



### Drug Abuse Trends in the Dayton Region



#### Regional Epidemiologist:

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#### Data Sources for the Dayton 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 Allen, Clark and Montgomery 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 Montgomery County Coroner’s Office, Logan County Family Court, the Miami Valley Regional Crime Lab, the Ohio Bureau of Criminal Investigation (BCI) and the Ohio Department of Public Safety (ODPS), which logs drug task force seizures from across the state. All secondary data are summary data of cases processed from July through December 2017. In addition to these data sources, Ohio media outlets were queried for information regarding regional drug abuse for January through June 2018.

*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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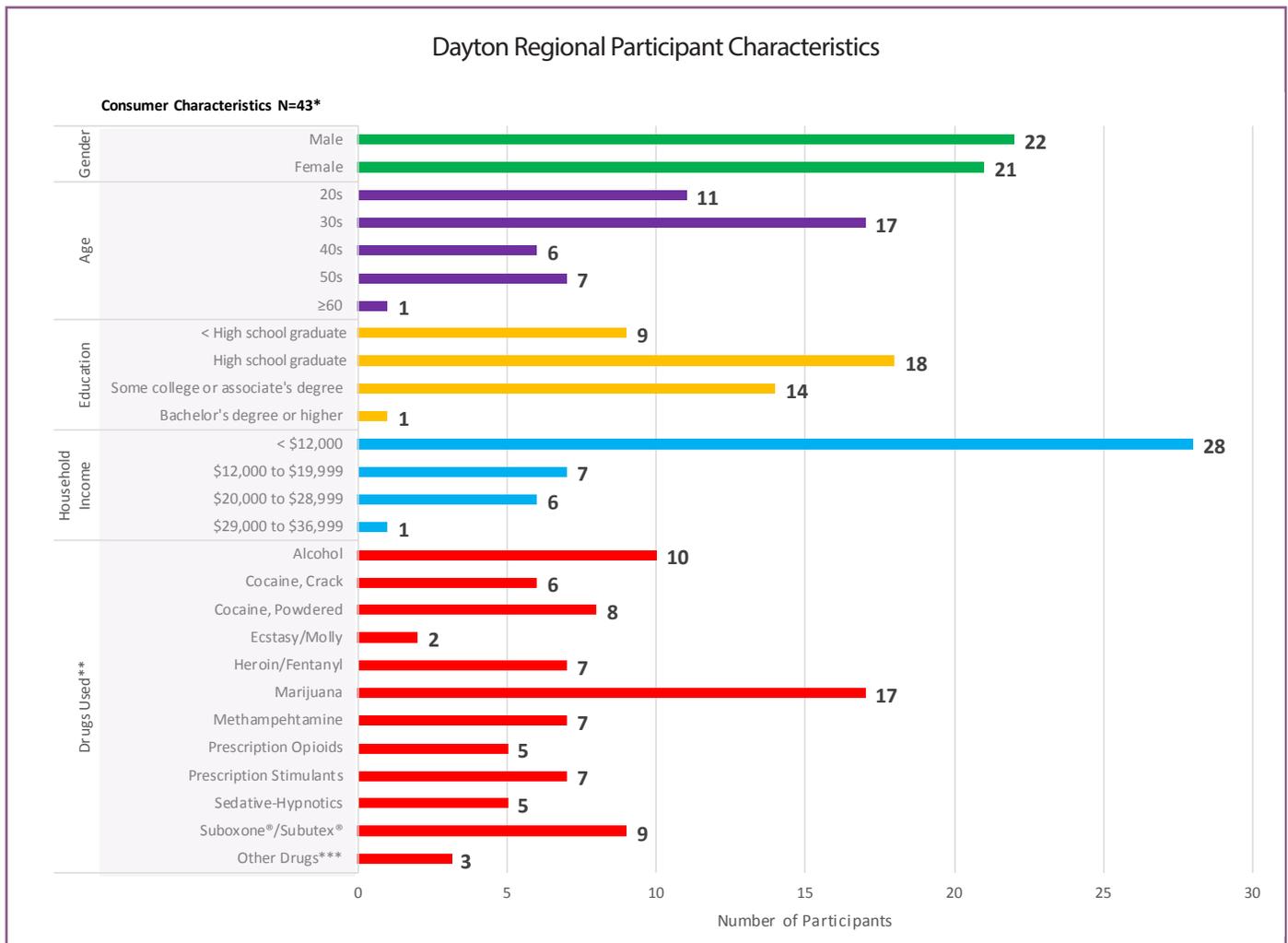
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### Regional Profile

Indicator <sup>1</sup>	Ohio	Dayton Region	OSAM Drug Consumers
Total Population, 2016	11,614,373	1,342,139	43
Gender (female), 2016	51.0%	51.1%	48.8%
White, 2016	82.5%	83.9%	67.4% <sup>2</sup>
African Americans 2016	12.8%	11.7%	16.3% <sup>2</sup>
Hispanic or Latino Origin, 2016	3.7%	2.5%	7.9% <sup>3</sup>
High School Graduation Rate, 2012-16	89.5%	89.7%	76.7% <sup>4</sup>
Median Household Income, 2012-16	\$50,674	\$50,817	Less than \$12,000 <sup>5</sup>
Persons Below Poverty Level, 2016	14.6%	14.7%	74.4% <sup>6</sup>

<sup>1</sup>Ohio and Dayton region statistics were derived from the most recent US Census; OSAM drug consumers were participants for this reporting period: January-June 2018.  
<sup>2</sup>Race was unable to be determined for 1 participant due to missing data. Other races reported include "American Indian/Alaska Native," "other race" and "more than one race."  
<sup>3</sup>Hispanic or Latino Origin was unable to be determined for 1 participant due to missing and/or invalid data.  
<sup>4</sup>Education level was unable to be determined for 2 participants due to missing and/or invalid data.  
<sup>5</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>6</sup>Poverty status was unable to be determined for 2 participants due to missing and/or invalid data.

### Dayton Regional Participant Characteristics



\*Not all participants filled out forms completely; therefore, numbers may not equal 43.  
 \*\*Some respondents reported multiple drugs of use during the past six months.  
 \*\*\*Other drugs included: Neurontin® (gabapentin), lysergic acid diethylamide (LSD) and psilocybin mushrooms.

## Historical Summary

In the previous reporting period (June 2017 - January 2018), crack cocaine, heroin, marijuana and methamphetamine remained highly available in the Dayton region; also highly available was fentanyl, Neurontin® (gabapentin), prescription opioids and Suboxone®. Changes in availability during the reporting period included: increased availability for fentanyl, methamphetamine and Neurontin®; and likely increased availability for marijuana and Suboxone®.

Although participants and community professionals reported high availability of heroin, respondents across focus groups discussed that heroin was not “heroin,” but rather heroin mixed with fentanyl. Participants explained that heroin unadulterated with fentanyl or carfentanil was nearly unavailable in the region. They, along with community professionals, noted that users desired fentanyl and carfentanil over heroin; many sought the synthetic opioids.

Fentanyl was extremely available in the region. Law enforcement reported that drug cartels had flooded the region with the drug. They also noted that fentanyl was purchased online from overseas vendors, primarily in China, and mailed to addresses in the region. Participants and community professionals attributed the increased availability of fentanyl during the reporting period to increased demand for the drug. They discussed that fentanyl provided a “better” (more potent) high than heroin and at a cheaper price. Both respondent types also discussed a higher frequency in overdoses in the region as indicative of a higher supply of fentanyl.

Participants reported the presence of gray, pink, white and yellow colored fentanyl. Participants discussed that fentanyl was an adulterant (aka “cut”) for other drugs. In fact, they reported that fentanyl was most often mixed with other drugs; thus, for those seeking fentanyl, they often got it in combination with other drugs. Participants described typical fentanyl users as heroin users, aged teens to 30 years and white people. In addition to fentanyl, participants also reported high availability of fentanyl analogues and carfentanil.

Participants and community professionals reported that the high availability of methamphetamine increased

during the reporting period. Participants discussed that heroin users were switching to methamphetamine as a way to detox from heroin, as methamphetamine was believed to be “safer” than opiates. Likewise, law enforcement indicated some heroin users had switched to methamphetamine use possibly out of fear of opiate overdose. Additionally, some users discussed coupling their heroin use with methamphetamine use. One participant stated, “*Meth’s been a life saver for me ... I mix it with my heroin and I won’t ‘OD’ (overdose).*” Participants and treatment providers also discussed that users who received Vivitrol® as medication assisted treatment for opioid use disorder continued to get high with methamphetamine.

Participants reported that methamphetamine was available in crystal and powdered forms throughout the region. However, they noted crystal methamphetamine as the most prevalent form of the drug. In addition to heroin users, participants and community professionals described typical methamphetamine users as white people, 20-40 years and people who worked labor-intensive jobs. Law enforcement also noted members of motorcycle gangs as typical users.

Neurontin® was highly available for illicit use in the region, and participants and community professionals reported that its street availability increased during the reporting period. Reportedly, typical illicit Neurontin® users were those addicted to opiates who used the drug to alleviate opiate withdrawal symptoms.

Lastly, the BCI London Crime Lab reported it processed 21 cases of ketamine (an anesthetic typically used in veterinary medicine) and 44 cases of U-47700 (synthetic opioid) during the reporting period.

## Current Trends

### Powdered Cocaine

Powdered cocaine remains moderately to highly available in the region. Participants most often reported the drug’s current availability as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely

easy to get); the previous most common score was '7-8.' Participants reported: *"It's everywhere; It is easy to get ... I can get it within 10 minutes; I could get it at a drop of a hat; I could go get it right now if I wanted it; It is available 24/7."* Treatment providers most often reported the current availability of powdered cocaine as '6,' while law enforcement most often reported it as '7;' the previous most common scores were '7-8.' Treatment providers reported: *"Cocaine is highly available; I am surprised how readily available cocaine is in the area; I have clients who report using it ... so I know it is out there; [There is a] high demand for mood altering chemicals in Montgomery County."*

Corroborating data indicated that powdered cocaine is available in the Dayton region. The Logan County Family Court reported that of the 310 positive adult drug tests it recorded during the past six months, 20.6% were positive for crack and/or powdered cocaine. The Montgomery County Coroner's Office found crack and/or powdered cocaine present in 46.0% of the 189 drug-related deaths it processed during the past six months. In addition, the Ohio Department of Public Safety (ODPS) reported seizing 6.9 kilograms (15.2 lbs.) of powdered cocaine from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Law enforcement in Urbana (Champaign County) arrested a woman after her 7-year-old son was discovered to be under the influence of cocaine at school that he inadvertently ingested at home before going to school ([www.nbc4i.com](http://www.nbc4i.com), April 29, 2018).

Participants and community professionals reported that the availability of powdered cocaine has remained the same during the past six months. Participants commented: *"It is always available for those who want it; It has been and always will be available ... a phone call away ... delivered right to your door; It is same now but could become less available ... with meth increasing [as an alternative]."* The Ohio Bureau of Criminal Investigation (BCI) crime labs and the Miami Valley Regional Crime Lab reported that the incidence of cocaine cases they process from this region have 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 '7' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '5-6.' Participants commented: *"In the bigger cities, the quality is better; It's 'stomped on' (adulterated) that's why it's not as good; The quality depends really on where you go to get it."* Participants discussed adulterants (aka "cuts") that affect the quality of powdered cocaine and reported the top cutting agents for the drug as baking soda, fentanyl and laxatives. Other adulterants mentioned included: baby aspirin, numbing agents and vitamin B-10. Participants reported: *"Cocaine is cut with a bunch of stuff ... stuff that causes you to get numb (to imitate the numbing effect of the drug); By the time it gets to the streets, you don't know what is in any of the drugs you buy."* Overall, participants reported that the quality of powdered cocaine has decreased during the past six months. One participant remarked, *"It keeps getting worse."*

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. Participants commented: *"The more you buy, the dealer will give you a break; It really depends on the dealer and the supply."* 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")	\$140-160
	1/8 ounce (aka "eight ball")	\$240-300

Participants reported that the most common route of administration for powdered cocaine remains snorting. Participants estimated that out of 10 powdered cocaine users, nine would snort and one would intravenously inject (aka "shoot") the drug. A participant commented, "The people I used with would ... like me ... snort because we did not use needles."

Participants described typical powdered cocaine users as older, predominately white people, and younger black males who are usually associated with rap music. Treatment providers also described typical users as predominantly white people, while law enforcement did not specify a typical powdered cocaine user. One treatment provider stated, "In my case load, it is mostly white individuals who are in treatment for cocaine." A law enforcement officer stated, "It is pretty much across the board ... not quite as broad as marijuana though."

### 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 stated: "It is everywhere; There is a 'dope' (drug) dealer on every street here; You can get it all the dang time; I bet I can get crack (cocaine) within 10 minutes if I wanted; Crack is the easiest drug to get; You can go right down the street and get some crack." Community professionals most often reported the current availability of crack cocaine as '6'; the previous most common score was '10' for treatment providers and '7-8' for law enforcement. A treatment provider commented: "'Powder' (powdered cocaine) is more common than crack; [Crack cocaine is] not as prevalent as in the 80s and 90s." Law enforcement stated: "It's available; It is not as available as powder."

Corroborating data indicated that crack cocaine is available in the Dayton region. ODPS reported seizing 258.2 grams (0.6 lbs.) of crack 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. Allen County Sheriff's deputies arrested a man following the seizure of undisclosed amounts of crack cocaine, methamphetamine, heroin, marijuana, oxycodone and cash while executing a search warrant of a motel room in Lima ([www.limaohio.com](http://www.limaohio.com), May 31, 2018). Local, state and federal authorities arrested eight men in Lima and charged them with conspiracy to possess with intent to distribute crack and powdered cocaine ([www.limaohio.com](http://www.limaohio.com), June 15, 2018).

Participants and community professionals reported that the availability of crack cocaine has remained the same during the past six months. Participants remarked: "Wherever there are poor people, there will be crack; It is the cheapest drug... cheap with a strong high." BCI crime labs and the Miami Valley Regional Crime Lab 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.

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

Participants most often rated the current overall quality of crack cocaine as '6' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '6'. Participants reported: "[Quality] really depends on the dealer; You get some good ... some bad; You have to stick with one certain [drug dealer] to know what you get." Participants reported that crack cocaine in the region is most often adulterated (aka "cut") with baking soda and fentanyl. Other cuts mentioned included: baby laxatives, heroin and vitamin B-12. Overall, participants reported that the quality of crack cocaine has decreased during the past six months. A participant reported, "It is getting cut ... don't know what you're getting."

Crack 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 crack cocaine were reported by participants with experience buying the drug. Reportedly, the most common quantity of purchase is 1/10 gram (aka "rock"). Participants commented: "You can usually get a rock for \$10; This is the cheapest drug to get when you are a poor addict." Overall, participants reported that the price has increased during the past six months.

Crack Cocaine	Current Prices for Crack Cocaine	
	1/10 gram	\$10-20
	A gram	\$65-100
	1/16 ounce (aka "teener")	\$110

Participants reported that the most common route of administration for crack cocaine remains smoking. Participants estimated that out of 10 crack cocaine users, nine would smoke and one would intravenously inject (aka "shoot") the drug. However, participants reported that routes of administration are based on the group of people using the drug together.

A profile of a typical crack cocaine user did not emerge from the data. Participants described typical users as anyone from rich to poor, young to old and of any race. Participants commented: "It is everybody; Crack does not discriminate; It's everybody ... young, old ... black and white; I've met poor and multi-millionaires who used crack." Treatment providers also described typical crack cocaine users as anyone, while law enforcement most often described typical users as of low socio-economic status. One treatment provider commented, "I have treated parents and their children." A law enforcement officer remarked, "lower class type of user."

## Heroin

Heroin remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Participants stated: "In [Hardin County] you can see it everywhere; It is very easy to get; It is way too available." However, participants discussed that often what one gets when purchasing heroin is fentanyl. One participant remarked, "You're not really getting heroin because it is really fentanyl."

Treatment providers most often reported the current availability of heroin as '10,' while law enforcement most often reported it as '4,' the previous most common scores were '10' and '5,' respectively. Law enforcement indicated that fentanyl has replaced much of the heroin in the region, thus the lower rating. Law enforcement commented: "It is hard to anchor availability for heroin because what is reported as heroin ... a lot of it is a mixture of heroin and fentanyl; It is hard to tell whether it is pure heroin until it gets tested ... it is usually a mixture of heroin and fentanyl; It is rare that it is pure heroin."

Corroborating data indicated that heroin is available in the Dayton region. The Montgomery County Coroner's Office found heroin present in 11.1% of the 189 drug-related deaths it processed during the past six months. In addition, ODPS reported seizing 21.0 kilograms (46.4 lbs.) of heroin from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A man was sentenced in Allen County Common Pleas Court to 11 years in prison for involuntary manslaughter, corrupting another with drugs and trafficking in heroin ([www.limaohio.com](http://www.limaohio.com), March 16, 2018). Law enforcement in Eaton (Preble County) arrested a man for possession of heroin and drug paraphernalia following the seizure of 50 capsules of heroin during a traffic stop ([www.abc22now.com](http://www.abc22now.com), April 4, 2018). A woman was sentenced to serve 18 months at the Ohio Reformatory for Women following her guilty plea of child endangering in response to the death of her baby of suspected fentanyl overdose ([www.abc22now.com](http://www.abc22now.com), April 23, 2018). Auglaize County corrections officers seized over 50 grams of heroin from a female inmate attempting to smuggle the drug into the county correctional facility in a body cavity ([www.limaohio.com](http://www.limaohio.com), June 5, 2018).

While many types of heroin are currently available in the region, participants specifically reported white powdered heroin as most available. One participant stated, "There is no black tar in the area and nobody wants the brown ... the white powder is very available in [Allen County]." Community professionals also reported white powdered as most available. A treatment provider stated, "I have not heard clients mention brown powder. The white powder is what clients talk about." Reportedly, brown powdered heroin is also available in the region. Participants commented: "I have seen a lot of the brown which is supposed to be heroin; The brown and white powder heroin are very available." Regarding the most available type of heroin, a law enforcement officer stated, "[The available type] depends on the shipments into the area."

Participants reported that the high availability of heroin has remained the same during the past six months. Participants discussed: "If I make a call ... I could get it instantly; It seems like everyone wants to be a heroin dealer." Treatment providers reported that the general availability of heroin has increased during the past six months, while law enforcement reported that it has remained the same. Treatment providers stated: "I hear about heroin more often from my clients; My clients are turning to heroin as replacement for pain killers." A law enforcement officer commented, "Availability goes in spurts." BCI and the Miami Valley Regional crime labs reported that the incidence of heroin cases they process from this region has decreased during the past six months; the labs reported processing beige, brown, gray, off-white, 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	Increase

Participants most often rated the current overall quality of heroin as '1' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was

'7'. Participants reported: "It is really fentanyl so there is not quality for heroin; The heroin is not killing people, it is the fentanyl that is being sold as heroin; All I can say about the quality is that it is garbage." Participants discussed adulterants (aka "cuts") that affect the quality of the drug and reported that the top cutting agent for heroin remains fentanyl. No additional cuts for heroin were discussed among participants in this region. Overall, participants reported that the general quality of heroin has remained the same during the past six months.

Heroin	Cutting Agents Reported by Crime Lab	
	<ul style="list-style-type: none"> <li> acetaminophen</li> <li> caffeine</li> <li> cocaine</li> <li> diphenhydramine (antihistamine)</li> <li> fentanyl</li> <li> inositol (dietary supplement)</li> <li> lidocaine (local anesthetic)</li> <li> mannitol (diuretic)</li> <li> methamphetamine</li> <li> Nicotinamide (vitamin)</li> <li> quinine (antimalarial)</li> <li> sorbitol (artificial sweeteners )</li> <li> tramadol</li> </ul>	

Reports of current prices for heroin were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is a gram. Participants reported: "The 'caps' (capsules filled with heroin) are pretty cheap, but most times you get the gram; It is \$10 caps ... [although price] depends on who is capping it up." Overall, participants indicated that the price of heroin has remained the same during the past six months. A participant commented, "The cost is about the same, [however] it just depends on where you buy."

Heroin	Current Prices for Heroin	
	<b>Powdered:</b>	
	1/10 gram	\$10-20
	1/2 gram	\$40-60
	A gram	\$80-100

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 heroin users, nine would shoot and one would smoke and/or snort the drug. A participant stated, “All would most likely be shooting up heroin.”

Participants reported that injection needles are most often obtained from drug dealers and at retail pharmacies. Additionally, participants reported obtaining needles from needle exchange programs or from individuals with chronic illness such as diabetes who sell their syringes. Participants reported: “The drug dealers sell them, or damn, you could go to Walmart and get them for cheap; I would sell needles. My mom was diabetic. I would sell a bag of five for \$10.” Reportedly, needles sell on the street for \$2-5 per needle.

Participants described typical heroin users as anyone between 16-60 years of age, but a few participants specified white people most often use the drug. Participants commented: “Addiction to heroin does not discriminate; Typical user is everyone and anyone; The majority is white ... has to do with those people who got started out on pain pills ... all of sudden it stopped and then they turned to heroin...” Treatment providers described typical heroin users as 18-60 years of age and white people, while law enforcement described typical users as white people, with a recent trend in heroin use among African-American people. Treatment providers reported: “It really doesn’t discriminate in age; I am not surprised with the background of the clients I see who use heroin, as they come in all shapes and sizes.” Law enforcement commented: “Typical user is lower class ... usually white; Younger to middle age; Starting to see more black people using heroin.”

## Fentanyl



Fentanyl is 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 discussed: “It’s scarily available;

*There is more fentanyl than heroin; Heroin is no longer the drug of choice. People want the dope that can kill them ... they think because it kills ... it is good stuff; Narcan® brings them back and they use again.”* Law enforcement officers commented: “It is off the charts; There is probably some on the bottom of my shoe right now.”

In addition, participants and community professionals reported high current availability of carfentanil in the region; many respondents commented that they believed carfentanil to be more prevalent than fentanyl. Participants commented: “It is mostly carfentanil in the area; I think is it mostly carfentanil, but really you don’t know until it is tested.” Corroborating data indicated that fentanyl and carfentanil are available in the Dayton region. The Montgomery County Coroner’s Office found fentanyl/fentanyl analogues present in 68.3% of the 189 drug-related deaths it processed during the past six months; the office found carfentanil present in 34.9% of these 189 drug-related deaths. In addition, ODPS reported seizing 8.8 kilograms (19.3 lbs.) of fentanyl from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A Montgomery County judge sentenced a man to 144 months in prison for possession of fentanyl and a firearm ([www.wdtn.com](http://www.wdtn.com), Jan. 4, 2018). A sting operation led by a federal task force resulted in the arrest of a man in Union (Montgomery County) on several felony counts of drug trafficking ([www.daytondailynew.com](http://www.daytondailynew.com), May 10, 2018). The Miami Valley Bulk Smuggling Task Force arrested four men and seized around nine kilograms of fentanyl, over 100 pounds of marijuana and a large amount of cash during a raid in New Carlisle (Clark County) ([www.mydaytondailynews.com](http://www.mydaytondailynews.com), June 13, 2018).

Participants and community professionals reported that the availability of fentanyl has increased during the past six months. Participants reported: “It seems like that is what everyone is doing; Now it is all about the fentanyl; That’s all that users want is fentanyl; [The cartels are] sending more and more into the area.” BCI and the Miami Valley Regional crime labs reported that the incidence of fentanyl, fentanyl analogue and carfentanil cases they process from this region has decreased during the past six months.

Fentanyl	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 fentanyl as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); a previous most common score was also '10'. Participants reported: "You know it's good stuff if it kills you; They've got some of the best fentanyl in the world." A treatment provider added, "We have had deaths due to overdoses of this lethal drug." Overall, participants reported that the quality of fentanyl has increased during the past six months.

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

Fentanyl	Current Street Prices for Fentanyl	
	1/10 gram	\$10
	1/2 gram	\$40-50
	A gram	\$80-100

While there were a few reported ways of using fentanyl, generally, the most common route of administration remains intravenous injection (aka "shooting"). Participants estimated that out of 10 fentanyl users, eight would shoot and two would snort or smoke the drug. Participants reported: "The group of people I used with most would shoot up; Most white women would snort, [men] would shoot up; Most are heroin users who now use fentanyl, they most likely shot up the heroin and would do the same with fentanyl!"

Participants described typical fentanyl users as white people of all socio-economic backgrounds. Participants reported: "It is mostly white people of all economic backgrounds; Poor and rich white people; There are less

black people that use ... it is a white drug." Community professionals described typical fentanyl users as heroin users. One law enforcement officer reported, "The typical user is those heroin addicts that crossed over to fentanyl."

### Prescription Opioids



Prescription opioids are moderately available for illicit use in the region. Participants most often reported the current street availability of these drugs as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '10'. Participants commented: "They are cracking down on the doctors prescribing; Doctors stopped handing out prescriptions; It is non-existent in my area." Treatment providers most often reported the current street availability of prescription opioids as '3,' while law enforcement most often reported it as '6,' the previous most common scores were '10' and '6,' respectively. Treatment providers stated: "They are not easy to get; There is more monitoring of the dispensing of opioids." A law enforcement officer remarked, "Opioids are not as easy to get [as previously] ... [but] they are still out there."

Corroborating data indicated that prescription opioids are available for illicit use in the Dayton region. The Logan County Family Court reported that of the 310 positive adult drug tests it recorded during the past six months, 12.3% were positive for prescription opioids (including buprenorphine). The Montgomery County Coroner's Office found at least one prescription opioid present in 33.3% of the 189 drug-related deaths it processed during the past six months (this does not include fentanyl). In addition, media outlets reported on law enforcement seizures and arrests in the region this reporting period. A man and a woman in Miami Township (Montgomery County) were indicted on charges of involuntary manslaughter, obstruction of justice and child endangering following the fatal tramadol overdose of a 6-year-old girl ([www.abc6onyourside.com](http://www.abc6onyourside.com), April 26, 2018).

Participants and community professionals identified Percocet® and Vicodin® as the most popular prescription opioids in terms of widespread illicit use. A participant reported, "You can get 'perks' (Percocet®) and 'vikes' (Vicodin®) if you know someone who is still taking them ... it will take some work to find."

Participants reported that the general availability of prescription opioids has decreased during the past six months. Participants commented: *"It is getting harder to get due to docs writing less prescriptions; I found one person I could go to once per month and that was it; I spent more time 'dope sick' (experiencing withdrawal) because it is not available."* Treatment providers reported that the street availability of prescription opioids has remained the same during the past six months, while law enforcement reported that it has decreased.

BCI crime labs reported that the incidence of morphine cases they process from this region has increased during the past six months, while the incidence of oxycodone (OxyContin®, Percocet®), hydrocodone (Vicodin®) and tramadol (Ultram®) cases has decreased or remained the same; the labs reported processing very few cases of hydromorphone (Dilaudid®), methadone and oxymorphone (Opana®) during the past six months. The Miami Valley Regional Crime Lab reported that the incidence of tramadol cases it processes has increased during the past six months, while the incidence of oxycodone and hydrocodone cases has decreased or remained the same; the lab reported processing very few cases of hydromorphone, oxymorphone, methadone and morphine during the past six months.

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

Reports of current street prices for prescription opioids were reported by participants with experience buying the drugs. Reportedly, the majority of prescription opioids sell for \$1-2 per milligram. Overall, participants indicated that the price of prescription opioids has remained the same during the past six months.

Participants reported obtaining prescription opioids for illicit use from drug dealers, individuals who have prescriptions for them and through Internet purchase. A

Prescription Opioids	Current Street Prices for Prescription Opioids	
	Percocet®	\$5-7 for 5 mg
		\$8-15 for 7.5 mg
		\$12-18 for 10 mg
Roxicodone®	\$30-50 for 30 mg	
Vicodin®	\$5 for 5 mg	
	\$7-8 for 7.5 mg	
	\$10 for 10 mg	

participant stated, *"You can get them from people trading their pain killers for heroin."* While there were a few reported ways of consuming prescription opioids, and variations in methods of use were noted among types of 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. A participant indicated, *"It really depends on who you use [with].... I would snort because that's what the people I used with did."*

A profile of a typical illicit prescription opioid user did not emerge from the data. Participants described typical illicit users as anyone. Participants commented: *"It is anyone ... does not discriminate; It blew my mind ... the type of people that use opioids."* Community professionals described typical illicit prescription opioid users also as anyone. However, one law enforcement officer observed, *"There are some middle to lower class whites who use the drug ... although I have seen more black people use in the past six months."*

### Suboxone®

Suboxone® is moderately to highly available for illicit use in the region. Participants most often reported the current street availability of Suboxone® as '8' 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'. A participant remarked, *"It is available.... My heroin dealer always had some. If you could not afford heroin, you could buy Suboxone®."* Community professionals most often reported current street availability as '6'; the previous most

common scores were '10' for treatment providers and '6' for law enforcement. A treatment provider commented, "There are four clinics in the area ... that is how they get on the streets." A law enforcement officer remarked, "It is pretty prevalent in prisons...."

Participants and law enforcement reported that the street availability of Suboxone® has remained the same during the past six months, while treatment providers indicated that it has increased. A participant noted, "You can find them if that is what you need ... this is because the people on them are selling them to get 'dope' (heroin)." Treatment providers discussed: "They are more available due to the increase in [the number of] clinics; I've heard they cut the 'strips' (Suboxone® filmstrip form) to have more to sell." BCI and the Miami Valley Regional crime labs reported that the incidence of Suboxone® cases they process from this region has remained the same during the past six months.

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

Reports of current street prices for Suboxone® were consistent among participants with experience buying the drug. A participant remarked, "There are lots of clinics, so the prices are not high [due to ample supply]..." Overall, participants indicated that the price of Suboxone® has remained the same during the past six months.

Suboxone®	Current Street Prices for Suboxone®	
	Filmstrip	\$15-20 for 8 mg
	Pill	\$20 for 8 mg

In addition to obtaining Suboxone® on the street from drug dealers, participants also reported getting the drug through individuals who have prescriptions and through Suboxone® clinics. Participants commented: "You can get

them from someone who gets them from clinic; I could just go to clinic myself as a patient and get 'subs' (Suboxone®)." Participants reported that the most common route of administration for illicit use of Suboxone® remains oral consumption, followed by snorting. Participants and community professionals described typical illicit Suboxone® users as heroin users, although one participant observed, "Suboxone® is mostly white people. Methadone is black people ... that is what I have seen."

### Sedative-Hypnotics

Sedative-hypnotics (benzodiazepines, barbiturates and muscle relaxants) remain 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 reported: "I don't think they are available at all; I love Xanax® and I can never find them; I couldn't find one if I tried." Community professionals most often reported the current street availability of sedative-hypnotics as '2'; the previous most common scores were '5,'7' and '10' for treatment providers and '7' for law enforcement. However, a treatment provider stated, "I believe it is readily available ... if that's what you are looking for."

Corroborating data indicated that sedative-hypnotics are available for illicit in the Dayton region. The Montgomery County Coroner's Office found at least one benzodiazepine present in 37.0% of the 385 drug-related deaths it processed during the past six months.

Participants identified Xanax® as the most available sedative-hypnotic in terms of widespread illicit use. Participants reported: "It is easier to get Xanax® than other 'benzos' (benzodiazepines) [in Allen County]; So many people abuse the Xanax®." Community professionals identified Klonopin® and Xanax® as most available. Treatment providers discussed: "We get a lot of drug screens that show Xanax® and Klonopin®; Xanax® availability is high." A law enforcement officer reported, "If we see any, it is usually Xanax® and Klonopin®"

Participants and community professionals reported that the general availability of sedative-hypnotics has remained the same during the past six months. BCI crime labs reported that the incidence of clonazepam (Klonopin®) cases they process from this region has increased during the past six months, while the incidence of alprazolam (Xanax®),

diazepam (Valium®) and zolpidem (Ambien®) cases have decreased or remained the same; the labs reported processing very few cases of carisoprodol (Soma®) and lorazepam (Ativan®) from this region during the past six months. The Miami Valley Regional Crime Lab reported that the incidence of clonazepam cases it processes from this region has increased during the past six months, while the incidence of alprazolam cases it processes has decreased; the lab reported processing very few cases of diazepam, carisoprodol, zolpidem and lorazepam during the past six months.

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

Reports of current street prices for sedative-hypnotics were reported by participants with experience buying the drugs. Overall, participants reported that the price of sedative-hypnotics has remained the same during the past six months.

Sedative-Hypnotics	Current Street Prices for Sedative-Hypnotics	
	Klonopin®	\$0.50 for 0.5 mg \$1-2 for 1 mg \$3-4 for 2 mg
Xanax®	\$1 for 0.25 mg \$2-3 for 0.5 mg \$4-5 for 1 mg \$6-7 for 2 mg	

Participants reported obtaining sedative-hypnotics for illicit use from drug dealers, individuals with prescriptions and through Internet purchase. Participants commented: *"I get them from people I know or online, so the availability is higher for me; You get them from doctors or the streets."* Generally, the most common route of administration for illicit use of sedative-hypnotics is oral consumption. Participants estimated that out of 10 illicit sedative-hypnotic users, eight would orally consume and two would snort the drugs. Participants described typical illicit

sedative-hypnotics users as females. Participants commented: *"I would say middle-aged women; Soccer moms."* Community professionals described typical illicit sedative-hypnotics users as young adults and white people. A law enforcement officer remarked, *"They are mostly white people that use the drug."*

## Marijuana



Marijuana remains highly available in the region. Participants and community professionals 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 scores were also '10'. Participants commented: *"It's everywhere ... like the grass in your yard; You can go outside right now and get it."* A law enforcement officer stated, *"It is easier to find marijuana than a Wendy's [restaurant]."*

Corroborating data indicated that marijuana is available in the Dayton region. The Logan County Family Court reported that of the 310 positive adult drug tests it recorded during the past six months, 64.8% were positive for THC (tetrahydrocannabinol; the principal psychoactive component of marijuana); the court also reported that 97.6% of the 85 positive juvenile drug tests it recorded during the past six months were positive for THC. In addition, ODPS reported seizing 287.5 kilograms (633.9 lbs.) of marijuana from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A judge in the Miami County Common Pleas Court sentenced a man to 18 months in prison; the man was arrested after police intercepted packages containing marijuana which were sent to him from California ([www.whio.com](http://www.whio.com), Jan. 2, 2018). Ohio State Highway Patrol (OSHP) in conjunction with the Sidney Police (Shelby County) and Piqua Police (Miami County) arrested two people while executing a search warrant in Sidney; officers seized an undisclosed amount of marijuana, hash, THC products and a large amount of cash from a camper ([www.wkbn.com](http://www.wkbn.com), Jan. 6, 2018). A K-9 officer assisted OSHP in the seizure of seven pounds of marijuana during a traffic stop along Interstate 70 in Preble County; officers arrested a man for felony possession of marijuana and criminal tools ([www.statepatrol.ohio.gov](http://www.statepatrol.ohio.gov),

Jan. 8, 2018). Dayton Police arrested a man after seizing over 120 pounds of marijuana, 3.88 pounds of cocaine, a large amount of cash and two firearms from his Dayton home ([www.wdtn.com](http://www.wdtn.com), Feb. 6, 2018). Middletown Police (Butler County) responded to reports of an 11-month-old girl testing positive for marijuana at Dayton Children’s Medical Center; the girl was taken from her mother and placed in custody of her grandmother ([www.whio.com](http://www.whio.com), March 19, 2018). Springfield Police (Clark County) arrested a woman after she assaulted two women when one of the victims’ dog ate her marijuana ([www.nbc4i.com](http://www.nbc4i.com), April 11, 2018). Tipp City Police (Miami County) arrested a man for possession of marijuana and drug paraphernalia after he was inadvertently shot by his own gun while driving; police found marijuana and a marijuana grinder in the console of the man’s car ([www.tdn-net.com](http://www.tdn-net.com), April, 18, 2018). Logan County Sheriff’s deputies arrested a man with multiple warrants upon his release from a hospital following treatment for a heroin overdose ([www.examiner.org](http://www.examiner.org), April 20, 2018). OSHP arrested a man following a traffic stop along Interstate 70 near Eaton in Preble County; officers seized three pounds of hash butter, 40 ounces of hash oil and 45 grams of marijuana ([www.wkbn.com](http://www.wkbn.com), May 3, 2018). OSHP arrested three men in Preble County during a traffic stop after recovering a pound of marijuana, a half-pound of hashish, THC oil and THC edibles from the vehicle ([www.wkbn.com](http://www.wkbn.com), June 13, 2018). A man pled guilty to felony drug possession of over 50 pounds of marijuana in the Miami County Common Pleas Court; police discovered the man with the marijuana during a traffic stop along Interstate 75 near Piqua ([www.whio.com](http://www.whio.com), June 22, 2018).

Participants and community professionals also discussed the 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 ‘5.’ Participants commented: *“Dabs ... everybody got those; They are pulling out all the THC ... it is purer; They are selling CBD (cannabidiol). I think it is highly available because of medical use.”* Community professionals most often reported the availability of marijuana extracts and concentrates as ‘9’; the previous most common scores were ‘5’ for treatment providers and ‘2’ and ‘7-8’ for law enforcement.

Participants reported that the availability of marijuana has increased during the past six months. Participants discussed: *“It’s increased ... it’s more popular; Everybody*

*wants to [sell marijuana] as a side job; You can go anywhere ... go to gas station and ask, ‘You got some weed?’”* Participants indicated that the availability of marijuana extracts and concentrates has also increased during the past six months. Participants reported: *“You get higher ... it’s cleaner; It’s gotten more available ... more and more people are wanting it...”*

Treatment providers reported that the general availability of marijuana has increased during the past six months, while law enforcement reported that it has remained the same. A treatment provider stated, *“It has increased due to legalization, media ... everybody has a medical condition now.”* BCI crime labs reported that the incidence of cannabis (including edible cannabis) and concentrated THC (oils, “dabs”) cases they process from this region has increased during the past six months, while the Miami Valley Regional Crime Lab reported that the incidence of cannabis and concentrated THC cases it processes has decreased.

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

Participants most often rated the current overall quality of marijuana as ‘10’ on a scale of ‘0’ (poor quality, “garbage”) to ‘10’ (high quality); the previous most common score was also ‘10.’ Regarding the current quality of marijuana extracts and concentrates, participants reported: *“Purity of extracts is super high; Dabs is always high quality; You can’t cut it.”* Overall, participants indicated that the quality of high-grade marijuana has increased during the past six months. Participants discussed: *“People are getting better in putting the chemicals on it to grow it; It’s getting stronger; They are making better ... better ways to grow it.”*

Reports of current prices for marijuana were provided by participants with experience buying the drug. Reportedly, the most common quantity of purchase is a “blunt” (marijuana-filled cigar). Overall, participants reported that the price of marijuana has remained the same during the past six months.

Marijuana	Current Prices for Marijuana	
	<b>Low grade:</b>	
	A blunt or a gram	\$5
	1/4 ounce	\$25-30
	An ounce	\$100
	<b>High grade:</b>	
	A blunt or a gram	\$15-20
	1/8 ounce	\$40-50
	1/4 ounce	\$60-80
	An ounce	\$225-300
	<b>Extracts and concentrates:</b>	
	Oil (unspecified amount)	\$25-40

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. A participant reported, "You can get 'edibles' (THC food products), but most people just smoke a 'joint' (marijuana cigarette) or pipe." A profile for a typical marijuana user did not emerge from the data. Participants and community professionals described typical marijuana users as anyone from young adults to older hippies.

## Methamphetamine



Methamphetamine 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 '10' and '8-9', respectively. Participants commented: "It is the 'crystal' (crystal methamphetamine) that is highly available; 'ice' (crystal methamphetamine) is predominantly what's out there; It is starting to skyrocket." A law enforcement officer stated,

*"It is all the heroin [users] turning to meth that are causing demand, as well as others who are getting off fentanyl!"*

Corroborating data indicated that methamphetamine is available in the Dayton region. The Montgomery County Coroner's Office found methamphetamine present in 21.7% of the 189 drug-related deaths it processed during the past six months. In addition, ODPS reported seizing 12.1 kilograms (26.8 lbs.) of methamphetamine from this region during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Additional charges were filed against a man who opened several bags of powdered methamphetamine while being booked into the Darke County Jail; over 10 officers had to be hospitalized from exposure to the substance through the jail's ventilation system ([www.cleveland.com](http://www.cleveland.com), April 19, 2018). Delphos Police (Allen County) arrested a woman during a traffic stop for possession of methamphetamine ([www.limaohio.com](http://www.limaohio.com), March 21, 2018). The Greene County Agencies for Combined Enforcement arrested a woman and charged her with two felony counts of illegal conveyance of drugs following an investigation that revealed she had been smuggling methamphetamine into the Greene County Detention Center ([www.daytondailynews.com](http://www.daytondailynews.com), May 9, 2018). OSHP arrested a man on felony drug charges following a traffic stop in Miami County; officers seized of 74 grams of crystal methamphetamine, drug paraphernalia and a firearm from the man ([www.statepatrol.ohio.gov](http://www.statepatrol.ohio.gov), May 23, 2018). The Montgomery County Regional Agencies Narcotics and Gun Enforcement task force arrested a man during a raid of his home in Dayton; officers seized a large quantity of methamphetamine, cocaine and marijuana ([www.whio.com](http://www.whio.com), June 25, 2018).

Participants reported that methamphetamine is available in crystal and powdered forms throughout the region; however, they noted crystal methamphetamine as most prevalent in the region. 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.

Participants reported that the availability of crystal methamphetamine has increased during the past six months, while the availability of powdered methamphetamine has remained the same or decreased. Participants discussed: *“People are changing from heroin to selling meth; It’s everywhere ... it’s cheaper [than heroin].... Everyone is leaving heroin and going to meth; It’s highly available as people are using it to detox from the heroin; I know a guy who is selling 30 pounds of ‘ice’ a week.”*

Community professionals also reported that the availability of crystal methamphetamine has increased during the past six months. Law enforcement reported: *“It would take you about three and half seconds to get some; [Drug cartels are] specifically targeted this area [with methamphetamine]; The cartels are sending more.”* BCI and the Miami Valley Regional crime labs reported that the incidence of methamphetamine cases they process from this region has increased during the past six months; the labs reported processing mostly clear crystal methamphetamine as well as some brown and tan 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 ‘7-10’. Participants reported: *“They have the ‘fire’ (high quality); The ‘dope boys’ (drug dealers) use it themselves, so they aren’t gonna ‘step on’ (adulterate) it; It’s getting better and stronger; The cookers are getting better; They are perfecting it.”* Participants reported MSM (methylsulfonylmethane, a joint supplement), as a cutting agent for methamphetamine. Overall, participants reported that the quality crystal methamphetamine has increased during the past six months.

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

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

Methamphetamine	Current Prices for Methamphetamine	
	<b>Powdered:</b>	
	1/8 ounce	\$125
	<b>Crystal</b>	
1/2 gram	\$40-60	
A gram	\$80-100	

Participants reported that the most common route of administration for methamphetamine remains smoking. Participants estimated that out of 10 methamphetamine users, six would smoke and four would snort the drug. However, a participant remarked, *“You would use like the people that use with you do.”*

Participants described typical methamphetamine users as white people. Participants stated: *“If you go to a meth house it is mostly white people; I think more Caucasian and younger ... like 40 [years of age] and younger.”* Community professionals described typical methamphetamine users as white people, heroin users and those of lower socio-economic status. A treatment provider commented, *“It is more lower class white clients that I see.”* A law enforcement officer reported, *“Former heroin addicts are turning to meth now.”*

## Prescription Stimulants

Prescription stimulants remain moderately available for illicit use in the region. Participants most often reported the current street availability of these drugs as '5' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '5'. A participant remarked, *"It is not extremely available... but it is out there."* Treatment providers most often reported the current street availability of prescription stimulants as '7'; while law enforcement most often reported it as '6'; the previous most common scores were '2' and '8-10' for treatment providers and '6' for law enforcement.

Participants and community professionals identified Adderall® as the most popular prescription stimulant in terms of widespread illicit use. A participant reported, *"I can find Adderall® any given day."* Participants and community professionals reported that the general availability of prescription stimulants has remained the same during the past six months. However, one participant observed, *"Sometimes it's easy, other times it is harder to get."*

BCI crime labs did not report processing any cases of amphetamine (Adderall®) or methylphenidate (Ritalin®) from this region during the past six months, and very few cases of lisdexamfetamine (Vyvanse®). The Miami Valley Regional Crime Lab reported that the incidence of amphetamine cases it processes has remained the same during the past six months; the lab reported processing very few cases of methylphenidate during the past six months.

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

Reports of current street prices for prescription stimulants were consistent among participants with experience buying these drugs. Reportedly, prescription stimulants typically sell for less than \$1 per milligram. Overall,

participants indicated that the price of prescription stimulants has remained the same during the past six months. Participants reported obtaining prescription stimulants for illicit use from individuals with prescriptions.

The most common route of administration for illicit use of prescription stimulants is oral consumption. Participants estimated that out of 10 illicit prescription stimulant users, nine would orally consume and one would snort the drugs.

Participants described typical illicit users of prescription stimulants as young adults and stay-at-home mothers. Participants commented: *"Primarily college kids or young kids; Stay-at-home moms... to lose weight."* Community professionals described typical illicit users as young white college students. A law enforcement officer reported, *"It is mostly young college kids."*

## Ecstasy

Ecstasy (methylenedioxyamphetamine: MDMA, or other derivatives containing BZP, MDA, and/or TFMPP) remains available in the region. Participants most often reported the current availability of the pressed tablet form of ecstasy as '3' and '5' and the current availability 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 '4' and '1-2', respectively. Participants reported: *"[Ecstasy] is hard to get in Lima [Allen County]; It really depends on who you know; I see more molly 'caps' (capsules) than anything."*

Community professionals most often reported the current availability of ecstasy and molly as '8'; the previous most common scores for ecstasy were '10' for treatment providers and '3-4' for law enforcement, and the previous most common scores for molly were '5-8' for treatment providers and not reported for law enforcement. Treatment providers discussed: *"You don't hear much about ecstasy; Molly is available...."*

Participants reported that the availability of ecstasy has remained the same during the past six months, while the availability of molly has increased. A participant stated, *"If you go to [a club in Dayton] you can get [ecstasy]... people there are 'rolling' (high on ecstasy/molly)."* Another participant reported, *"There are more and more bars where you can get molly."* Treatment providers reported that

the availability of ecstasy and molly has remained the same during the past six months, while law enforcement reported increased availability. A law enforcement officer remarked, *"You have more ecstasy and molly ... it is coming in from China."* BCI and the Miami Valley Regional crime labs reported that they processed very few cases of MDMA (ecstasy/molly) from this region during the past six months.

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

Participants discussed the quality of ecstasy and molly and rated the overall quality of ecstasy as '1' 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 discussed: *"Molly has higher quality than ecstasy; Ecstasy is garbage here in Dayton."* Reportedly, ecstasy and molly are adulterated (aka "cut") with methamphetamine. Participants reported: *"Here in Lima, it is not molly it is really meth ... straight meth; In Lima, the quality is dirty, you're not really getting molly or ecstasy ... it is meth."* Overall, participants reported that the quality of ecstasy has remained the same during the past six months, while the quality of molly has increased.

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

Ecstasy/Molly	Current Prices for Ecstasy/Molly	
	<b>Ecstasy:</b>	
	Low dose (aka "single stack")	\$10
	Medium dose (aka "double stack")	\$15-25
	High dose (aka "triple stack")	\$25-30
	<b>Molly:</b>	
	1/10 gram	\$10
A gram	\$100	

Participants reported that the most common route of administration for ecstasy and molly remains oral consumption. Participants estimated that out of 10 ecstasy and molly users, all 10 would orally consume the drugs. Participants also discussed "parachuting" the drugs. A participant explained, *"Parachuting is [when you] break [ecstasy] down into a powder then you take a piece of toilet paper and ... put powder (ecstasy or molly) in the paper, twist it and swallow it, so when it hits your stomach ... it opens instantly...."*

Participants indicated that molly is obtained in night clubs, at "raves" (dance parties) and music festivals. A participant reported, *"[The weather is] getting nice ... people want to go out. It's a festival drug."* Participants described typical ecstasy and molly users as young party-going individuals. Participants reported: *"College kids love to do the stuff; Mostly white; People that like to party hard; A lot of black people have been doing molly; It is a big thing with black people. It is because of the rappers ... 'molly, powder, Percocet' (referring to a rap song referencing the drugs)."* Community professionals described typical ecstasy and molly users as young, white adults and young black males. A treatment provider reported, *"Younger black males are using ecstasy and molly."* A law enforcement officer remarked, *"It is mostly young people."*

### Other Drugs in the Dayton Region

Participants reported synthetic marijuana (synthetic cannabinoids) as being present in the region, but this drug was not mentioned by the majority of people interviewed.

In addition, secondary data sources reported on other drugs in the region not mentioned by respondents.

BCI crime labs reported that the incidence of LSD (lysergic acid diethylamide) and psilocybin mushroom cases they process from this region has increased during the past six months, although still few cases; the crime labs also reported that they processed very few cases of DMT (dimethyltryptamine). BCI crime labs also reported that the incidence of U-47700 (synthetic opioid) cases they process from this region has increased during the past six months. The Miami Valley Regional Crime Lab reported that the incidence of LSD cases it processes has decreased during the past six months; the lab reported processing very few cases of psilocybin mushrooms and DMT during the past six months.

## Synthetic Marijuana

Synthetic marijuana (synthetic cannabinoids) remains available in the region. However, only one participant reported on the drug's current availability, reporting it 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'. The participant stated, *"You can find synthetic marijuana in head shops,"* and believed that the availability of synthetic marijuana has remained the same during the past six months. Participants described typical synthetic marijuana users as anyone on probation.

BCI crime labs reported that the incidence of synthetic cannabinoids cases they process from this region has decreased during the past six months, while the Miami Valley Regional Crime Lab reported processing very few cases of synthetic cannabinoids during the past six months.

## Conclusion

Crack cocaine, fentanyl, heroin, marijuana and methamphetamine remain highly available in the Dayton region. Changes in availability during the past six months include: increased availability for fentanyl and methamphetamine; likely increased availability for marijuana; and likely decreased availability for prescription opioids.

While participants and treatment providers reported current high availability of heroin, law enforcement reported moderate heroin availability. Law enforcement noted fentanyl as having replaced much of the heroin in the region. Participants also commented that often one receives fentanyl when purchasing heroin.

There was consensus among participants, treatment providers and law enforcement that fentanyl remains highly available in the region and that its availability has increased during the past six months. Participants discussed that there is more fentanyl than heroin in the region. Many participants commented that heroin is no longer the drug of choice. Reportedly, many users seek fentanyl. One participant stated, *"People want the dope that can kill them ... they think because it kills ... it is good stuff."* Another participant remarked, *"Narcan® brings them back and they use again."*

Participants and community professionals also reported high current availability of carfentanil; many respondents commented that they believed carfentanil to be more prevalent than fentanyl. The Montgomery County Coroner's Office found fentanyl/fentanyl analogues present in 68.3% of the 189 drug-related deaths it processed during the past six months; the office found carfentanil present in 34.9% of these 189 drug-related deaths. Community professionals described typical fentanyl users as heroin users. One law enforcement officer remarked, *"The typical user is those heroin addicts that crossed over to fentanyl."*

Participants and community professionals reported that the availability of crystal methamphetamine has increased during the past six months. BCI and the Miami Valley Regional crime labs reported that the incidence of methamphetamine cases they process from this region has increased during the past six months; the labs reported processing mostly clear crystal methamphetamine.

Law enforcement discussed that heroin/fentanyl users are switching to methamphetamine and driving up the demand for crystal methamphetamine. To meet this increasing demand, law enforcement reported that drug cartels are targeting the region with increased shipments of methamphetamine. Reportedly, many heroin dealers are now selling methamphetamine.

Participants attributed increased demand for methamphetamine to heroin users seeking a cheaper high, noting that methamphetamine is less expensive than heroin, as well as to users using methamphetamine to detox from heroin/fentanyl. The Montgomery County Coroner's Office found methamphetamine present in 21.7% of the 189 drug-related deaths it processed during the past six months.

Lastly, participants indicated that the availability of high-grade marijuana extracts and concentrates, often appearing as oil and waxy forms of the drug (aka "dabs") has increased during the past six months. BCI crime labs reported that the incidence of cannabis (including edible cannabis) and high-grade extract and concentrate cases they process from this region has also increased.

