

## KANSAS DRUG CONTROL UPDATE

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

#### **Kansas At-a-Glance:**

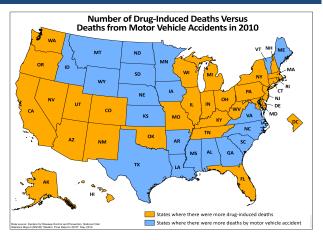
- The number of meth lab seizure incidents in the state of Kansas increased 48%, from 101 incidents in 2007 to 149 incidents in 2012, according to data from the El Paso Intelligence Center's National Seizure System (EPIC-NSS).
- Approximately 6.71 percent of Kansas residents reported past-month use of illicit drugs; the national average was 8.82 percent.

  \*\*Source: National Survey on Drug Use and Health 2009-2010.\*\*
  - In 2010, the rate of drug-induced deaths in Kansas was below the national average.
- Marijuana is the most commonly cited drug among primary drug treatment admissions in Kansas at over 50 percent. The percentage of admissions for cocaine has been decreasing since 2006.

# **Drug Use Trends in Kansas**

**Drug Use in Kansas:** 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 NSDUH Survey, 6.71 percent of Kansas residents reported using illicit drugs in the past month. The national average was 8.82 percent. Additionally, 3.14 percent of Kansas residents reported using an illicit drug other than marijuana in the past month (the national average was 3.33 percent).

Source: Substance Abuse and Mental Health Services Administration - State Estimates of Substance Use from the 2009–2010 National Survey on Drug Use and Health: <a href="http://store.samhsa.gov/shin/content//SMA11-4641/SMA11-4641.pdf">http://store.samhsa.gov/shin/content//SMA11-4641/SMA11-4641.pdf</a>



**Drug-Induced Deaths:** As a direct consequence of drug use, 288 persons died in Kansas in 2010. This is compared to the number of persons in Kansas who died from motor vehicle accidents (482) and firearms (300) in the same year. Kansas drug-induced deaths (10.1 per 100,000 population) were lower than the national rate (12.9 per 100,000).

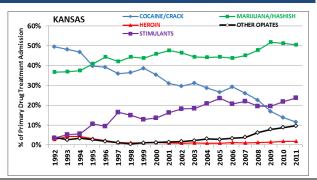
Source: WONDER online databases: http://wonder.cdc.gov/cmf-icd10.html

### **Substance Abuse Treatment Admissions Data**

#### **Kansas Primary Treatment Admissions:**

The graph on the right depicts substance abuse primary treatment admissions in Kansas from 1992 to 2011. The data show that marijuana is the most commonly cited drug among primary drug treatment admissions in the state.

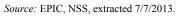
Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: http://www.samhsa.gov/data/DASIS.aspx#teds

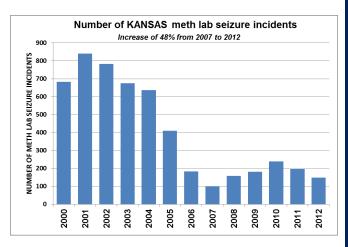


# Methamphetamine Lab Seizure Data

#### **Methamphetamine Lab Seizure Incidents:**

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 "one-pot" labs. Nationwide, meth lab seizures rose 85% between 2007 and 2012. During this time, meth lab seizures in Kansas rose 48% from 2007 to 2012.





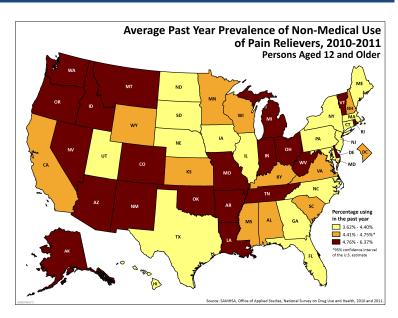
#### State-Level Action: Return pseudoephedrine to prescription-drug status

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**

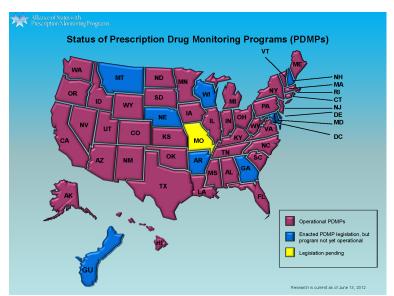
Prescription drug abuse is the fastest-growing drug problem in the Nation. The Administration's Prescription Drug Abuse Prevention Plan entitled "Epidemic: Responding to America's Prescription Drug Abuse Crisis," provides a national framework for reducing prescription drug diversion and abuse by supporting 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. Forty-one states have operational PDMP programs established by state legislation and funded by a combination of state and Federal funds. An additional 9 states and territories 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 Kansas Prescription Drug Monitoring Program, which became operational in October 2010, monitors prescriptions in Schedules II, III, and IV. The program features a Web-based application called K-TRACS (Kansas Tracking and Reporting of Controlled Substances). The K-TRACS database allows prescribers and pharmacists to access their patients' prescription information to improve pain management and help reduce diversion, addiction, and misuse.

Source: Kansas State Board of Pharmacy: http://www.kansas.gov/pharmacy/KSPMP.html

#### State-Level Action: Drug Take-Back Programs

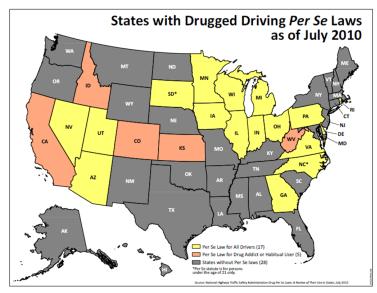
A comprehensive plan to address prescription drug abuse must include proper disposal of unused, unneeded, or expired medications. Providing

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**

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 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 develop and implement *Per Se* standards for impairment that make it illegal to drive a vehicle with any detectable level of illegal drugs in the driver's body. 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.

Kansas does not have a *Per Se* standard, but under Section 8-1567, no person shall operate or attempt to operate any vehicle within the state while under the influence of any drug or combination of drugs to a degree that renders the person incapable of safely driving a vehicle. The law further states that no person shall operate or attempt to operate any vehicle in Kansas if the person "is a habitual user of any narcotic, hypnotic, somnifacient, or stimulating drug." Legal entitlement to use the drug is not a defense against a charge of driving under the influence.

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**

#### 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.

#### 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 2013, the following Kansas coalitions received grants from ONDCP:

- Draw the Line Lawrence Coalition
- Reno County Communities that Care Association

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

# **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.

**Midwest HIDTA Kansas Counties:** Cherokee, Crawford, Johnson, Labette, Leavenworth, Saline, Seward, Barton, Sedgwick, Finney, Shawnee, Miami, Franklin, and Wyandotte

Projects and task forces:

- *Kansas Interdiction Support:* provides operational support to the Kansas Bureau of Investigation for interdiction investigations and improvements to intelligence sharing in the state of Kansas.
- Topeka Regional Drug Task Force: multi-agency enforcement task force located in Shawnee County.
- *Kansas Intelligence and Information Exchange:* provides assistance and intelligence coordination and support to the Highway drug interdiction program.
- Garden City DEA Task Force: targets major manufacturing, importation, and distribution organizations in southwest Kansas.

- Southeast Kansas Drug Enforcement Task Force: targets trafficking and manufacturing organizations in the southeastern counties of Kansas.
- Wichita DEA Task Force: targets trafficking and manufacturing organizations in the Wichita Kansas area and the designated counties served by the Wichita Resident Office of the DEA.
- Kansas City/Overland Park DEA Task Force: investigates and dismantles methamphetamine laboratories, importation, and trafficking organizations in Kansas and northwest Missouri.
- Special Assistant United States Attorney: enhances the resources of the Kansas United States Attorney's Office to aggressively prosecute narcotics trafficking cases at the Federal level, and to cross-designate state prosecutors when appropriate.

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

The Federal Government awards competitive grants to help states in their efforts to reduce drug use and its harmful consequences. In FY 2012, 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 2012, your State received support under the grant programs shown below.

epartment / Office / Program Name		2012
Department of Agriculture	\$	10,625,7
National Institute of Food and Agriculture		
Cooperative Extension Service	\$	10,625,7
Department of Defense	\$	300,0
The Army	300	,
National Guard ChalleNGe Program	\$	300,0
Department of Education	\$	10,987,6
Office of Elementary and Secondary Education	*	
Safe and Drug-Free Schools and Communities National Programs	\$	2,339,
Twenty-First Century Community Learning Centers	\$	8,648,
Department of Health and Human Services	\$	53,249,
Administration for Children and Families	399	
Promoting Safe and Stable Families	\$	2,156,
Transitional Living for Homeless Youth	\$	200,
Centers For Medicare and Medicaid Services	· #	,
Medical Assistance Program - Grants to States for Medicaid To Treat Substance Abuse	\$	24,366,
Indian Health Service	•	2 1,500,
Urban Indian Health Services	\$	183,
National Institutes Of Health		105,
Alcohol Research Programs	\$	2,337,
Drug Abuse and Addiction Research Programs	\$	5,857,
Substance Abuse and Mental Health Services Administration	7	3,037,
Block Grants for Prevention and Treatment of Substance Abuse	\$	12,198,
Projects for Assistance in Transition from Homelessness (PATH)	\$	364,
Substance Abuse and Mental Health Services Projects of Regional and National Significance	\$	4,585,
Prescription Drug Monitoring Program Electronic Health Record (EHR) Integration	\$	449,
Health Resources and Services Administration	¥	773,
Healthy Start Initiative	\$	550,
Department of Housing and Urban Development	Š	8,759,
Community Planning and Development	9	0,755,
Emergency Shelter Grants Program	\$	1,883,
Emergency Solutions Grant Program	\$	913,
Shelter Plus Care	\$	1,543,
Supportive Housing Program	\$	4,419,
Department Of Justice	\$	5,413,
Office of Justice Programs	9	3,413,
Edward Byrne Memorial Justice Assistance Grant Program	\$	2,973,
Harold Rogers Prescription Drug Monitoring Program	\$	400,
Juvenile Accountability Block Grants		
Juvenile Justice and Delinquency Prevention Allocation to States	\$ \$	262, 400,
Residential Substance Abuse Treatment for State Prisoners		
Second Chance Act Prisoner Reentry Initiative	\$ \$	77, 1,299,
Department of Labor	\$	1,299, <b>1,500</b> ,
	Ş	1,500,
Employment and Training Administration  Reintegration of Ex-Offenders	, a	1 500
Reintegration of Ex-Offenders  Department of Veteran's Affairs	\$ <b>\$</b>	1,500,
Department of Veteran's Affairs	>	353,

Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of KS			
Department / Office / Program Name		2012	
Veterans Health Administration			
VA Homeless Providers Grant and Per Diem Program	\$	353,393	
Executive Office of The President	\$.	4,363,514	
Office of National Drug Control Policy			
Drug-Free Communities Support Program Grants	\$	230,000	
High Intensity Drug Trafficking Areas Program	\$	4,133,514	
Grand Total	\$	95,553,826	

File updated 08/01/13.

# in Kansas with Drug Court Locations Office of National Drug Control Policy Programs



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

Source: National Drug Court Institute and ONDCP, August 2013

Midwest HIDTA counties

**Drug Court locations** 

Drug-Free Communities program grantees

counties