



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:

- In 2009-2010 Michigan was one of the top ten states for rates in past month illicit drug use among persons age 26 or older.
Source: National Survey on Drug Use and Health (NSDUH) 2009-2010.
- Approximately 10.37 percent of Michigan residents reported past-month use of illicit drugs; the national average was 8.82 percent.
- In 2009, the rate of drug-induced deaths in Michigan significantly exceeded the national average.
- In 2011, 30 percent of treatment admissions in Michigan were for heroin.

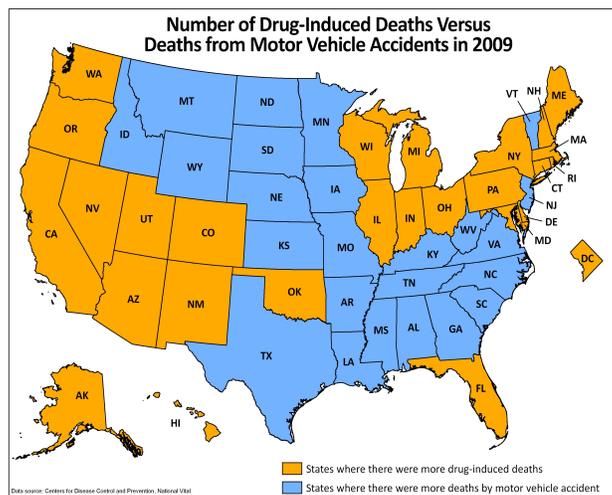
Drug Use Trends in Michigan

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, 10.37 percent of Michigan residents reported using illicit drugs in the past month. The national average was 8.82 percent. Additionally, 3.77 percent of Michigan residents reported using an illicit drug other than marijuana in the past month (the national average was 3.6 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: <http://store.samhsa.gov/shin/content/SMA11-4641/SMA11-4641.pdf>

Drug-Induced Deaths: As a direct consequence of drug use, 1,750 persons died in Michigan in 2009. This is compared to the number of persons in Michigan who died from motor vehicle accidents (962) and firearms (1,095) in the same year. Michigan drug-induced deaths (17.6 per 100,000 population) exceeded the national rate (12.8 per 100,000).

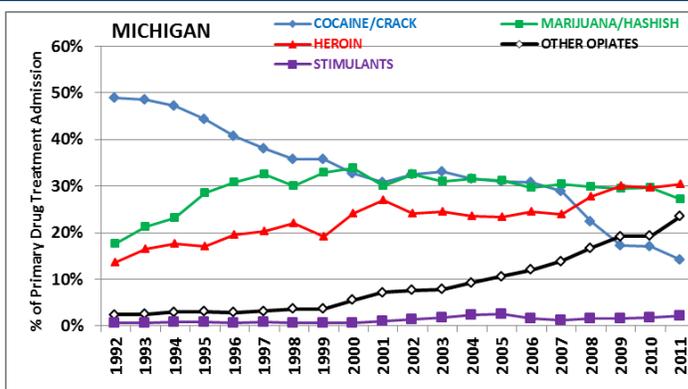
Source: WONDER online databases: <http://wonder.cdc.gov/cmfi-icd10.html>



Substance Abuse Treatment Admissions Data

Michigan Primary Treatment Admissions: The graph on the right depicts substance abuse primary treatment admissions in Michigan from 1992 to 2011. The data show that heroin, shortly followed by marijuana, is the most commonly cited drugs among primary drug treatment admissions in the state.

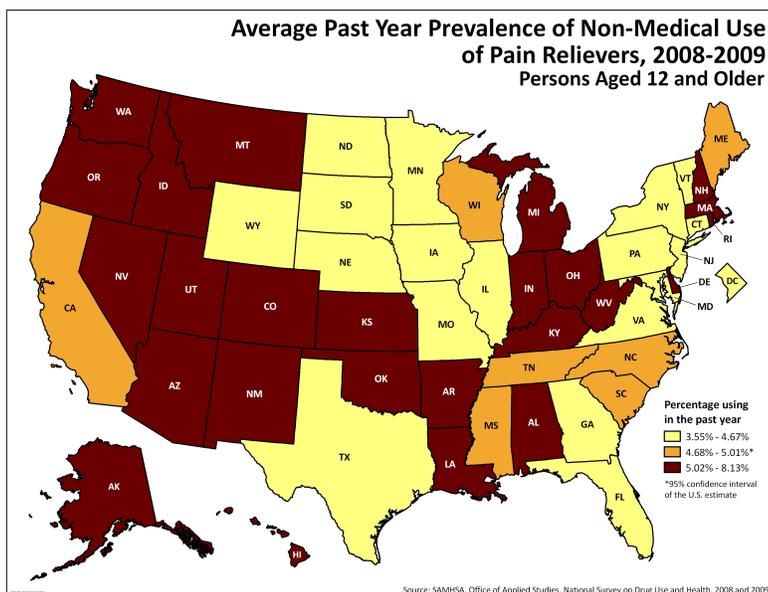
Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov/data/DASIS.aspx#teds>



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 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 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

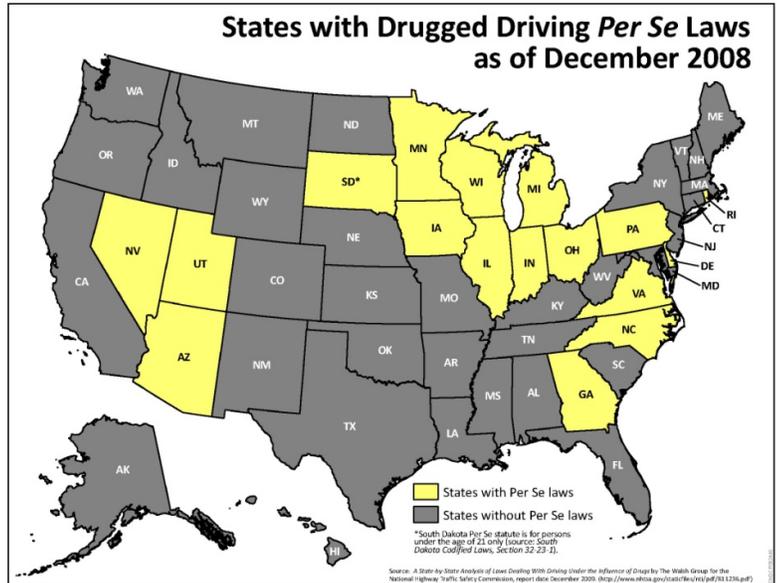
State-Level Action: Drug Take-Back Programs

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

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 2012, 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
- The Healthy, Safe, and Drug-Free Schools and Communities Coalition
- Healthy Youth Coalition of Marinette and Menominee Ctys
- Holly Area Youth Coalition
- Jackson County Substance Abuse Prevention Coalition
- Kalamazoo County Substance Abuse Task Force
- Kent County Prevention Coalition
- Madison Heights Community 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
- SRSLY
- Southeast Oakland Coalition
- Sterling Area Health Center
- 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 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.

| Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of MI | |
|--|-----------------------|
| Department / Office / Program Name | 2012 |
| Department of Agriculture | \$ 11,335,738 |
| National Institute of Food and Agriculture | |
| Cooperative Extension Service | \$ 11,335,738 |
| Department of Defense | \$ 4,721,000 |
| The Army | |
| National Guard ChalleNGe Program | \$ 4,721,000 |
| Department of Education | \$ 47,054,328 |
| Office of Elementary and Secondary Education | |
| Safe and Drug-Free Schools and Communities National Programs | \$ 5,770,072 |
| Twenty-First Century Community Learning Centers | \$ 41,284,256 |
| Department of Health and Human Services | \$ 266,223,349 |
| Administration for Children and Families | |
| Promoting Safe and Stable Families | \$ 12,731,374 |
| Transitional Living for Homeless Youth | \$ 3,397,479 |
| Centers For Medicare and Medicaid Services | |
| Medical Assistance Program - Grants to States for Medicaid To Treat Substance Abuse | \$ 101,129,000 |
| Indian Health Service | |
| Urban Indian Health Services | \$ 223,739 |
| National Institutes Of Health | |
| Alcohol Research Programs | \$ 14,945,384 |
| Drug Abuse and Addiction Research Programs | \$ 49,788,788 |
| Substance Abuse and Mental Health Services Administration | |
| Block Grants for Prevention and Treatment of Substance Abuse | \$ 57,459,952 |
| Projects for Assistance in Transition from Homelessness (PATH) | \$ 1,984,000 |
| Substance Abuse and Mental Health Services Projects of Regional and National Significance | \$ 15,726,523 |
| Substance Abuse and Mental Health Services-Access to Recovery | \$ 3,227,840 |
| Health Resources and Services Administration | |
| Healthy Start Initiative | \$ 5,609,270 |
| Department of Housing and Urban Development | \$ 70,124,267 |
| Community Planning and Development | |
| Emergency Shelter Grants Program | \$ 4,891,713 |
| Emergency Solutions Grant Program | \$ 7,849,488 |
| Section 8 Moderate Rehabilitation Single Room Occupancy | \$ 508,715 |
| Shelter Plus Care | \$ 8,841,372 |
| Supportive Housing Program | \$ 48,032,979 |
| Department Of Justice | \$ 17,589,529 |
| Office of Justice Programs | |
| Byrne Criminal Justice Innovation Program | \$ 1,000,000 |
| Drug Court Discretionary Grant Program | \$ 1,163,513 |
| Edward Byrne Memorial Competitive Grant Program | \$ 349,978 |
| Edward Byrne Memorial Justice Assistance Grant Program | \$ 9,641,197 |
| Edward Byrne Memorial State and Local Law Enforcement Assistance Discretionary Grants Program | \$ 631,659 |
| Juvenile Accountability Block Grants | \$ 1,105,277 |
| Juvenile Justice and Delinquency Prevention Allocation to States | \$ 691,306 |
| Juvenile Mentoring Program | \$ 380,030 |
| Project Safe Neighborhoods | \$ 499,995 |

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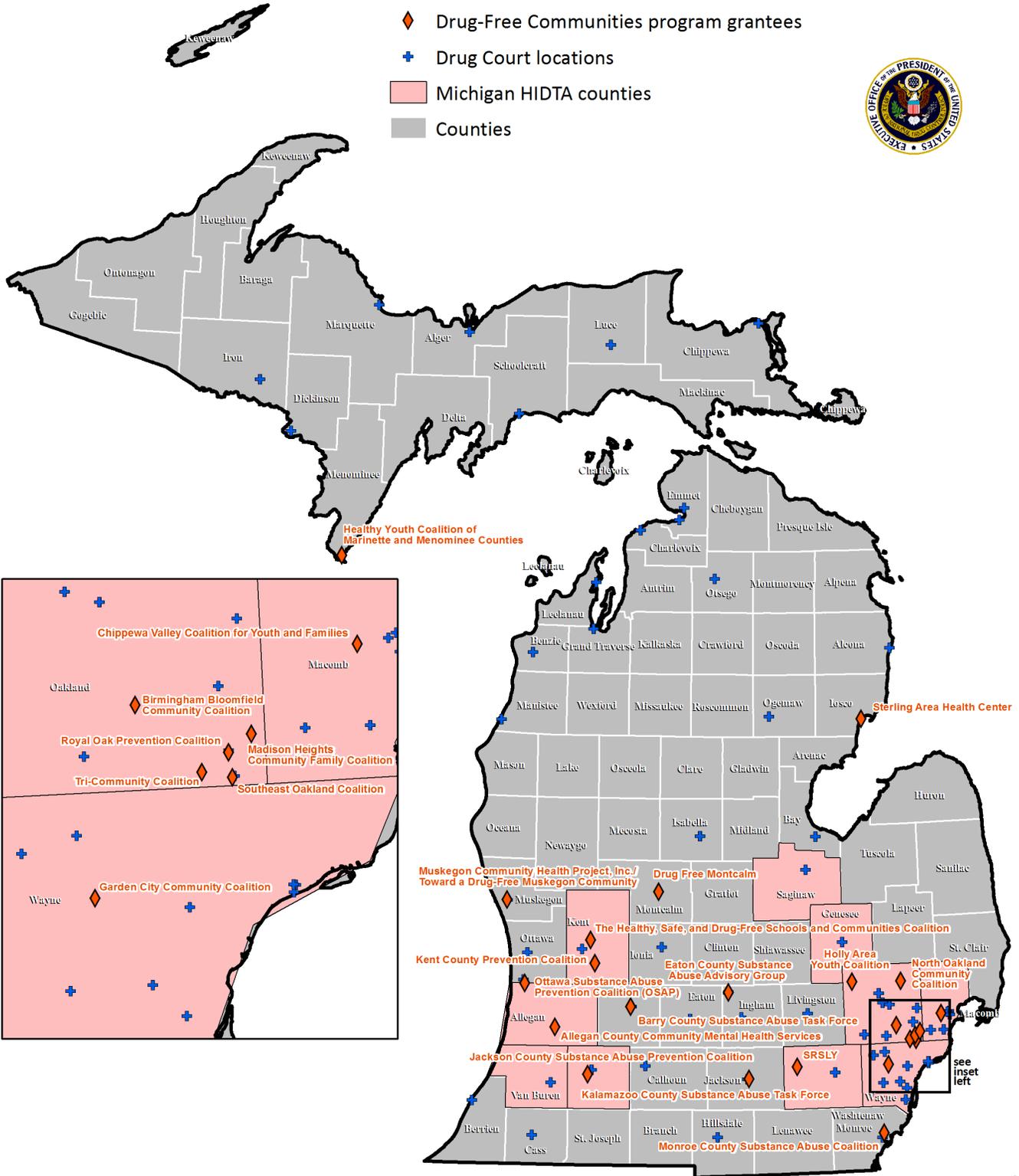
| Department / Office / Program Name | 2012 |
|---|-----------------------|
| Residential Substance Abuse Treatment for State Prisoners | \$ 245,478 |
| Second Chance Act Prisoner Reentry Initiative | \$ 598,900 |
| Tribal Court Assistance Program | \$ 1,282,196 |
| Department of Labor | \$ 2,245,317 |
| Employment and Training Administration | |
| Reintegration of Ex-Offenders | \$ 1,145,317 |
| Youthbuild | \$ 1,100,000 |
| Department of Transportation | \$ 3,655,009 |
| National Highway Traffic Safety Administration | |
| Alcohol Impaired Driving Countermeasures Incentive Grants I | \$ 3,655,009 |
| Department of Veteran's Affairs | \$ 4,657,724 |
| Veterans Health Administration | |
| VA Homeless Providers Grant and Per Diem Program | \$ 4,657,724 |
| Executive Office of The President | \$ 6,035,678 |
| Office of National Drug Control Policy | |
| Drug-Free Communities Support Program Grants | \$ 2,840,731 |
| High Intensity Drug Trafficking Areas Program | \$ 3,194,947 |
| Grand Total | \$ 433,641,939 |

File updated January, 2013.

Office of National Drug Control Policy Programs in Michigan with Drug Court Locations



- ◆ Drug-Free Communities program grantees
- + Drug Court locations
- Michigan HIDTA counties
- Counties



Source: National Drug Court Institute and ONDCP, September 2012

ONDCP00-0083