



CALIFORNIA DRUG CONTROL UPDATE

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

California At-a-Glance:

- Data from the Treatment Episode Data Set (TEDS) indicate 25% of voluntary California primary drug treatment admissions were for marijuana, while 36% were for stimulants (including methamphetamine).
- Approximately 9 percent of California residents reported past-month use of illicit drugs; the national average was 8 percent.
- The rate of drug-induced deaths in California is lower than the national average.

Drug Use Trends in California

Drug Use in California: 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, 9.07 percent of California residents reported using illicit drugs in the past month. The national average was 8.02 percent. Additionally, 3.94 percent of California 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, 4,178 persons died in California in 2007. This is compared to the number of persons in California who died from motor vehicle accidents (4,306) and firearms (3,268) in the same year. California drug-induced deaths (11.4 per 100,000 population) were lower than 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:

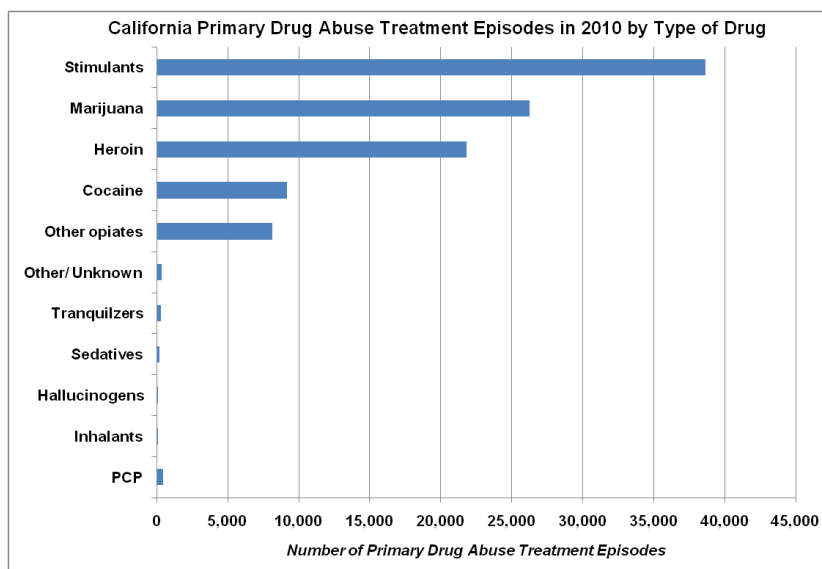
http://www.cdc.gov/nchs/data/nvsr/nvsr58/nvsr58_19.pdf

Substance Abuse Treatment Admissions Data

California Primary Treatment Admissions

The graph at right depicts substance abuse primary treatment admissions in California in 2009. The data show stimulants, including methamphetamine, are the most commonly cited drugs among primary drug treatment admissions in California.

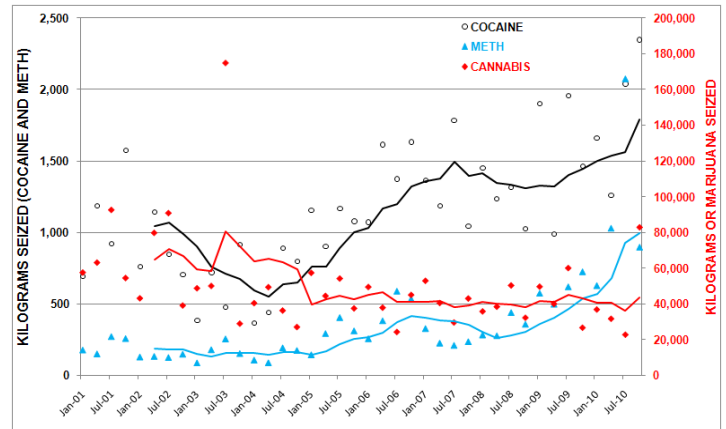
Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: <http://oas.samhsa.gov/dasis.htm>



Southwest Border Drug Seizure Data

California Border Drug Seizure Data: The amount of cocaine seized along the California portion of the Southwest Border has steadily increased over the period 2001 to 2010. While the amount of marijuana seized over time has declined, methamphetamine seizures continue to increase.

Source: National Seizure System (NSS), EPIC, extracted 1/14/11

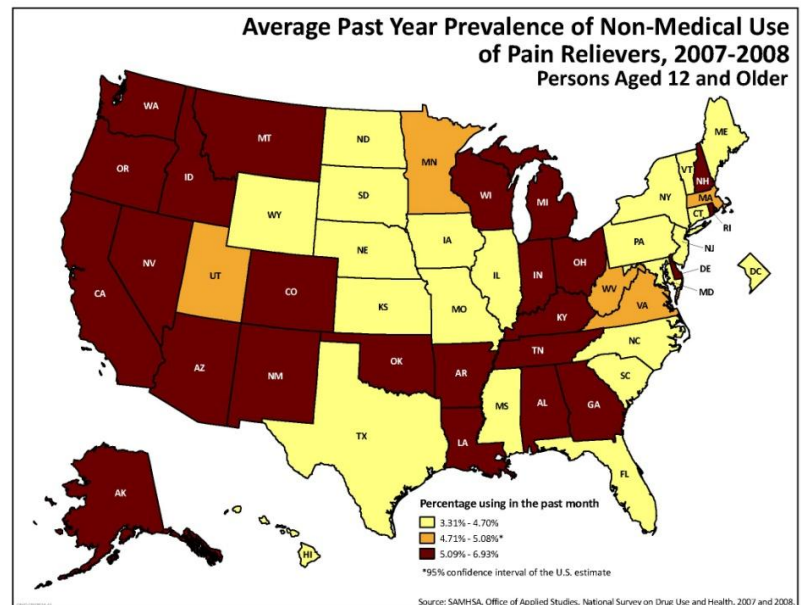


Quarterly Southwest Border drug seizures in California 2001-2010

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

California's operational PDMP, the **Controlled Substance Utilization Review and Evaluation System (CURES)**, contains over 100 million entries of controlled substances dispensed in California and responds to

more than 60,000 requests from practitioners and pharmacists each year. The system allows licensed healthcare prescribers, law enforcement, and regulatory boards to access real-time information on patients' controlled substance history.

Source: Office of the Attorney General, State of California. <http://ag.ca.gov/bne/cures.php>

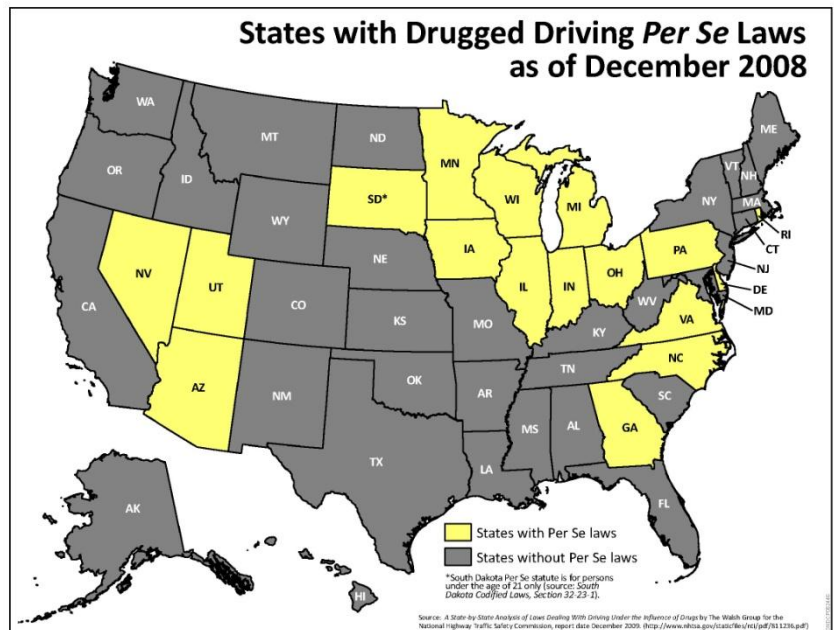
State-Level Action: Drug Take-Back Programs

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.

Prescription Drug Abuse

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 develop and implement *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.

California does not have a *Per Se* standard. However, according to the California Vehicle Code (Section 23152 VC), it is unlawful for any person who is under the influence of any drug, or under the combined influence of any alcoholic beverage and drug, to drive a vehicle. It is also unlawful for any person who is addicted to the use of any drug to drive a vehicle.

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.

ONDCP Support for Community-Based Prevention

National Anti-Drug Media Campaign

ONDCP's National Youth Anti-Drug Media Campaign provides consistent and credible messages to young people (including those in Native American and Alaska Native communities) 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 2011, the following California coalitions received grants from ONDCP:

- A Sobering Choice
- Alcohol and Drug Prevention Coalition
- Alcohol, Tobacco and Other Drug Prevention Coalition
- Anderson Valley Community Action Coalition
- Ashland/ Cherryland Violence Prevention Collaboration (ACVPC)
- Boyle Heights Coalition for a Safe and Drug-Free Community
- California for Drug Free Youth
- Castro Valley Community Action Network
- CATALYST Coalition
- Cinco De Mayo Con Orgullo (With Pride) Coalition
- Coalition for a Drug-Free Nevada County
- Coalition for Gang Awareness and Prevention
- Coalition for Placer Youth
- Community-Supporting Alcohol and Drug Free Environment
- Crescenta Valley Drug and Alcohol Prevention Coalition
- Hemet Community Action Network (Hemet CAN)
- Julian Backcountry Collaborative
- Laytonville Healthy Start
- Mountain Communities Coalition to Address Substance Abuse
- NATHA
- Novato Blue Ribbon Coalition for Youth
- One East Palo Alto Community-Based Partnership for the Prevention of Alco, Tobac, and Other Drugs
- Preventing Alcohol Related Trauma in Salinas (P.A.R.T.S)
- Rancho Cordova Children, Youth and Families Collaborative
- Safety Wellness Advocacy Community Coalition
- San Dieguito for Drug Free Youth
- San Luis Obispo County Friday Night Live Partnership
- Santa Cruz County Community Prevention Partners
- Santa Ynez Valey Coalition
- Santee Solutions Coalition
- Saving Lives Camarillo
- Saving Lives San Fernando Valley California
- Siskiyou Substance Abuse Coalition
- Solano County Alcohol, Tobacco and Other Drugs (ATOD) Reducing Rates Coalition
- Sonoma County Prevention Partnership
- South County Collaborative
- South Orange County Coalition
- South Sacramento Coalition for Future Leaders
- Tahoe Truckee Future Without Drug Dependence (TT-FWDD)
- The Faith and Institutions Together for Health Coalition
- The Petaluma Coalition to Prevent Alcohol, Tobacco and Other Drug Problems
- Vision Coalition of Eldorado Hills
- We Stand United! Coalition of the Gridleyans United Against Drugs is a Necessary (GUARDIAN) Collaboration
- West End Gangs and Drugs Task Force
- YES Partnership

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 Federal, State, and local 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 California

Central Valley HIDTA: Kern, Kings, Madera, Merced, Shasta, Stanislaus, San Joaquin, Fresno, Tulare, and Sacramento counties.

Los Angeles HIDTA: Los Angeles, Orange, Riverside, and San Bernardino counties.

Northern California HIDTA: Alameda, Contra Costa, Lake, Marin, Mendocino, Monterey, San Francisco, San Mateo, Santa Clara, Santa Cruz, and Sonoma counties.

Southwest Border HIDTA/California Region: Imperial and San Diego counties.

- The HIDTA program has been integral in targeting the major production and distribution threats of methamphetamine and marijuana in California.
- In addition to interdiction and eradication efforts, the four California HIDTAs participate in a state-wide, community-oriented demand reduction program.

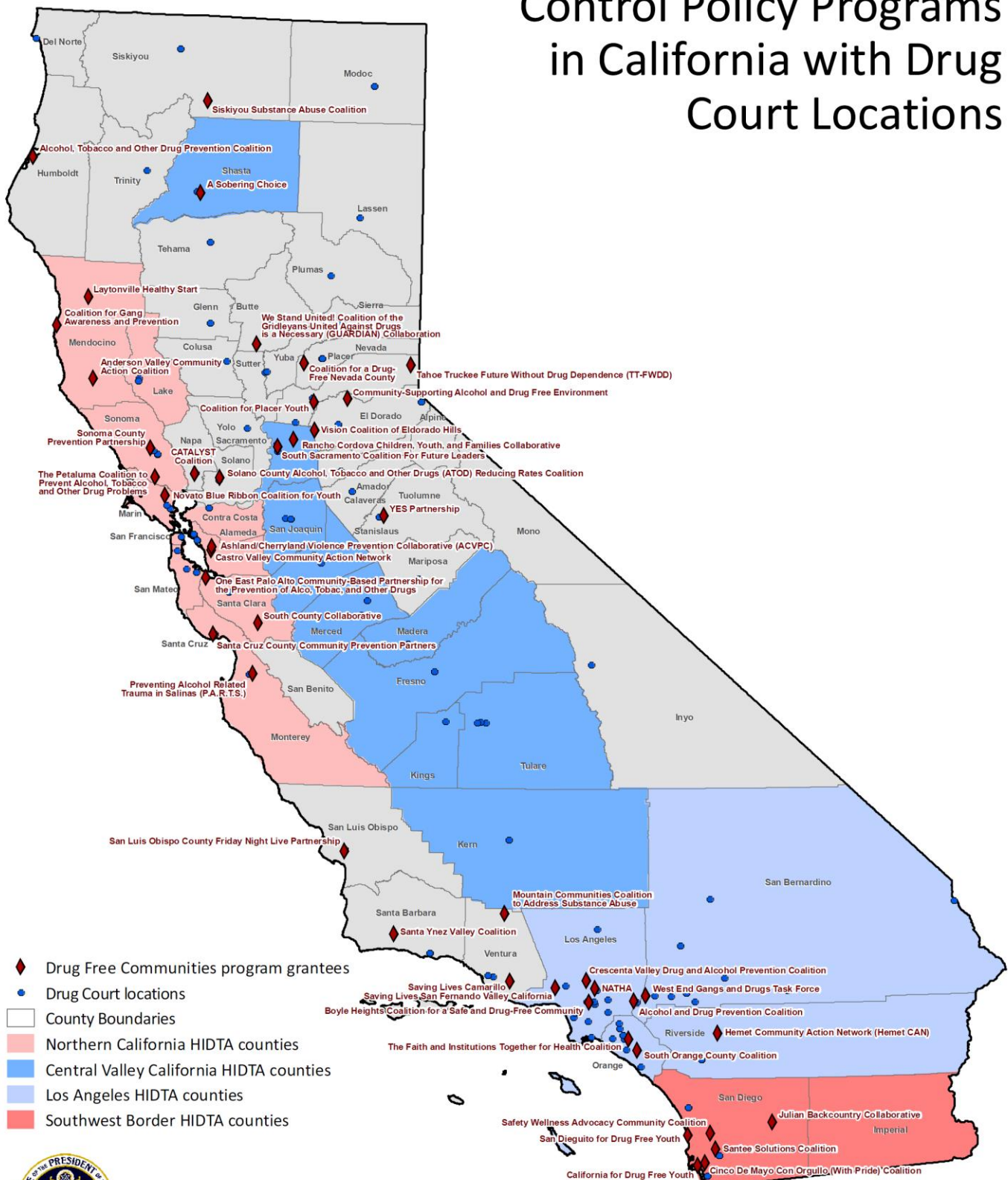
Federal Grant Awards Available to Reduce Drug Use in the State of California

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		34,966,351
Alcohol Abuse Reduction Grants		5,444,894
Building State And Local Leadership Capacity for Preventing Youth Substance Use and Violence		249,554
Competition To Prevent High-Risk Drinking & Violent Behavior Among College Students		294,139
Grants For Coalitions To Prevent And Reduce Alcohol Abuse At Institutions Of Higher Education		-
Grants For School-Based Student Drug-Testing Programs		314,080
Improving The Climate For Learning		2,715,331
Safe Schools/Healthy Students Grants		25,948,353
Department of Health and Human Services		
Administration for Children and Families		43,571,881
Enhance the Safety of Children Affected by Parental Methamphetamine or Other Substance Abuse		3,834,000
Mentoring Children of Prisoners		3,519,652
Promoting Safe and Stable Families		36,218,229
Centers for Disease Control and Prevention		13,758,199
HIV Prevention Activities_Non-Governmental Organization Based		13,758,199
Health Resources and Services Administration		4,395,374
Healthy Start Initiative		4,395,374
Immediate Office of the Secretary of Health and Human Services		1,095,741
Family and Community Violence Prevention Program		1,095,741
Indian Health Service		2,070,038
Urban Indian Health Services		2,070,038
National Institutes of Health		154,324,327
Discovery and Applied Research for Technological Innovations to Improve Human Health		45,701,848
Drug Abuse and Addiction Research Programs		108,622,479
Substance Abuse and Mental Health Services Administration		332,075,296
Block Grants for Prevention and Treatment of Substance Abuse		251,659,105
National All Schedules Prescription Electronic Reporting Grant		437,858
Projects for Assistance in Transition from Homelessness (PATH)		9,073,000
Substance Abuse and Mental Health Services_Projects of Regional and National Significance		64,201,333
Substance Abuse and Mental Health Services-Access to Recovery		6,704,000
Department of Housing and Urban Development		
Assistant Secretary for Community Planning and Development		58,678,850
Shelter Plus Care		58,678,850
Assistant Secretary for Housing--Federal Housing Commissioner		26,804,793
Shelter Plus Care		26,804,793
Department of Justice		
Office of Justice Programs		124,362,138
Community Capacity Development Office		1,410,940
Congressionally Recommended Awards		15,740,000
Criminal and Juvenile Justice and Mental Health Collaboration Program		549,322
Drug Court Discretionary Grant Program		2,243,377
Edward Byrne Memorial Justice Assistance Grant Program		57,966,279
Enforcing Underage Drinking Laws Program		356,400
Gang Resistance Education and Training		262,048
Harold Rogers Prescription Drug Monitoring Program		400,000
Indian Country Alcohol and Drug Prevention		1,195,590
Juvenile Accountability Block Grants		4,442,000
Juvenile Mentoring Program		1,178,161
National Institute of Justice Research Evaluation and Development Project Grants		17,983,739
Recovery Act - Edward Byrne Memorial Justice Assistance Grant (JAG) Program		54,835
Regional Information Sharing Systems		6,187,390
Residential Substance Abuse Treatment for State Prisoners		2,780,460
Second Chance Act Prisoner Reentry Initiative		8,568,563
Tribal Youth Program		2,068,865
Youth Gang Prevention		974,169
Department of Labor		
Employment and Training Administration		1,000,000
Reintegration of Ex-Offenders		1,000,000
Executive Office of the President		
Office of National Drug Control Policy		29,942,125
High Intensity Drug Trafficking Area Program		29,942,125
Substance Abuse and Mental Health Services Administration		5,062,792
Drug-Free Communities Support Program Grants		5,062,792
Grand Total		832,107,905

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 3/10/2011.

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



Source: National Drug Court Institute and ONDCP, September 2011

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