Questions for Milwaukee City-County Heroin, Opioid and Cocaine Task Force

Why have their been no substantive updates made to the Task Force's Work Plan since November 2017?

Updates from Task Force Work Groups have been few and far between at the Task Force's public meetings. Why is that?

The Task Force emphasizes collaboration with the Community, then why are the Task Force's goals and strategies limited to only those proposed by Task Force members?

Does the Task Force have any obligation to respond to communications from members of the Community regarding their efforts?

Is the Task Force considering how the War on Drugs leads to violence, crime and overdose death? If yes, what goals and strategies have been identified to address this?

Alcohol prohibition led directly to crime, violence, corruption and poisoning. Is the Task Force considering how drug prohibition is producing the same results now?

Has the Task Force developed any goals and strategies to specifically address the issue of physicians pumping pills on the street?

Has the Task Force followed up with DEA Supervisor Kathy Federico to find out how the DEA is handling cases of physicians illegally prescribing opioids?

Has the Task Force developed any goals or strategies to work with the DEA to find out why there are no consequences if doctors do not check the Prescription Drug Monitoring Program (PDMP) before writing a prescription for a patient?

Has the Task Force followed up with DEA Supervisor Kathy Federico to find out how the DEA is handling cases of doctors not looking at the PDMP?

Has the Task Force investigated Supervised Drug Injection Sites?

Has the Task Force considered providing anonymous drug testing facilities so substance users can know what is in the drugs they are taking?

Can the Task Force reach its goal of destigmatizing substance abusers while not addressing their criminalization?



The Task Force highlights non-natural deaths with data from the Milwaukee County Medical Examiner's Office to show the trends in overdose deaths. Does the Task Force consider death from alcohol or tobacco abuse to be "Natural"? (how do the annual deaths from alcohol and tobacco compare to those from opioid overdose?)

Has the Task Force requested an audit of what the City and County are currently spending to enforce drug prohibition including a showing of the costs and benefits?

is the Task Force coordinating in any way with the Office of Violence Prevention? If not, why not?

Is the Task Force considering the impact of the racial disparities in enforcement of the drug laws? If yes, how is this reflected in their Goals and Strategies?

Is the Task Force considering Medical Cannabis as an alternative to opioids for pain management? If not, why not?

What goals or strategies has the Task Force identified to reduce the availability of addictive substances? How do they propose to get any increase in these efforts funded?

The Task Force is advocating that Law Enforcement treat addiction as a disease. How does it propose this be accomplished? Would this include decriminalization? If not, why not? Do we treat any other population suffering from a "disease" as criminals?

The Task Force goals and strategies advocate targeting education efforts at young people. What evidence of success is this approach based on?

The Task Force advocates expanding statutory tools for prosecuting major distributors. How will this be accomplished?

What goals and strategies has the Task Force identified to reduce recidivism and provide more re-entry services in general and, more specifically, for felons with histories of substance abuse?

What strategies is the Task Force proposing to reach its goal of stabilizing drug involved homicides by 2022 and cutting the current rate by 50% by the year 2027?