



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 Muskingum 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) London office, which serves central and southern Ohio and includes data from BCI's Athens and Cambridge offices. In addition, data were abstracted from the *High-lighted Seizures of 2015 and 2016* report of the Criminal Patrol Unit of the Ohio High Intensity Trafficking Area (HIDTA), as well as from the National Forensic Laboratory Information System (NFLIS) which collects results from drug chemistry analyses conducted by state and local forensic laboratories across Ohio. All secondary data are summary data of cases processed from July through December 2015. In addition to these data sources, Ohio media outlets were queried for information regarding regional drug abuse for January through June 2016.

Note: OSAM participants were asked to report on drug use/knowledge pertaining to the 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	Athens Region	OSAM Drug Consumers
Total Population, 2014	11,560,380	583,689	45
Gender (female), 2014	51.1%	50.3%	48.9%
Whites, 2014	84.8%	96.8%	93.3%
African Americans, 2014	13.6%	3.2%	2.2%
Hispanic or Latino Origin, 2014	3.3%	1.0%	2.4% ³
High School Graduation Rate, 2014	82.6%	89.5%	73.1% ³
Median Household Income, 2014	\$49,349	\$40,682	\$12,000-\$19,999 ⁴
Persons Below Poverty Level, 2014	15.3%	18.7%	65.4% ⁵

¹Ohio and Athens regional statistics were derived from the most recent US Census and Ohio Department of Education data; OSAM drug consumers were participants for this reporting period: January - June 2016.

²Hispanic or Latino Origin was unable to be determined for 3 participants due to missing and/or invalid data.

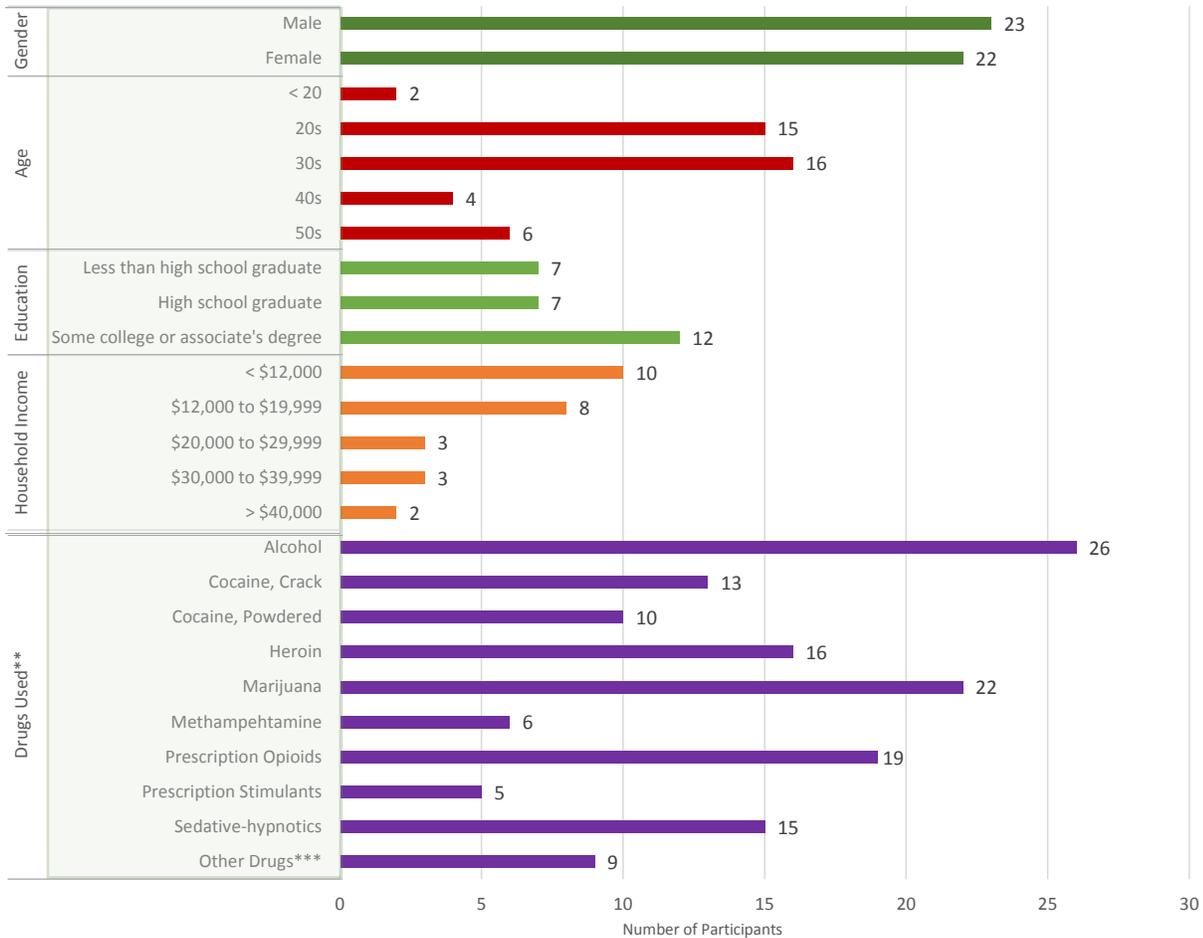
³High school graduation rate was unable to be determined for 19 participants due to missing and/or invalid data.

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 19 participants due to missing and/or invalid data.

⁵Poverty status was unable to be determined for 19 participants due to missing and/or invalid data.

Athens Regional Participant Characteristics

Drug Consumer Characteristics* (N=45)



*Not all participants filled out forms completely; therefore, numbers may not equal 45.

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

***Other drugs included: Neurontin®, Suboxone® and Subutex®.

Historical Summary

In the previous reporting period (June 2015 – January 2016), crack cocaine, heroin, marijuana, methamphetamine, Neurontin®, powdered cocaine, prescription opioids, prescription stimulants, sedative-hypnotics and Suboxone® were highly available in the region. An increase in availability existed for methamphetamine; a likely increase in availability existed for Suboxone®.

Heroin remained easy to obtain. Participants and community professionals identified the drug as the most prevalent and problematic of all drugs that were available in the region. Many respondents identified heroin use as epidemic. Reportedly, black tar heroin was the most available heroin type in the region; however, participants noted brown and white powdered heroin as also available.

Participants throughout the region agreed that the availability of heroin increased during the previous six months, while community professionals reported that heroin availability had remained the same (highly available). The BCI London Crime Lab reported that the number of heroin cases it processed had increased; the lab reported processing black tar and powdered heroin.

Participants continued to report that heroin was adulterated with fentanyl, which contributed to higher overdose rates than previously reported. The BCI London Crime Lab reported that powdered heroin was often a heroin-fentanyl mixture and confirmed that straight fentanyl was often sold in lieu of heroin.

Participants and treatment providers reported an increase in street availability of Suboxone® and participants attributed it to an increase in number of clinics dispensing the drug. Participants most often reported obtaining Suboxone® for illicit use through personal prescription or from someone who had a prescription. Participants and community professionals described typical illicit Suboxone® users as opiate addicts.

Many participants reported that methamphetamine was as available as heroin. Participants noted methamphetamine availability in powdered and crystal forms, but reported that the most available type in terms of widespread use throughout the region was powdered (aka “shake-and-bake” or “one pot”). Participants and community professionals reported that the availability of methamphetamine had increased during the reporting period.

Participants who reported personal use of methamphetamine also reported personally manufacturing the drug and added that they believed more people produced the drug due to how easily it is made. Very few participants reported difficulty in obtaining this drug. The BCI London Crime Lab reported that the number of methamphetamine cases it processed had increased; the lab reported processing crystal, brown, off-white and white powdered methamphetamine.

Participants noted that many methamphetamine users initially used heroin. Community professionals described typical methamphetamine users as younger adults (18-24 years) and of lower socio-economic status.

Finally, participants and community professionals reported high availability and abuse of Neurontin® (gabapentin, an anticonvulsant). Law enforcement noted challenges in adult drug court surrounding illicit use of this drug. Participants described typical illicit users of Neurontin® as those with limited access to other drugs. Community professionals described typical illicit users as opiate users, as well as, those who were desperate to get high and could not obtain other substances.

Current Trends

Powdered Cocaine



Powdered 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'. One participant stated, "Yeah, anybody can make a phone call and find it." Treatment Providers most often reported current availability of powdered cocaine as '5', while law enforcement most often reported it as '10'; the previous most common scores were the same for both groups. A law enforcement officer commented, "It's huge."

Corroborating data also indicated that cocaine is available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 253 cocaine cases

reported during the past six months (an increase from 246 cases for the previous six months).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A man from Columbus (Franklin County), was arrested at a motel in Athens for cocaine and heroin trafficking; oxycodone was also found in his possession (www.athensmessenger.com, Jan. 19, 2016). Belmont County Sheriff's Department increased its manpower to target drug traffickers, and subsequently arrested two men in possession of cocaine and heroin during a traffic stop (www.wtrf.com, Feb. 16, 2016). A former student at a regional university, who was caught with five ounces of powdered cocaine, MDMA, LSD, heroin and marijuana, was sentenced to a diversion program following agreement between the prosecutor's office and the Major Crimes Unit (www.athensnews.com, Feb. 28, 2016). A Dayton man was arrested in Jackson County when the Ohio State Highway Patrol (OSHP) found 160 grams of powdered cocaine, 33 grams of crack cocaine and three grams of heroin in his vehicle (www.statepatrol.ohio.gov, March 11, 2016). A Millfield (Athens County) woman pled guilty to trafficking cocaine and heroin and voluntarily entered into a rehabilitation program, as well as enrolled in the prosecutor's Vivitrol® program (www.athensnews.com, April 10, 2016).

Participants reported that the availability of powdered cocaine has remained the same during the past six months. A participant remarked, "It's been a '10' (highly availability) for a while now." Community professionals reported increased availability of powdered cocaine during the past six months. A treatment provider stated, "For me, it's gone up, but I don't know if that is because of my case load." Law enforcement officers commented: "It's becoming bigger because of what we are doing with heroin; It's increased since we started taking away the heroin and oxycodone." The BCI London Crime Lab reported that the number of powdered cocaine cases it processes has increased during the past six months.

Powdered Cocaine	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 powdered cocaine as '5' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '10'. One participant claimed, "Shoot, when I was getting it, it was great. Soon as it touched my face, it went numb." Another participant explained, "It depends on how much it's 'cut up' (adulterated)." Participants reported the top cutting agents for powdered cocaine as baby laxative, baking soda and powdered milk. Other adulterates mentioned include: creatine and numbing agents. A participant added, "Anything that's white." Overall, participants reported that the quality of powdered cocaine has decreased during the past six months. A participant commented, "People are cutting it too much ... trying to make that money." Another participant agreed, "It was better six months ago ... it keeps getting worse."

Powdered Cocaine	Cutting Agents Reported by Crime Lab	
		benzocaine (local anesthetic)
	levamisole (livestock dewormer)	

Reports of current prices for powdered cocaine were consistent among participants with experience buying the drug. Participants shared that the most common quantity purchased is a gram. A participant commented, "I have honestly never heard anyone around here try to buy a 'teener' (1/16 ounce). It's either a gram or an 'eight ball' (1/8 ounce)." 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	
	1/2 gram	\$50
	A gram	\$100
	1/16 ounce (aka "teener")	\$150
	1/8 ounce (aka "eight ball")	\$250
An ounce	\$1,000	

Participants reported that the most common route of administration for powdered cocaine remains intravenous injection (aka "shooting") and snorting. Participants

estimated that out of 10 powdered cocaine users, seven would shoot and three would snort the drug. Most participants reported that snorting is a preferred route of administration among those who do not shoot other substances. A participant explained, *"Most people start by snorting it, but once you go to the needle, you ain't going anyway else ... you ain't going to get the same high."*

Participants described typical powdered cocaine users as younger, white, college students and lawyers. A participant reflected, *"I feel like, I see a lot more younger people partying on it."* Community professionals described typical powdered cocaine users as more affluent. Additionally, a law enforcement officer commented, *"So, it's about what they learn to use in high school is what they end up liking. They try them all. I don't think that we have met a major user that has not tried 'meth' (methamphetamine) and cocaine"*

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 commented: *"It's usually easier to get than 'coke' (powdered cocaine); I can get [crack cocaine] all day long."* Treatment providers most often reported current availability as '3-5', while law enforcement most often reported it as '8'; the previous most common scores were '8' for treatment providers and '2' for law enforcement.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A Columbus man was arrested after OSHP stopped him in Jackson County for several traffic violations and discovered 152 grams of crack cocaine and 13 grams of powdered heroin (www.statepatrol.ohio.gov, Feb. 13, 2016). A man was arrested in Muskingum County for possession of crack cocaine; this arrest was in connection with another case in which heroin, methamphetamine and marijuana were seized (www.otfca.net, March 19, 2016). OSHP seized a large bag of crack cocaine that was in plain view from a vehicle that was stopped for following too closely (www.statepatrol.ohio.gov, May 17, 2016).

Participants reported that the availability of crack cocaine has remained the same during the past six months. One participant shared, *"It's my drug of choice, so it's always going to be a '10' (highly available) for me."* Treatment pro-

viders reported that the availability of crack cocaine has increased during the past six months, while law enforcement reported decreased availability. A treatment provider commented, *"Oh yeah, probably more [available] than the powdered cocaine."* Another treatment provider explained, *"I don't know why [crack cocaine availability has increased], I just know that's what my clients are saying they are using."* In contrast, a law enforcement officer observed, *"That's gone down [in availability]."* The BCI London Crime Lab reported that the number of crack cocaine cases it processes has increased during the past six months, although the lab noted that it does not typically differentiate between powdered and crack cocaine.

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

Participants most often rated the current overall quality of crack cocaine as '5' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '5'. However, participants noted inconsistency of quality. One participant shared, *"I've bought good crack and I have bought crack that wasn't even crack."*

Participants reported that crack cocaine in the region is most often adulterated (aka "cut") with baking soda, dried eggs and heroin. One participant shared, *"The last time I smoked crack, these guys were putting heroin in it because it's just flooded with that around here and heroin is cheaper. But, they charge more when it's cooked up in the 'rock' (crack cocaine) and it also gives you a better high."* Overall, participants reported that the quality of crack cocaine has decreased during the past six months. A participant explained, *"There is less high quality of that around because everyone is just cooking it themselves. You can go out and buy just straight coke and cook it up yourself"*

Crack Cocaine		Cutting Agents Reported by Crime Lab	
		benzocaine (local anesthetic)	
		levamisole (livestock dewormer)	

Reports of current prices for crack cocaine were consistent among participants with experience buying the drug. Reportedly, the most common quantity purchased is a “rock” (1/10 gram). One participant shared, *“Pretty much whatever you got (whatever money you have), you will get something.”* Another participant agreed and shared, *“I could buy whatever. If I had \$10, \$20, \$30 ... whatever.”*

Crack Cocaine	Current Prices for Crack Cocaine	
	1/10 gram (aka “rock”)	\$10
	1/2 gram	\$50
	A gram	\$100
	1/16 ounce (aka “teener”)	\$150

Participants reported that the most common route of administration for crack cocaine remains smoking. Participants estimated that out of 10 crack cocaine users, seven would smoke and a three would intravenously inject (aka “shoot”) the drug. One participant explained, *“You can put it in some Kool-Aid®, mix it up and it breaks it down in an instant and then you can take it up a needle.”*

Participants described typical crack cocaine users as older and African-American. A participant reflected, *“I don’t see young people doing it ... no one under 20 [years of age].”* Community professionals described typical crack cocaine users as women and heroin addicts. Treatment providers described, *“They are middle-aged women. This one was 50-years old and never used crack ... and then she did.”* A law enforcement officer considered, *“I think you are more likely to use crack if you are on heroin because, I mean, they ‘speedball’ with crack (use cocaine and heroin concurrently or consecutively for an up-and-down high).”*

Heroin

Heroin 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’. A participant remarked, *“I could have it delivered to my house.”*

Corroborating data also indicated that heroin is available in the region. Ohio HIDTA’s Criminal Patrol Unit Highlighted Seizures report recorded that HIDTA officers interdicted 225 grams of heroin in Jackson County in July 2015 in a single seizure. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 421 heroin cases reported during the past six months (a decrease from 445 cases for the previous reporting period).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Five individuals were arrested for their role in trafficking heroin from Columbus to Athens (www.athensnews.com, May 22, 2016). OSHP stopped a vehicle for following too closely in Athens County and arrested a passenger for heroin trafficking when they discovered 315 grams of heroin in her possession (www.nbc4i.com, March 29, 2016). A member of a heroin drug ring was sentenced to four years in prison for “spreading addiction” in Athens County (www.athens-messenger.com, Jan. 28, 2016). Zanesville Police worked in coordination with Muskingum County Sheriff’s Office and the Central Ohio Drug Enforcement Task Force to bring down a top heroin dealer in the county; 2,600 dose units of heroin, \$25,000 worth of methamphetamine and \$3,000 worth of marijuana were confiscated during the investigation (www.otfca.net, Jan. 29, 2016). Three individuals pled guilty to their role in the overdose death of a woman in Glouster (Athens County); she had been using heroin and cocaine for several days prior to her death (www.athensnews.com, Feb. 28, 2016). A Michigan woman was arrested when a K-9 officer alerted OSHP troopers to a vehicle that was stopped in Athens County; the woman was apprehended after attempting to flee the scene; 315 grams of heroin were seized from her vehicle (www.state-patrol.ohio.gov, March 23, 2016). A Westerville (Franklin County) man and a Pataskala (Licking County) woman were arrested for selling heroin in Athens; the investigation and subsequent arrests were a coordinated effort among several counties’ law enforcement agencies (www.athensnews.com, April 3, 2016).

While many types of heroin are currently available in the region, participants reported brown powdered as most available. A participant responded, *“There is ‘tar’ (black tar heroin) and ‘white china’ (white powdered heroin), but mostly what I see is brown chunks. I have seen gray [powder] and black, too, but mostly brown.”* Participants indicated that black tar heroin is also readily available and most

often reported its current availability as '8' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get).

Contrary to participants, community professionals reported black tar heroin as the most available heroin type in the region. A treatment provider stated, "We have a lot of people using heroin and it's the black tar. It's the cheapest, definitely a '10' (highly available)." Another treatment provider estimated, "Tar is the biggest one. I would say 90 percent of the heroin around here [is black tar heroin]." A law enforcement officer agreed, "Mainly black tar, but a little bit of white powder."

Participants reported that the availability of heroin has increased during the past six months and commented: "It's gotten a lot easier [to obtain]; It only goes up (increases in availability)." Treatment providers reported that the availability of heroin has remained the same during the past six months, while law enforcement reported a decrease in availability. A treatment provider commented, "I think it has just been consistent all along." However, a law enforcement officer reasoned, "It's down because we have taken so many suppliers out."

The BCI London Crime Lab reported that the number of powdered heroin cases it processes has increased during the past six months; the lab reported processing beige, brown, tan and white powdered heroin. The lab also reported that the number of black tar heroin cases has increased as well, although the lab noted that it does not typically differentiate between black tar and powdered heroin.

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

Participants most often rated the current overall quality of heroin as '7' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '5-7.' Participants expressed that quality varies. One participant explained, "That's one reason that there are so many overdoses. You might get this [batch of heroin] and you need this much of it. Then the next day, or even later on that same day, half of what you did before could kill you."

Participants discussed adulterants (aka "cuts") that affect the quality of heroin and reported that the top cutting agents are fentanyl and baby laxative. A participant stated, "The last drug test I took, I failed for four different drugs ... and the only drug I [knowingly] took was heroin. I failed for morphine, and [two] drugs I never ... heard of, and heroin." Additional cuts mentioned by participants include: cornmeal, sedative-hypnotics (Xanax®), sleep aids and vitamin-B. Overall, participants reported that the quality of heroin has decreased during the past six months. One participant stated, "It's gotten worse because people are money hungry."

Heroin	Cutting Agents Reported by Crime Lab	
		caffeine
		diphenhydramine (antihistamine)
		fentanyl/acetyl fentanyl
		mannitol (diuretic)
	triacetin (glycerin triacetate, a food additive)	

Reports of current prices for heroin were consistent among participants with experience purchasing the drug. Participants reported that the most common quantity purchased is a tenth of a gram (aka "stamp" or "folds"). One participant shared, "Depends on who your 'dope boy' (dealer) is ... I am partial to the tar and it's easier to weigh it out that way because with the powder someone could 'pinch' (take a little away without the buyer knowing)...." Participants indicated that the price of heroin has remained the same during the past six months.

While there were a few reported ways of using heroin, generally, the most common route of administration remains intravenous injection (aka "shooting"). Participants estimated that out of 10 users, nine would shoot and one

Heroin	Current Prices for Heroin	
	Powdered:	
	1/10 gram (aka "folds")	\$10-30
	1/2 gram	\$75-100
	A gram	\$150-200
	Black tar:	
	1/10 gram (aka "balloon")	\$10-20
1/2 gram	\$60-75	

would snort the drug. A participant asserted, "Nine of them are 'banging' (shooting) it, the other might be snorting, but it would not take long to move (progress) to banging it."

Participants reported obtaining needles from pharmacies and dealers. A participant remarked, "You can go straight to the pharmacy. There are two in town. They don't ask no questions as long as you are 18 [years of age]." The most commonly reported street price for needles is \$5 apiece. According to participants, sharing needles is rare. One participant shared, "I didn't really share needles ... I mean, I did with my girlfriend, but that's it." Another participant stated, "I'm definitely not sharing."

A profile for a typical heroin user did not emerge from the data. Participants described typical heroin users as anybody and across the board. A participant commented on how young users and dealers are: "I seen a 12-year old ... shooting up. I have bought heroin off of a 13-year old." Community professionals described typical heroin users as anyone. A law enforcement officer stated, "I would say 99 percent of them come from tragedy, where their parents were addicts and it just sort of came down the ladder"

Prescription Opioids



Prescription opioids remain highly available in the region. Participants and community professionals 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 scores were also '10'. A participant commented, "You can get them anywhere."

Corroborating data also indicated that prescription opioids are available for illicit use in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region, returned 343 prescription opioid cases, of which 31 were acetyl-fentanyl/fentanyl cases, reported during the past six months (a decrease from 362 cases for the previous reporting period, of which 15 were acetyl-fentanyl/fentanyl cases).

In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. A K-9 officer alerted to a vehicle pulled over in Jackson County; upon search, the driver dropped a bag containing 368 oxycodone pills and 30 oxymorphone pills, which were then seized by

OSHP (www.statepatrol.ohio.gov, March 9, 2016). Fairfield County probation officers coordinated with the Athens and Hocking Counties Major Crimes Unit to inspect a residence of a man on probation; during the visit, the man's wife dropped baggies with approximately 85 OxyContin® 30 mg pills out the bottom of her pant leg (www.athensnews.com, Jan. 13, 2016).

Participants identified Opana®, OxyContin®, Percocet® and tramadol as the most popular prescription opioids in terms of widespread illicit use. A participant asserted, "Perc 30s' (30 mg Roxicodone®) are definitely the most popular." Community professionals identified OxyContin®, Percocet® and Roxicodone® as the most popular prescription opioids in terms of widespread illicit use.

Participants reported that the general availability of prescription opioids has decreased slightly during the past six months. A participant commented, "It's maybe not quite what it used to be because more people are selling heroin, but they are still really easy to get." Another participant reasoned, "It's because doctors aren't prescribing them like they used to." One participant reflected, "I think it depends on which pill, like finding a Dilaudid® is a lot harder than getting a perc 30 or something like that." Community professionals also reported that the general availability of prescription opioids has decreased during the past six months. One law enforcement officer commented, "It's gone down, oxycodone is almost a drug of the past here."

The BCI London Crime Lab reported that the number of prescription opioid cases it processes has increased during the past six months for Dilaudid®, fentanyl, Kadian®, morphine, Opana®, OxyContin®, Percocet® and Vicodin®; the lab reported a decreased number of cases for methadone and Ultram®.

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 per milligram, plus a "tax." The majority of participants indicated that the price of prescription opioids has increased during the past six months. Several participants agreed with an individual who stated, "Prices have definitely gone up."

Prescription Opioids	Reported Availability Change during the Past 6 Months	
	 Participants	Decrease
	 Law enforcement	Decrease
	 Treatment providers	Decrease

Prescription Opioids	Current Street Prices for Prescription Opioids	
	Dilaudid®	\$30-40 per pill (unspecified dose)
	Opana®	\$30-35 for 15 mg
	Percocet®	\$1-2 per milligram
	Vicodin®	\$1 per milligram

Participants reported obtaining prescription opioids for illicit use from pain clinics, hospitals, dealers, and most commonly, from other people who have prescriptions. Participants commented: *"I get them from people who have 'scripts' (prescriptions); You can buy them from little old ladies who get them, but don't eat (take) them."*

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, all 10 would snort these medications. Several participants shared similar sentiments as one participant stated, *"They would probably all be snorting them."*

A profile of a typical illicit prescription opioid user did not emerge from the data. Participants described illicit users as someone who has been injured in the past, or in general, as anyone. One participant shared, *"A lot of people, who would not have ever touched drugs, get hurt, get on pills and there you go ... Two years later you're in the hood looking for a bag of 'dope' (heroin)."* Another participant remarked, *"If you have a back problem, you got a pill problem."* Community professionals described typical illicit users of prescription opioids also as someone who has experienced an injury, but they, too, emphasized that anyone might illicitly use these medications. One treatment provider commented, *"Anybody. I have seen it range from young to older, rich to poor."* A law enforcement officer shared, *"When it comes to the pills, it's normally someone who's had an injury and got them prescribed at first. I mean this whole opioid problem comes from doctors over prescribing them. People who you would think would never get into this, had a simple back injury and"*

Suboxone®

Suboxone® remains highly available in the region. Participants and community professionals 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 scores were also '10'. One participant remarked, *"They are like 100 [on the availability scale]; they are so easy to get."* Another participant stated, *"That's one of the main things out there right now."* One treatment provider commented, *"We have a Suboxone® clinic right up the street, so yeah, it's a 10."*

Corroborating data also indicated the availability of Suboxone® for illicit use in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 130 buprenorphine (an ingredient of Suboxone®) cases reported during the past six months (a decrease from 157 cases for the previous reporting period).

Participants reported that the street availability of Suboxone® in both tablet and filmstrip forms has increased during the past six months. A participant stated, *"I have seen more and more people over the last year using them and having them."* Community professionals reported that the street availability of Suboxone® has remained the same during the past six months. Treatment providers explained: *"People don't like to be 'dope sick' (go through withdrawal); I think it's because there are more [Suboxone®] programs out there."* The BCI London Crime Lab reported that the number of Suboxone® and Subutex® cases it processes has increased during the past six months.

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

Suboxone®	Current Street Prices for Suboxone®	
	filmstrip	\$30-35 for 8 mg
	tablet	\$20-25 for 8 mg

Reports of current street prices for Suboxone® were consistent among participants with experience buying the drug.

In addition to obtaining Suboxone® on the street from dealers, participants also reported getting the drug through clinics. A participant explained, *"You can go to the clinic, but it's just as easy to find on the streets."*

Participants reported that the most common route of administration for illicit use of Suboxone® remains intravenous injection (aka "shooting") and sublingual consumption for filmstrips; snorting and oral consumption for tablets. One participant shared, *"I prefer the pills because you don't get that taste."* Participants agreed with the sentiment expressed by one participant who said, *"Strips' (filmstrips) are preferred by IV (intravenous) users because they can liquefy the strips and 'bang' (inject) them."*

The majority of participants described typical illicit users of Suboxone® as opiate users. However, a few agreed it could be anyone. Community professionals described typical illicit users of Suboxone® as anyone addicted to opiates.

Sedative-Hypnotics

Sedative-hypnotics (benzodiazepines, barbiturates and muscle relaxants) are moderately to highly available 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 '10'. Treatment providers most often reported the current availability of sedative-hypnotics as '10', while law enforcement most often reported it as '5'; the previous most common scores were '10' and '8' respectively.

Corroborating data also indicated that sedative-hypnotics are available for illicit use in the region. Ohio HIDTA's Criminal Patrol Unit High-lighted Seizures report recorded that HIDTA

officers interdicted 1,100 du (dose units) of Xanax® along with one gram of marijuana in Jackson County in November 2015 in a single seizure. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 165 benzodiazepine cases reported during the past six months (an increase from 125 cases for the previous reporting period).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Two men were arrested at a pizza place in uptown Athens (Athens County) when police found them intoxicated and in possession of nearly 20 alprazolam pills (generic Xanax®) and 86.5 Xanax® pills (www.athensnews.com, May 22, 2016). A judge denied a motion by a 31-year-old man, who had been sentenced to 10 years prison for heroin trafficking, to withdraw his guilty plea due to being high on Xanax® and heroin at the time it was made (www.athensnews.com, April 6, 2016).

Participants identified Klonopin® and Xanax® as the most available sedative-hypnotics in terms of widespread illicit use. A participant suggested, *"Xanax® is harder to find than Klonopin®."* Community professionals identified Xanax® as the most available sedative-hypnotic in terms of widespread illicit use. A treatment provider shared, *"I think that some of the medicated assistance programs are giving Xanax® also with [buprenorphine]."*

Participants reported that the general availability of sedative-hypnotics has decreased during the past six months, while community professionals reported no change in availability. The BCI London Crime Lab reported that the number of sedative-hypnotic cases it processes has either decreased or remained the same during the past six months, with the exception of an increased number of cases for Ambien® and Xanax®.

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. Generally, sedative-hypnotics most often sell for \$2 per half milligram. A participant stated, "Bars' (Xanax® 2.0 mg) would go for \$8-10."

Sedative-Hypnotics	Current Street Prices for Sedative-Hypnotics	
	Klonopin®	\$1 for 0.5 mg \$2 for 1 mg
	Xanax®	\$1-2 for 0.5 mg \$4 for 1 mg \$8-10 for 2 mg

Participants reported obtaining sedative-hypnotics from people they knew who had prescriptions. A participant commented, "You find people who have 'scripts' (prescriptions) and you buy them out."

While there were a few reported ways of using sedative-hypnotics, generally the most common routes of administration for illicit use are oral consumption and snorting. Participants estimated that out of 10 illicit sedative-hypnotic users, five would orally consume (aka "eat") and five would snort the drugs. However, several participants agreed with one who said, "Everyone is going to snort them." Another participant affirmed, "I would say maybe a few more are snorting than eating." Participants described typical illicit users of sedative-hypnotics as white, female and nervous. Community professionals described typical illicit users of these medications as female.

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'. Referencing marijuana's abundance in the area, one participant stated, "A '20' [on the availability scale] probably; you can get it anywhere."

Community professionals most often reported current availability of marijuana as '10'; the previous most common

score was also '10'. A treatment provider estimated, "99.99 percent of our people (clients) use marijuana." A law enforcement officer observed, "We may even have some elected officials that smoke marijuana, not in this office, but ... the last commissioner we had in 2012, the Sheriff had to take marijuana from his house ... a grow operation."

Corroborating data also indicated that marijuana is available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 462 cannabis cases reported during the past six months (an increase from 437 cases for the previous reporting period).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. OSHP seized more than 45 pounds of marijuana in Zanesville (Muskingum County) when they pulled a Maryland man over for a traffic violation (www.statepatrol.ohio.gov, Feb. 23, 2016). Reports of an underage drinking party led Perry County Deputies to a residence in Glenford where they seized 129 marijuana plants and methamphetamine (www.nbc4i.com, March 30, 2016). One hundred marijuana plants were discovered in an abandoned home in Guernsey County (www.whiznews.com, Feb. 15, 2016). A marijuana grow operation was found inadvertently in Athens County when officers were investigating an abandoned car that led them to a residence just north of Amesville; 61 marijuana plants were seized from the home (www.athensnews.com, March 30, 2016). Another marijuana grow operation was found on the north side of Athens; 105 marijuana plants were seized from five different areas in the basement of a residence (www.athensnews.com, March 30, 2016).

Participants indicated moderate 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 '6-7'; the previous most common score was '10'. A participant commented, "Dabs are a little less available than marijuana."

Participants reported that the availability of both low- and high-grade marijuana has remained the same during the past six months. A participant remarked, "It's always been around and easy [to obtain]." Participants indicated that marijuana concentrates and extracts have increased during the past six months. A participant explained, "A lot of people are switching to dabs. It's definitely around." Community

professionals reported that the availability of marijuana has remained the same during the past six months. A law enforcement officer commented, "It's always been high." The BCI London Crime Lab reported that the number of marijuana cases it processes has decreased during the past six months.

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 reported: "Quality has gone up; It's not your daddy's 'Mexican dirt weed' (low-grade marijuana) that's for sure." However, participants indicated that the overall quality of marijuana has remained the same during the past six months. A participant noted, "It all depends on who you go to (the dealer)."

Reports of current prices for marijuana were provided by participants with experience buying the drug. Participants reported that the most common quantity purchased is an eighth gram and added that there are better prices when purchasing larger quantities.

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. One participant commented, "Smoke it mainly. The edibles are kind of a throwback ... it's rare."

A profile for a typical marijuana user did not emerge from the data. Participants described typical marijuana users as possibly everybody and anyone. A participant proclaimed, "If it were legal, everyone would do it." Community professionals described typical marijuana users as everybody. A treatment provider commented, "I think everybody. It goes across all age groups." A law enforcement officer quipped, "[Anyone] alive and breathing."

Marijuana	Current Prices for Marijuana	
	Low grade:	
	A blunt (cigar) or two joints (cigarettes)	\$10
	High grade:	
	A blunt (cigar) or two joints (cigarettes)	\$20
	1/8 ounce	\$50
	1/4 ounce	\$70-100
	An ounce	\$350-400
	A pound	\$3,200-3,500
	Extracts and concentrates:	
A gram	\$50	

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'. A participant reported, "It's quite the epidemic in Zanesville [Musk- ingum County] right now." Another participant recounted, "Everyone is doing it around Scioto County. There are a bunch of [methamphetamine] labs that they bust around there." Community professionals most often reported the current availability of methamphetamine as '10'; the previous most common score was '8-10'.

Participants reported that methamphetamine is available in both powdered (aka "one-pot" or "shake-and-bake") and crystal (aka "ice") forms, but identified powdered as the most prevalent form throughout the region. A participant remarked, "It's around a lot now ... that shake-and-bake ..." Shake-and-bake methamphetamine is produced 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. A participant reported, "It's easy to find because you can make that shake-and-bake in a couple of hours." A law enforcement officer commented, "Mainly the shake-and-bake. We have very little ice ... It is coming now ... from Mexico."

Corroborating data also indicated that methamphetamine is available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned 197 methamphetamine cases reported during the past six months (a decrease from 328 cases for the previous reporting period).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A one-pot methamphetamine lab was seized at a trailer park residence in Athens County, wherein 12 children were present; a K-9 officer sniffed out the suspect who was subsequently arrested (www.athensnews.com, Jan. 10, 2016). A couple days later, a backpack was found beneath a child's crib in the same residence with an active one-pot methamphetamine lab in it (www.athensmessenger.com, Jan. 13, 2016). Another backpack was reported found along a roadside in Glouster (Athens County) with remnants of a one-pot methamphetamine lab inside which was neutralized (www.athensnews.com, Jan. 17, 2016). Athens County Major Crimes Unit conducted searches in both Coolville and Glouster during a two-day period and found methamphetamine and cocaine and methamphetamine-related materials; altogether four individuals were arrested (www.athensmessenger.com, Feb. 1, 2016). A father and son were arrested in Trinway (Muskingum County) following an investigative search and seizure of 100 grams of methamphetamine; the two are facing charges for trafficking methamphetamine in Muskingum, Perry and Licking counties (www.otfca.net, Feb. 5, 2016). As an active one-pot methamphetamine lab in a Nelsonville residence was being neutralized, another one-pot lab was found by the Ohio Department of Natural Resources in a public hunting area (www.athensnews.com, March 2, 2016). Methamphetamine was found concealed in a Glouster woman upon entering the Southeastern Ohio Regional Jail (www.athensnews.com, March 20, 2016).

Participants reported that the availability of powdered methamphetamine has increased during the past six months, while the availability of crystal methamphet-

amine has decreased. Reportedly, the availability and quality of crystal methamphetamine varies by location. One participant reported, "You go up around Zanesville, you can find a lot of high-quality ice." Community professionals reported that the availability of methamphetamine has increased during the past six months. Treatment providers commented: "It's gone up here; More people are using 'meth' (methamphetamine) because it's cheaper." The BCI London Crime Lab reported that the number of methamphetamine cases it processes has decreased during the past six months; the lab reported processing crystal, brown and off-white powdered methamphetamine.

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 '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '10'. However, participants often noted that quality varies. One participant explained, "Depends on where you get it from, really. Some people have some good stuff and others it's just 'bunk' (poor quality)." Participants identified Epsom salt and vitamin E as common adulterates (aka "cuts") for methamphetamine. Only a couple participants discussed quality change of methamphetamine. One participant reported quality has remained the same, while the other reported it has decreased during the past six months. The participant who suggested a decrease in quality explained, "It's gone down [because] they cut it more to try to get more out of it."

Reports of current prices for methamphetamine were inconsistent among participants with experience buying the drug. Several participants indicated that methamphetamine is typically sold in quantities that match the amount of money one has. A participant explained, "You can get anything really, \$10, \$15, \$20 ... whatever you got."

Participants reported that the most common route of administration for methamphetamine remains

Methamphetamine	Current Prices for Methamphetamine	
	Powdered:	
	1/2 gram	\$50-100
	A gram	\$80-180
1/8 ounce (aka "eight ball")	\$200-250	

smoking, followed by snorting and intravenous injection (aka "shooting"). Participants estimated that out of 10 methamphetamine users, six would smoke, two would snort and two would shoot the drug. A participant shared, "They would be doing all three [routes of administration]. They are all different buzzes."

A profile for a typical methamphetamine user did not emerge from the data. Participants were unable to identify a typical methamphetamine user. Community professionals described typical methamphetamine users as unemployed and women who want to be skinny. Law enforcement indicated that many methamphetamine users have already used many other drugs. One officer commented, "I think it's like the end. It's like your last gasp."

Prescription Stimulants

Prescription stimulants remain highly available 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 also '10'. One participant commented, "Yeah, they are easy to get. They pass that shit out to kids." Treatment Providers most often reported prescription stimulant availability as '10' in Athens County and '3' in Muskingum County; law enforcement most often reported the current overall availability as '4'. The previous most common scores were '10' for treatment providers and '3-4' for law enforcement.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A man in connection with a Columbus-Athens heroin drug trafficking ring was also found in possession of numerous Adderall® and Xanax® pills; he was sentenced to 10 years in prison,

followed by participation in the Athens County Prosecutor's Vivitrol® program (www.athensnews.com, Feb. 21, 2016).

Participants and community professionals identified Adderall® and Vyvanse® as the most popular prescription stimulants in terms of widespread illicit use. A law enforcement officer specifically commented, "I think Adderall® is very prevalent."

Participants reported that the general availability of prescription stimulants has increased during the past six months. One participant specified, "I think Adderall® is going up." Community professionals reported that the availability of prescription stimulants remained the same during the past six months. The BCI London Crime Lab reported that the number of Adderall® cases it processes has decreased during the past six months, while the number of Ritalin® cases has increased.

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

Reports of current street prices for prescription stimulants were consistent among participants with experience buying these drugs.

Prescription Stimulants	Current Street Prices for Prescription Stimulants	
	Adderall®	\$3 for 10 mg
		\$3-5 for 15 mg
\$6-8 for 30 mg		
Vyvanse®	\$1 per milligram	

Treatment providers indicated that these drugs are often obtained for illicit use through diversion of a child's prescription. A treatment provider explained, "They just send their kids to the doctors to get it." 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 these drugs.

Participants described typical illicit users of prescription stimulants as college students. Community professionals described typical illicit users as women and college students. One law enforcement officer surmised, "I think if you went and drug tested law students and medical students, I think you would find a lot of Adderall®."

Ecstasy



Ecstasy (methylenedioxymethamphetamine: MDMA, or other derivatives containing BZP, MDA, and/or TFMPP) remains available in the region. Although participants were unable to rate the current availability of ecstasy (traditional pressed pills) or "molly" (powdered MDMA) due to lack of personal experience with the drugs, one participant commented, "Molly is pretty popular." Treatment providers most often reported the current availability of ecstasy as '1-2,' while law enforcement reported availability of molly as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); previous scores for ecstasy in general were '5-7' for participants and '10' for professionals. A law enforcement officer asserted, "Molly is probably the biggest drug on the college campus now. So, inside the city (Athens), it's a '10' (highly available), but outside the city it's a '1'."

Participants reported that the availability of molly has increased during the past six months. A participant commented, "It seems like a lot of those drugs are around when the students are in town." Law enforcement also reported that the availability of molly has increased during the past six months. The BCI London Crime Lab reported that the number of ecstasy cases it processes has increased during the past six months; the lab does not differentiate between ecstasy and molly cases.

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

Participants were unable to report on pricing for ecstasy or molly. One participant remarked, "I never bought it, so I don't know." Participants described typical molly users as college students. Community professionals described typical ecstasy and molly users as college students and exotic dancers (aka "strippers").

Synthetic Marijuana

Synthetic marijuana (synthetic cannabinoids) remains available in the region, although participants reported no personal experience with this drug during the past six months and treatment providers reported limited knowledge. One clinician reported, "The kids aren't even talking about it. Half the adults I get in here don't even know what it is." Another treatment provider referred to previous employment and commented, "I know in [correctional facilities] it was available. They were sneaking it in just because they said it didn't show up [on drug tests] as easy." Only law enforcement professionals were able to report on current availability of synthetic marijuana and rated it as '8' in urban areas and '3' in rural areas of the region on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '2.' A law enforcement officer commented, "On the college campus, it's huge."

Corroborating data also indicated that synthetic marijuana is available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Athens region returned seven cases of synthetic cannabinoids for Belmont County and eight cases for Guernsey County (no cases in the region were found for the previous reporting period).

Treatment providers reported that the availability of synthetic marijuana has decreased during the past six months, while law enforcement reported that availability has remained the same. A treatment provider commented, "I think use has gone down just because availability has gone down." The BCI London Crime Lab reported that the number of synthetic marijuana cases it processes has decreased during the past six months.

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

Community professionals described typical synthetic marijuana users as college students. One professional responded, "In their mid-20s, you know, the younger population."

Other Drugs in the Athens 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: bath salts, hallucinogens (lysergic acid diethylamide [LSD] and psilocybin mushrooms) and Neurontin® (gabapentin, an anticonvulsant).

Bath Salts

Bath salts (synthetic compounds containing methylone, mephedrone, MDPV or other chemical analogues) remain available in the region. However, only community professionals discussed availability of bath salts during the past six months and law enforcement reported current availability as '2' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get). Law enforcement reported that the availability of bath salts has decreased during the past six months. A law enforcement officer reported, "A little bit [available] with college students ... at one time, it was big. I mean, you could get it over the counter." The BCI London Crime Lab reported that the number of bath salts cases it processes has decreased during the past six months.

Hallucinogens

Hallucinogens remain available in the region. Participants most often reported the current 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 '7-8'. A participant replied, "It just depends. You got to know the people to get it from. I mean, I guess I could make a phone call [to obtain hallucinogens]."

Community professional were unable to rate the availability of these substances, but one treatment provider informed, "They are around, but we don't get people in here to treat them for that addiction. But when you talk to [clients], they will let you know that they are around." Participants reported that the availability of LSD and psilocybin mushrooms has remained the same during the past six months. The BCI London Crime Lab reported that the number of LSD and psilocybin mushroom cases it processes has increased during the past six months.

Current prices for LSD and psilocybin mushrooms were consistent among participants with experience buying the drugs. Reportedly, LSD sells \$10 for one dose (aka "hit") and \$90-100 for 10 hits (aka "strip"); psilocybin mushrooms sell \$35-40 for an eighth ounce. Participants indicated a belief that prices have increased during the past six months. Participants described typical users of LSD and psilocybin mushrooms as hippies, while community professionals described them as college kids and those experimenting with drug use.

Neurontin®



Neurontin® is highly available for illicit use in the region. Participants most often reported the current street availability for Neurontin® 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'. A participant commented, "It seems like everyone is on Neurontin®." Law enforcement also most often reported the current street availability of Neurontin® as '10'; the previous most common score was '8'. A law enforcement officer commented, "Enormous Neurontin® abuse right now. It is huge right now."

Participants and community professionals reported that the availability of Neurontin® has increased during the past six months. Participants reasoned: "I think it's increased because it doesn't show up in your urine; They also prescribe it to you if you are on Vivitrol®." A treatment provider commented, "It's on the rise. I am hearing a lot more about it being on the streets and I got clients that are prescribed it. They say it's awesome for withdrawals."

Current street prices for Neurontin® were consistent among participants with experience buying the drug. Reportedly, Neurontin® sells \$1-2 for 300 mg, \$2-3 for 400 mg, \$4 for 600 mg and \$5 for 800 mg. Participants

described the typical illicit Neurontin® user as “people on Vivitrol®.” Community professionals describe typical illicit users as heroin addicts and anybody who can get their hands on it.

Conclusion

Crack cocaine, heroin, marijuana, methamphetamine, powdered cocaine, prescription opioids and Suboxone® remain highly available in the Athens region; also highly available is Neurontin®. Changes in availability during the past six months include increased availability for powdered cocaine and Neurontin®; likely increased availability for ecstasy and methamphetamine; and decreased availability for prescription opioids.

While there was no consensus among data sources as to a change in availability for heroin during the past six months, all indicators were in agreement that the drug remains extremely easy to get. Many types of heroin are currently available in the region; participants reported brown powdered as most available while community professionals reported black tar as most available.

Participants expressed that the quality of heroin varies and discussed that varying quality is driving the many overdoses experienced in the region. One participant explained, “You might get this [batch of heroin] and you need this much of it. Then the next day, or even later on that same day, half of what you did before could kill you.” Participants continued to report fentanyl as a top cutting agent for heroin. The BCI London Crime Lab also reported fentanyl and acetyl fentanyl in samples it processed during the past six months.

Community professionals reported increased availability of powdered cocaine during the past six months. Law enforcement officers believe their targeted efforts with

heroin and oxycodone have tightened the supply of opiates and may be a reason for increasing cocaine use and availability. The BCI London Crime Lab reported that the number of powdered cocaine cases it processes has increased during the past six months. Participants described typical powdered cocaine users as younger, white, college students and lawyers, while community professionals described typical powdered cocaine users as more affluent.

Participants and community professionals reported that the availability of “molly” (powdered MDMA) has increased during the past six months. Many respondents noted a connection between molly and college students, with a law enforcement officer stating that molly is probably the most popular drug on college campuses today. The BCI London Crime Lab reported that the number of ecstasy cases it processes has increased during the past six months; the lab does not differentiate between ecstasy and molly cases.

Lastly, Neurontin® is highly available for illicit use in the region. A participant commented, “It seems like everyone is on Neurontin®.” A law enforcement officer commented, “Enormous Neurontin® abuse right now.” Participants and community professionals reported that the availability of Neurontin® has increased during the past six months. Participants reasoned demand and use for the drug has increased because it reportedly doesn’t show up in standard drug screen results; they also reported that many individuals prescribed Vivitrol® are also prescribed Neurontin®. Community professionals described typical illicit users of Neurontin® as heroin addicts who use the drug to aid withdrawal, as well as anybody who can get their hands on the drug.

