



### Drug Abuse Trends in the Athens Region



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#### Data Sources for the Athens 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 Athens, Belmont and Perry 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 the Ohio Bureau of Criminal Investigation (BCI) and the 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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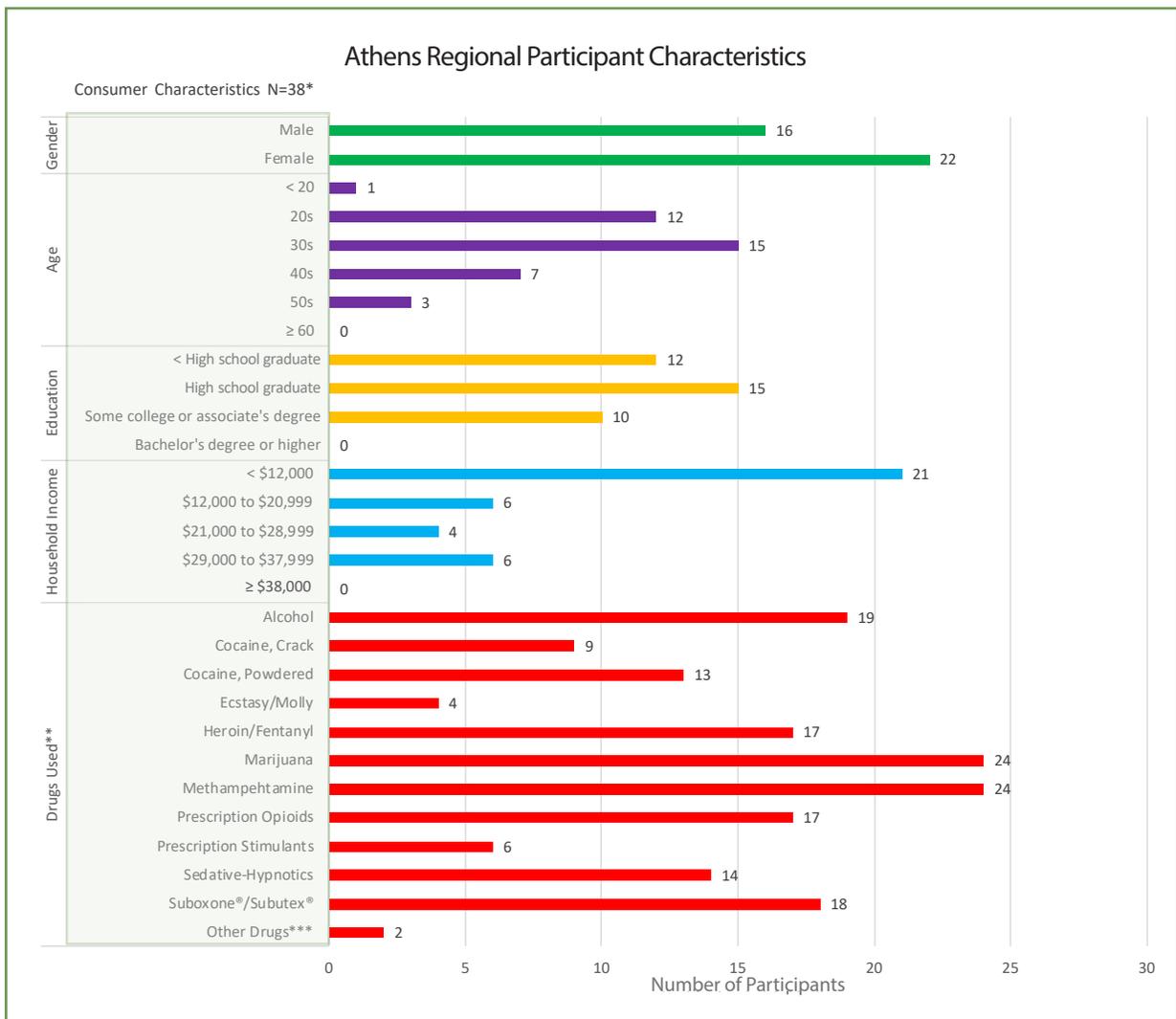
## Regional Profile

Indicator <sup>1</sup>	Ohio	Athens Region	OSAM Drug Consumers
Total Population, 2017	11,689,442	578,199	38
Gender (female), 2017	51.0%	50.2%	57.9%
White, 2017	82.2%	94.7%	92.1%
African American, 2017	12.9%	2.2%	7.9%
Hispanic or Latino Origin, 2017	3.8%	1.1%	7.9%
High School Graduation Rate, 2013-17	89.8%	87.0%	65.8%
Median Household Income, 2013-17	\$52,407	\$43,411	Less than \$12,000 <sup>2</sup>
Persons Below Poverty Level, 2017	14.0%	17.1%	71.1% <sup>3</sup>

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

<sup>2</sup>Participants 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 1 participant due to missing and/or invalid data.

<sup>3</sup>Poverty status was unable to be determined for 1 participant due to missing and/or invalid data.



\*Not all participants filled out forms completely; therefore, numbers may not equal 38.

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

\*\*\*Other drugs included: lysergic acid diethylamide (LSD) and synthetic marijuana.

## Historical Summary

In the previous reporting period (June 2018 – January 2019), heroin, marijuana, methamphetamine and Suboxone® (buprenorphine) remained highly available in the Athens region; also, highly available in the region was Neurontin® (gabapentin). Changes in availability during the reporting period included: increased availability for Suboxone®; likely increased availability for marijuana extracts and concentrates (aka “dabs”) and Neurontin®; and decreased availability for prescription opioids.

While there was consensus among respondents that the availability of heroin had remained highly available in the region during the reporting period, participants and law enforcement reported low availability of unadulterated fentanyl. These respondents shared the perception that fentanyl apart from heroin (aka “straight fentanyl”) was challenging for users to obtain; reportedly, dealers typically sold the drug mixed with heroin. Participants continued to discuss fentanyl as a top cut (adulterant) for heroin.

Corroborating data indicated that fentanyl was highly available in the Athens region. Ohio Department of Public Safety (ODPS) reported seizing 33.1 kilograms (73.0 lbs.) of fentanyl from this region during the reporting period. BCI crime labs reported that the incidence of fentanyl and fentanyl analogue cases they processed from this region had increased during the reporting period; the labs also reported increased incidence of heroin cases.

Participants and law enforcement were also in agreement that the availability of high-grade marijuana extracts and concentrates, dabs, oil and waxy forms of marijuana had increased during the reporting period. Participants attributed the increased availability of dabs to heightened popularity for this form of marijuana due to its higher content of THC (tetrahydrocannabinol, the psychoactive component of marijuana). Law enforcement discussed legalization and greater social acceptability for marijuana generally, along with reduced sentencing guidelines for marijuana possession, as having led to more growers of marijuana, and thus more producers of the popular dabs.

Participants and community professionals continued to report high availability of methamphetamine in the region, with law enforcement and BCI labs also indicating increased cases of methamphetamine during the

reporting period. One treatment provider remarked, *“It is like an epidemic around here ... [methamphetamine] is everywhere.”* There was consensus among respondents that crystal methamphetamine was the most prevalent form of methamphetamine in the region. Law enforcement reported that crystal methamphetamine was trafficked into the region via drug cartels originating in Mexico. Participants and community professionals described typical methamphetamine users as anyone. However, treatment providers noted methamphetamine use among opiate users and users receiving Vivitrol® (medication-assisted treatment for opioid use disorder).

Lastly, respondents discussed high availability of Neurontin® for illicit use. Participants explained that doctors prescribed this medication more while prescribing opioids less. Reportedly, opiate users sought Neurontin® to alleviate withdrawal symptoms and because this drug was not typically screened for by treatment providers and probation officers.

## Current Trends

### Powdered Cocaine

Powdered cocaine remains available in the region. Participants most often reported the drug’s current availability as ‘3’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common scores were ‘5’ and ‘8.’ Participants stated: *“It is harder to get nowadays; Sometimes, it can be in a drought (unavailable); All of my [powdered cocaine] connections are dead or locked up.”* Treatment providers most often reported the current availability of powdered cocaine as ‘1,’ while law enforcement most often reported it as ‘5-6;’ the previous most common scores were ‘6’ and ‘7,’ respectively. Treatment providers remarked: *“I would say [powdered] cocaine is lower [in availability] than ‘crack’ (crack cocaine); It is not accessible to our population because it is so expensive.”* Law enforcement noted: *“Anyone who wants cocaine, can get it; I don’t think it is as prevalent as other [drugs].”*

Corroborating data indicated that powdered cocaine is available in the Athens region. ODPS reported seizing 403.2 grams (0.9 lbs.) of powdered cocaine from this

region during the past six months. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. Ohio State Highway Patrol (OSHP) conducted a traffic stop in Hocking County and seized 49 grams of cocaine, 458 grams of methamphetamine, 37 grams of suspected hashish (aka 'hash,' a drug made from the resin of the cannabis plant), more than a gram of heroin and a gram of suspected crack cocaine valued at approximately \$39,360; troopers arrested two men and a woman drug possession and trafficking ([www.statepatrol.ohio.gov](http://www.statepatrol.ohio.gov), March 29, 2019). Athens Major Crimes Unit recovered 6.5 ounces of powdered and crack cocaine, drug paraphernalia, a handgun and \$1,300; officers arrested two suspects for drug trafficking and drug manufacturing ([www.wtap.com](http://www.wtap.com), April 29, 2019).

Participants and community professionals reported that the availability of powdered cocaine has remained the same during the past six months. A participant observed, "Most people who use drugs prefer methamphetamine or heroin." A treatment professional shared, "It is so expensive." A law enforcement representative reported, "The dynamics of drug trafficking is different in the city than in the rural areas. So, if you take a rural area ... meth and heroin are more prevalent. But, if you come into the university setting, you are looking at more cocaine or Xanax® and marijuana." Ohio Bureau of Criminal Investigation (BCI) crime labs reported that the incidence of cocaine cases they process from this region has decreased during the past six months; 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 change
	 Treatment providers	No change

Participants most often rated the current overall quality of powdered cocaine as '2,' '4' and '7-8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '6.' Participants discussed quality as variable: "I was a shooter (intravenous injector of powdered cocaine) ... if I put it in a spoon and added water, it came

back clear, then [I knew] it was good stuff. Sometimes, it came out white and chalky ... like you are drawing up baking soda [it was poor quality]; It comes from larger cities and then comes to our little town ... [dealers] try to stretch it, to make more money off of it, so, they add other additives to it." Participants discussed adulterants (aka "cuts") that affect the quality of powdered cocaine and reported the top cutting agent as isotol (dietary supplement). Other adulterants mentioned included: baby laxatives, ether, mannitol (diuretic), prescription opioids, Similac® and Tylenol®. Participants shared: "People like to cut it with other stuff ... like isotol, pills and numbing stuff; Similac® is used because it is identical in color; Ether to make you numb ... or to bind it together." Overall, participants reported that the quality of powdered cocaine remained the same during the past six months.

Powdered Cocaine	Cutting Agents Reported by Crime Lab	
	<ul style="list-style-type: none"> <li> caffeine</li> <li> levamisole (livestock dewormer)</li> <li> local anesthetics (lidocaine and procaine)</li> <li> phenacetin (banned analgesic)</li> </ul>	

Reports of current prices for powdered cocaine were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is a gram. Overall, participants reported that the price of powdered cocaine has remained the same during the past six months.

Powdered Cocaine	Current Prices for Powdered Cocaine	
	A gram	\$80-100
	1/16 ounce (aka "teener")	\$150
	1/8 ounce (aka "eight ball")	\$250

Participants reported that the most common route of administration for powdered cocaine is snorting. Participants estimated that out of 10 powdered cocaine users, seven would snort and the others would intravenously inject (aka "shoot") or smoke the drug. One participant stated, "Once you hit a needle (intravenously inject), there is no other way to get high." Participants and community professionals described typical powdered

cocaine users as of higher socio-economic status, those who need to stay up late, college students and white people. Participants confirmed: *“Rich white men; People who work in the restaurant industry; A lot of college students to stay up and get their work done ... rich kids, who have the money.”* A treatment provider shared, *“Wealthy, business-class individuals who have more money to spend.”* A law enforcement representative declared, *“A little bit of a trend with the college students, talking with people at the university....”*

### Crack Cocaine

Crack cocaine is remains moderately to highly available in the region. Participants most often reported the drug’s current availability as ‘8’ and ‘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 ‘6.’ Participants commented: *“I can make ‘crack’ (crack cocaine). I can cook it myself; I have sixty phone numbers [of dealers and other users] ... everyone has crack.”* Treatment providers most often reported the current availability of crack cocaine as ‘4-5,’ while law enforcement most often reported it as ‘3;’ the previous most common scores were ‘5-6’ and ‘8,’ respectively. One treatment provider commented, *“It does not seem like it is accessible here. I know it is difficult to obtain.”* However, a treatment provider indicated a high preference for crack cocaine among treatment clients, stating, *“The people coming in (entering treatment) right now ... it is usually their second drug of choice to methamphetamine....”*

Corroborating data indicated that crack cocaine is available in the Athens region. ODPS reported seizing 80.7 grams 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. Belmont County Major Crimes Unit and Bellaire Police seized guns, cash and 6.5 ounces of crack cocaine, methamphetamine and heroin from two men; officers charged the men with drug trafficking, receiving stolen property and a weapons violation ([www.wtov9.com](http://www.wtov9.com), March 8, 2019). Belmont County Sheriff’s Office executed a search warrant and seized nearly an ounce of crack cocaine, approximately two grams of fentanyl/heroin, marijuana, liquid THC, \$1,193 and \$400 in counterfeit money; officers arrested a man for drug trafficking and possession of cocaine, heroin/fentanyl and marijuana ([www.wtrf.com](http://www.wtrf.com), June 11, 2019).

Participants and treatment providers reported that the availability of crack cocaine has remained the same during the past six months, while law enforcement reported that availability has increased. BCI crime labs reported that the incidence of cocaine cases they process from this region has decreased during the past six months; the labs do not differentiate between powdered and crack cocaine.

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

Participants most often rated the current overall quality of crack cocaine as ‘7’ on a scale of ‘0’ (poor quality, “garbage”) to ‘10’ (high quality); the previous most common scores were ‘3’ and ‘5.’ Participants noted: *“It depends of the quality of the ‘powder’ (powdered cocaine used to make the crack cocaine); You have to go to the city (Columbus) to get the good stuff.”* Participants reported that crack cocaine in the region is most often adulterated (aka “cut”) with baking soda. Other cuts mentioned included: methamphetamine, Novocain®, Orajel® and Similac®. A participant shared, *“All you need is baking soda to turn powder cocaine into crack. The more baking soda, the more it blows up ... the more it weighs and the more money you make....”* Overall, participants reported that the quality of crack cocaine has remained the same during the past six months.

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

Reports of current prices for crack cocaine were consistent among participants with experience buying the drug. A participant concluded, *“[Price] depends on what you have ... if it is good, I am going to the bank.”* Reportedly, the most common quantity of purchase is a gram. Participants discussed: *“Usually, dealers won’t sell it*

less than [a gram amount] ... the risk [of arrest] down here isn't worth [selling smaller amounts].... They don't want to keep divvying out tenths (1/10 amounts); if you want it bad enough, you will get the money." Overall, participants reported that the price of crack cocaine has remained the same during the past six months.

Crack Cocaine	Current Prices for Crack Cocaine	
	1/10 gram (aka "rock")	\$10
	A gram	\$80

Participants reported that the most common route of administration for crack cocaine remains smoking. Participants estimated that out of 10 crack cocaine users, all 10 would smoke the drug. A participant confirmed, "It gives you instant gratification. You can smoke it and it hits you really fast...." Participants and community professionals described typical crack cocaine users as of lower socio-economic status. However, one participant added, "There are some people we call 'part-time smokers,' they work through the week and smoke on the weekends ... they pay their bills, have gas in their car and maintain their households and their kids." Treatment providers shared: "Around here, ... it would be Caucasian female, living in poverty; More inner city than the rural population." A law enforcement official emphasized, "We see more males and individuals who are of lower socio-economic status."

## 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 '8.' Participants commented: "It is everywhere; More people get addicted to it every day." Treatment providers most often reported the current availability of heroin as '7-10,' while law enforcement most often reported it as '6,' the previous most common scores were '10' and '9,' respectively. A treatment provider shared, "I just know it is in the top five of drugs as far as prevalence around here." A law enforcement official explained a moderate availability rating by stating, "Most people who were using heroin in this area, transitioned to methamphetamine."

Corroborating data indicated that heroin is available in

the Athens region. ODPS reported seizing 1.3 kilograms (2.9 lbs.) of heroin from this region during the past six months. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. An Athens County Major Crimes Unit investigation found over 40 items of evidence related to illegal drug trafficking, including approximately a quarter pound of heroin, a quarter pound of methamphetamine, \$12,000 in cash, two handguns and digital scales ([www.athensnews.com](http://www.athensnews.com), February 17, 2019). A Guernsey County Sheriff's deputy conducted a traffic stop and found heroin, drug paraphernalia and potential fentanyl; the Sheriff's office seized the stopped vehicle and arrested its two occupants ([www.daily-jeff.com](http://www.daily-jeff.com), April 26, 2019). Washington County Sheriff's office and Major Crimes Task Force collaborated in a raid, seizing narcotics, drug paraphernalia and weapons; officers arrested six people for weapons violations and felony drug offenses, including possession and trafficking in heroin and methamphetamine ([www.wtap.com](http://www.wtap.com), May 2, 2019).

While many types of heroin are currently available in the region, participants reported black tar and white powdered heroin (aka "china white") as most available. Participants and law enforcement reported that the overall availability of heroin has remained the same during the past six months, while treatment providers were not in agreement as to whether availability has increased or remained the same. BCI crime labs reported that the incidence of heroin cases they process from this region has remained the same during the past six months; 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 consensus	

Participants most often rated the current quality of heroin as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common scores were '3' and '8.' A participant commented on the high potency of heroin, "It is cut with fentanyl and carfentanil." Participants discussed adulterants (aka "cuts") that affect the quality of

the drug and continued to report the top cutting agents for the drug as fentanyl and coffee. Additional cuts mentioned included: brown sugar, carfentanil (synthetic opioid more potent than fentanyl), Coca-Cola®, cosmetics (powder foundation), isotol (dietary supplement) and mannitol (diuretic). Participants shared: *“People will do crazy stuff. They will cut make-up in [heroin] ... brown gravy; It is cut with so many items .”* Overall, participants reported that the general quality of heroin has remained the same during the past six months.

Cutting Agents Reported by Crime Lab	
Heroin	● acetaminophen
	● caffeine
	● cocaine
	● diphenhydramine (antihistamine)
	● fentanyl
	● inositol (dietary supplement)
	● lidocaine (local anesthetic)
	● mannitol (diuretic)
	● methamphetamine
	● quinine (antimalarial)
	● sorbitol (artificial sweetener)
	● tramadol
● xylazine (animal sedative)	

Reports of current prices for heroin were consistent among participants with experience purchasing the drug. Reportedly, the most common quantity of purchase is 1/10 gram. Overall, participants indicated that the price of heroin has remained the same during the past six months.

The most common route of administration for heroin remains intravenous injection (aka “shooting”). Participants estimated that out of 10 heroin users, eight would inject and two would smoke the drug. A profile for a typical heroin user did not emerge from the data.

Current Prices for Heroin	
Heroin	<b>Powdered:</b>
	1/10 gram (aka “point”) \$20-25
	1/2 gram \$50-80
	A gram \$150

## Fentanyl



Fentanyl is moderately to 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);

participants most often assigned a low availability rating to fentanyl last reporting period based on the determination that unadulterated fentanyl was difficult to obtain as the drug was typically used as a cut for other drugs and not sold “straight.” Participants added: *“It is pretty common where I am from, people prefer it over heroin ... because it is a lot stronger and people like how it makes you nod out (fall asleep) more; People down here sell pure fentanyl; It is usually used as a fishing technique to get people addicted to whatever they are selling; They press fentanyl into ‘perk 30s’ (Roxicodone®) or ‘xanies’ (Xanax®) or anything....”*

Treatment providers most often reported the current availability of fentanyl as ‘9,’ while law enforcement reported it as ‘4,’ the previous most common scores were ‘8’ and ‘3,’ respectively. Treatment providers shared: *“It is huge; Every one of our clients are coming in testing [positive for fentanyl on urine drug screens]....”* A law enforcement representative emphasized that the moderate availability score for fentanyl is reflective of the fact that straight unadulterated fentanyl is not as readily available as other drugs, saying, *“It is not as easy to find as methamphetamine or heroin, but it is available.”* A law enforcement official further clarified, *“I haven’t had a situation where I’ve seen the carfentanil, just fentanyl.”*

Corroborating data indicated that fentanyl is available in the Athens region. ODPS reported seizing 423.1 grams (0.9 lbs.) of fentanyl from this region in the past six months. Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Cambridge Police (Guernsey County) initiated a traffic stop that resulted in a K-9 unit alerting to the vehicle where two women admitted to possession of drugs; one woman was in possession of fentanyl and the other possessed heroin ([www.daily-jeff.com](http://www.daily-jeff.com), March 6, 2019). Cambridge Police charged a Cleveland man with felony drug charges after suspected fentanyl was found inside his shorts’ pocket during a police investigation of an alleged breaking-and-entering attempt ([www.daily-jeff.com](http://www.daily-jeff.com), June 11, 2019).

Participants and treatment providers reported that the availability of fentanyl has increased during the past six months. Participants confirmed: “[Fentanyl] is on the rise in the last six months; More available because [fentanyl] is cheaper to obtain than heroin; [Fentanyl] is talked about more and it is being offered more; People are wanting [fentanyl] more, it is better than heroin.” One treatment provider determined: “Increased ... they are finding it in traces of crack, marijuana and other drugs.” Law enforcement officials reported that the general availability of fentanyl has remained the same during the past six months. BCI crime labs reported that the incidence of fentanyl and fentanyl analogue cases they process from this region has slightly 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.

Fentanyl	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 fentanyl as ‘10’ on a scale of ‘0’ (poor quality, “garbage”) to ‘10’ (high quality); the previous most common score was not reported. A participant explained, “The quality of it is high and very pure ... people do not understand how pure [fentanyl] is. They are thinking they are shooting heroin, or they’re trying to shoot the same amount as they would heroin, [fentanyl] is a lot stronger.” Participants discussed that in addition to fentanyl being used to adulterate (aka “cut”) other drugs, they discussed heroin as a cut for fentanyl. A participant stated, “They cut [fentanyl] with other stuff to make more money, then you start to withdrawal from [fentanyl], you need it more and more.” Overall, participants reported that the quality of fentanyl has remained the same during the past six months.

Participants were unable to report the current prices for fentanyl. Participants remarked: “It depends on what form they are selling it in. For instance, if they are selling it as a pill like ‘perk 30s’ (Roxicodone®) the price will be different [than a fentanyl-heroin mixture]; The come up (price mark-up) is

insane ... you can make a lot of money off of it.” While there were a few reported ways of using fentanyl, generally, participants reported that the most common route of administration for the drug as intravenous injection (aka “shooting”). Participants estimated that out of 10 fentanyl users, six would shoot and four would smoke the drug. However, a participant noted, “A lot of people are afraid to inject the drug because it can kill you.”

Participants described typical fentanyl users as heroin users between the ages of 16-40 years. One participant shared, “I’ve seen a lot of younger kids aged 16 [years] who were getting high with their friends on ‘perks’ (Percocet®), then the perk was cut with fentanyl ... they are now just seeking out straight [fentanyl].” Community professionals were unable to describe a typical fentanyl user other than to say someone addicted to opioids that has progressed in their addiction.

### Prescription Opioids



Prescription opioids remain available for illicit use in the region. Participants most often reported the current street availability of these drugs as ‘2’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common score was ‘5.’ Participants concluded: “They are not easy to get ... and they are overpriced; The doctors are not writing ‘scripts’ (prescriptions) like they used to ... there are stricter guidelines that they have to go by; A lot of people have graduated from opioids to harder drugs like heroin.” In addition, participants commented on fraudulent pills being sold as prescription opioids. They said: “[Dealers are] pill pressing them; They use methadone to press into ‘perks’ ... they use the aspirin to press into ‘perks,’ too.” Treatment providers most often reported the current street availability of prescription opioids as ‘10,’ while law enforcement most often reported it as ‘3;’ the previous most common scores were ‘9’ and ‘10,’ respectively. A treatment provider maintained, “I think we live in a community where people sell their prescriptions to buy other drugs or to supplement their income.”

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Meigs County Sheriff’s deputies seized 13 oxycodone pills, methamphetamine, 20 glass pipes, syringes, digital scales, other drug paraphernalia and a small amount of cash

from two men, charging the men with possession of methamphetamine, drug trafficking and tampering with evidence ([www.wsaz.com](http://www.wsaz.com), April 22, 2019).

Participants identified Norco®, Percocet® and Vicodin® as the most popular prescription opioids in terms of widespread illicit use. Participants added: *"I rather have Percocet® than Vicodin® ... they work better ... they give you that move (boost) which allows you to do what you got to do; 'Perks' (Percocet®), 'vics' (Vicodin®), you can get those two easy if you go to the hospital, they won't give you a bunch, but they still will give them to you; Norco®, if you have a small surgery that is what they give you; Norco® is easier to obtain from a doctor [than other opioids]."* Community professionals identified Percocet® and Vicodin® as most popular in terms of widespread illicit use. Treatment providers shared: *"'Perks' are huge; It seems like those are always around."*

Participants reported that the street availability of prescription opioids has decreased during the past six months. A participant confirmed, *"They are harder to find ... I think doctors are doing a great job in cracking down and not prescribing to so many people. People who actually have the prescriptions are noticing this ... so they do not sell them as much."* Treatment providers reported that the street availability of prescription opioids has remained the same during the past six months, while law enforcement reported that availability has decreased. A treatment provider shared, *"The ERs (hospital emergency rooms) don't give out any kind of opioids unless it is serious. Doctors are cutting down as well."* Law enforcement officials determined: *"It keeps decreasing all the time; The manufacturers are getting put in jail ... I think doctors are more scared to write scripts as they did in the past, because they are going to be held accountable for them...."*

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

BCI crime labs reported that the incidence of tramadol (Ultram®) cases they process from this region has increased, while the incidence of hydrocodone (Vicodin®), morphine and oxycodone (OxyContin®, Percocet®) has

decreased or remained the same during the past six months. BCI labs reported processing very few cases of hydromorphone (Dilaudid®), methadone and oxymorphone (Opana®) from this region during the past six months.

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. One participant declared, *"The high price is why I got away from [illicit use of prescription opioids]."* Overall, participants indicated that the price of prescription opioids has remained the same during the past six months.

Prescription Opioids	Current Street Prices for Prescription Opioids	
	Percocet®	\$7 for 5 mg \$8-10 for 7.5 mg
	Roxicodone®	\$20 for 15 mg \$40-50 for 30 mg
	Vicodin®	\$1 per milligram

Participants reported obtaining prescription opioids for illicit use from drug dealers and individuals who sell their prescriptions. A participant explained, *"From a doctor and dealer ... both buying prescriptions or obtaining their own script."* A treatment provider added, *"I think people are really good at going to their doctor or the emergency room ... to get them. The ladies we work with tend to sell them to obtain their drug of choice. Also, because we live in a lower social-economic area, I think people are looking for a way to supplement their income."*

While there were a few reported ways of consuming prescription opioids, generally the most common route of administration for illicit use remains snorting. Participants estimated that out of 10 illicit prescription opioid users, eight would snort and two would orally consume the drugs. Participants remarked: *"I don't see too many people 'shooting' (intravenously injecting) because there is too much binding agent that would clog everything up; I would eat them."*

Participants described typical illicit prescription opioid users as high school students, construction workers and anyone who had a serious injury. A participant noted, *"I've seen the younger generation doing this, like 25 [years of age] and younger. Most people who are over 25 want either*

'weed' (marijuana) or the harder stuff." Community professionals described typical illicit prescription opioid users as anyone. A treatment provider commented, "I think everyone abuses [prescription opioids] ... and it is not really a big deal to anyone anymore ... they just sit around and take them." A law enforcement official observed, "It affects everyone."

### Suboxone®

Suboxone® (buprenorphine) remains highly available for illicit use in the region. Participants most often reported the current street availability of Suboxone® 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 concluded: "People just use it as a replacement for the heroin. There are clinics everywhere and there are not that many measures in place for regulating the clinics; A lot of heroin users use it when they can't get heroin; Everyone is selling that stuff; I know people who would buy them off the street because they didn't have the time or the proper insurance to go to the doctor ... it is cheaper that way for them...." Treatment providers most often reported the most often reported it as '9'; the previous most common scores were '10' and '9-10,' respectively. Treatment providers maintained: "They are being prescribed the 18 mg and the doctors are getting the cash, so they are making a ton of money; People are detoxing themselves and trying to use it for this, but ... people using this as their drug of choice, we don't see that often."

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Muskingum County/Zanesville City Joint Drug Unit, Perry County Sheriff's Office and Central Ohio Drug Enforcement Task Force arrested and charged four people with drug trafficking and possession of drugs, including Suboxone®, methamphetamine, fentanyl and marijuana; officers also seized drug packaging materials, U.S. currency and a vehicle ([www.ycitynews.com](http://www.ycitynews.com), April 4, 2019).

Participants reported that the street availability of Suboxone® has remained the same during and the past six months. Treatment providers did not reach a consensus on whether street availability of Suboxone® has increased or decreased during the past six months, while law enforcement reported increased availability. A law enforcement representative emphasized, "High availability for trade ... what they will do is get a prescription

for Suboxone® and trade it for heroin, pills or meth ... trading one drug for the next drug." BCI 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	Increase
	 Treatment providers	No consensus

Reports of current street prices for Suboxone® were consistent among participants with experience buying the drug. Participants discussed: "It depends; [Asking price] depends on who you sell it to ... an upper-class white male has more money, so you can sell it to them for more ... they are willing to pay more to hide their addictions." Overall, participants reported that the street price of Suboxone® has remained the same during the past six months.

Suboxone®	Current Street Prices for Suboxone®	
	Filmstrip	\$20-25 for 8 mg
	Pill	\$25-30 for 8 mg

In addition to obtaining Suboxone® on the street from drug dealers and other users, participants reported getting the drug from clinics. Participants stated: "You can get it free now with Medicaid; As long as you can pass a drug test with only Suboxone® in your system, you can obtain them for free." Participants reported that the most common route of administration for illicit use of Suboxone® is snorting. Participants estimated that out of 10 illicit Suboxone® users, all 10 would snort the drug. A participant declared, "I snorted them...." Participants described typical illicit Suboxone® users as heroin users. A participant commented, "Anyone strung out on 'dope' (heroin), anyone who is stuck on 'pills' (opioids)."

## Sedative-Hypnotics

Sedative-hypnotics (benzodiazepines, barbiturates and muscle relaxants) are moderately available for illicit use in the region. Participants most often reported 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 '5.' Participants remarked: "You can obtain them off the Internet; I know a lot of people with prescriptions." Treatment providers most often reported the current street availability of sedative-hypnotics as '10,' while law enforcement most often reported it as '6-7,' the previous most common scores were '5' and '6,' respectively. Treatment providers noted: "I would say they are really accessible; Doctors are overprescribing it actually." A law enforcement official commented, "There is definitely an uptick at [the university] with Xanax® right now."

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. While on a different investigation, Belmont County Sheriff's officers viewed drugs in a motel room in plain sight, resulting in the seizure of several Xanax® pills, methamphetamine and cocaine; officers arrested one suspect for drug possession and trafficking and another suspect for obstruction of official police business, possession of drugs and drug instruments ([www.dispatch.com](http://www.dispatch.com), March 27, 2019).

Participants and treatment providers identified Xanax® and Klonopin® as the most available sedative-hypnotics in terms of widespread illicit use, while law enforcement identified Xanax® and Valium® as most available. Participants shared: "I still hear about the Ambien® but [Xanax® and Klonopin®] is what everyone is wanting; Xanax® is the strongest and the best [benzodiazepine]; They gave me Klonopin® for my withdrawal symptoms when I was detoxing." Treatment providers concluded: "If you separate the drugs out, Xanax® is the most prevalent, Valium® is fading out, Ambien® is on the rise, Klonopin® is fading out ... it is still there. I feel Xanax® is more used and thus more accessible and it is prescribed quite a bit; Klonopin® is not being prescribed that much unless they are in a facility for withdrawal, it does not do the same as Xanax®."

Participants and community professionals reported that the general availability of sedative-hypnotics has remained the same during the past six months. A participant added, "I tried to get my doctor to give them to me, but he wouldn't. When I was working in a nursing home a doctor told me I

should get Ativan®, he told me that he thinks everyone should be on them." BCI crime labs reported that the incidence of alprazolam (Xanax®), clonazepam (Klonopin®), diazepam (Valium®), lorazepam (Ativan®) and zolpidem (Ambien®) cases they process from this region has decreased or remained the same. BCI labs reported processing very few cases of carisoprodol (Soma®) from this region during the past six months.

Reported Availability Change during the Past 6 Months		
Sedative-Hypnotics	 Participants	No change
	 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. Participants discussed: "It is all about desperation and how bad you want them that will determine how much you will pay; The more you buy, the cheaper the prices ... the dealer will cut you a deal." Overall, participants reported that the price of sedative-hypnotics has remained the same during the past six months.

Current Prices for Sedative-Hypnotics		
Sedative-Hypnotics	Klonopin®	\$2 per milligram
	Xanax®	\$7 for 2 mg

Participants reported obtaining sedative-hypnotics for illicit use from drug dealers and people with prescriptions. A participant emphasized, "Dealers, and from someone who is prescribed them ... for like PTSD (post-traumatic stress disorder)." The most common routes of administration for illicit use of sedative-hypnotics are snorting and oral consumption. Participants estimated that out of 10 illicit sedative-hypnotic users, 5 would snort and 5 would orally consume the drugs. Participants discussed: "They would chew them because it hits you faster; It would all depend on my mood with me, sometimes I would eat a handful and sometimes I would snort them ... it is [a drug] that is harder to 'shoot' (inject) because it has the binding agent in it."

Participants and community professionals described typical illicit sedative-hypnotics users as college students and females. Participants confirmed: *“College students; More commonly prescribed for college students ... so they are not stressed out about school and stuff ... [and] they sell it to make money; Middle-class to upper-class moms or soccer moms for stress, and there are a lot of people who do it to enhance their buzz (high from another drug); Everyone, 15 year of age to soccer moms.”* Treatment providers observed: *“Alcoholics I work with (treat), they tend to use the sedatives; Someone who is trying to self-medicate, sleep or has anxiety issues.”* A law enforcement representative added, *“They love to mix it with alcohol....”*

## Marijuana

Marijuana remains highly available in the region. Participants and community professionals 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 scores were also ‘10.’ Participants explained: *“You have the whole legalization thing going so it is not hard to find; A lot of people are bringing it from other states; You can get ‘weed’ (marijuana) anywhere.”* Treatment providers stated: *“It is very easy to get; It is used frequently.”* A law enforcement representative remarked, *“It is everywhere.”*

Participants and law enforcement 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 ‘8.’ One participant noted, *“Dabs are becoming more popular, you get higher quicker and more people are making it. I know a lot more people who are into the dabs.”* Law enforcement most often reported the current availability of marijuana extracts and concentrates as ‘6-7;’ the previous most common score was ‘5.’

Corroborating data indicated that marijuana is available in the Athens region. ODPS reported seizing 1,770.6 kilograms (3,903.5 lbs.) of marijuana from this region during the past six months; ODPS reported seizing 272.2 kilograms (600.0 lbs.) the previous reporting period. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period.

OSHP conducted a traffic stop that led to the seizure of 7,040 liquid ounces of CBD (cannabidiol) oil worth approximately \$165,000; troopers the arrested of the driver and passenger of the care for possession of a schedule I substance ([www.statepatrol.ohio.gov](http://www.statepatrol.ohio.gov), Feb. 28, 2019). Central Ohio Drug Enforcement Task Force, Guernsey County Special Response Team and Guernsey County Sheriff’s Office executed a search warrant that resulted in one of the largest drug seizures in county history, seizing an estimated 50 pounds of marijuana, several pounds of methamphetamine, cocaine, a large amount of THC (tetrahydrocannabinol, the psychoactive component of marijuana) oils and psilocybin mushrooms while also confiscating several firearms and approximately \$100,000 cash; law enforcement arrested and charged a man and woman with two counts of trafficking in drugs and one count of engaging in a pattern of corrupt activity ([www.ohio.com](http://www.ohio.com), April 24, 2019).

Participants reported that the availability of marijuana and marijuana extracts and concentrates has remained the same during the past six months. Community professionals reported that the availability of marijuana has remained the same during the past six months, while they did not report on the availability of marijuana extracts and concentrates. 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 from this region has remained the same.

Marijuana	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 marijuana as ‘10’ on a scale of ‘0’ (poor quality, “garbage”) to ‘10’ (high quality); the previous most common score was also ‘10.’ Participants observed: *“The higher quality is now more available, now all of it is hydroponic weed; The strands are constantly changing, they are always coming up with new [potent] strands.”* Overall, participants indicated that the quality of marijuana has increased during the past six months. Participants added: *“The quality has gone up; Purer*

THC; Quality is high, there is a lot more technology to extract it; 'Chronic' (high-grade marijuana) is getting better."

Reports of current prices for marijuana were provided by participants with experience buying the drug. Reportedly, the most common quantity of purchase for marijuana and marijuana extracts and concentrates is a gram.

Participants shared: "They have gone up and down with pricing [depending on location where purchased]; [Price] depends on how 'thirsty' (greedy) the dealer is, if they have the better quality than anyone around, then they will up the price; 'Mids' (regular-grade marijuana), you can get \$5 a gram ... it is a lot cheaper, but people want the higher grade because it lasts longer, the texture is better, it smells better and you smoke less; Dabs, you can get [vape] cartridges for like \$30 bucks." Overall, participants reported that the price of marijuana has remained the same during the past six months.

Marijuana	Current Prices for Marijuana	
	A blunt (cigar) or a gram	\$5-10
	1/4 ounce	\$50-60
	An ounce	\$180-280
	<b>Extracts and concentrates:</b>	
A gram	\$50-100	

While there were a few reported ways of consuming marijuana, generally the most common route of administration remains smoking. Participants estimated that out of 10 marijuana users, all 10 would smoke the drug. Participants reported that the most common routes of administration for marijuana extracts and concentrates are orally consumption and smoking/vaping. Participants estimated that out of 10 marijuana extracts and concentrates users, five would orally consume and five would smoke/vape the drug. Participants commented: "Dabs, they make it into the butter; Edibles ... it is infused in food ... in macaroni and cheese."

A profile for a typical marijuana user did not emerge from the data. Participants and community professionals described typical marijuana users as anyone. Participants declared: "It's not socially unacceptable anymore; Everyone, I think all ethnicities ... it is a popular drug, it has many uses,

for health, for recreation or partying, a lot of teenagers like it 13-18-year olds use it. ..." A treatment provider added, "Everyone is smoking it, it is a natural herb."

## Methamphetamine



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

to get) to '10' (highly available, extremely easy to get); the previous most common scores were also '10.' Participants discussed: "You can always find it; It is off the Richter scale; Everyone wants it because it lasts longer than any other 'upper' (stimulant). If it is good, you can take 1/10 gram and go 24 hours; Everyone is doing it ... it is cheaper and there is more of it and it lasts longer; Everyone is getting off heroin with the Vivitrol® ... and everyone is going to 'speed' (stimulants), and 'meth' (methamphetamine) is about the best thing that there is right now." Treatment providers remarked: "Methamphetamine is at the top of the drug list this year; It is really accessible here, many of the women we work with here make it and sell it; There is a lot of manufacturing in this area; That is all we got lately is methamphetamine clients."

Corroborating data indicated that methamphetamine is available in the Athens region. ODPS reported seizing 5.1 kilograms (11.2 lbs.) of methamphetamine from this region during the past six months. In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. Belmont County detectives seized more than a quarter pound of drugs, including crystal meth with a street value of more than \$12,000, and \$1,600 in cash after receiving information regarding a shipment coming into the county for distribution; detectives arrested and charged three people with drug-related offenses ([www.cantonrep.com](http://www.cantonrep.com), March 6, 2019). Cambridge Police (Guernsey County) investigated three drug-related incidents resulting in the arrest of three people with one charged with aggravated possession of drugs related to suspected methamphetamine residue, receiving stolen property and possession of drug paraphernalia ([www.daily-jeff.com](http://www.daily-jeff.com), March 14, 2019). A Guernsey County deputy on routine patrol initiated a traffic stop and detected an odor of marijuana resulting in a probable cause search where a

plastic bag with methamphetamine was seized along with drug paraphernalia, digital scales and a small amount of marijuana; the deputy arrested the two men traveling in the stopped vehicle ([www.daily-jeff.com](http://www.daily-jeff.com), April 4, 2019). Cambridge Police conducted a traffic stop where they found methamphetamine; law enforcement impounded the vehicle and arrested the driver ([www.daily-jeff.com](http://www.daily-jeff.com), May 3, 2019). OSHP conducted a traffic stop in Hocking County and seized 458 grams of methamphetamine worth \$45,800 along with a loaded gun and drug abuse instruments; troopers arrested three individuals on possession of a schedule I substance, aggravated drug trafficking and improper handling of a firearm in a motor vehicle ([www.statepatrol.ohio.gov](http://www.statepatrol.ohio.gov), May 13, 2019). Central Ohio Drug Enforcement Task Force arrested several individuals in Perry County for drug trafficking after they caught two individuals selling methamphetamine to undercover agents; officers subsequently executed a search warrant at a residence where another individual was charged with drug trafficking and three others were found to have various quantities of methamphetamine ([www.zanesville.com](http://www.zanesville.com), June 6, 2019). Noble County Sheriff's deputies investigated a fraudulent check complaint and discovered two meth labs, suspected marijuana, two marijuana plants and drug paraphernalia; officers arrested a woman for child endangerment after arresting a man at the residence for drug and weapons violations ([www.daily-jeff.com](http://www.daily-jeff.com), June 19, 2019). Perry County Sheriff's Office and Central Ohio Drug Enforcement Task Force arrested two men for possession of methamphetamine and drug trafficking after one suspect attempted to traffic bulk quantities of methamphetamine to an undercover agent and the other suspect was stopped and detectives found two ounces of methamphetamine on him ([www.zanesville.com](http://www.zanesville.com), June 28, 2019).

Participants and community professionals reported that methamphetamine is available in powdered and crystal forms throughout the region. However, they specified that crystal methamphetamine is the most prevalent form in the region. Participants commented: "I haven't seen powder; Most people don't sell powder. Powder is when you do not have any money and you go and make it yourself." The powdered form of methamphetamine is typically referred to as "shake-and-bake," 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. Law enforcement noted: "They are not making [shake-and-bake] here anymore; The penalties for manufacturing [methamphetamine] are so much more than for possessing [crystal methamphetamine], and it is harder to obtain the materials now because of [pharmacy restrictions on the sale of] Sudafed®, it is easier to just drive and buy it..."

Participants reported that the availability of crystal methamphetamine has increased during the past six months, while the availability of powdered methamphetamine has decreased. Participants observed: "It's cheaper, people are bringing it in ... the 'buzz' (high) ... lasts for days; 'Coke' (powdered cocaine) lasts for a couple of hours, and this lasts for 12 hours ... and you get up and go to work." Community professionals also reported that the availability of crystal methamphetamine has increased during the past six months. Treatment providers concluded: "What I am seeing, is that when we moved through the opioid wave, ladies were getting on the medication-assisted treatment (MAT) program, they let the opioids go and picked up methamphetamine, those two things can be used together and we saw methamphetamine use skyrocket in this area; They are selling it cheap [to get people hooked]." Law enforcement maintained: "Last year, it was on its way up and now it is just ... bad (high in availability); We are losing." BCI crime labs reported that the incidence of methamphetamine cases they process from this region has increased during the past six months.

Methamphetamine	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 methamphetamine as '4' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '8-10.' Participants assigned a moderate quality score based on their reporting of the many adulterants (aka "cuts") being added to

methamphetamine. Comments included: “[Quality] depended on the number of hands in it, cutting it to make more money; It is a hit or miss with me ... I think out of five people that I went to, only one person had really good stuff.”

Participants discussed cuts that affect the quality of methamphetamine and reported the following cutting agents for the drug: baking soda, bath salts (substituted cathinones), ecstasy (MDMA), fentanyl, MSM (methylsulfonylmethane, a joint supplement), rock salt, salt and vitamin C. Participants stated: “People are cutting it with a lot of things that they shouldn’t be; My son OD’d (overdosed) on meth because they used fentanyl to cut it ... he didn’t know it had it in there; I tested for Suboxone® when I came here (residential treatment) and I don’t use ‘subs’ (Suboxone®).” Overall, participants reported that the quality of methamphetamine has remained the same during the past six months.

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

Reports of current prices for methamphetamine were consistent among participants with experience buying the drug. Reportedly, the most common amount of purchase is a gram. Participants shared: “I get really cheap pricing for meth. I don’t buy 1/2 grams I buy ounces ... because I am a drug dealer. I would sell a 1/2 gram for \$30 to a friend, not a friend, \$50. A gram I would sell \$75 to a friend, non-friends \$100; An ‘eight ball’ (1/8 ounce), I would pay \$60 but I would sell it for \$150-200; I didn’t sell large quantities but I would buy in in large quantities, you make more money if you will sell in less quantities; The more you buy, it is cheaper.” Overall, participants reported that the price of methamphetamine has remained the same during the past six months.

Participants reported that the most common routes of administration for methamphetamine are intravenous injection (aka “shooting”) and snorting. Participants discussed: “[Shooting] is not as hush hush (looked down upon) as it used to be; I liked the rush that [shooting] gave

<b>Methamphetamine</b>	<b>Current Prices for Methamphetamine</b>	
	1/2 gram	\$20-50
	A gram	\$80-120
	1/8 ounce (aka “eight ball”)	\$150-200

me, I felt like Hulk and that nothing could stop me; Snorting is for the newcomer ... it burns your nose; Most people are shooting it because of the instant high, it is intense....”

A profile for a typical methamphetamine user did not emerge from the data. However, participants noted methamphetamine use among individuals who work long or physically demanding jobs. Community professionals described typical methamphetamine users as prior opioid users and anyone. Treatment providers declared: “Indigent, Caucasian with a prior opioid addiction; I see the women using the methamphetamine to kind of stabilize whatever they are going through ... so when they feel they have a lot more demand (stressors) in their lives and they need less sleep, they use the methamphetamine as a stimulant ... it is to maintain and renew their energy levels....” A law enforcement official explained, “Someone who cannot afford opioids any more, or someone who is on Vivitrol®.”

### 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 ‘4’ 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 stated: “A lot of people are not doing them anymore because they have gone to meth; Meth is cheaper and easier to get and stronger; I know several people who were using Adderall® that are now doing meth ... me, too.” Treatment providers most often reported current street availability of prescription stimulants as ‘7,’ while law enforcement most often reported it as ‘4;’ the previous most common scores

were '8' and '6-8,' respectively. Treatment providers remarked: "A lot of the ladies that I work with have the prescription stimulants in their house for their kids; The individuals I work with are sharing the prescriptions; I have heard that women would pay their children to obtain the drug at school ... I heard it a few times."

Participants and law enforcement identified Adderall® as the most available prescription stimulant in terms of widespread illicit use. A law enforcement official noted, "We have a little Adderall® at the college." Treatment providers were unable to report the most available prescription stimulant in terms of widespread illicit use. Participants and community professionals reported that the street availability of prescription stimulants has remained the same during the past six months. BCI crime labs did not report any cases of amphetamine (Adderall®) or methylphenidate (Ritalin®) from this region during the past six months, and very few cases of lisdexamfetamine (Vyvanse®).

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

Participants did not report the current street prices for prescription stimulants. Participants reported obtaining prescription stimulants for illicit use from someone with a prescription. Participants commented: "If you have kids that take it, you take it from them; Some doctors [advise] parents to take their kids off of the prescription during the summer, so they are going to have extra ... it is going to be readily available [during the summer months]."

Participants reported that the most common route of administration for illicit use of prescription stimulants remains snorting. Participants estimated that out of 10 illicit prescription stimulant users, all 10 would snort the drugs. Participants and law enforcement described typical illicit prescription stimulant users as college students, while treatment providers identified women with children.

## Ecstasy

Ecstasy (methylenedioxymethamphetamine: MDMA, or other derivatives containing BZP, MDA, and/or TFMP) remains 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 '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common scores were not reported for ecstasy and '5' for molly. A participant observed, "It is available ... it is just not done as much [as other illicit drugs]." Treatment providers most often reported the current availability of ecstasy as '2' and of molly as '8'; the previous most common scores were not reported. A treatment provider concluded, "It doesn't seem to be a drug of choice as compared to a drug that is abused when it is around." Law enforcement most often reported the current availability of ecstasy and molly as '4-5'; the previous most common scores were not reported for ecstasy and '4-5' for molly.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Athens County Major Crimes Unit arrested a college student for drug trafficking during a local festival; officers found molly, suspected cocaine, THC, resin (dabs) and almost \$300 in cash during a search of the student's dorm ([www.athensnews.com](http://www.athensnews.com), March 3, 2019).

Participants and law enforcement reported the availability of ecstasy and molly has remained the same during the past six months. Treatment providers reported the availability of ecstasy has remained the same during the past six months, while the availability of molly has increased. Treatment providers explained: "I know the clients are looking for it more, so the demand is high; We also live in a college town and students use a lot of molly, and so that might bring more of it into the area; It pops up in a [urine drug] screen every once in a while, and clients don't expect it to be on there ..."

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

BCI crime labs reported that the incidence of MDMA (ecstasy/molly) cases they process from this region has slightly increased during the past six months.

Participants discussed the quality of ecstasy and molly and rated the current quality of ecstasy as '6' and of molly as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common scores were not reported. Participants did not report on cutting agents. 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 molly is typically sold as a "single stack" (low dose amount) for \$20. A participant added, *"Twenty dollars a pill. If you buy more than one, you can get a better price."* Overall, participants reported that the prices of ecstasy and molly have remained the same during the past six months. Participants indicated that ecstasy and molly are obtained through drugs dealers and at bars. Participants and community professionals described typical ecstasy and molly users as college students. A treatment provider shared, *"I know in the college population around here, it is pretty high (used often)."*

### Other Drugs in the Athens Region

Participants and community professionals did not report on additional drugs as present in the region. However, BCI crime labs reported that the incidence of substituted cathinones ("bath salts") cases they process from this region has slightly increased during the past six months, although it remains low. In addition, BCI crime labs reported that the incidence of LSD (lysergic acid diethylamide) cases they process from this region has slightly increased during the past six months; the labs reported having processed very few cases of synthetic cannabinoids, psilocybin mushrooms and DMT (dimethyltryptamine) from this region during the past six months.

### Conclusion

Heroin, marijuana, methamphetamine and Suboxone® (buprenorphine) remain highly available in the Athens region; also, highly available are fentanyl and sedative-hypnotics. Changes in availability during the past six months include: increased availability for methamphetamine; likely increased availability for fentanyl; and decreased availability for prescription opioids.

Participants most often assigned a low availability rating to fentanyl last reporting period based on the determination that unadulterated fentanyl was difficult to obtain as the drug was typically used as a cut for other drugs and not sold "straight." Participants this reporting period indicated high and increasing availability for the drug. They attributed increased availability during the past six months to increased demand for the drug, discussing fentanyl as commonly found and preferred over heroin because it produces a more intense high than heroin. A participant remarked, *"[Fentanyl] is better than heroin."* In addition to reporting the sale of "pure" fentanyl in the region, participants and community professionals also noted that the drug is pressed into pills resembling prescription opioids. BCI crime labs reported that the incidence of fentanyl and fentanyl analogue cases they process from this region has slightly increased during the past six months.

Participants and community professionals reported that the availability of crystal methamphetamine has increased during the past six months. Participants discussed inexpensiveness and the production of a long-lasting high as methamphetamine's appeal to users. They also noted, along with treatment providers, that opioid users have switched from heroin/fentanyl to methamphetamine, with this transition most notable among users receiving Vivitrol® as MAT. Law enforcement concurred with participants that the availability of powdered (aka "shake-and-bake") methamphetamine has decreased during the past six months due primarily to the wide availability of crystal methamphetamine which is cheap and pushed in the region. Law enforcement also commented on harsher legal penalties for methamphetamine manufacture opposed to methamphetamine possession, as well as pharmacy restrictions on the sale of pseudoephedrine

needed for the production of the drug, as reasons for increased demand/availability of crystal methamphetamine. BCI crime labs reported that the incidence of methamphetamine cases they process from this region has increased during the past six months.

Lastly, in terms of the current overall quality of methamphetamine, participants most often assigned a moderate quality score based on their reporting of the many adulterants (aka "cuts") being added to methamphetamine, including fentanyl. Participants discussed overdoses caused by fentanyl-cut methamphetamine.