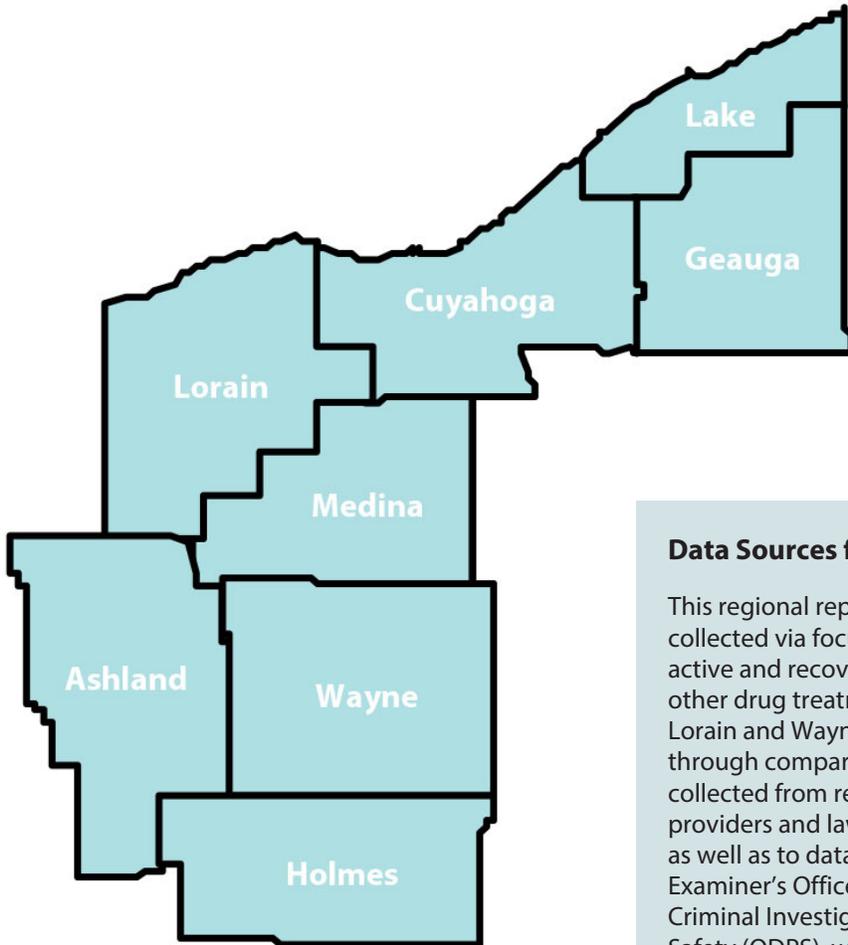




Drug Abuse Trends in the Cleveland Region



Regional Epidemiologist:
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Data Sources for the Cleveland Region

This regional report was based upon qualitative data collected via focus group interviews. Participants were active and recovering drug users recruited from alcohol and other drug treatment programs in Cuyahoga, Geauga, Lorain and Wayne counties. Data triangulation was achieved through comparison of participant data to qualitative data collected from regional community professionals (treatment providers and law enforcement) via focus group interviews, as well as to data surveyed from Cuyahoga County Medical Examiner’s Office, Lake County Crime Lab, Ohio Bureau of Criminal Investigation (BCI) and Ohio Department of Public Safety (ODPS), which logs drug task force seizures from across Ohio. All secondary data are summary data of cases processed from July through December 2018. In addition to these data sources, Ohio media outlets were queried for information regarding regional drug abuse for January through June 2019.

Note: OSAM participants were asked to report on drug use/knowledge pertaining to the past six months prior to the interview; thus, current secondary data correspond to the reporting period of participants.

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Regional Profile

Indicator ¹	Ohio	Cleveland Region	OSAM Drug Consumers
Total Population, 2017	11,689,442	2,272,467	56
Gender (female), 2017	51.0%	51.6%	42.9%
White, 2017	82.2%	76.7%	67.9%
African American, 2017	12.9%	18.7%	26.8%
Hispanic or Latino Origin, 2017	3.8%	5.4%	14.3% ²
High School Graduation Rate, 2013-17	89.8%	89.1%	85.7% ³
Median Household Income, 2013-17	\$52,407	\$59,400	\$12,000 to \$15,999 ⁴
Persons Below Poverty Level, 2013-17	14.0%	14.5%	44.6% ⁵

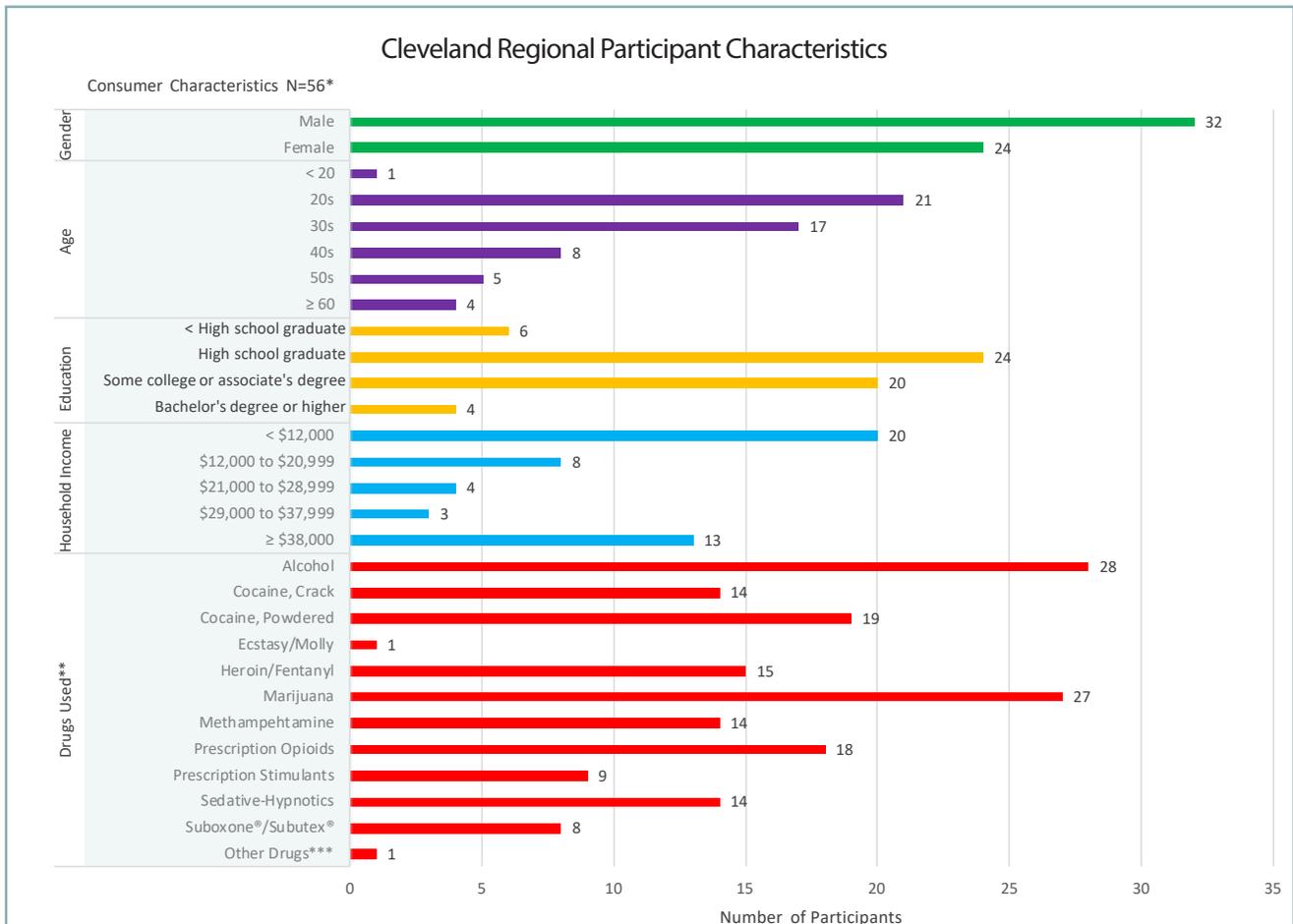
¹Ohio and Cleveland region statistics were derived from the most recent US Census; OSAM drug consumers were participants for this reporting period: January through June 2019.

²Hispanic or Latino Origin was unable to be determined for 2 participants due to missing and/or invalid data.

³Education level was unable to be determined for 2 participants due to missing and/or invalid data.

⁴Participants reported income by selecting a category that best represented their household's approximate income for the previous year. Income was unable to be determined for 8 participants due to missing and/or invalid data.

⁵Poverty status was unable to be determined for 9 participants due to missing and/or invalid data.



*Not all participants filled out forms completely; therefore, numbers may not equal 56.

**Some respondents reported multiple drugs of use during the past six months.

***Other drugs included: lysergic acid diethylamide (LSD) and phencyclidine (PCP).

Historical Summary

In the previous reporting period (June 2018 – January 2019), fentanyl, heroin, marijuana and methamphetamine remained highly available in the Cleveland region; also, highly available in the region was crack cocaine. Changes in availability during the reporting period included: increased availability for methamphetamine; likely increased availability for Neurontin® (gabapentin) and Suboxone® (buprenorphine); and decreased availability for prescription opioids.

Respondents reported that the high availability of heroin and fentanyl had remained the same during the reporting period. Participants and law enforcement observed drug dealers pushing heroin in urban areas similar to how crack cocaine had been pushed. Participants reported that in Cleveland all one had to do to obtain heroin was drive into certain areas where drug dealers approached cars and solicited for customers. One participant remarked, *“People come up (approach you) [and ask], ‘You working for that boy?’ (looking for heroin).”* Law enforcement also noted that heroin dealers were driving around and looking for customers. One officer commented, *“They see people that they think are either ‘dope sick’ (experiencing withdrawal) or look like they’re addicts, and basically, they’re just asking them if they’re looking to buy drugs....”*

While several respondents indicated that they thought fentanyl was more available than heroin, there was consensus that the two drugs had become synonymous. Participants expressed: *“It’s all so mixed; Heroin and fentanyl are one in the same anymore.”* Participants continued to report that the top cutting agent for heroin remained fentanyl; several participants reported heroin as the top cutting agent for fentanyl.

In addition to heroin-fentanyl mixtures, fentanyl continued to be combined with other drugs such as cocaine and methamphetamine. Law enforcement also reported that fentanyl was pressed into pill form to resemble prescription opioids. The use of fentanyl continued to result in fatal consequences. Cuyahoga County Medical Examiner’s Office reported that 68.7% of the 259 drug-related deaths it recorded during the reporting period involved fentanyl/fentanyl analogues; 9.3% of the 259 deaths involved carfentanil (synthetic opioid more potent than fentanyl).

Participants and community professionals reported that the availability of crystal methamphetamine had increased during the reporting period. Respondents attributed increased availability to a shift in use from opiates to stimulant drugs due to fear of fatal overdose with fentanyl. Participants commented: *“A lot of people died from fentanyl, so everyone’s moving to ‘meth’ (methamphetamine); Meth is running rampant; More people want it, so more people have it.”* Participants also discussed that methamphetamine was preferred over cocaine because it was cheaper, more potent and easier to obtain.

According to all reporting regional crime labs (BCI, Cuyahoga County and Lake County crime labs), the incidence of methamphetamine cases for the Cleveland region had increased during the reporting period. The labs reported that they processed brown and white powdered methamphetamine, as well as clear, blue, pink and white crystalline methamphetamine during the reporting period.

Lastly, participants indicated that the availability of marijuana extracts and concentrates (oils, “dabs”) had increased during the reporting period. One participant explained that increased availability of dabs was due to increased demand for more potent forms of marijuana. In addition, community professionals reported that the availability of Neurontin® for illicit use had increased during the reporting period. A law enforcement officer remarked, *“Definitely increased.”* Community professionals described typical illicit Neurontin® users as white people in their 20s.

Current Trends

Powdered Cocaine

Powdered cocaine is moderately to highly available in the region. Participants most often reported the drug’s current availability as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common score was also ‘10.’ Participants stated: *“[Powdered cocaine is] making a comeback, heroin is getting too dangerous; It’s everywhere.”* Treatment providers most often reported the current availability of powdered cocaine as ‘5,’ while law enforcement most often reported it as ‘6;’ the previous

most common scores were '9' and '6,' respectively. A treatment provider remarked, *"Most people use crack cocaine."* Law enforcement noted: *"We don't deal with too many [powdered cocaine] informants, Geauga County ... we're pretty rural. We don't have people hanging on the streets [selling powdered cocaine], so we have to prearrange [a buy]; I have come across [powdered cocaine] quite often [in Cuyahoga County]."*

Corroborating data indicated that powdered cocaine is available in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 45.4% of the 306 drug-related deaths it processed during the past six months involved cocaine (crack and/or powdered cocaine). In addition, Ohio Department of Public Safety (ODPS) reported seizing 4.5 kilograms (10.0 lbs.) of powdered cocaine from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Cleveland Police (Cuyahoga County) arrested eight men involved in drug trafficking after a raid of two homes; officers seized 236 grams of cocaine, three pounds of marijuana, a small amount of heroin, 10 guns, equipment to weigh and package drugs, \$8,790 and two cars (www.cleveland.com, Jan. 31, 2019). After a long investigation, U.S. Drug Enforcement Agency (DEA) arrested three people with connections to a restaurant in Lakewood (Cuyahoga County) on federal cocaine charges and for unlawful possession of a firearm (www.cleveland.com, Feb. 4, 2019). Parma Police (Cuyahoga County) were dispatched for a possible overdose but when they arrived on scene the victim fought and attempted to swallow evidence; officers took the man into custody and were exposed to a mixture of powdered cocaine and possible fentanyl (www.fox8.com, Feb. 6, 2019). Cleveland State University disciplined members of their swim team and dismissed one team member after confirming cocaine and marijuana were used; the head coach and two senior athletics department officials resigned (www.cleveland.com, March 22, 2019). Ohio State Highway Patrol (OSHP) conducted a traffic stop and seized 11 pounds of cocaine; law enforcement charged the suspect with intent to distribute cocaine (www.fox8.com, March 28, 2019). Broadview Heights Police (Cuyahoga County) spoke to a man acting erratically in his car and seized cocaine, marijuana and a pipe after he started dumping juice around his car to rinse off cocaine residue; police arrested the man for

drug abuse, possession of drug paraphernalia, driving with a suspended license and illegal window tint (www.cleveland.com, May 29, 2019). U.S. DEA seized nearly 20 pounds of cocaine, fentanyl, 21 ounces of marijuana and \$1,000,000 while searching homes after an investigation into a drug operation; law enforcement charged five men with conspiracy to possess with intent to distribute narcotics (www.cleveland.com, June 17, 2019). Cleveland Police arrested three men in connection to a drug deal that turned into a deadly shootout that left one man dead and four others hurt; investigators seized cocaine, heroin, methamphetamine, other drugs, guns and cash from the home where the shootout took place (www.cleveland.com, June 20, 2019). The U.S. Department of Justice arrested 15 people in Lorain County for attempting to transport and sell cocaine, heroin and fentanyl (www.patch.com, June 20, 2019).

Participants and treatment providers reported that the availability of powdered cocaine has remained the same during the past six months, while law enforcement were not in agreement as to change of availability. Law enforcement discussed: *"It's more available ... people are scared to mess with heroin [due to fentanyl and overdose] ... they're just trying to be a little safer [by switching to cocaine use]; I would say availability has decreased, it's expensive.... If you're going to go with something cheap, then why not do fentanyl or heroin?"* BCI crime labs reported that the incidence of cocaine cases they process from this region has decreased during the past six months, while Lake County Crime Lab reported that the incidence of cocaine cases it processes has increased. The labs do not differentiate between powdered and crack cocaine.

Powdered Cocaine	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No consensus
	 Treatment providers	No change

Participants most often rated the current overall quality of powdered cocaine as '8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '6.' However, participants responded: *"It all depends who you get it from; The one person I know*

that got it, got some really clean stuff.” Participants discussed adulterants (aka “cuts”) that affect the quality of powdered cocaine and reported the top cutting agents for the drug as: baby laxatives, baking soda, Benefiber® and fentanyl. Other adulterants mentioned included: creatine and foot powder. A participant stated, “Some people are cutting it with ‘fetty’ (fentanyl).” Overall, participants reported that the quality of powdered cocaine has remained the same during the past six months.

Powdered Cocaine	Cutting Agents Reported by Crime Lab	
	<ul style="list-style-type: none"> ● atropine (prescription heart medication) ● caffeine ● levamisole (livestock dewormer) ● local anesthetics (benzocaine, lidocaine and procaine) ● mannitol (diuretic) ● phenacetin (banned analgesic) 	

Reports of current prices for powdered cocaine were variable among participants with experience buying the drug. Reportedly, the most common quantities of purchase are a gram and 1/8 ounce (aka “eight ball”). Participants shared: “[Price] depends on whether you’re using it or selling it; You can get it cheaper, but it’s going to be cut.” Overall, participants reported that the price of powdered cocaine has increased during the past six months. A participant stated, “Prices have definitely gone up in the last six months.”

Powdered Cocaine	Current Street Prices for Powdered Cocaine	
	A gram	\$60-100
	1/16 ounce (aka “teener”)	\$100-120
	1/8 ounce (aka “eight ball”)	\$150-160

Participants reported that the most common route of administration for powdered cocaine remains snorting. Participants estimated that out of 10 powdered cocaine users, all 10 would snort the drug. Participants emphasized: “They’d all snort it; I’ve never smoked it or done anything besides snort it; Everyone I know snorts it.”

Participants described typical powdered cocaine users as of middle to upper socio-economic status as well as people who work long hours and need to stay awake.

Participants discussed: “Cocaine’s expensive, so you gotta have a good job to support that habit; It’s a rich man’s drug; Truck drivers, waitresses, lawyers; I know a lot of nurses that do it, they have long shifts.” Community professionals described typical powdered cocaine users as white people, 30-40 years of age. A treatment provider summarized, “Caucasians are more inclined to use powdered cocaine ... suburban, white ... business people.”

Crack Cocaine

Crack cocaine remains highly available in the region. Participants most often reported the drug’s current availability as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common score was also ‘10.’ Participants declared: “I don’t know if it’s because I look like an addict, but anytime I go to the gas station, it’s, ‘Hey I got that ‘hard’ (crack cocaine);’ Every ‘dope’ (heroin) dealer I ever knew always had ‘crack’ (crack cocaine) on them, too; There’s still four or five ‘dope boys’ (drug dealers) on my block that I used to grab [crack cocaine] from ... it wouldn’t take a whole lot of effort to get it if I wanted it.”

Treatment providers most often reported the current availability of crack cocaine as ‘10,’ while law enforcement most often reported it as ‘4;’ the previous most common scores were ‘10’ and ‘8,’ respectively. Treatment providers explained: “It’s easy to get; Drive down the right street and make eye contact, use the universal sign, chin up. If someone is looking for crack, it’s in the inner city, urban areas...” A law enforcement representative stated, “We haven’t come across it too much recently ... now we’re seeing a lot of ‘meth’ (methamphetamine)....”

Corroborating data indicated that crack cocaine is available in the Cleveland region. ODPS reported seizing 544.8 grams (1.2 lbs.) of crack cocaine from this region in the past six months. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. Cleveland Police Vice Unit raided an apartment and seized 279 grams crack cocaine, 100 grams heroin-fentanyl mixture and four guns; officers arrested a man for drug trafficking (www.cleveland.com, Jan. 31, 2019). Westlake Police (Cuyahoga County) conducted a traffic stop and discovered the passenger with suspected crack cocaine and heroin; after a struggle, law enforcement arrested and charged the passenger with felony drug possession, obstructing official business and

later for bringing prohibited contraband into a jail (www.cleveland.com, May 19, 2019). Lorain County Sheriff's deputies conducted a traffic stop and arrested an individual for driving under suspension; while being booked, law enforcement recovered \$1,448 from a pocket and two baggies of suspected crack cocaine and fentanyl from the driver's rectum, which the driver tried to conceal and destroy, resulting in the exposure of six people to the suspected fentanyl; officers charged the driver with assault on a police officer, tampering with evidence, possession of crack cocaine and driving under suspension (www.news5cleveland.com, May 30, 2019). Westlake Police conducted a traffic stop where the driver had two active arrest warrants and a K-9 unit alerted to possible drugs inside the vehicle; officers found a pipe the driver admitted to using with crack cocaine; officers arrested the driver and later found she smuggled suspected crack cocaine into the jail which resulted in police charging her with felony conveyance of contraband into a detention facility along with possession of crack cocaine and drug paraphernalia (www.cleveland.com, May 30, 2019).

Participants and community professionals reported that the availability of crack cocaine has remained the same during the past six months. Participants remarked: *"Crack ain't goin' nowhere; It won't go nowhere because it's too easy to make money off of. I'm going to sell you 20 bucks [worth of crack cocaine] and you're going to be back in ten minutes [for more crack cocaine due to the drug's short-lived high]."* Law enforcement commented: *"It's on every corner; It's always been pretty available, so I would say it's probably the same."* BCI crime labs reported that the incidence of cocaine cases they process from this region has decreased during the past six months, while Lake County Crime Lab reported that the incidence of cocaine cases it processes has increased. The labs do not differentiate between powdered and crack cocaine.

Crack Cocaine	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No change

Participants most often rated the current overall quality of crack cocaine as '8' on a scale of '0' (poor quality,

"garbage") to '10' (high quality); the previous most common score was '7.' Participants observed: *"It really depends on how it's cut; It depends on who you get it from, there's a lot of garbage out there; I get it from the same people ... sometimes they would cook it in my kitchen ... it was good quality."* Participants reported that crack cocaine in the region is most often adulterated (aka "cut") with baby laxatives, baking soda and fiber. Overall, participants reported that the quality of crack cocaine has remained the same during the past six months.

Crack Cocaine	Cutting Agents Reported by Crime Lab	
		atropine (prescription heart medication)
		caffeine
		levamisole (livestock dewormer)
		local anesthetics (benzocaine, lidocaine and procaine)
		mannitol (diuretic)
	phenacetin (banned analgesic)	

Reports of current prices for crack cocaine were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is a gram. Participants concluded: *"That's how they buy it on the street, they buy it by the gram; Some people do it by the gram, some people do it by the 'stone' (piece, aka 'rock'); Each dope boy is a little different on what they give; There's a lot [of dope boys] that just pull it out the bag and hand it to you."*

Crack Cocaine	Current Street Prices for Crack Cocaine	
	1/10 gram (aka "rock")	\$10-20
	1/2 gram	\$40-45
	A gram	\$50-100
1/8 ounce (aka "eight ball")	\$180	

Participants reported that the most common routes of administration for crack cocaine are smoking and intravenous injection (aka "shooting"). Participants estimated that out of 10 crack cocaine users, five would smoke and five would shoot the drug. Participants discussed: *"Crack is a smokable thing, that's why they say,*

'smoke crack' ... they don't say, 'snort crack' ... 'eat crack'; The crowds I hung out with, most would smoke it. I personally would shoot it or smoke it; If you shoot it, you'd still smoke it; It's not water soluble, so you need vinegar, lemon juice, or for some reason Kool-Aid® breaks it down [for injection]; I knew more people that smoked it, and then they'd shoot it.'

Participants and treatment providers described typical crack cocaine users as living in urban areas and of low socio-economic status. Participants added: *"They come in all ages, from twelve [years of age] on up; Definitely an inner-city drug; They call it, 'the poor people's drug.'" Law enforcement commented: "We're not seeing [a typical user] at all; Crack cocaine is probably more the African-American race, although ... definitely white males and females [also use crack cocaine]."*

Heroin

Heroin remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Participants emphasized: *"[Heroin] is everywhere; It's readily available."* Treatment providers most often reported current availability of heroin as '10,' while law enforcement most often reported it as '9,' the previous most common scores were also '10' and '9,' respectively. One treatment provider discussed, *"In this area, there's a high overdose rate ... [heroin is] on every corner."* A law enforcement representative added, *"If you define availability as waiting 20 minutes for someone to bring it [to you], I think it's pretty easy."* However, although reporting current high availability of heroin, participants and community professionals noted that available heroin typically contains fentanyl or is fentanyl. One treatment provider stated, *"Most of the people say that heroin hardly exists ... it's all fentanyl now."* A law enforcement officer reported, *"We see a lot more fentanyl and the carfentanil, we rarely see straight heroin anymore."* One participant explained, *"As consumers, you could ask for heroin, but for the most part, you're getting fentanyl regardless now."*

Corroborating data indicated that heroin is available in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 27.8% of the 306 drug-

related deaths it processed during the past six months involved heroin; 92.9% of these heroin cases also involved fentanyl. ODPS reported seizing 1.4 kilograms (3.2 lbs.) of heroin from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. OSHP conducted a traffic stop that resulted in a high-speed car chase where the driver jumped out of the car and was pursued and caught on foot while a passenger fled the scene; law enforcement seized heroin, cocaine, marijuana and a gun from the car (www.news5cleveland.com, Jan. 8, 2019). Cleveland narcotics detectives arrested and charged a drug dealer with involuntary manslaughter after a man died from a fatal dose of fentanyl and heroin supplied by the dealer (www.cleveland.com, March 12, 2019). Cleveland's DEA office charged 22 people, part of a drug trafficking ring known as 'Groewood Boys,' for trafficking heroin, fentanyl, other synthetic opioids, powdered and crack cocaine after executing 15 search warrants; investigators shared that the suspects shared cell phones that their customers could call 24/7 to make purchases (www.cleveland.com, March 13, 2019). Richmond Heights Police (Cuyahoga County) responded to an accident where the driver of the wrecked car was under the influence of heroin and required six applications of Narcan® (naloxone, opiate overdose reversal medication) to be revived (www.fox8.com, April 6, 2019). Lorain Police (Lorain County) responded to a call where two men had overdosed and died at an abandoned house; police discovered hundreds, if not thousands, of hypodermic needles in the house (www.news5cleveland.com, April 8, 2019). Westlake Police (Cuyahoga County) responded to a call about a vehicle parked between two houses where they found the driver slumped over his steering wheel with the car running; officers administered Narcan® and the driver confessed to snorting heroin before the incident (www.cleveland.com, May 30, 2019).

While many types of heroin are currently available in the region, participants and community professionals continued to report powdered heroin as most available. Participants stated: *"I feel like every 'dope' (heroin) you buy these days is in a powdered form; I've seen white, pink, gray and brown [powdered heroin]; I'm scared of the white shit, every time I do white [powdered heroin], I overdose; Fentanyl-heroin [mixture] is most popular ... it's white, like powdered sugar."* Law enforcement shared: *"We're mostly*

just seeing the powder ... mostly gray or pink, and some white; I haven't seen 'tar' (black tar heroin) in a long time."

Participants and community professionals reported that the availability of heroin has remained the same during the past six months. BCI Crime Labs reported that the incidence of heroin cases they process from this region has decreased during the past six months, while Lake County Crime Lab reported that the incidence of heroin cases it processes has increased. The labs reported processing beige, blue, brown, gray, pink, purple, tan and white powdered heroin as well as black tar heroin.

Heroin	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No change

Participants most often rated the current overall quality of heroin as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '10.' Participants explained that their high-quality scores were reflective of the high potency of heroin with fentanyl. They said: *"Fentanyl makes the heroin a lot stronger; You know they have those strips (fentanyl test strips) now, you put it in there and see if [your heroin] has fentanyl... [If it does contain fentanyl], I'll limit my dose; You cannot get pure heroin right now. It's all cut up with fentanyl, that's why so many people are dying."* However, some participants were conflicted over the quality of heroin when fentanyl is used as a "cut" (adulterant). Participants shared: *"[Heroin mixed with fentanyl makes the quality] worse, it makes the high more intense, but it makes it more dangerous and shortened ... you don't feel the high for as long; People are interpreting death ratios as better 'buzzes' (highs), it's not."*

Participants discussed adulterants that affect the quality of the drug and continued to report the top cutting agent for heroin as fentanyl. Additional cuts mentioned included: baby laxatives, Benadryl®, carfentanil, lactose, mannitol (diuretic), melatonin, quinine (antimalarial), Seroquel® (antipsychotic), Sleepinal®, sugar and trazodone (sedative and antidepressant). Overall, participants

reported that the quality of heroin has remained the same during the past six months.

Heroin	Cutting Agents Reported by Crime Lab	
	<input type="checkbox"/>	acetaminophen
	<input type="checkbox"/>	caffeine
	<input type="checkbox"/>	cocaine
	<input type="checkbox"/>	diphenhydramine (antihistamine)
	<input type="checkbox"/>	fentanyl
	<input type="checkbox"/>	lidocaine (local anesthetic)
	<input type="checkbox"/>	mannitol/inositol/sorbitol (artificial sweeteners)
	<input type="checkbox"/>	methamphetamine
	<input type="checkbox"/>	papaverine (vasodilator)
<input type="checkbox"/>	quinine (antimalarial)	
<input type="checkbox"/>	tramadol	
<input type="checkbox"/>	xylazine (animal sedative)	

Reports of current prices for heroin varied among participants with experience purchasing the drug. Participants discussed: *"[Price] depends on who you get it from and where; The dude that I get it from, he charges most people \$20 a bag, I get two [bags] for \$20, so it just depends on who you are and who you're going through."* Reportedly, the most common quantity of heroin purchase is a gram. However, a participant noted, *"The people I knew that were selling it never weighed it, they just kind of sifted it into a piece of paper or something and folded it up and handed it to you, it was never weighed."*

Heroin	Current Street Prices for Heroin	
	Powdered:	
	1/10 gram (aka "point")	\$10-20
	1/2 gram	\$30-80
	A gram	\$60-120

The most common route of administration for heroin remains intravenous injection (aka "shooting"). Participants estimated that out of 10 users, eight would shoot and two would snort the drug. Participants noted: *"Most common is shooting it; There's that small percentage of people are chasing that dragon' smoking it; I would say two would snort it, everyone else would shoot it. I don't see anyone smoking it."*

A profile of a typical heroin user did not emerge from the data. Participants and community professionals described typical heroin users as anyone. Participants said: *"It varies; Anybody could be one; [Heroin] is super not discriminative."* Treatment providers observed: *"In a treatment center, you really see all ages and races; Nobody is immune, but the typical [age] right now is maybe between 20 to 35 [years]."* Law enforcement concluded: *"We've seen all of it, we have young adults and we have older people. We just had a sixty-year old overdose, so it's everyone; As far as race and socio-economic class and everything else, it's a hodge-podge ... we've had as young as 17 [years of age] ... and the oldest was in their sixties."*

Fentanyl



Fentanyl remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get);

the previous most common score was also '10.'

Participants maintained: *"No problem getting it, just make a phone call; Heroin is harder to find; Most of us are getting fentanyl; It's cheaper for to buy [fentanyl], and it's stronger so they can cut it more; There is no drug that is not laced with fentanyl right now."* One participant summarized, *"These days it's just fentanyl and carfentanil. There's no real heroin on the streets...."* Treatment providers most often reported the current availability of fentanyl as '10,' while law enforcement most often reported it as '8,' the previous most common scores were '10' and '6-7,' respectively. A treatment provider added, *"Now they're just asking for and getting fentanyl (users prefer fentanyl)."*

Corroborating data indicated that fentanyl is available in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 72.5% of the 306 drug-related deaths it processed during the past six months involved fentanyl/fentanyl analogues. In addition, ODPS reported seizing 1.5 kilograms (3.2 lbs.) of fentanyl from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Cuyahoga

County Sheriff's Office seized a package with more than two pounds of fentanyl at a United Parcel Service hub and reached out to federal authorities who assisted in a controlled delivery of the package resulting in the arrest of a California man, charging him with possession with intent to distribute controlled substances (www.cleveland.com, Jan. 15, 2019). Lake County General Health District reported the discovery of more than 250 blue fentanyl-laced pills mimicking prescription oxycodone in that county (www.news5cleveland.com, March 4, 2019). Northern Ohio Law Enforcement Task Force in Cuyahoga County conducted an investigation that led to the indictment of 21 people for drug conspiracy, distribution of heroin and opioids, several weapons charges, money laundering and use of a cellphone to commit drug offenses; during the investigation, law enforcement found two people sold a mix of heroin, fentanyl, carfentanil and acetyl fentanyl that led to an overdose and seized \$44,000, six guns and ammunition (www.cleveland.com, April 25, 2019). Federal agents in Cuyahoga County determined a man still serving prison time in a halfway house had three-quarters of a pound worth of blue pills laced with fentanyl shipped to Ohio; agents arrested the man for attempted possession with intent to distribute fentanyl and for possession of crack and powdered cocaine, heroin, marijuana and prescription pills (www.cleveland.com, May 23, 2019).

Participants reported that the availability of fentanyl has remained the same during the past six months, while community professionals reported increased availability. Treatment providers confirmed: *"We have a lot of people testing positive for fentanyl now; Increased, now they're putting it into the cocaine, too; People are testing positive for cocaine and fentanyl."* Law enforcement determined: *"I think it's become more available [because of] popularity, you just need a little bit, you can get it from China, it's cheap ... it's readily available; We are a lot more hesitant and more careful of dealing with any kind of drugs because they have the possibility of being fentanyl."* BCI and Lake County crime labs reported that the incidence of fentanyl and fentanyl analogue cases they process from this region has increased during the past six months. BCI crime labs reported that they did not process any cases of carfentanil from this region during the past six months, while Lake County Crime Lab reported having processed only one case of carfentanil.

Fentanyl	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	Increase
	 Treatment providers	Increase

Participants most often rated the current overall quality of fentanyl as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '8.' However, a participant clarified, "[Quality is a '10' if you] get it before it's 'cut' (adulterated) ... you gotta get it before it's been passed through 12 different hands." Participants discussed adulterants (aka "cuts") that affect the quality of the drug and continued to report the top cutting agent for fentanyl as heroin. An additional cut mentioned was sugar. Overall, participants reported that the quality of fentanyl has remained the same during the past six months.

Reports of current prices for fentanyl were variable among participants with experience purchasing the drug. Reportedly, the most common quantities of purchase are 1/2 gram and a gram.

Fentanyl	Current Street Prices for Fentanyl	
	1/10 gram	\$10
	1/2 gram	\$30-70
	A gram	\$60-120

The most common route of administration for fentanyl remains intravenous injection (aka "shooting"). Participants estimated that out of 10 fentanyl users, eight would shoot and two would snort the drug. A participant stated, "It's the same as heroin."

Participants and community professionals described typical fentanyl users as heroin users. However, treatment providers noted fentanyl use among young people in particular. One provider shared, "For the fentanyl, they're younger ... 18, 29, 30 [years of age] ... they jumped doing all that other stuff, ... and now going straight to fentanyl." Law enforcement officer noted, "In my experience, tends to be white and Latino populations, also 30s to 40s [in age] and then low to working class for sure, not to say the higher

echelons don't use, it's just not what I commonly run into at work."

Prescription Opioids

Prescription opioids remain available for illicit use in the region. Participants most often reported the current street availability of these drugs as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '8.' Participants commented: "I know plenty of people that sell their 'scripts' (prescription opioids); Getting them off the street, that'd be really easy out here; Most dope boys that sell crack or heroin usually have pills, too...." Treatment providers most often reported the current street availability of prescription opioids as '3,' while law enforcement most often reported it as '6,' the previous most common scores were '3' and '5,' respectively. Law enforcement concluded: "They're putting the restrictions on the doctors for over prescribing ... so it's not as easy to go to a doctor and get a script [as previously]; [Prescription opioids are] pretty available ... it depends on the prescription; We all have access from someone who has them prescribed."

Corroborating data indicated that prescription opioids are available for illicit use in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 11.8% of the 306 drug-related deaths it processed during the past six months involved prescription opioids. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. Olmsted Falls Police (Cuyahoga County) searched for a man suspected of at least two pharmacy armed robberies, where he demanded prescription opioids (www.cleveland.com, Jan. 8, 2019). Cuyahoga County Sheriff's deputies conducted an investigation at a jail after a drug overdose that resulted in the arrest of a Cuyahoga County Jail officer after deputies witnessed the officer selling opioids to an inmate; deputies seized oxycodone, heroin, cellphone batteries, vape pens and \$1,409 from the officer and charged him with corrupting another with drugs, bribery, fentanyl trafficking, and obstructing justice (www.cleveland.com, May 16, 2019).

Participants and community professionals identified Percocet® as the most popular prescription opioid in terms of widespread illicit use. A participant stated, "I used to tell doctors I was allergic to Vicodin® so they would give

me Percocet®." A treatment provider shared, "Percocet®, OxyContin®, those are probably the ones I've heard most in this area." A law enforcement officer added, "Norco®, oxycodone and OxyContin®, Percocet® are on the street."

Participants also reported counterfeit prescription opioids containing fentanyl as currently available in the region. Participants discussed: "I know someone who thought they were taking a Percocet® and they tested positive for fentanyl; I can get [a pill press] right now for \$20, you put whatever powder you want in it; [People are pressing pills with] fentanyl, you break down a white Tylenol®, you put some fentanyl in the middle of it and you press ... that's why I got out of the pill game."

Participants and law enforcement reported that the general availability of prescription opioids has remained the same during the past six months, while treatment providers reported that availability has decreased. Treatment providers explained: "On the streets, they're less available that's why so many people have transferred over to heroin; With a prescription it's becoming more difficult, anybody that goes to a hospital these days that has a history of documented addiction, heroin addiction, they don't want to give them pain medication...."

BCI crime labs reported that the incidence of hydrocodone (Vicodin®) and tramadol (Ultram®) cases they process from this region has increased during the past six months, while the incidence of morphine and oxycodone (OxyContin®, Percocet®) cases has decreased or remained the same. BCI labs reported processing very few cases of hydromorphone (Dilaudid®), methadone and oxymorphone (Opana®). Lake County Crime Lab reported increased incidence of tramadol cases, while the incidence of oxycodone cases has decreased during the past six months. The lab processed few to no cases of oxycodone with acetaminophen (Percocet®), hydrocodone, methadone, morphine, oxymorphone and hydromorphone.

Prescription Opioids	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	Decrease

Reports of current street prices for prescription opioids were consistent among participants with experience buying the drugs. Reportedly, the majority of prescription opioids sell for \$1-2 per milligram. Overall, participants indicated that the street prices of prescription opioids have increased during the past six months. A participant stated, "That's why we went to heroin ... it's way cheaper [than buying prescription opioids on the street]."

Prescription Opioids	Current Street Prices for Prescription Opioids	
	methadone	\$1 per milligram
	OxyContin® OP	\$10 for 10 mg \$50 for 80 mg
	Percocet®	\$9-10 for 5 mg \$12-13 for 7.5 mg \$15-17 for 10 mg
	Roxicodone®	\$35 for 30 mg
	Tramadol	\$1-2 per pill
	Vicodin®	\$1-2 per milligram

Participants reported obtaining prescription opioids for illicit use from drug dealers, doctors and persons with prescriptions for them. While there were a few reported ways of consuming prescription opioids, generally the most common route of administration for illicit use is intravenous injection (aka "shooting"). Participants estimated that out of 10 illicit prescription opioid users, five would shoot, four would snort, and one would orally consume the drugs. Participants commented: "You can snort them or take them orally; When I was doing it, I would snort it and eat one; I would preferably inject. I would take by mouth if I didn't have [shooting] utensils...."

A profile of a typical illicit prescription opioid user did not emerge from the data. A treatment provider shared, "I don't know ... younger, stealing out of grandma's cabinet, 20s to 30s. I keep hearing there's a lot of elderly people addicted to their medicines now, but I never really had any in treatment." Law enforcement stated: "White people, a little more well off; That's a tough one because the age range is so broad. I've seen young people use them, college kids use them, working class.... It's a broad spectrum of ethnicities, races and socio-economic class."

Suboxone®

Suboxone® (buprenorphine) remains moderately to highly available for illicit use in the region. Participants most often reported the current street availability of Suboxone® as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '10.' Participants remarked: *"I'd say it's pretty easy to get; I have a friend of a friend who is in treatment and sells [Suboxone®]."* Treatment providers most often reported the current street availability of Suboxone® as '10,' while law enforcement most often reported it as '1;' the previous most common score was '6' for both treatment providers and law enforcement. Treatment providers noted: *"There are a lot of people selling it; A lot of them ... use a minimum for themselves and sell the rest..."* Law enforcement commented: *"We haven't been seeing it and none of our informants have mentioned buying it; I've run into it a little bit..."*

Participants and community professionals reported that the availability of Suboxone® for illicit use has remained the same during the past six months. BCI and Lake County crime labs reported that the incidence of Suboxone® cases they process from this region has slightly increased during the past six months.

Suboxone®	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No change

Reports of current street prices for Suboxone® were consistent among participants with experience buying the drug. Reportedly, Suboxone® 8 mg most often sells for \$10-20. Participants commented: *"Most people that use heroin know where to get it from; \$10-12 a 'strip' (sublingual filmstrip)."*

The most common routes of administration for illicit use of Suboxone® remain oral consumption and snorting. Participants estimated that out of 10 illicit Suboxone® users, five would orally consume and five would snort the drug. Participants did not identify a typical illicit Suboxone® users. However, community professionals described

typical illicit users as similar to heroin users. A treatment provider noted, *"[Heroin users] like to use them to avoid withdrawal whenever they can't get the opioids."* A law enforcement representative shared, *"It's basically the same as the heroin user because it's a treatment for heroin addiction."*

Sedative-Hypnotics

Sedative-hypnotics (benzodiazepines, barbiturates and muscle relaxants) are moderately available for illicit use in the region. Participants most often reported the current street availability of these drugs as '7' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '8.' One participant emphasized, *"If you wanted it, you'd know where to get it."* Treatment providers most often reported the current street availability of sedative-hypnotics as '5,' while law enforcement most often reported it as '4;' the previous most common scores were '8' and '4,' respectively. A treatment provider shared, *"'Benzos' (benzodiazepines) are a problem ... you get tested (drug screen positive) with benzo, you would get kicked out of the program. They can't come into treatment on it... Most heroin addicts seek benzos ... these are easier to get from the doctors [than opioids]."* Law enforcement confirmed: *"I'm sure it's out there, we're just not seeing it; All depends on who you know, what kind of community you live in ... college towns ... it would be a little easier [to obtain illicit sedative-hypnotics]."*

Corroborating data indicated that sedative-hypnotics are available for illicit use in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 15.4% of the 306 drug-related deaths it processed during the past six months involved one or more benzodiazepine or other sedative-hypnotic. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. Ashland Police (Ashland County) arrested a person on an outstanding warrant for aggravated drug trafficking of methamphetamine and found they were in possession of Xanax®, methamphetamine, heroin, marijuana and several items related to drug trafficking and paraphernalia (www.wmfd.com, March 26, 2019).

Participants identified Klonopin® and Xanax® as the most available sedative-hypnotics in terms of widespread illicit use. Community professionals identified Ambien® and Xanax® as most available. Law enforcement confirmed: *"[We're seeing] Ambien® for sure; We're running into Xanax®"*

a lot; We all know someone who has Xanax® prescribed to them for some reason, we can all reach out to them like, 'Hey, can I get some 'xanies' (Xanax®)?'"

Participants reported that the street availability of sedative-hypnotics has decreased during the past six months. Participants commented: *"More restrictions and guidelines and they're monitoring the prescription counts; People aren't getting scripts like they used to."* Community professionals reported that the availability of sedative-hypnotics has remained the same during the past six months. A treatment provider declared, *"[Availability has] stayed the same ... it's a pretty high ease of access."*

BCI crime labs reported that the incidence of alprazolam (Xanax®) cases they process from this region has slightly increased during the past six months, while the incidence of clonazepam (Klonopin®), diazepam (Valium®) and lorazepam (Ativan®) cases has decreased or remained the same. BCI labs reported processing very few cases of carisoprodol (Soma®) and zolpidem (Ambien®) from this region during the past six months. Lake County Crime Lab reported that the incidence of alprazolam cases it processes has increased during the past six months, while the incidence of clonazepam and diazepam cases it processes has decreased or remained the same during the past six months. Lake County Crime Lab reported few cases of carisoprodol, lorazepam and zolpidem; in addition, the lab reported that it processed three cases of designer benzodiazepines.

Sedative-Hypnotics	Reported Availability Change during the Past 6 Months	
	 Participants	Decrease
	 Law enforcement	No change
	 Treatment providers	No change

Reports of current street prices for sedative-hypnotics were consistent among participants with experience buying the drugs. However, a participant remarked, *"[Price] depends on how many pills you buy."* Participants reported obtaining sedative-hypnotics for illicit use from drug dealers, doctors and persons with prescriptions for them. A participant noted, *"It's usually somebody you know who has a script or you get your own script."*

Sedative-Hypnotics	Current Street Prices for Sedative-Hypnotics	
	Valium®	\$2-3 for 10 mg
	Xanax®	\$1-2 for 1 mg \$6 for 3 mg

The most common routes of administration for illicit use of sedative-hypnotics remain oral consumption and snorting. Participants estimated that out of 10 illicit sedative-hypnotic users, five would orally consume and five would snort the drugs. Participants commented: *"I used to 'pop' (swallow) mine and then I used to snort them; Anytime that I've ever done pills, we always grinded them down and snorted them."* A profile of a typical illicit sedative-hypnotic user did not emerge from the data. One participant observed, *"All races, all ages [use them]...."*

Marijuana



Marijuana remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Participants shared: *"You can get 'weed' (marijuana) anywhere; It's no longer a jailable offense to just have a bag of weed on you; People grow it; It's all over people's yards, basements."* Treatment providers most often reported the current availability of marijuana as '10,' while law enforcement most often reported it as '9,' the previous most common scores were '10.' A treatment provider emphasized, *"They're legalizing it and ... people that never smoked it will want to try it because it's a cure for everything now. It's perceived as this wonderful miracle drug ... everybody wants to try marijuana."* A law enforcement officer noted, *"Everybody has it. When I worked traffic, almost every car I stopped had it."*

Participants and community professionals also discussed current availability of high-grade marijuana extracts and concentrates, often appearing as oil and waxy forms of the drug (aka "dabs"). Participants most often reported the current availability of marijuana extracts and concentrates as '10,' the previous most common score was also '10.' Participants confirmed: *"With the invention of medicinal use,*

the oils have become available and now the vapes (vaping pens or e-cigarettes) is real big; It's convenient [to vape]; Everybody I see now has the vape cartridges." Community professionals most often reported the current availability of marijuana extracts and concentrates as '8'; the previous most common scores were not reported. Law enforcement declared: *"We are dealing a lot with those, a lot of the vapes, the THC (tetrahydrocannabinol oils, dabs), the 'edibles' (food products made with THC oil), we get a ton of it; It's becoming more and more common and more popular, we're finding it on the streets ... it's a step up from marijuana."*

Corroborating data indicated that marijuana is available in the Cleveland region. ODPS reported seizing 772.4 kilograms (1,703.0 lbs.) of marijuana from this region in the past six months. Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Brooklyn Police (Cuyahoga County) conducted a traffic stop, detected the smell of marijuana from the stopped car and arrested the driver; the driver admitted to smoking a "blunt" (marijuana-filled cigar) while driving and driving while having a suspended license (www.cleveland.com, Jan. 16, 2019). Cleveland Police arrested a mother for child endangerment after her son took marijuana-laced gummies to school and gave them to 14 classmates between the ages of five and nine years (www.cleveland.com, Feb. 5, 2019). OSHP in Cuyahoga County seized 60 pounds of marijuana worth approximately \$84,000 during a traffic stop; troopers arrested the driver for possession and trafficking in marijuana (www.statepatrol.ohio.gov, Feb. 27, 2019). Cuyahoga County Sheriff's deputies were alerted to a strong odor coming from corrections officers' lockers where they found marijuana and cited an officer with misdemeanor marijuana possession; the officer was placed on paid administrative leave (www.cleveland.com, March 5, 2019). Parma Heights Police (Cuyahoga County) were dispatched to a disturbance due to a couple in a verbal disagreement; officers found the man in possession of marijuana and cited him for drug abuse and causing a disturbance (www.cleveland.com, March 13, 2019). Parma Heights Police observed a car without headlights on and when they pulled the driver over they smelled marijuana and found a marijuana blunt and THC oils; the officer cited the driver for drug abuse and driving without headlights (www.cleveland.com, March 13, 2019). Willowick Police (Lake County) investigated a delivered package addressed to the actor Leonardo DiCaprio that contained about two pounds of marijuana and suspected heroin

(www.fox8.com, March 15, 2019). Westlake Police (Cuyahoga County) conducted a traffic stop and detected the smell of marijuana; officers found drug paraphernalia and more than a pound of marijuana in both edible and plant forms, officers arrested the driver for possession of marijuana, drug paraphernalia and carrying various weapons (www.patch.com, March 18, 2019). U.S. DEA agents in Cuyahoga County seized over 15,000 THC vaping cartridges (www.news5cleveland.com, April 23, 2019). The following month, DEA agents seized additional cartridges totaling 23,000 THC vaping cartridges and arrested three men for conspiracy and possession with intent to distribute THC; agents also seized nearly \$1.5 million (www.cleveland.com, May 9, 2019). Medina County Drug Task Force conducted an investigation of a high school student who became ill from THC gummies that resulted in the seizure of over 13 pounds of edibles containing THC; officers arrested a woman for drug possession, drug trafficking and corrupting another with drugs; law enforcement confirmed the woman had an Ohio medical marijuana card and she purchased the edibles in Michigan (www.cleveland19.com, May 20, 2019). Brecksville Police (Cuyahoga County) conducted a traffic stop after observing speeding and two different license plates on a vehicle with one being reported stolen one month earlier; officers also found a bag of marijuana and charged the driver with receiving stolen property, drug abuse, speeding and driving with a suspended license (www.cleveland.com, May 29, 2019). North Royalton Police (Cuyahoga County) conducted a traffic stop for speeding and observed a weapon and suspicious behavior that resulted in a vehicle search and seizure of a hidden container of marijuana; law enforcement cited the driver for drug abuse, speeding and possession of drug paraphernalia (www.cleveland.com, June 5, 2019). Bentleyville Police (Cuyahoga County) conducted a traffic stop for speeding, seized a two-gram bag of marijuana, citing the driver for a minor misdemeanor (www.cleveland.com, June 7, 2019). Westlake Police rescued a 14-month-old child who was locked in a vehicle and observed marijuana in plain sight that resulted in law enforcement charging the father, who reportedly forgot the child was in the car, with child endangerment and possession of marijuana (www.news5cleveland.com, June 11, 2019).

Participants and law enforcement reported that the availability of marijuana has remained the same during the past six months, while treatment providers reported increased availability of marijuana. A treatment provider

remarked, "It has probably increased just because of the legal aspect and the stigma has come off of it..."

Participants and community professionals indicated that the availability of marijuana extracts and concentrates has increased during the past six months. Participants stated: "[Dabs are] becoming more popular; I know people who are getting it mail ordered from out of the states ... from Canada; The oils are definitely increasing." A treatment provider commented, "Concentrates have increased, too, probably because everybody is curious." BCI crime labs reported that the incidence of cannabis (including edible cannabis) cases they process from this region has decreased during the past six months, while the incidence of concentrated THC (oils, "dabs") cases they process has increased. Lake County Crime Lab reported that the incidence of cannabis and concentrated THC cases it processes has decreased during the past six months.

Marijuana	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	Increase
	 Treatment providers	Increase

Participants most often rated the current overall quality of marijuana as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '10.' One participant said of the potency of dabs: "You can take a couple hits of dabs and be good ... versus smoking weed, you need less [of the dabs]." Overall, participants indicated that the quality of marijuana has remained the same during the past six months.

Reports of current prices for marijuana were provided by participants with experience buying the drug. Reportedly, the most common quantities of purchase are a gram and 1/4 ounce; the most common quantity of purchase for marijuana extracts and concentrates is a gram. Participants explained: "[Amount of purchase] depends. If you just want to smoke, you get a gram; For extracts, [the most common unit] is either a gram or one of the cartridges." Overall, participants reported that the price of marijuana has remained the same during the past six months.

Marijuana	Current Street Prices for Marijuana	
	A blunt (cigar)	\$5-10
	A gram	\$10-20
	1/8 ounce	\$25-45
	1/4 ounce	\$50-75
	1/2 ounce	\$60-125
	An ounce	\$120-200
	Extracts and concentrates:	
	A gram	\$30-60
	A cartridge	\$45-50

Participants reported obtaining marijuana from drug dealers. A participant shared, "A lot of people grow it, a lot of people buy it. We're not getting it from a dispensary, no one is." The most common route of administration for marijuana remains smoking/vaping. Participants estimated that out of 10 marijuana users, nine would smoke/vape and one would orally consume the drug. Participants stated: "I've smoked it, I ate it; I think people prefer smoking for the ritual behind it; It depends on what kind of high you want to get, they're two different highs... Edible is more of a body high..."

A profile for a typical marijuana user did not emerge from the data. Participants determined: "Everybody uses it; Any income level, any race; I feel like everybody smokes it." A treatment provider declared, "That, I can say is all ages, I couldn't [describe a typical marijuana user], especially now that it's so ... accepted ... it's anybody and everybody." Law enforcement explained: "It's young, old, homeless to people that are well off; Everybody, it doesn't matter if you're black or white... I'm not saying everybody that I pull over, but a lot of them." Participants and community professionals described typical marijuana extract and concentrate users as young people, including high-school aged adolescents. A law enforcement officer said, "More the younger crowd ... like 16 to 30 [years of age]."

Methamphetamine



Methamphetamine remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to

get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Participants discussed that the ease of availability of methamphetamine is due to high demand for the drug which is driven by its low cost and high potency. Participants commented: *"'Ice' (crystal methamphetamine) is a lot cheaper now [than heroin]; Once you've done 'meth' (methamphetamine), you don't even wanna do crack anymore."* Treatment providers reported the current availability of methamphetamine as '5,' while law enforcement most often reported it as '7,' the previous most common scores were '4' and '6,' respectively. A treatment provider observed, *"I'm really just starting to see an increase in people reporting using meth."*

Corroborating data indicated that methamphetamine is available in the Cleveland region. Cuyahoga County Medical Examiner's Office reported that 5.6% of the 306 drug-related deaths it processed during the past six months involved methamphetamine. In addition, ODPS reported seizing 8.0 kilograms (17.7 lbs.) of methamphetamine from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Ashland Police (Ashland County) investigated a child abuse case that resulted in the seizure of methamphetamine, drug paraphernalia, a gun and the removal of children from a home; officers arrested the children's parents for drug possession, weapons violations, tampering with evidence and child endangerment; in a separate case, Ashland Police investigated a report of a runaway juvenile, when they later found the juvenile in a residence with evidence of drug use that resulted in a search warrant being executed and the seizure of methamphetamine and drug paraphernalia, officers arrested two individuals; in another case, Ashland Police investigated numerous complaints of drug trafficking at a trailer park where officers arrested one male after seizing suspected methamphetamine, drug paraphernalia and a gun (www.wmfd.com, March 26, 2019). Westlake Police (Cuyahoga County) conducted a traffic stop and arrested a driver after seizure of methamphetamine, marijuana, loose pills and drug paraphernalia (www.patch.com, March 29, 2019). U.S. postal inspectors flagged a package that a Cuyahoga County Sheriff's K-9 officer alerted to; officers arranged for a controlled delivery where a woman used a fake name and accepted the package that was found to have 14 ounces of methamphetamine pills;

law enforcement charged the woman with possession with intent to distribute methamphetamine (www.cleveland.com, April 11, 2019). Solon Police (Cuyahoga County) conducted a traffic stop after observing erratic driving and found the driver had a suspended out-of-state license and placed him in custody; law enforcement seized 7.2 grams of methamphetamine, a pipe and scales, charging the driver with driving under suspension, drug possession and not wearing a seatbelt while the front seat passenger was charged with possession of drugs, possession of drug paraphernalia, obstructing official business and not wearing a seatbelt (www.patch.com, April 15, 2019). Wickliffe Police (Lake County) were conducting a drug investigation where they witnessed a drug deal and arrested both parties; officers arrested one man with possession of methamphetamine and the other with trafficking in methamphetamine, possession of methamphetamine, tampering with evidence, possession of criminal tools and resisting arrest (www.news5cleveland.com, May 5, 2019). U.S. Department of Justice in Cuyahoga County filed a nine-count indictment against four people connected to a drug ring; all four people were charged with possession with intent to distribute methamphetamine, after they were found to have been trying to sell 16 pounds of methamphetamine (www.patch.com, May 27, 2019). Westlake Police conducted a traffic stop for an expired license plate and found the driver to be in possession of drug paraphernalia in addition to three outstanding warrants and driving under suspension; officers seized suspected methamphetamine from the vehicle and charged the man for possession of methamphetamine and drug paraphernalia (www.cleveland.com, May 30, 2019).

Participants and law enforcement reported that methamphetamine is available in crystal and powdered forms throughout the region. However, they continued to note crystal methamphetamine as most prevalent. Law enforcement reported: *"We see both [powdered and crystal methamphetamine], but we have more of the crystal; It's mostly all just coming straight from Mexico, so the clandestine labs down there are making [crystal methamphetamine] in huge batches, bringing it over ... it's dirt cheap and it's more pure [than powdered methamphetamine]."* The powdered form of methamphetamine is typically referred to as "shake-and-bake" or "one-pot" which means users produce the drug in a single-sealed container, such as a two-liter soda bottle. By using common household chemicals along with

ammonium nitrate (found in cold packs) and pseudoephedrine (found in some allergy medications), people who make methamphetamine can produce the drug in approximately 30 minutes in nearly any location.

Participants and law enforcement also discussed the harsher legal penalties for manufacturing powdered methamphetamine compared to the lesser legal penalties for possession of crystal methamphetamine as another reason for user preference for the crystal form. A law enforcement officer summarized: *"With the shake-and-bake, the penalties are higher ... if we catch them with a one-pot lab, they're looking at a felony of the second degree or third degree, which is a good chance you're going to prison.... If you go and buy two grams of meth ... and if you get 'popped' (arrested) with that ... you're looking at probation or intervention in lieu of conviction...."*

Participants reported that the availability of crystal methamphetamine has increased during the past six months, while the availability of powdered methamphetamine has decreased. Community professionals reported that the availability of crystal methamphetamine has remained the same during the past six months, while the availability of powdered methamphetamine has increased or remained the same. A treatment provider noted, *"It's more available ... more reports of clients coming in with reports of using meth...."* A law enforcement representative shared, *"The cartels are flooding the United States with [crystal methamphetamine]."* BCI and Lake County crime labs reported that the incidence of methamphetamine cases they process from this region has increased during the past six months. The labs reported processing blue, brown and white powdered methamphetamine along with crystal methamphetamine during the past six months.

Methamphetamine	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	No change
	 Treatment providers	Increase

Participants most often rated the current overall quality of powdered methamphetamine as '7-8' on a scale of '0' (poor

quality, "garbage") to '10' (high quality); the previous most common score was '7.' However, a participant emphasized, *"[Quality] depends again on who you get it from."* Participants discussed adulterants (aka "cuts") that affect the quality of the drug and reported the following as cutting agents for methamphetamine: bath salts (substituted cathinones) and MSM (methylsulfonylmethane). Overall, participants reported that the quality of methamphetamine has remained the same during the past six months.

Methamphetamine	Cutting Agents Reported by Crime Lab	
	<ul style="list-style-type: none">  dimethyl sulfone (DMSO; dietary supplement)  magnesium sulfate (Epsom salts) 	

Reports of current prices for methamphetamine were consistent among participants with experience buying the drug. Reportedly, the most common amounts of purchase are 1/8 ounce and an ounce. A participant determined, *"There's no reason to buy a half a gram if you can get a gram for \$20."* Overall, participants reported that the price of methamphetamine has decreased during the past six months. A participant stated, *"The price keeps going down for ice."*

Methamphetamine	Current Prices for Methamphetamine	
	Crystal:	
	A gram	\$20
	1/8 ounce	\$75-120
An ounce	\$175-300	

Participants reported that the most common route of administration for methamphetamine is intravenous injection (aka "shooting"). Participants estimated that out of 10 methamphetamine users, five would shoot, four would snort and one would smoke the drug. Participants declared: *"As far as I've witnessed ... half the people would shoot, half the people would smoke and snort it; 'Hot rail' ... you heat up a glass tube, and when it gets hot, you snort it;*

Pretty much 90 percent of the time it's going in my nose; You can eat it, 'parachute' it; Parachuting is when you wrap [methamphetamine] in [tissue] paper [and swallow the bundle], so you don't taste it ... it tastes like shit."

While participants could not provide a profile of a typical methamphetamine user, community professionals described typical users as of low socio-economic status, white, aged 20-40 years of age and rural. Treatment providers stated: *"More rural than inner city; The ones that I've dealt with have all been young, white people, 20s. I'd probably say lower income most of them."* Law enforcement remarked: *"Lower income and almost all white, I would say like 20s to 40s ... we've had some 50-year old's; The poorer people [use methamphetamine], at least that's what we've seen."*

Prescription Stimulants

Prescription stimulants are moderately available for illicit use in the region. Participants most often reported the current street availability of these drugs as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '5.' Participants noted: *"It's harder to get more of it. Once you're out for the month, you're out for the month; I know people who have prescriptions, and doctors have really cut back on them; A lot of people have kids that have ADHD (attention-deficit-hyperactivity disorder) or say that their kids have ADHD ... go to the doctor and get them."* Treatment providers most often reported the current street availability of prescription stimulants as '3,' while law enforcement most often reported it as '5,' the previous most common scores were '9' and '5,' respectively. One treatment provider commented, *"I just don't hear a lot of talk about it or people reporting [illicitly] using it...."*

Participants and community professionals identified Adderall® as the most available prescription stimulant in terms of widespread illicit use. Participants stated: *"All of them [are available], but Adderall® is the most popular; I see Adderall® and Vyvanse® the most."* A treatment provider added, *"Adderall®, that's probably the only one [we hear about], most of them don't like the rest of them, they say they don't work."* A law enforcement officer observed, *"We're seeing a little bit of Adderall®.... We haven't seen a lot of it in the county."*

Participants and law enforcement reported that the street availability of prescription stimulants has remained the same during the past six months, while treatment providers reported decreased availability. A treatment provider explained, *"Decreased, you don't hear about it ... it's not the thing anymore."* BCI crime labs reported processing very few cases of amphetamine (Adderall®), methylphenidate (Ritalin®) and lisdexamfetamine (Vyvanse®) from this region during the past six months. Lake County Crime Lab reported that the incidence of amphetamine (Adderall®) cases it processes has increased during the past six months.

Prescription Stimulants	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	Decrease

Reports of current street prices for prescription stimulants were consistent among participants with experience buying these drugs. However, a participant commented, *"[Price] depends on how much you buy...."* Overall, participants reported that the price of prescription stimulants has increased during the past six months. Participants explained: *"It never used to be that expensive; That's why everyone's doing meth nowadays because [prescription stimulants] are way too expensive; Who needs Adderall® when you can get meth."*

Prescription Stimulants	Current Street Prices for Prescription Stimulants	
	Adderall®	\$10 for 30 mg
	Vyvanse®	\$2-5 for 30 mg

Participants reported obtaining prescription stimulants for illicit use from drug dealers and from persons with prescriptions or whose children are prescribed the drugs. The most common route of administration for illicit use of prescription stimulants remains snorting. Participants estimated that out of 10 illicit prescription stimulant users, six would snort, two would shoot (intravenously inject), and two would orally consume the drugs.

Participants shared: *"I've shot mine; It's easier to snort them [than shoot them]; I wouldn't snort the capsules, but if I have the pressed pills [I would snort those] ... they're easier to crush [for snorting]; Snort them or eat them."*

Participants and community professionals described typical illicit prescription stimulants users as high school and college students. A treatment provider stated, *"Probably, 18 to 25 [years of age] ... mostly prescribed to school-age kids, so that's the group that traded their Adderall®."* Law enforcement confirmed: *"I would say the younger crowd; The college kids."*

Ecstasy



Ecstasy (methylenedioxymethamphetamine: MDMA, or other derivatives containing BZP, MDA, and/or TFMP) remains moderately available in the region. Participants most often

reported the current availability of the pressed tablet form of ecstasy as '6' and of "molly" (powdered MDMA) as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common scores were '4.' Participants determined: *"I could get it right now if I wanted to, but I wouldn't trust it because of the fentanyl and everything [adulterated into ecstasy tablets]. I don't trust any kind of pills right now; I can get it, but I just don't seek it; I have tried to get [molly], but [dealers] ... don't want me doing molly when they could be providing me heroin, so they have it [for personal use]. ..."*

Treatment providers most often reported the current availability of ecstasy as '3' and of molly as '4'; the previous most common scores were '7.' Law enforcement most often reported the current availability of ecstasy and molly as '6'; the previous most common scores were '3.' Treatment providers declared: *"Anything is available, but it's just not what's real popular right now. Molly, you probably hear more about that than ecstasy; I think the popularity of it just went away, they graduated to other things; Those are two party drugs, maybe it's because it's the winter, there aren't as many parties in the wintertime as there are in the summer."* Law enforcement explained: *"I haven't seen ecstasy or molly in a while ... it's infrequent; We've seen it around ... but not as much as the heroin and the meth obviously; All of ours is basically coming in the mail, being shipped over from China, we got two pounds sitting in*

our safe right now that the postal service gave us that was going to a trailer park...."

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Ashland Police (Ashland County) executed a search warrant and arrested an individual after they recovered MDMA, more than two pounds of marijuana, marijuana brownies, cocaine, dabs, THC cartridges and other evidence of drug trafficking (www.fox8.com, March 25, 2019).

Participants reported that the availability of ecstasy and molly has decreased during the past six months. Treatment providers reported that the availability of ecstasy has decreased during the past six months, while the availability of molly has remained the same. Law enforcement reported that the availability of ecstasy and molly have remained the same during the past six months. BCI crime labs reported that the incidence of MDMA (ecstasy/molly) cases they process from this region has remained the same during the past six months and remains low.

Ecstasy/Molly	Reported Availability Change during the Past 6 Months	
	 Participants	Decrease
	 Law enforcement	No change
	 Treatment providers	Decrease

Participants discussed the quality of ecstasy and molly and rated the overall quality of ecstasy and molly as '5' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common scores were '5' and '7,' respectively. Reportedly, molly is often adulterated (aka "cut") with other substances including fentanyl and methamphetamine. Participants stated: *"It's all fentanyl; Crystal meth, people try to pass it off as molly; Anyone can say that they're going to give you molly, but most of the time it's meth."* Overall, participants reported that the quality of ecstasy and molly has remained the same during the past six months.

Reports of current prices for ecstasy and molly were consistent among participants with experience buying the drug. Participants reported that the most common quantity of purchase for molly is 1/10 gram. Overall, participants reported that the prices of ecstasy and molly have remained the same during the past six months.

Ecstasy/Molly	Current Prices for Ecstasy/Molly	
	Ecstasy:	
	Low dose (aka "single stack")	\$10
	High dose (aka "triple stack")	\$20
	Molly:	
	1/10 gram	\$10
	A gram	\$60

Participants indicated that ecstasy and molly are obtained through drug dealers. The most common route of administration for ecstasy and molly remains oral consumption. Participants estimated that out of 10 ecstasy and molly users, all 10 would swallow the drug. Participants noted: *"Ecstasy you swallow; Molly you either snort it or put it in water and drink it; I've never snorted it. I always would just 'pop' (swallow) it or put in the drinks."*

Participants and community professionals described typical ecstasy and molly users as 15-35 years of age and people who go to clubs or "raves" (dance parties). A participant commented, *"People who go to raves ... younger to middle age white people ... like 15 to 35."* Another participant noted, *"Molly is sort of associated, in my experience, with drug dealers...."* Law enforcement concluded: *"High school to the twenty-year olds ... more the party crowd; College age."*

Other Drugs in the Cleveland Region

Participants and community professionals listed a variety of other drugs as being present in the region, but these drugs were not mentioned by the majority of people interviewed: hallucinogens (lysergic acid diethylamide [LSD], phencyclidine [PCP] and psilocybin mushrooms), Neurontin® (gabapentin) and synthetic marijuana (synthetic cannabinoids). In addition, BCI and Lake County crime labs reported that the incidence of substituted cathinones ("bath salts") cases they process from this region has decreased during the past six

months and remains low. BCI labs also reported that the incidence of U-47700 (synthetic opioid) cases they process from this region has increased during the past six months, although it remains low.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. South Euclid Police (Cuyahoga County) responded to a call about a man in a bathroom stall for five hours and located the man attempting to leave the store with several cans of canned air (inhalants), which he admitted to law enforcement that he had been "huffing" (inhaling); law enforcement cited the man for theft and took him to the hospital (www.cleveland.com, Jan. 23, 2019). Westlake Police (Cuyahoga County) conducted a traffic stop and found an intoxicated driver who reported to be under the influence of GHB (gamma-hydroxybutyrate, a central nervous system depressant) as well as methamphetamine; officers charged the man with felony possession and trafficking offenses, and when they searched his hotel, they found another man in possession of suspected GHB and drug paraphernalia (www.patch.com, April 15, 2019).

Hallucinogens

Hallucinogens remain available in the region. Participants most often reported the current availability of psilocybin mushrooms as '8,' LSD as '6' and PCP as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common scores were '7' for psilocybin mushrooms and LSD and not reported for PCP. Law enforcement most often reported the current availability of psilocybin mushrooms as '4,' LSD as '5' and PCP as '4;' the previous most common scores were '3' for LSD and not reported for psilocybin mushrooms and PCP. A law enforcement officer summarized, *"We've seen a decent amount of LSD. We've dealt with a bunch of 'mushrooms' (psilocybin mushrooms). We don't seem to come across PCP too much."*

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Solon Police (Cuyahoga County) conducted a traffic stop after witnessing a car driving in and out of traffic and then hitting a curb while stopping; officers took the driver into custody for suspicion of drug abuse and marked lanes violations after seizing LSD, five grams of marijuana and a container of marijuana dabs (www.patch.com, June 7, 2019).

Participants and law enforcement reported that the availability of LSD and PCP has remained the same during the past six months. BCI crime labs reported that the incidence of LSD and psilocybin mushrooms cases they process from this region has decreased during the past six months. BCI labs reported that they processed very few cases of PCP. Lake County crime lab reported processing very few cases of hallucinogens during the past six months.

Hallucinogens	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No comment

Participants discussed the quality of hallucinogens and rated the current quality of LSD as '6' and of psilocybin mushrooms as '8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common scores were '8-9' for LSD and not reported for psilocybin mushrooms. Participants emphasized: *"I would give [LSD] a '6' because of all the fake chemicals and stuff; I would say '8' in general for mushrooms."* Overall, participants reported that the quality of hallucinogens has remained the same during the past six months.

Reports of current prices for psilocybin mushrooms and LSD were consistent among participants with experience buying the drugs. Participants reported that psilocybin mushrooms are typically sold in 1/8-ounce amounts and LSD is typically sold by hits (single doses). A participant noted, *"Acid' (LSD) is either ten bucks a hit or 60 bucks a strip, that's ten hits."*

Hallucinogens	Current Prices for Hallucinogens	
	Psilocybin mushrooms:	
	1/8 ounce	\$40
	LSD:	
	A liquid drop or single dose (aka "hit")	\$10
10 hits (aka "strip")	\$60	

Participants reported that the most common route of administration for psilocybin mushrooms and LSD is oral consumption. Participants estimated that out of 10 psilocybin mushroom and LSD users, all 10 would orally consume the drugs. A participant confirmed, *"You can't really do anything else [with psilocybin mushrooms] except eat them."*

Participants and community professionals described typical hallucinogen users as young, white people and hippies. Participants stated: *"White people with 'dreadlocks' (hippies); I've noticed it's mostly a young person's drug; Most older people who are doing it are trying to go back to being young; 13-year olds to 20s."* Law enforcement added: *"The younger age, I would say 18 to mid-twenties; In my history, I've never seen blacks use 'shrooms' (psilocybin mushrooms) or acid, it's mostly all whites; College age kids, 17, 18 to late twenties; [For PCP] younger individuals, late 20s to early 30s."*

Neurontin®

Neurontin® (gabapentin, an anticonvulsant and nerve pain medication) is highly available for illicit use in the region. Participants most often reported the drug's current street availability as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was not reported. Participants explained: *"Everybody gets gabapentin; I've been prescribed them multiple times; I know my mom gets gabapentin and my aunt hits her up for them all the time."* Treatment providers also reported the current street availability of Neurontin® as '10'; the previous most common score was '7.' A treatment provider stated, *"It's a very widely prescribed drug right now. I think they're trying to find alternate drugs for the narcotics, so now [doctors are] giving everybody something like gabapentin...."*

In addition to reports of illicit Neurontin® use, participants and treatment providers also discussed illicit use of Lyrica® (pregabalin, a nerve pain medication). A participant shared, *"I used to get Lyrica® and would take like six or seven at one time ... it's for nerve pain ... if you take enough of them, trust me, you feel something."* Treatment providers commented: *"Lyrica® messes them up, like being drunk. I've seen some people under the influence and thought they were drunk; Lyrica® doesn't really show up on drug tests. If you have*

a drug or alcohol problem, you're not supposed to take it." Participants reported that the street availability of Neurontin® has remained the same during the past six months, while treatment providers reported increased availability.

Neurontin®	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No comment
	 Treatment providers	Increase

Reports of current prices for Neurontin® were consistent among participants with experience buying the drug. Participants noted: *"Two dollars for a pill, you can buy a whole bottle for like 10 bucks; When I used to take them, somebody would just give them to me; It's pretty much like that, people just sharing them; There's not really a financial market for it...."*

The most common route of administration for illicit use of Neurontin® is oral consumption. Participants estimated that out of 10 illicit Neurontin® users, all 10 would orally consume the drug. A profile for a typical illicit Neurontin® user did not emerge from the data. A treatment provider observed, *"That one does not really have a typical because they give it to people of all ages, nerve pain, older people as well as ... younger people."*

Synthetic Marijuana

Synthetic marijuana (synthetic cannabinoids) remains available in the region. Participants most often reported the drug's current availability as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was not reported. Participants concluded: *"It's a ten, you can find it anywhere online. I used to make it. You can order a powder and mix it with acetone ... I used to sell it to people getting out of rehab; If you go to the right neighborhood, you can get it."*

Participants reported that the availability of synthetic marijuana has increased during the past six months. Participants maintained: *"It's easier to get on the 'dark web' (websites operated by criminal enterprises) now than*

ever; If you look for it, it's easy to find." BCI crime labs reported that the incidence of synthetic cannabinoids cases they process from this region has remained the same during the past six months and remains low.

Synthetic Marijuana	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	No comment
	 Treatment providers	No comment

Reports of current prices for synthetic marijuana were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is 1/8 ounce for \$20. A participant noted, *"It's cheap."* The most common route of administration for synthetic marijuana is smoking. Participants estimated that out of 10 synthetic marijuana users, all 10 would smoke the drug. A participant shared, *"There ain't no other way you can do it than smoke it."* A profile of a typical synthetic marijuana user did not emerge from the data. However, a participant stated, *"Somebody that can't smoke weed for probation."*

Conclusion

Crack cocaine, fentanyl, heroin, marijuana and methamphetamine remain highly available in the Cleveland region; also, highly available for illicit use is Neurontin® (gabapentin). Changes in availability during the past six months include: increased availability for fentanyl, marijuana and methamphetamine; and likely decreased availability for ecstasy (MDMA).

There was consensus among participants and community professionals that fentanyl is highly available and easier to obtain than heroin. Participants summarized: *"There is no drug that is not laced with fentanyl right now; These days it's just fentanyl and carfentanyl. There's no real heroin on the streets...."* Reportedly, there is a user preference for fentanyl over heroin. Community professionals noted an increase in fentanyl availability during the past six months.

Professionals discussed the prevalence of fentanyl-cut cocaine in the region and the high proportion of clients testing positive for the drug on urine drug screens. Participants also reported on counterfeit prescription opioids containing fentanyl as currently available in the region. BCI and Lake County crime labs reported that the incidence of fentanyl and fentanyl analogue cases they process from this region has increased during the past six months.

Participants and community professionals reported current high availability of marijuana extracts and concentrates, often appearing as oil and waxy forms of the drug (aka "dabs"). Respondents discussed the growing popularity of dabs, noting that dabs are high in THC (tetrahydrocannabinol, the psychoactive component of marijuana) content and its use is easy to conceal via vaping pens. Participants and community professionals indicated that the availability of marijuana extracts and concentrates has increased during the past six months. BCI crime labs reported that the incidence of concentrated THC (oils, dabs) cases they process has increased. Participants reported obtaining marijuana and marijuana extracts and concentrates from drug dealers and through out-of-state and Internet purchase. A participant shared, *"We're not getting it from a dispensary [in Ohio]. No one is [due to high retail pricing]."*

Participants discussed that the ease of availability of methamphetamine is due to high demand for the drug which is driven by its low cost and high potency. Participants and law enforcement reported that methamphetamine is available in crystal and powdered forms throughout the region. However, they continued to note crystal methamphetamine as most prevalent. A law enforcement representative stated, *"The cartels (drug cartels in Mexico) are flooding the United States with [crystal methamphetamine]."* Participants and law enforcement also discussed the harsher legal penalties for manufacturing powdered methamphetamine compared to the lesser penalties for possession of crystal methamphetamine as another reason for user preference for the crystal form.

Lastly, participants and treatment providers reported high current availability for Neurontin® for illicit use in the region. These respondents reported increased doctor prescribing for the drug as the reason for current high availability. Treatment providers explained that doctors are prescribing gabapentin in lieu of opioids. In addition to reports of illicit Neurontin® use, participants and treatment providers also discussed illicit use of Lyrica® (pregabalin, a nerve pain medication) during the past six months.

