the Bronx intimately and has a real sense of what to do to address them the District Attorney of the Bronx, Darcel Clark.

[Applause]

[...]

Mayor: Thank you very much District Attorney. Now I want to just turn to the Chair of the Committee on Mental Health, Disabilities, and Addiction in the City Council, and I want to say that Councilmember Diana Ayala has been at the forefront of addressing these issues and also recognizing how they all connect. Mental health challenges connect with substance misuse, also

connects with some of the fundamental underlying challenges, including poverty, including lack of affordable housing – she’s working to address all of these pieces in a really powerful way together and I want to thank her for her leadership. Councilmember Diana Ayala.

[Applause]

[...]

Mayor: Finally I wanted to turn to Councilmember Rafael Salamanca, and he has also been a powerful voice and I want to say one of the things I’ve always appreciated about the councilmember is he started out as the district manager for his community board, he literally understood his community block by block, and he’s been one of the voices saying to us at City Hall that there has to be an approach in the Bronx that reaches deeper to the grassroots or we’re not going to reach the people we need to reach, so I want to thank him for pushing us in that direction and welcome Councilmember Rafael Salamanca.

[Applause]

[...]

Mayor: Thank you very much Councilmember, and we’re now going to turn to our colleagues in the media and we’re going to do questions on today’s announcement obviously on the opioid situation overall and then we’ll break for a second and let folks move on and we’ll take other types of questions as well. Let’s start on this announcement, yes?

Question: These street teams that will be going out to bodegas and other places in the neighborhoods, will they be distributing naloxone kits on site or [inaudible] on site?

Mayor: So I just want to start and then pass to Dr. Palacio and Dr. Barbot. You know, the teams have more than one thing that they need to do, I want to emphasize that. In some cases it is getting naloxone out there but in a lot of cases it’s also connecting people to treatment and getting people comfortable with the notion of coming in for treatment which is one of the big problems. So they have more than one role to do but let’s let the experts speak about it.

Deputy Mayor Palacio: Yeah, I’ll just begin. We do have in fact many mechanisms to get people naloxone and get people trained. That can be through pharmacies, it can be through community-based organizations, it can be through the teams, and I will let Dr. Barbot provide more detail.

Acting Commissioner Oxiris Barbot, Department of Health and Mental Hygiene: So these teams will not be distributing naloxone during their visits but they will be providing education and resources and linking folks to where they can go to get naloxone trainings.

Mayor: Okay, yes?

Question: I wanted to – two part question, one is about the funding. Is this new funding on top of the annual \$60 million or a shift in resources?

Mayor: So let me start with that and then do your next question in a moment. The – on the funding, two pieces, one there are some new elements like the anti-syringe efforts, that's new funding, the main part of this funding was being held for the decision on where to apply it and which piece of our anti-opioid initiative to apply it to. So when we started HealingNYC, we said explicitly, we had to figure out something new that would work. I told you in particular the experience we had in Staten Island convinced us that an intensive outreach effort was the way to go, we had money in reserve – we're applying that money to the Bronx.

Question: When you announced the expansion last year, an extra \$22 million, it seemed like a program that was city wide but obviously the hot spot was Staten Island and the Bronx. Now you seem to be saying that it's had a bigger impact in Staten Island than the Bronx. Is that because of how the resources were allocated or what?

Mayor: I'll start and again, my colleagues can jump in. I don't think it's because of the resources, I think it's because the approach – we found that we could break through in Staten Island and that it was a very positive strategy, but as I said I think there are some objective hurdles in the Bronx, we can all say them out loud: obviously you have more people whose first language is not English, more folks who are immigrants, and that is a question of what people are going to be comfortable with if you're trying to engage them, and I do think, very painfully, for folks who happen to be undocumented, you know, there's so many signals they're getting now from Washington to not come out in the open, that that's causing people not to get the treatment they need that might save their lives too. So I think those are some of the factors that make the Bronx situation different and require a more in depth strategy. Want to add?

Deputy Mayor Palacio: I think that's right, and we deployed a lot of resources in the Bronx with both the initial Healing investment and the second Healing investment. What we have also done though has been looking at our data in a very rapid order. So as opposed to like the usual death data routine – would often take a longer period of time – we're looking at data trends very rapidly and deploying resources according to those data trends. So what we saw was a more rapid decrease in Staten Island and less rapid decrease in the Bronx and so we are putting more resources to try to make sure that we bend that curve. So this is really where we see the need, we are putting to try to – to continue to make those decreases even more steep.

Mayor: David?

Question: On a related note, you said the total investment of \$38 million through HealingNYC and ThriveNYC, what money is coming from Thrive? Where is that going? What is the Thrive use in this, I don't understand it?

Mayor: The specific Thrive initiatives that connect to this, so again the two pieces kind of overlap in some ways. Can you tease out which money stream is which or do we need to get back?

Deputy Mayor Palacio: We can get back. HealingNYC is sort of under the broad umbrella of Thrive, and we've got a lot of mental health services for example. The HEAT teams will be addressing mental health issues, not just substance abuse issues, so there's quite a bit of overlap.

Question: On the HEAT teams, how are they dispatched? It seems as if they're going when there's already a first responder there so how do they—

Mayor: Can I – let me do the layman's version then go to the experts because I'm proud to say I asked some of the same questions that all of you are asking to make sure I understood. I think it's important to recognize, just like we were talking about you can't arrest your way out of the problem, that the medical community, which obviously was trying to save lives, was not trained to think about how to hand off to ongoing mental health support, ongoing treatment – it's not that people wouldn't ideally want to have done it. It's that bluntly everything was very hard to mouth and there wasn't a coherent vision of how to do that. I think the power of this model is it says the minute you have identified someone because tragically they're in the emergency room. You're bringing in the peer counselors – you're bringing in the experts who are then part of taking them the next step. Now, doctors, that's my layman's interpretation. Tell me if I'm in the ballpark there.

Deputy Mayor Palacio: That is certainly one of the programs and I think you were also referring to one of the other – we've got a lot of alphabet soup here—

Mayor: Yeah, let's try and avoid alphabet soup yeah.

[Laughter]

Deputy Mayor Palacio: —in our program. So the – when the calls go in, when a police officer is getting a call, or a fire department is getting a call that appears to be primarily health related, they can actually call a dispatch desk which is collocated with some police and Health to dispatch a team.

Acting Commissioner Barbot: Yeah, I mean I think that the point of this is that we're doing everything possible to deescalate situations that are preventable, and touching people where they are, when they're most vulnerable, and when they are most open to engaging in services. And so for example, the relay teams work with emergency departments as a way to capture folks when they're at their most likely to be open to services and similarly the HEAT teams are a way to ensure that we don't criminalize situations that should really be more medicalized and we have more of a human touch and, you know, treat people with the dignity and respect and treat it as a medical issue as opposed to a criminal issue.

Question: [Inaudible] in real world situation someone's calling 911 because of an extreme situation with substance namely an overdose, and so there's very rapid medical response to that, often also a police response. At what stage and who is calling this HEAT team to get them there?

Acting Commissioner Barbot: Right so these situations wouldn't be for those life-threatening situations. We would still want people to call 911 if someone is having an active overdose—

Mayor: I think I'm going to intervene – I think the question is when does the HEAT team come in to it? Who brings them in?

Acting Commissioner Barbot: Right so these are in combination with police so when someone is calling the dispatch desk, if it sounds like something that is not an emergency they will then go with their HEAT counterparts.

Mayor: Way back, let's go from the back forward, way back. Who's last, Jill?

Question: Mayor about a year ago the Daily News wrote a story – a series of stories about a railroad [inaudible] just a few blocks from here where people were sort of frequently gathering to use heroin and other drugs and I'm curious if you could give me – you know, I know you sort of spoke about this a little bit broadly – but if you could give me a sense of how these programs that are aimed at meeting people where they are can interact with people who might be using drugs in a setting like that when they're in sort of an abandoned area, they're kind of off the beaten track and not—

Mayor: So it's a very important question because it gets to our strategy. Our strategy is not to allow those kind of abandoned areas to exist any longer. That's really important to recognize. We had a clear directive to the Police Department, to the Health Department, to the Sanitation Department, to the Department of Homeless Services, that no such encampment is tolerable in New York City and it has to be disbanded as soon as it's identified. You're right, that was a notorious location that was there for years I think even decades, decades. So the challenge that now connects to this announcement today is okay, so you got those folks away from what was a horrible, dangerous, permanent trap of addiction – now they're out in the broader community – we have to reach them. We have to reach them in ways that are different than what we did before because again, the more passive like having various centers and – you look at these maps when you get a chance – having places that people could go that people weren't actually using wasn't a solution. And the more we experimented, the more we realized you had to go out to people in whatever voice they will hear. Tyrell, as a great example, people will listen to Tyrell who might not listen to someone from the Health Department, or they might listen to a minister, or they might listen to someone from a community organization – everyone needs to be reached a different way, but what we will not tolerate, once we know of any place that has become a location, we're not going to allow those kinds of locations to exist in this city. That was something that was true in the 70s, the 80s, the 90s, even the last decade – we don't accept that. Yeah?

Question: What is your feeling on medical marijuana as treatment for opioid addiction?

Mayor: I don't actually know enough to answer so let's turn to the doctors.

Deputy Mayor Palacio: Well very broadly there's studies that suggest in locations that have legalized marijuana the rate of overdose deaths have gone down so that is a – or you know, are lower. So very broadly it seems like a – it's a – a potential ally in this place to legalize.

Acting Commissioner Barbot: But I would add that the science still isn't clear in terms of what the impact will be.

Deputy Mayor Palacio: For individuals – for individual use.

Question: Quickly, I believe in July [inaudible] uses of medical marijuana in New York City [inaudible] wondering if you're seeing that this is something that the city can potentially –

Mayor: Can you just clarify because I want to make sure we're all speaking the same language. You're saying in July it was approved as one of the uses of – in New York City. So, again, I like to be open about my ignorance. I don't remember that milestone. I don't remember that approval. I don't even – which entity approved it. So, either of you?

Deputy Mayor Palacio: I am not aware of that.

Acting Commissioner Barbot: I would say – not aware of the data but I think it's an important opportunity to emphasize that what we do know is that medication-assisted treatment through methadone, through buprenorphine are evidence-based interventions that we know work. And before we sort of open the door on what medical marijuana might or might not do, I think what we are all engaged in is ensuring that we maximize the number of people that are taking advantage of these proven treatments.

Mayor: Okay, yes?

Question: We recently did a story [inaudible] the City has spent on naloxone since [inaudible] and since 2014 the City has spent more than \$22 million on naloxone kits and has given out [inaudible]. The Health Department told me that [inaudible] where the kits are going and who is receiving them but they don't keep track of [inaudible]. Do you think that's [inaudible] –

Mayor: Can you just [inaudible] that last part? I couldn't hear you well. They don't take – keep track of multiple – what did you say?

Question: They don't keep track of someone who may use naloxone not once but twice –

Mayor: You mean who needs to be saved multiple times? Right –

Question: [Inaudible] saves one person. Do you think that that is needed given how much the City is spending on these kits and given the fact that addicts often say they use naloxone not once but maybe twice or more over the course of their addiction to [inaudible] –

Mayor: I'm just going to offer my view as someone who is not a medical professional and then turn to the medical professionals. Look, I think we have to be clear that our role in government is to try and protect people, and naloxone has been a crucial part of this strategy. I mean, unquestionably, one of the reasons that the tide is turning in this city is that we got naloxone in the hands of the NYPD, FDNY, and a lot of community organizations, clergy, you name it. That greater distribution has made a big impact.

I think I understand your point that there are some people unfortunately who, it's not like you save them once and then they immediately connect to treatment and everything is going to be great. I think we are clear-eyed about the fact that there will be some people we have to save multiple times before we can get them on the right track. But so long as we are keeping them alive, it opens that door to getting them to treatment.

[Applause]

I think Terrell has a strong view on this.

Jones: And to further answer the question, the Mayor hit it right on the head because of the simplest fact that you don't know why this person is using and how many – why they overdosed so many times. For someone to be on the frontlines every day, when we run into these obstacles, we educate people. Our agency right now has saved 201 lives in one year.

[Applause]

We have given out over 6,000 naloxone kits and I don't care if I have to give it to a person twice as long as they're safe and they're going to live. It doesn't make – I mean like [inaudible] putting restrictions, it sounds like, on giving out naloxone kits. We are here to save lives, ma'am. We are here to make sure that they are allowed to have informed education about their lives, their health.

We don't put any type of restriction. This is what we call harm – we turn our backs on no one. We're always there on the front lines for the person until they can make an informed decision about their life.

Mayor: Amen.

[Applause]

First Lady McCray: I just want to add to what Terrell said. We wouldn't stigmatize someone who had more than one asthma attack because they weren't able to make the proper lifestyle changes or maybe the medication wasn't working as well for them or whatever the reason might be. Maybe the diagnosis wasn't as complete as it should be, maybe there are other factors. We wouldn't say, 'Oh, well forget you, we're going to give up on you.' We wouldn't do that for someone who is suffering from diabetes. We know that it takes some time sometimes for people to turn their lives around when they have a medical condition that is complicated and that is what we're all here talking about. We don't label people as addicts. These are people with a medical condition who need help.

[Applause]

Question: Can you just clarify [inaudible] talk that the surge is over, that there's been a levelling off? Is it still – is the overdose rate still going up like at a slower pace but –

Mayor: Yes, but let –

Question: [Inaudible]

Mayor: It's just – I want to be very, very straightforward about this. And again Dr. Palacio referred to something I want to frame this with. There used to be a very painstaking effort to determine if something was an overdose – Office of the Medical Examiner, NYPD, Health Department. We still are doing that painstaking effort but we're trying to look at information quickly and at least take basic information to determine strategic moves.

But what we're saying when we talk about 2016 and when we talk about 2017, we now have closed the book – we have the final information. In 2016, there were 51 percent more deaths than 2015, unbelievable explosion. In 2017, there were two percent more deaths. It's still – any additional death is too many but you can see it's night and day. Two percent more deaths mean we've essentially levelled off.

Also we saw in the borough of Staten Island the actual number of deaths go down. It was 119 in 2016, it was 101 in 2017. What this says to us is, this crisis can be arrested. It can be stopped dead in its tracks and then we can turn to start reducing the number. So, we're not by any means satisfied but I will tell you that 2017 showed us that it's possible to do something very different and succeed. That's why we're now applying these strategies very intensely in the Bronx.

Let's see if there's anything else on this – yes?

Question: In May your administration announced there was a [inaudible] disposal kiosks in [inaudible] the Bronx, in the parks. Just wondering if you have an update on that. Do you know if those [inaudible]? Is that program [inaudible] –

Mayor: I'll turn to our Health Commissioner and I'll say – I'm not going to say it's not working. She'll say her professional view. I can say there's more we got to do. That's why we're doing this clean-up effort because clearly not everyone is using those kiosks who should. Go ahead.

Acting Commissioner Barbot: Yeah, Mr. Mayor, I think you got it just right. We certainly have seen that the kiosks are being used and we want to ensure that individuals who are using these syringes are disposing of them in the safest way possible. But clearly, you know, on the visit that we did with Councilwoman Ayala and Council Member Salamanca, we know that there's more that needs to be done and that's part of the announcement today.

Question: [Inaudible]

Acting Commissioner Barbot: I think we'll need to get back to you on the figures.

Question: [Inaudible] populations are different in Staten Island as they are in the Bronx. Is there a difference in the [inaudible]?

Mayor: Is there a difference in the drugs? You –

Question: [Inaudible] people using heroin, now switching over to fentanyl?

Deputy Mayor Palacio: So, I think as you've heard alluded, the epidemic did start out in a different way. So, on Staten Island, there was probably an initial increase that started out people with prescription drugs transitioning to heroin. In the Bronx, it was a more stable heroin epidemic all along. I think the unifying theme among both is the explosion of fentanyl especially in heroin but we're also starting to see – it's important to note that we're starting to see even other drugs being cut with fentanyl, things like cocaine – very problematic. This is one of the reasons that we are really being very – intensifying our efforts on the campaign around the presence and the deadliness of fentanyl and why naloxone is in fact such a critical piece because fentanyl really shortens the time between overdose and death. So, you have to be able to get to somebody quickly to save them which is why really flooding the zone with naloxone is critically important because you just – the clock is ticking much faster.

Question: [Inaudible] tailor it specifically for the Bronx compared to Staten Island in terms of those drug changes?

Deputy Mayor Palacio: So, right now both are largely heroin-based epidemics with fentanyl. But the truth is – a sound public health approach really wants to – we want to make sure that we understand the evidence-based practices. We also want to tailor those practices to the needs of the population to make sure that we are addressing specific needs, and that's one of things that you're hearing today is that we are really trying to understand better what is it that Bronx communities need to be able to achieve the same success.

Acting Commissioner Barbot: What I would add to that is that – I would just really want to emphasize the importance of fentanyl in this equation and that 57 percent of the deaths that happen for opioids are attributable to fentanyl, and the fact that we are now seeing fentanyl in cocaine as well as heroin, I think is an important message that we want to make sure that gets out there because, you know, independent of whether a community has more history using heroin or more history using cocaine, the reality is that we need folks educated about the risks and to know where to go for help and where to get linked to services.

Jones: So, the other piece when we're talking about fentanyl – here are the fentanyl test strip kits where we provide everyone our individuals that come to our agency to test their heroin to see if there is any fentanyl in the heroin. This also comes with more education that we give the individual is the test is positive, where we give them harm reduction strategies – don't use by yourself, take a test shot, let somebody know where you're at because like I said, even if it comes with fentanyl in it, that person is not going to throw that bag away.

Mayor: Let's wrap up in a minute on – this is questions about this announcement and media questions. I just want to remind people, media questions. Are you media over there? If not, we're just going to finish with the media. Okay.

Question: [Inaudible] current timeline for [inaudible] supervised injection facility in Longwood and other areas of the city, and what are you doing to make sure that the State gives its okay [inaudible]?

Mayor: There's been a consistent dialogue with the State. I am hopeful for an answer relatively soon. Look, we went through at the City level – I want to be the first to say, it is a complex issues, there's a lot to consider. When we get the go-ahead from the State Health Department, we're ready to get moving. We've got – remember what we said would be the approach. We would want to know that the State Health Department agreed both because we thought that was crucial for coordination on the medical and health side, but we also thought that was legally important.

We needed to have the district attorney in each area be in agreement. I haven't checked the latest but I believe that's true in the case of the three boroughs where we have identified locations. We would need the individual Council member to be in agreement and there to be a community consultative process.

Again, I believe that standard has been met in these locations. So, we would be ready to move as soon as the State Health Department indicates. Obviously, we expect – it's been quite public – that the federal government will attempt to obstruct overdose prevention centers. At that point, if that were to occur, we would take the federal government to court.

We believe that we have a strong legal basis for defending this idea. This is about saving lives. This is about health. This is a proven approach. You only need to go across the border into Canada to see how it has saved lives – largest cities in Canada use this and save lives and then get people to treatment.

So, once we have the State Health Department approval, those other local steps will be fulfilled, and then we want to see this effort start.

Question: [Inaudible] what is their concern?

Mayor: I can't speak to that. You should ask them. I will only say there has been an ongoing dialogue. And again it took us, objectively, months to review all the issues and come to a final decision. When we presented it to them, I don't remember the exact month, but it wasn't that long ago – but I do hope that their answer will come soon.

Question: [Inaudible] move forward without State approval?

Mayor: We've been very clear. State approval overall and then ensure the specific site, the DA's approval, and a consultative process with the community which must include the approval of the Council member. Obviously some people in the community may have one view, some may have another but we need the Council member on board, and then a non-profit that's already doing similar work would set up the capacity. It is not publically funded. It is not run by the government. It would be run by a non-profit with their own resources.

Last call on anything related to opioids. Okay, lets – I want to thank everyone for being here. Thank you all for being here. You can go and do other good work.

[Applause]

[...]

Mayor: Last call – if you're not sticking around please move out so we can start the next piece of the press conference.

Okay – what do you got, everyone?

Question: [Inaudible] there's been a recent [inaudible] in Manhattan who have been [inaudible] of their motorized bikes –

Mayor: You said robbed of them, right?

Question: [Inaudible] controversy over [inaudible]. What are your thoughts?

Mayor: Well, look, that is the first time I've heard of a pattern like this, and obviously the NYPD – when they see any kind of criminal pattern they do a very good job of stopping it quickly. So, I'm assuming that the perpetrators are going to be caught in short order. This is something they're doing out in the open. We tend to have video. We tend to get people very quickly.

The bigger issue needs resolution and we're still trying to understand if all of that needs to come from Albany or if some of that can be done locally, but we've got to figure out what will keep people safe – this is my first concern with any of these new, or newer technologies – safety first. Obviously we want people to have as many ways as possible to get around, but I think right now it's – what will keep people safe and where do the decisions ultimately have to be made? Do they all have to be made by the legislature or can some of them be done locally? That's still an open question.

Question: Sort of a similar question [inaudible]?

Mayor: So, let's separate the two. I think we've got a safety issue that's quite clear to me, and I've heard it from so many people around neighborhoods of the city around the e-bikes, which go very fast – not the pedal-assist, there's two kinds – but the one the kinds of e-bikes that a lot of the delivery folks have used go very fast, and unfortunately have often been abused, going the wrong way on streets, driving recklessly, and there's a lot of problems related to that. It's also just legal. It's not legal to use them in New York City – that is the law, period. So, based on both the safety problem and the sheer legal reality, we ordered a crackdown last year, which we're continuing. The only way to resolve that issue is in Albany. And if we're going to resolve it in Albany, it has to be done in a way that will protect public safety. On the scooters, the e-scooters – that's something newer. And again, I'm certainly interested in anything that will help people get around better, but there's also safety issues there that have to be resolved. So, one – we've

got to figure out where the final decisions have to be made. Two – as we try and craft a solution, first concern has to be safety.

Go ahead –

Question: Assuming that there's different – if it was to be neutralized, assuming that there's different safety regulations placed around it, do you think if this is something that the City could ultimately embrace or do you think that this is something that should not be legalized, period?

Mayor: I am open to a process that gets us a safe outcome, right? If I can see something that will create safety in this city and allow people to use e-bikes or e-scooters, I'm very open to that. Now, I haven't seen that yet. So, right now, I'm staying exactly where I am on the e-bikes. They're not legal in New York City and there have been real safety problems. We're going to continue to enforce. The e-scooters are so new in most cities that we really don't have a take yet on the pros and cons, but any solution must address public safety – that's my simple formula.

Question: Mayor, I wanted to ask you about an audit from the Comptroller's Office regarding the Department of Education [inaudible] travel – that they overpaid for the Marriot, they spent on trips [inaudible]. Are you concerned at all about the spending? Do you want to see them rein it in?

Mayor: Definitely concerned, and I have not seen the audit, but I have spoken to the Chancellor and said we have to make sure that money is used appropriately and anything inappropriate has to be stopped, and there may have to be some consequences for some people involved. Look, I'm the first to say there are very legitimate reasons for educators to go to conferences in a time when we're emphasizing professional development, right? We need a lot more STEM teachers, for example. Sometimes they're going to a conference to learn new skill that they're going to bring back to their classrooms. We need a lot more computer science teachers as part of our Computer Science for All initiative. This is the fundamental problem – everyone's ready to see it taught across all grade levels, we don't have enough trained teachers. If the training is available somewhere and it's a fair deal economically, that's good for the City. But what we don't want is money being spent that doesn't need to be spent – that's not acceptable. Same with field trips – field trips are part of the school experience. There's a way to do that that makes a lot of sense and there might be a way that doesn't make sense. So, I'm definitely concerned. I want to see a full accounting. I want to make sure money is used right. If anyone didn't use the money right, there needs to be consequences.

Question: Follow-up on the scooter question – I'm curious, have you been to any cities recently where they have these scooters? Have you seen them?

Mayor: Just sparingly – I've seen a couple of the scooters in action and I can't remember which city it was, honestly, but it didn't give me enough take to understand the ramifications. I mean, look, we're not like any other city, we have to be clear. I could see scooters on the sidewalks of New York City being a real challenge, I can see scooters in the streets being a real challenge. But I also understand people are looking for new ways to get around, that's why I keep saying in a lot

of cases I would love to see us first figure out what will work and then move forward with, you know, letting people have the opportunity, but I don't think we've figured it out yet.

Question: Follow-up on the audit – the DOE audit – one sample in the audit was of a million-dollars' worth of travel expenses they counted. In 93 percent of the cases it wasn't done properly, they didn't get the cheaper options. It seemed like either there was absolutely no understanding of the rules or there was an attitude of just spend the money.

Mayor: Yeah, that's not acceptable, obviously. Look, where I always want to be careful – any audit, we're going to look at and learn from and act on. That doesn't mean we necessarily think every single thing in the audit is accurate, we also will challenge if we think there's something that isn't. But when you talk about, do you need the proper sign off? Are the checks and balances being followed? Are you trying to get the cheapest rate? That's like – 101. That's really basic stuff. If that's not being done, something's wrong, and that is fixable and it must be fixed. And I want to give the Chancellor a lot of credit – you saw when he very early on in his tenure dealt with the school bus issue and he took immediate personal responsibility and he got rid of people who were doing the wrong thing very, very quickly. I think he has a can-do attitude about cleaning up things like this.

Question: Last week I asked you about the security video about the [inaudible] suspicious package for several minutes [inaudible]. Have you had any chance to watch it yet? Have you spoken to –

Mayor: So, I'm meeting with the Police Commissioner this week and this is on the agenda. I am going to look at the video in anticipation of that meeting. I'm obviously concerned. There's never a situation where security personnel should ignore an unattended package, it's just as simple as that. Now again, I want to reserve my final statement on that video and I want to ask the Commissioner his interpretation. But I want to be clear about the standard – we keep saying, if you see something, say something. Obviously that means that our uniformed personnel have to live by that same standard, if they see something they have to address it.

Marcia?

Question: [Inaudible]

Mayor: Before the meeting with the Police Commissioner I will.

Question: I'd like to go back to [inaudible] –

Mayor: Yes.

Question: [Inaudible] I know that you've expressed concerns about safety –

Mayor: Yes.

Question: [Inaudible]

Mayor: It's – I'm not there, but I want to – I'm everywhere until that last statement. I am seeing too many problems with e-bikes already and that's why we cracked down on them. That doesn't mean you can't figure out a way to address the problem. So, I'm not going to rule out that we can come up with a resolution, and the same with the scooters, but what we saw so far – and again, there's two different types – there's what we typically call the e-bikes and then there's the pedal-assist. The pedal-assist are often used by folks with disabilities and some cases seniors, and those have more of a clear speed limit on them. And that might be part of a solution – is somehow physically putting the mechanism in place that these e-bikes can't go as fast as they've been going around this town. But under current conditions, there is a safety problem. The only way I would get comfortable is if we can address that safety problem.

Question: [Inaudible]

Mayor: Yes, thank you.

Question: [Inaudible]

Mayor: That's why I'm saying the safety standard has to be met. If we can't become convinced that it's safe, I can't support it. Now, let's be clear – and in Vision Zero, you can take that same example and bring it the other way – cars create a danger, we're using a set of strategies to make sure that we reduce that danger. We're not telling people you can't use cars anymore, we're saying we've got to do a lot of things differently. So, but the same logic there may be a way to figure out how to keep e-bikes safe and keep community safe with e-bikes – how to use e-scooters. But the difference now is, since we're starting from zero, e-bikes aren't legal and there's no regulation for scooters and they're just starting to get here – why don't we get it right and say, what are all the things we need to put in place to keep people safe before we let this become a bigger problem.

Question: [Inaudible]

Mayor: I'm not that attracted, honestly. If I'm going to ride a bike I would rather ride a traditional bike and get some exercise in the process.

Question: Mayor, you and the First Lady are heading to Vermont this weekend to [inaudible]. My understanding is that government paid for the trip. Was wondering if both of you, or one of you, can address why is it an official trip and not a political one and what do you hope to get out of being part of this event?

Mayor: I'll start and – share your thoughts as well. This is a gathering of progressive leaders from around the country to talk about policies that we need to implement. And some of them will require legislation and some of them can be done at the local level. In fact, the specific panel that I'll be moderating is about what Mayors are doing right now regardless of the challenges in Washington. Progressive policies that are working on the ground in American cities and in global cities that we need more – we need to show can work and get to more places. This is exactly why you gather with other people in public life, to share ideas, to figure out what works,

to show them good examples that they can build on. I always say some of the best things we've done in New York City, we learned from other people's example. I appreciate Marcia's kind comment on Vision Zero. We didn't invent Vision Zero – we've been very open about it. We gently borrowed it from places like Sweden. We didn't invent the local ID card, we got that from Oakland and New Haven. Now, I think in each case we took the ideas and built upon them, but this kind of interchange is really, really important. And I've said that, you know, I think it's crucial instead of cursing the darkness, that there's conflict in Washington and kind of a lot of paralysis to keep building progressive change on the ground in American cities and in American states. So, I'm excited for this conference because I think a lot of people who can really make an impact will be there.

Do you want to add?

First Lady McCray: Everywhere I go I talk about mental health, and as you have seen from the stories told here today, we're in a crisis and the only way we're going to get to a place where we can address this crisis with all of the solutions that we need is by talking with other people – what they're doing, sharing what we're doing here and making sure that we have legislation on the federal level, on the State level, as well as employing ideas on the local level to address what's going on in terms of mental illness and substance-use disorders. There's a lot of work to do. You know, Thrive was started with ideas borrowed from all over the country, all over the world actually. We borrowed from what they're doing in Zimbabwe and Haiti. And everywhere I go I learned new things and I also share what we're doing. New York City is leading the way in terms of applying solutions to the mental health crisis that we're in, but there's still more to do, and I'm – I love to go these kinds of gatherings to have the opportunity to talk with so many different kinds of people about what's going on in the area.

Mayor: Last thing I want to say to this is, I think the world changes when attitudes change. What is possible? So, for example, I believe fundamentally on mental health you're going to see a breakthrough in the next few years. I know it because I get the reports from Chirlane when she meets with both Republican and Democratic members of the House of Representatives and the U.S. Senate, and leaders – mayors and other leaders in cities around the country. And people are more and more saying the same thing. When the attitudes change, when the sense of possibility changes, that's when you actually could get to some legislation that could get through Washington potentially. So, the part that I think is often left out of the discussion is, the bigger changes we need have to be built. They won't happen on their own, they have to be built. And a lot of the good that we can do for this city that could come from changes in Washington is going to come from slowly but surely convincing people that something can be done.

Yes?

Question: [Inaudible] report today that City Planning is moving forward with a vote on a pretty large development in the Two Bridges area of the Lower East Side without a full land use review because [inaudible]. That caused a lot of concern among local and elected officials who want to be able to refuse something of such magnitude. What do you think of their concern that the borough president, community board, and City Council won't have a say in this process?

Mayor: Look, this is a very unusual situation. It goes back to an urban renewal initiative years ago. This particular area is governed by a very specific set of rules. But that said, there's been a huge community debate and it was quite clear to the administration that whatever happened here, we had to get real action on community needs – affordable housing and infrastructure needs, open space, things like that.

So, recognizing that the legalities made quite clear that this development could go forward, we still found a way to get a set of guarantees for the public in it. And I think that was the practical, realistic way to handle the situation. We need more housing in this city, we know that. We need a whole lot more affordable housing. This set of development – these buildings will at least bring us a lot of that as part of the ultimate plan.

Question: Mr. Mayor, knowing the sidewalks in New York [inaudible] –

Mayor: I want to live in your alternate reality. It sounds wonderful.

Question: Can you imagine a way that these e-scooters could survive here and could you imagine yourself riding one?

Mayor: Well, it's an excellent question. Can I imagine myself riding one? I just don't like the idea, personally, because I'm like if you're going to move around why are you not getting some exercise. It seems really passive to me and so it's just not personally appealing.

But can I imagine it working in New York City? I think for the reason you said, the still too rough roads despite all of our repaving, the amount of traffic and all, I think it's harder here objectively than other places. And it's not – you certainly can't say, just go on the sidewalk. That's not necessarily going to be easy either. So, I think we have an interesting question before us. It's a new technology a lot of people are going to find appealing but how does it work here even if here is different from a lot of other places. I don't have the answer. We have to work on that answer. But am I interested personally? No. Okay, we'll do a few more. I see three, and then you'll be four, and then we'll be out of here. Alright.

Question: [Inaudible] e-scooters and e-bikes, it's hard for me to imagine that residents who complain about e-bikes have not also complained about [inaudible]. Why do you think one is going to be –

Mayor: So, I – you are catching a nuance but I want to go back to my off-stated larger reality. I said it a bunch of times and I'm going to say it again – the safety concerns are exactly the same. Figure out how we address safety first, then address legalization. And I'm really sick of the cart being before the horse. I fear that's about to happen with marijuana which is why I keep saying, could we please figure out how we're regulating before we actually legalize?

So, I say the same here. There are real safety issues. I think you're right to say there's a difference. A bike is a bigger thing than a scooter, right. A bike – and a lot of people – I hear this from a lot of my constituents, I hear this particularly from a lot of seniors. They fear being hit by not just a bike, a motorized bike that can go pretty fast especially if it's going the wrong way,

especially if it's in some case going up on the sidewalk, or driving recklessly. That's a real concern. I think a scooter presents less of that concern but I still think there's a safety issue.

Question: There was a report earlier this week that DOI's essentially [inaudible] investigation about the disciplining of police officers [inaudible] or what have you. Is that something that you made any inquiries about? Would you like to see the new DOI commissioner do a similar report – either take up that report that was halted or do [inaudible]?

Mayor: That article was news to me and I think the right way to proceed – because obviously more than one thing had gone wrong at DOI – is to have a new commissioner who is a respected leader, come in, and do her own analysis of everything happening there, and set a new course. That's the way we resolve it and I leave it to her to determine what to do with the information that's been surfaced.

Question: During this press conference, Hakeem Jeffries won the race for Democratic Caucus Chair, so he'll now be the number-four Democrat in House leadership. [Inaudible] get your response to that. Is that good for New York [inaudible] making him a future Speaker of the House –

Mayor: That's very good for New York. I congratulate Congressman Jeffries and I'm going to talk to him later today to congratulate him personally. And, no, it's great for New York. We need our people in leadership positions and look, let's remember the election on November 6th catapulted New Yorkers into primary positions in the House of Representatives especially Nita Lowey as the Appropriations Chair, and Jerry Nadler as the Judiciary Chair. But to also have one of the top positions in the Democratic leadership go to a New Yorker is a very, very good thing. I mean Hakeem Jeffries is a real capable guy. He's a powerful spokesperson for the Democratic Party. But he's also someone who is going to watch out for the interest of New York City. So, I'm very happy about it.

Question: Over the summer, you [inaudible] on Staten Island, you said that you considered looking into to help private property owners get deer stuck for days out of their yards, out of their –

Mayor: I'm sorry, get deer –

Question: Deer stuck in private property owners' –

Mayor: Do you mean alive or dead?

Question: [Inaudible]

Mayor: Okay.

Question: [Inaudible]

Mayor: Yes, that's why – I am quite aware. That's why I want to make sure we know what we're talking about here.

Question: [Inaudible] calling different agencies, getting passed around to [inaudible] every agency under the sun and they can't get the deer out [inaudible]. I know Councilman Matteo sent you a letter asking you to [inaudible] policy to help –

Mayor: Yeah. One, I haven't seen his letter. I think very highly of Councilman Matteo, I just haven't seen the letter. I will look at it. But the bottom line is, he's right. We need a clear plan. Now, on the – using the gentle phrase – carcasses, we did initiate an effort to remove carcasses and we're going to do that. But the – in terms of live deer stuck in a fence or something like that, that's a real issue and we got to figure out the right way to handle it.

It's not – everyone understands this is not something historically the City of New York had a lot to do with because it wasn't a problem for most of our history. But we can't just leave people to figure it out for themselves. We've got to see if there's something we can do to help. So, we will, in light of Councilman Matteo's letter – we'll come back with what we can do.

Okay, thanks everyone.

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