



## RHODE ISLAND DRUG CONTROL UPDATE

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

### Rhode Island-At-A-Glance:

- In 2009-2010, Rhode Island was one of the top ten states for rates of drug-use among persons age 12 or older and among young adults age 18-25 in several categories, including: past-month illicit drug use; past-month marijuana use; past-month illicit drug use other than marijuana; past-year cocaine use; past-year non-medical use of pain relievers; and illicit drug dependence.  
*Source: National Survey on Drug Use and Health (NSDUH) 2009-2010.*
- Approximately 13.21 percent of Rhode Island residents reported past-month use of illicit drugs; the national average was 8.82 percent.
- In 2009, the rate of drug-induced deaths in Rhode Island was significantly higher than the national average.
- Heroin is the most commonly cited drug among primary drug treatment admissions in Rhode Island. Data from the Treatment Episode Data Set (TEDS) indicate 37 percent of primary treatment admissions in Rhode Island were for heroin in 2011.

## Drug Use Trends in Rhode Island

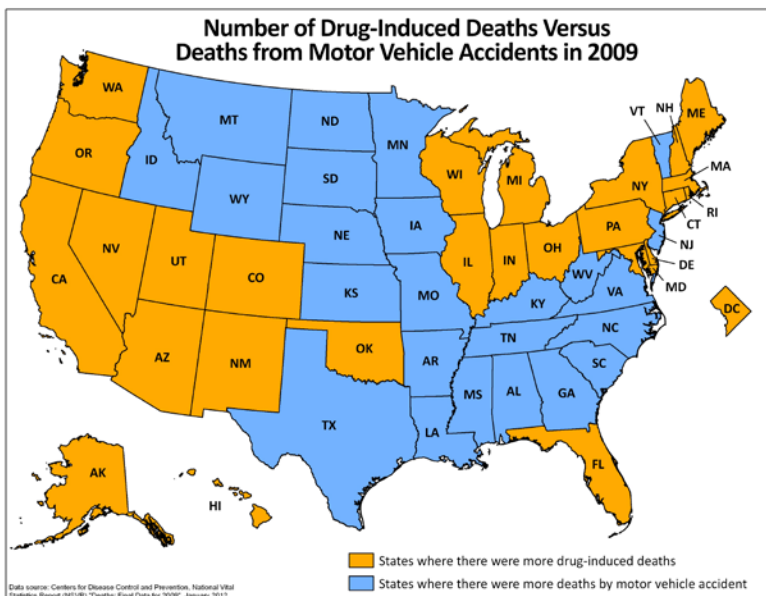
**Drug Use in Rhode Island:** The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs), and mental health in the United States. In the most recent NSDUH Survey, 13.21 percent of Rhode Island residents reported using illicit drugs in the past month. The national average was 8.82 percent. Rhode Island's rate was the second highest among the states. Additionally, 4.75 percent of Rhode Island 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, 168 persons died in Rhode Island in 2009.

This is compared to the number of persons in Rhode Island who died from motor vehicle accidents (84) and firearms (56) in the same year. Rhode Island drug-induced deaths (16.0 per 100,000 population) exceeded the national rate (12.8 per 100,000).

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

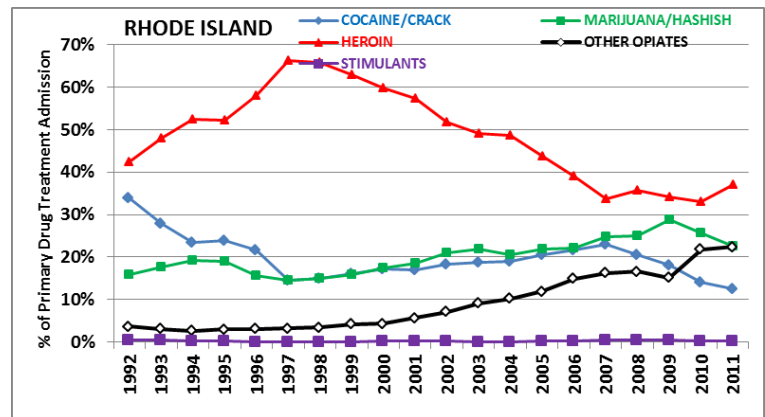


## Substance Abuse Treatment Admissions Data

### Rhode Island Primary Treatment Admissions:

The graph on the right depicts substance abuse primary treatment admissions in Rhode Island from 1992 to 2011. The data show heroin is the most commonly cited drug among primary drug treatment admissions in the state, followed by marijuana and opiates (including prescription drugs).

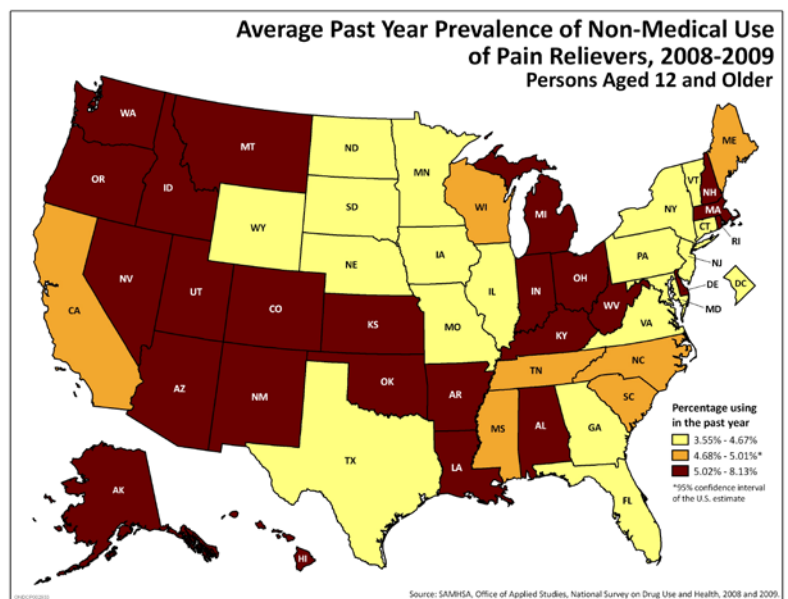
Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov/data/DASIS.aspx#teds>



## 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 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.

**Rhode Island's Prescription Monitoring Program**, in operation since 1978, is administered through the Rhode Island Department of Public Health Board of Pharmacy. The program "requires all pharmacies holding a Rhode Island controlled substance registration ... to report all Schedule II and Schedule III prescriptions to the Prescription Monitoring Program (PMP) on a monthly basis."

Source: [http://www.health.ri.gov/hsr/professions/csr\\_reporting.php](http://www.health.ri.gov/hsr/professions/csr_reporting.php) ; <http://www.pmpalliance.org/content/rhode-island-state-profile>.

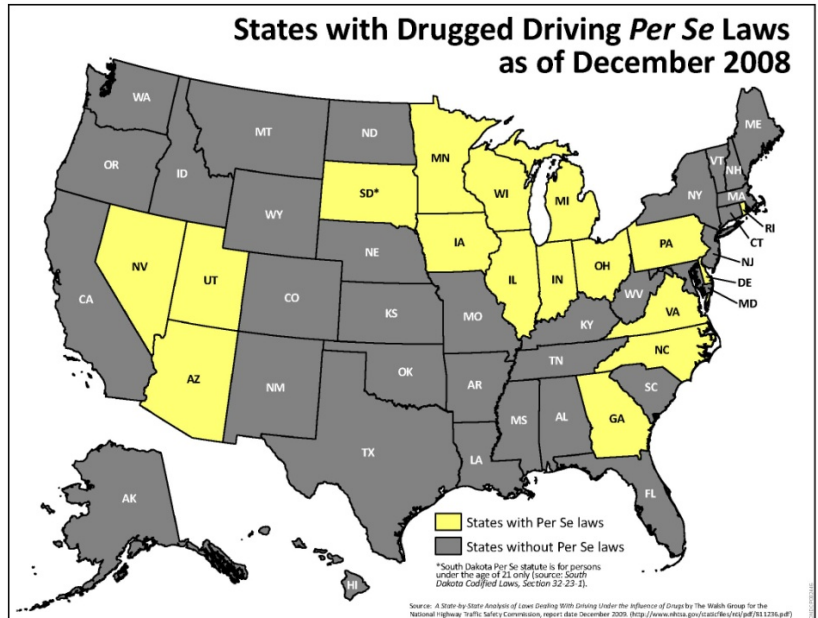
### State-Level Action: Drug Take-Back Programs

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 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.

**Rhode Island has an operating *Per Se* standard** (*General Laws of Rhode Island § 31-27-2, Driving under influence of liquor or drugs*) that prohibits driving or operating a motor vehicle “with a blood presence of any scheduled controlled substance.” Chemical drug testing can be requested based on “reasonable grounds” to believe the defendant was operating a motor vehicle while under the influence.

## 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 Program:** Recognizing that local problems require local solutions, the 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 Rhode Island coalitions received grants from ONDCP:

- Barrington Substance Abuse Task Force
- Chariho Tri-Town Task Force
- Mayor's Substance Abuse Prevention Council
- Narragansett Prevention Partnership
- The Smithfield Substance Abuse Prevention Coalition
- Tiverton Prevention Coalition
- Town of Middletown
- Woonsocket Task Force on Substance Abuse
- Working Together for Wellness

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

### HIDTA Counties in Rhode Island

#### New England HIDTA: Providence County

- *Rhode Island HIDTA Task Force:* Seeks to dismantle core and secondary Dominican/Colombian/Mexican and other significant cocaine and heroin trafficking organizations, including Regional Priority Organization Targets, and to identify, arrest, and prosecute members of drug trafficking organizations that participate in money laundering and violent criminal activity.
- *Fugitive Task Force:* Targets fugitives that are members of Colombian and Dominican drug trafficking organizations, Consolidated Priority Organization Targets, and other drug trafficking organizations operating in the New England area and other regions of the country.
- *New England Domestic Highway Enforcement:* Promotes collaborative, intelligence-led, unbiased policing in coordinated and mutually supportive multi-jurisdictional law enforcement efforts on the major highways that connect New England to drug sources-of-supply in New York City and the New England-Canadian border.
- *Financial Investigative Task Force:* Seeks to identify, investigate, and prosecute large-scale drug money laundering organizations and their financial operating systems throughout the New England area.

## Federal Grant Awards Available To Reduce Drug Use in the State of Rhode Island

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.

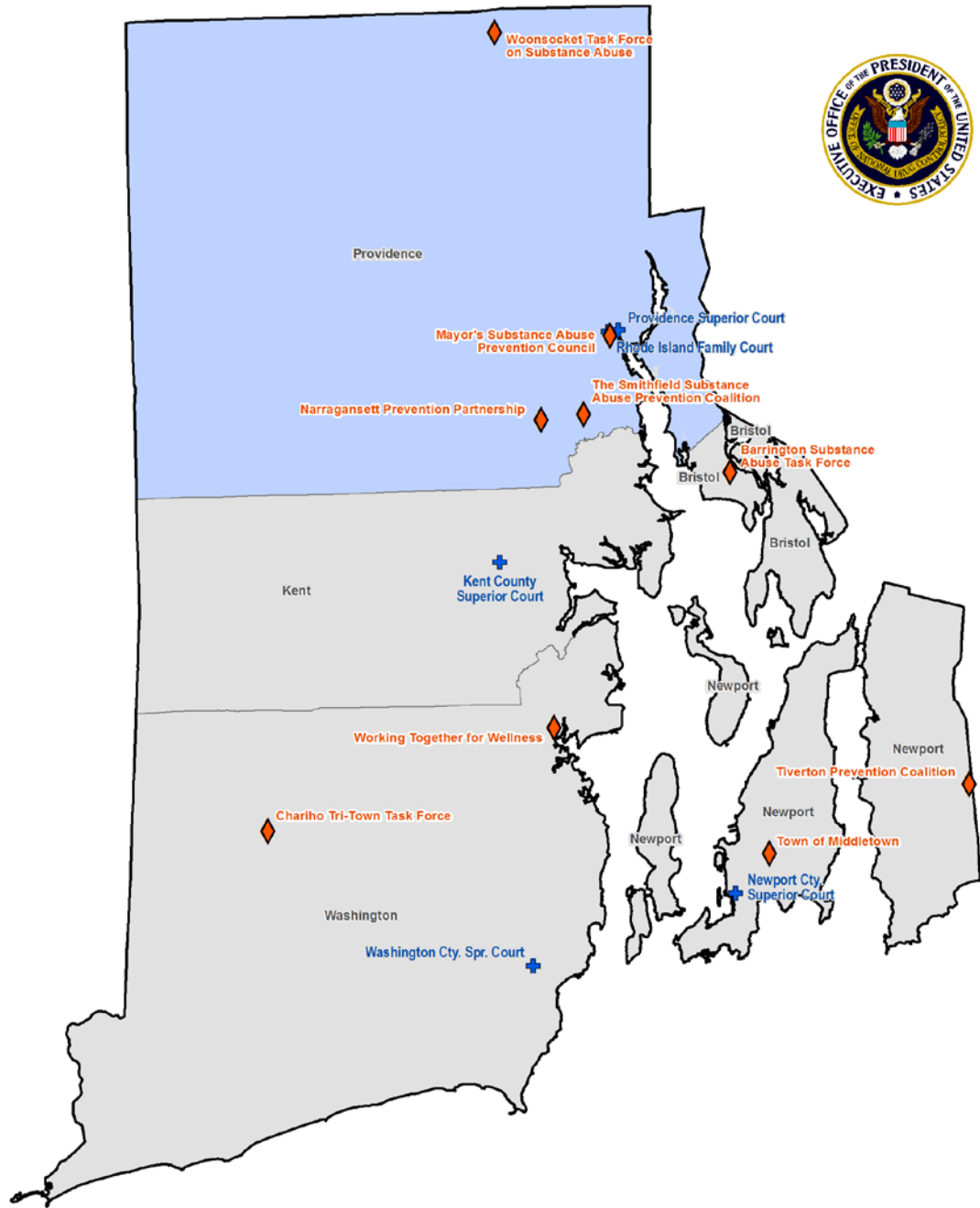
Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of RI	
Department / Office / Program Name	2012
<b>Department of Agriculture</b>	<b>\$ 1,739,378</b>
<b>National Institute of Food and Agriculture</b>	
Cooperative Extension Service	\$ 1,739,378
<b>Department of Education</b>	<b>\$ 5,643,199</b>
<b>Office of Elementary and Secondary Education</b>	
Twenty-First Century Community Learning Centers	\$ 5,643,199
<b>Department of Health and Human Services</b>	<b>\$ 109,853,440</b>
<b>Administration for Children and Families</b>	
Promoting Safe and Stable Families	\$ 1,378,018
Transitional Living for Homeless Youth	\$ 200,000
<b>Centers For Medicare and Medicaid Services</b>	
Medical Assistance Program - Grants to States for Medicaid To Treat Substance Abuse	\$ 25,544,866
<b>National Institutes Of Health</b>	
Alcohol Research Programs	\$ 31,387,088
Drug Abuse and Addiction Research Programs	\$ 32,336,850
<b>Substance Abuse and Mental Health Services Administration</b>	
Block Grants for Prevention and Treatment of Substance Abuse	\$ 6,670,567
Projects for Assistance in Transition from Homelessness (PATH)	\$ 300,000
Substance Abuse and Mental Health Services Projects of Regional and National Significance	\$ 8,903,683
Substance Abuse and Mental Health Services-Access to Recovery	\$ 3,132,368
<b>Department of Housing and Urban Development</b>	<b>\$ 4,545,188</b>
<b>Community Planning and Development</b>	
Emergency Shelter Grants Program	\$ 59,039
Emergency Solutions Grant Program	\$ 425,505
Shelter Plus Care	\$ 1,599,732
Supportive Housing Program	\$ 2,460,912
<b>Department Of Justice</b>	<b>\$ 2,820,314</b>
<b>Office of Justice Programs</b>	
Edward Byrne Memorial Justice Assistance Grant Program	\$ 1,354,062
Edward Byrne Memorial State and Local Law Enforcement Assistance Discretionary Grants Program	\$ 56,468
Juvenile Accountability Block Grants	\$ 156,508
Juvenile Justice and Delinquency Prevention Allocation to States	\$ 400,000
Residential Substance Abuse Treatment for State Prisoners	\$ 44,412
Second Chance Act Prisoner Reentry Initiative	\$ 808,864
<b>Department of Labor</b>	<b>\$ 1,099,656</b>
<b>Employment and Training Administration</b>	
Youthbuild	\$ 1,099,656
<b>Department of Transportation</b>	<b>\$ 1,251,701</b>
<b>National Highway Traffic Safety Administration</b>	
Alcohol Impaired Driving Countermeasures Incentive Grants I	\$ 953,248
Minimum Penalties for Repeat Offenders for Driving While Intoxicated	\$ 298,453
<b>Department of Veteran's Affairs</b>	<b>\$ 806,353</b>
<b>Veterans Health Administration</b>	
VA Homeless Providers Grant and Per Diem Program	\$ 806,353
<b>Executive Office of The President</b>	<b>\$ 1,122,062</b>
<b>Office of National Drug Control Policy</b>	

**Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of RI**

Department / Office / Program Name	2012
Drug-Free Communities Support Program Grants	\$ 1,122,062
<b>Grand Total</b>	<b>\$ 128,881,291</b>

File updated January, 2013.

# Office of National Drug Control Policy Programs in Rhode Island and Drug Court Locations



- ◆ Drug-Free Communities program grantees
- + Drug Court locations
- New England HIDTA counties
- County Boundaries



Source: National Drug Court Institute and ONDCP, September 2012

ONDCP003102