

MICHIGAN DRUG CONTROL UPDATE

This report reflects significant trends, data, and major issues relating to drugs in the State of Michigan.

Michigan At-a-Glance:

- The number of meth lab seizure incidents in Michigan increased 290%, from 174 incidents in 2007 to 679 incidents in 2009, according to the El Paso Intelligence Center's National Seizure System (EPIC-NSS).
- Approximately 9 percent of Michigan residents reported past-month use of illicit drugs; the national average was 8 percent.
- The rate of drug-induced deaths in Michigan exceeds the national average.

Drug Use Trends in Michigan

Drug Use in Michigan: The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States. In the most recent Survey, 8.95 percent of Michigan residents reported using illicit drugs in the past month. The national average was 8.02 percent. Additionally, 3.56 percent of Michigan residents reported using an illicit drug other than marijuana in the past month (the national average was 3.58 percent).

Source: Substance Abuse and Mental Health Services Administration - State Estimates of Substance Use from the 2007–2008 National Survey on Drug Use and Health: http://oas.samhsa.gov/2k8state/Cover.pdf

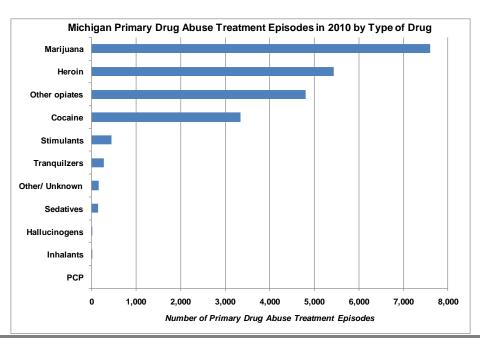
Drug-Induced Deaths: As a direct consequence of drug use, 1,542 persons died in Michigan in 2007. This is compared to the number of persons in Michigan who died from motor vehicle accidents (1,229) and firearms (1,095) in the same year. Michigan drug-induced deaths (15.3 per 100,000 population) exceeded the national rate (12.7 per 100,000). *Source:* Centers for Disease Control and Prevention - National Vital Statistics Reports Volume 58, Number 19 for 2007: http://www.cdc.gov/nchs/data/nvsr/nvsr58/nvsr58_19.pdf

Substance Abuse Treatment Admissions Data

Michigan primary treatment

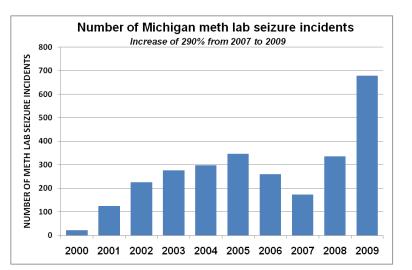
admissions: The graph at right depicts substance abuse primary treatment admissions in Michigan in 2010. The data show that marijuana, followed by heroin, is the most commonly cited drug among primary drug treatment admissions in the state.

Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration : http://oas.samhsa.gov/dasis.htm



Methamphetamine Lab Seizure Data

Methamphetamine Seizures: Nationwide, methamphetamine lab seizures declined drastically following the 2005 Federal Combating Methamphetamine Epidemic Act (CMEA) and similar state laws to control the sale of pseudoephedrine (PSE). Recently, the number of meth labs seized has risen due to "smurfing," which is the bulk purchase of PSE for non-therapeutic reasons, and due to smaller, more mobile labs. Nationwide, meth lab seizures rose 76% between 2007 and 2009. Meth lab seizures in Michigan have exceeded this overall trend, rising 290% from 2007 to 2009. *Source*: EPIC, NSS, extracted 11/2010



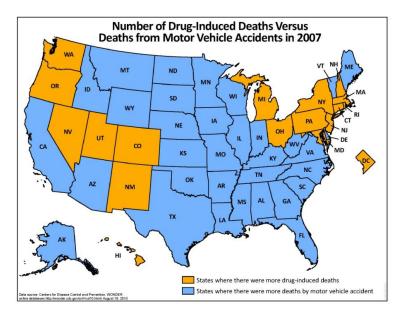
Example of State-Level Action: Return pseudoephedrine to prescription-drug status

Facing a steep increase in meth lab incidents, the state of Oregon returned medicines containing PSE to prescription-drug status in 2006. Several years later, the results are promising, with meth lab incidents declining from a high of 467 in 2004 (prior to enactment of the bill) to 12 in 2009 and Oregon officials reporting a virtual "eradication" of smurfing and meth labs. Experiencing a similar rise in meth lab production and trafficking, Mississippi enacted similar legislation, which took effect on July 1, 2010. Mississippi reports that after six months, there has been a nearly 70 percent reduction in meth-related cases statewide.

Prescription Drug Abuse

ONDCP's Efforts to Combat Prescription Drug Abuse

Prescription drug abuse is the fastest-growing drug problem in the Nation. The Administration's Prescription Drug Abuse Prevention Plan, entitled, **"Epidemic: Responding to America's Prescription Drug Abuse Crisis,"** provides a national framework for reducing prescription drug diversion and abuse by supporting the expansion of state-based prescription drug monitoring programs; recommending secure, more convenient, and environmentally responsible disposal methods to remove expired, unused, or unneeded medications from the home; supporting education for patients and healthcare providers;



and reducing the prevalence of pill mills and doctor shopping through enforcement efforts.

State-Level Action: Prescription Drug Monitoring Programs (PDMPs)

PDMPs track controlled substances prescribed by authorized practitioners and dispensed by pharmacies. PDMPs serve a number of functions, including assisting in patient care, providing early warning signs of drug epidemics, and detecting drug diversion and insurance fraud. Thirty-five states have operational PDMP programs established by state legislation and funded by a combination of state and Federal funds. An additional 13 states have a prescription drug monitoring program authorized, but not yet operational. Adequate resourcing, increasing the number of states with operational PDMPs, and development of state-to-state information-sharing systems would significantly help reduce prescription drug diversion and abuse.

The Michigan Automated Prescription System (MAPS) collects prescription information on Schedule II-V controlled substances and allows physicians, dentists, pharmacists, nurse practitioners, physician's assistants, podiatrists and veterinarians to query the data for patient-specific reports. This enables practitioners to determine if patients are receiving controlled substances from other providers and to help prevent prescription drug abuse. Prescription data collected by pharmacies and dispensing practitioners are stored in a secure central database within the Department of Community Health.

Source: Michigan Department of Community Health: http://www.michigan.gov/mdch/0,1607,7-132-27417_55478---,00.html

State-Level Action: Drug Take-Back Programs

A comprehensive plan to address prescription drug abuse must include proper disposal of unused, unneeded, or expired medications. Providing individuals with a secure and convenient way to dispose of controlled substances will help prevent diversion and abuse of these substances and demonstrate sound environmental stewardship. Federal rulemaking is underway and will further enhance the viability and scope of state and community take-back programs. In the meantime, states are encouraged to work with the DEA to conduct additional take-back events and educate the public about safe and effective drug return and disposal.

Drugged Driving

ONDCP Action on Drugged Driving

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In 2007, the National Highway Traffic Safety Administration (NHTSA) found that one in eight weekend, nighttime drivers tested positive for illicit drugs. According to recent Fatal Accident Reporting System (FARS) data, one in three motor vehicle fatalities (33 percent) with known drug test results tested positive for drugs in 2009. Recognizing this growing problem, ONDCP is working to raise awareness of the dangers of drugged driving, provide increased training to law enforcement in identifying drugged drivers, and encourage states to consider *Per Se* laws to facilitate effective enforcement and prosecution of those who drive with drugs in their systems.



State-Level Action: Enacting Per Se Standards for Impairment

Although all 50 states have laws against drugged driving, law enforcement often lacks adequate tools to enforce and prosecute drugged driving. ONDCP encourages states to consider *Per Se* standards for impairment that make it illegal to drive a vehicle after taking illegal drugs. This is the same standard used successfully for 12 million commercial drivers in the United States over the past two decades. *Per Se* standards have been adopted in 17 states.

Michigan has a *Per Se law*, stipulating under Section 257.625 of the Michigan Vehicle Code that a person, "whether licensed or not, shall not operate a vehicle upon a highway or other place open to the general public" within the state of Michigan if the person is operating while intoxicated. "Operating while intoxicated" means the person is under the influence of alcoholic liquor, a controlled substance, or a combination of alcoholic liquor and a controlled substance. The law further states that a person shall not operate a vehicle if the person "has in his or her body any amount of a controlled substance," as described in the public health code. Source: A State-by-State Analysis of Laws Dealing With Driving Under the Influence of Drugs, by the Walsh Group for the National Highway Traffic Safety

Administration, December 2009.

ONDCP Support for Community-Based Prevention

The Drug Free Communities (DFC) Program

Recognizing that local problems require local solutions, Drug Free Communities (DFC) organizations mobilize communities to prevent youth drug use by creating local data-driven strategies to reduce drug use in the community. ONDCP works to foster the growth of new coalitions and support existing coalitions through the DFC grants. In FY 2011, the following Michigan coalitions received grants from ONDCP:

- Allegan County Community Mental Health Services •
- Barry County Substance Abuse Task Force •
- Birmingham Bloomfield Community Coalition •
- Chippewa Valley Coalition for Youth and Families •
- Drug Free Montcalm •
- Eaton County Substance Abuse Advisory Group •
- Garden City Community Coalition •
- Grand Valley State University/ AOD Partnership for Healthy Communities
- Greater West Bloomfield Community Coalition for Youth
- Healthy Youth Coalition of Marinette and Menominee Counties
- Holly Area Youth Coalition .
- Ingham Substance Abuse Prevention Coalition, c/o Cristo • **Rey Community Center**
- Jackson County Substance Abuse Prevention Coalition

- Kalamazoo County Substance Abuse Task Force •
- Madison Heights Community Family Coalition
- Monroe County Substance Abuse Coalition
- Muskegon Community Health Project, Inc. / Toward a Drug-Free Muskegon Community
- North Oakland Community Coalition .
- Ottawa Substance Abuse Prevention Coalition (OSAP)
- **Royal Oak Prevention Coalition**
- Southeast Oakland Coalition
- SRSLY (Chelsea)
- Sterling Area Health Center •
- The Detroit Recovery Project Coalition
- The Healthy, Safe and Drug-Free Schools and Communities Coalition (Grand Rapids)
- **Tri-Community Coalition**

Source: Office of National Drug Control Policy http://www.ondcp.gov/dfc/grantee_map.html

National Anti-Drug Media Campaign

ONDCP's National Youth Anti-Drug Media Campaign provides consistent and credible messages (including in Native American and Alaska Native communities) to young people about drug use and its consequences. Above the Influence, a major component of the Campaign, informs and inspires youth to reject illicit drugs and drinking via a mix of national and local advertising vehicles. The Campaign, in close partnership with local community-based, youth-serving organizations, also conducts teen-targeted Above the Influence activities to assist local groups with youth drug prevention work in their respective communities.

ONDCP High Intensity Drug Trafficking Area (HIDTA) County Info

The High Intensity Drug Trafficking Areas (HIDTA) program enhances and coordinates drug control efforts among local, state, and Federal law enforcement agencies. In designated HIDTA counties, the program provides agencies with coordination, equipment, technology, and additional resources to combat drug trafficking and its harmful consequences in critical regions of the United States.

HIDTA Counties in Michigan

Michigan HIDTA: Wayne, Oakland, Macomb, Washtenaw, Genesee, Kent, Kalamazoo, Allegan, Saginaw, and Van Buren counties.

• The mission of the Michigan HIDTA is to reduce drug trafficking, terrorism, related violent crimes, and money laundering in the HIDTA region. Through co-location, interagency cooperation, and consolidation of strategic and tactical information, the Michigan HIDTA fosters a comprehensive response to illicit drug activity by bringing together all available law enforcement resources in a united effort. The Michigan HIDTA provides much needed federal funding and investigative support services to 27 task forces throughout the State. Many of the local agencies that participate in these task forces would not be able to do so without the support of the Michigan HIDTA.

Federal Grant Awards Available to Reduce Drug Use in the State of Michigan

The Federal Government awards competitive grants to help states in their efforts to reduce drug use and its harmful consequences. In FY 2010, direct support was provided to state and local governments, schools, and law enforcement organizations in your state for this purpose. Some Federal grant programs are dedicated to reducing drug use and its harmful consequences while others can be used for reducing drug use or for other purposes. In FY 2010, your State received support under the grant programs shown below.

Federal Grant Awards 2010 Department of Education Safe and Drug-Free Schools and Communities_National Programs 10,263,079 **Alcohol Abuse Reduction Grants** 334,814 Building State And Local Leadership Capacity for Preventing Youth Substance Use and Violence 185,000 Competition To Prevent High-Risk Drinking & Violent Behavior Among College Students 114,955 Grants For Coalitions To Prevent And Reduce Alcohol Abuse At Institutions Of Higher Education 321,570 Grants For School-Based Student Drug-Testing Programs 150,750 Improving The Climate For Learning 6,254,539 Safe Schools/Healthy Students Grants 2.901.451 **Department of Health and Human Services** Administration for Children and Families 16,784,798 Mentoring Children of Prisoners 2,360,000 Promoting Safe and Stable Families 14,424,798 Centers for Disease Control and Prevention 706,745 HIV Prevention Activities_Non-Governmental Organization Based 706,745 Health Resources and Services Administration 5,129,445 Healthy Start Initiative 5,129,445 Immediate Office of the Secretary of Health and Human Services 247,874 Family and Community Violence Prevention Program 247,874 Indian Health Service 218,739 Urban Indian Health Services 218.739 National Institutes of Health 39.395.979 Discovery and Applied Research for Technological Innovations to Improve Human Health 9,588,035 Drug Abuse and Addiction Research Programs 29,807,944 Substance Abuse and Mental Health Services Administration 78.601.040 Block Grants for Prevention and Treatment of Substance Abuse 58,098,674 National All Schedules Prescription Electronic Reporting Grant 189,141 1,993,000 Projects for Assistance in Transition from Homelessness (PATH) Substance Abuse and Mental Health Services_Projects of Regional and National Significance 14.968.225 Substance Abuse and Mental Health Services-Access to Recovery 3,352,000 **Department of Housing and Urban Development** 7,315,572 Assistant Secretary for Community Planning and Development Shelter Plus Care 7,315,572 **Department of Justice** Office of Justice Programs 81,618,568 Community Capacity Development Office 785,000 Congressionally Recommended Awards 4,579,995 Criminal and Juvenile Justice and Mental Health Collaboration Program 47,970 Drug Court Discretionary Grant Program 869.651 Edward Byrne Memorial Justice Assistance Grant Program 26,829,378 Enforcing Underage Drinking Laws Program 356,400 Indian Country Alcohol and Drug Prevention

499.995 Juvenile Accountability Block Grants 1.305.900 Juvenile Mentoring Program 299,255 National Institute of Justice Research Evaluation and Development Project Grants 2,251,787 Recovery Act - Eward Byrne Memorial Justice Assistance Grant (JAG) Program 38,705,018 Residential Substance Abuse Treatment for State Prisoners 1.232.010 Second Chance Act Prisoner Reentry Initiative 3,356,209 **Tribal Youth Program** 500,000 Department of Labor **Employment and Training Administration** 500,000 500,000 Reintegration of Ex-Offenders **Executive Office of the President** Substance Abuse and Mental Health Services Administration 2,774,867 2.774.867 **Drug-Free Communities Support Program Grants** 243,556,706

Grand Total

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Note: Report as of 11/30/2010. FY 2009 includes additional grant awards under the Recovery Act. The Federal, State and Local Shares of Medicaid and the Federal Medicare Programs are not included above. File updated 06/07/2011.

ONDCP seeks to foster healthy individuals and safe communities by effectively leading the Nation's effort to reduce drug use and its consequences.

