NORTH DAKOTA OFFICE OF ATTORNEY GENERAL

2016 Comprehensive Status and Trends Report

A summary evaluation of the status of substance abuse and treatment in North Dakota, and analysis of substance abuse trends.

Report period: Calendar years 2014-2015

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HISTORY

The 2001 Legislative Assembly passed N.D.C.C. § 19-03.1-44:

19-03.1-44. Comprehensive status and trends report.
On or before July first of each even-numbered year, the attorney general, or designee of the attorney general, shall report the current status and trends of unlawful drug use and abuse and drug control and enforcement efforts in this state. This report must be made to an interim legislative committee and must include the following information:

1. The superintendent of public instruction shall provide the results of the most recent survey of the state's young people regarding drug usage. This survey must include information regarding the accessibility of gateway and other illicit drugs, the prevalence of gateway and other illicit drugs in schools or on school property, and the types and frequency of gateway and other illicit drugs used by young people.
2. The state crime laboratory shall provide a report that includes the type of each controlled substance tested and the number of times tests were run for each controlled substance.
3. The department of human services shall provide a current status of the number of people who were treated in the state. The report must include information about the variety of drugs, legal and illegal, for which people were treated.
4. The department of corrections and rehabilitation shall provide the current status of the number of people incarcerated or on probation in the state correctional system for violation of title 19. This report must specify the average length of sentence including probation, average length of incarceration ordered by a court to be served, and average actual time incarcerated for drug offenders sentenced to the custody of the department. The report also must identify the number of people referred to treatment and treated as a condition of sentencing, probation, or parole.
5. The attorney general shall provide the current status of the number of arrests for violation of title 19 and the current enforcement efforts to combat unlawful drug trafficking and usage.

SUMMARY

- The percentage of high school students who say they have taken a prescription drug (such as OxyContin, Percocet, Ritalin, Xanax) without a doctor's prescription, one or more times during their life has decreased, from 17.6% in 2013 to 14.5% in 2015. This is below the national rate.

- The number of drug cases submitted to the State Crime Laboratory increased by 26% from 2013 to 2015, but during the same time period, drug cases involving heroin increased by more than 400%.

- While alcohol continues to be the number one primary substance reported by adults receiving treatment through the regional human service centers, meth use by adults has almost doubled in the last three years, from 21% in 2012 to 39% in 2015, and heroin use by adults increased from 1% to 6%.

- The ND Department of Corrections & Rehabilitation reports that the number of inmates with drug/alcohol offenses has more than doubled in the past five years, from 334 in 2011 to 779 in 2015, and the number of drug offenders under supervision by Parole & Probation has almost doubled, from 1306 in 2011 to 2507 in 2015.

- In the past five years, heroin and methamphetamine related drug violations have skyrocketed. Methamphetamine violations have more than quintupled, from 246 in 2010 to 1,633 in 2015. Heroin violations increased from 4 to 177, a 4,300% increase.

1. DEPARTMENT OF PUBLIC INSTRUCTION

The Youth Risk Behavior Survey (YRBS) monitors priority health-risk behaviors that contribute to the leading causes of mortality, morbidity and social problems among youth in the areas of unintentional injuries and violence; tobacco, alcohol, and other drug use; sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases, including HIV infection; unhealthy dietary behaviors; and physical activity. The survey is developed by the Centers for Disease Control and Prevention (CDC) and all but three states offer the survey to school districts.

The North Dakota YRBS was completed voluntarily and anonymously in spring 2015 by 7469 middle school students (grades 7-8) and 10,325 high school students (grades 9-12) from 93 middle and 88 high schools, of which 2047 middle school students and 2121 high school students from schools/classes were selected for the statewide CDC sample and 5422 middle and 8204 high school students from schools/classes voluntarily participated. The weighted data results can be used to make important inferences about all North Dakota students in grades 7-12 due to the research-based process that has been used since its inception in 1991.

- The ND State and Regional YRBS reports can be accessed at https://www.nd.gov/dpi/SchoolStaff/SafeHealthy/YRBS/.

TOBACCO

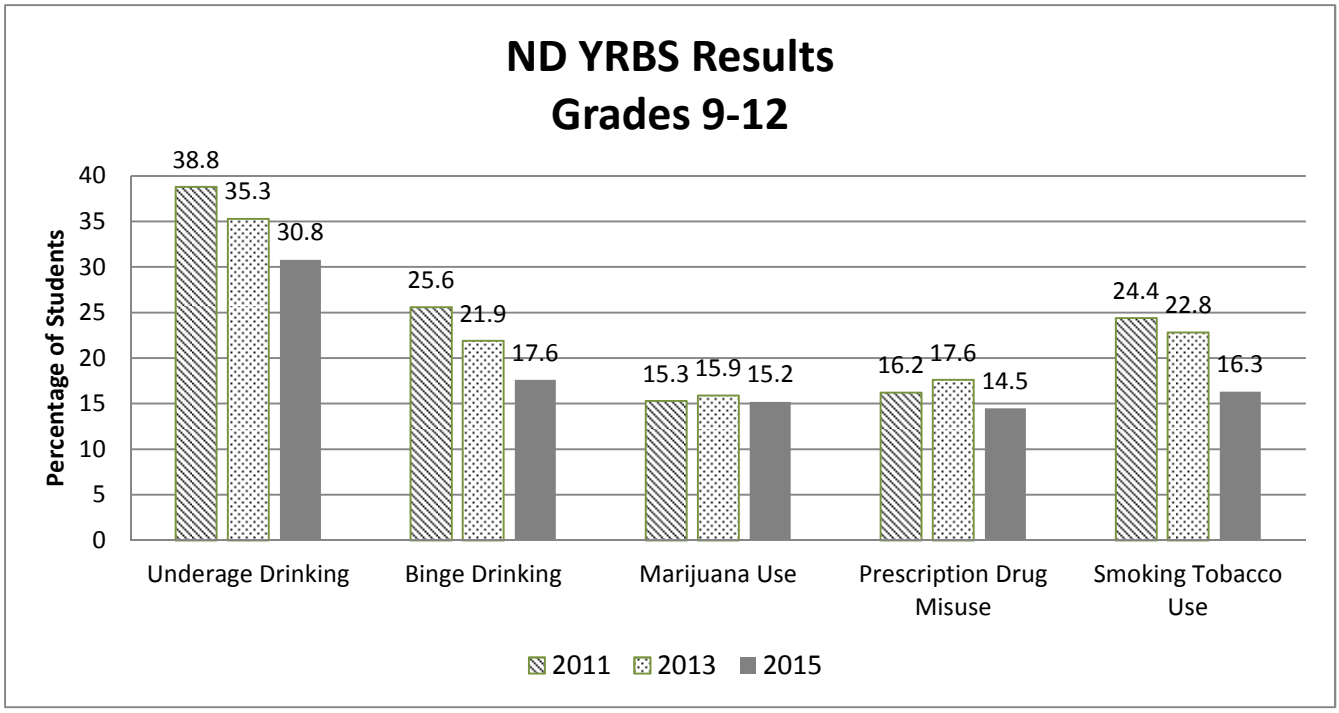
The use of smoking tobacco among school aged youth and adolescents continues to decrease. The percentage of students who currently smoke cigarettes or cigars declined again from 2013 to 2015 from 4.2% to 3.6% for grades 7-8, and 22.8% to 16.3% for grades 9-12, closing in on the national average of 16%. However, there was a substantial increase in high school students reporting they could obtain cigarettes in a store or gas station, from 7.8% in 2013 to 16.9% in 2015.

ALCOHOL

The 2015 national YRBS comparison shows alcohol use by North Dakota high school students decreased for almost all responses from 2013 to 2015. Since 2007, North Dakota has been unable to decrease the access of alcohol to minors who have other people providing it to them (41.3% in 2015).

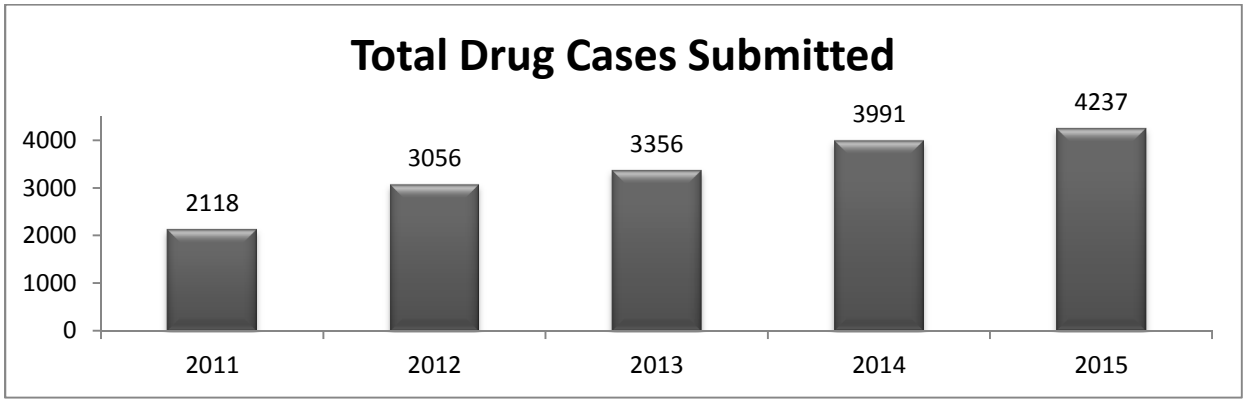
OTHER ILLICIT DRUGS

There has been no improvement in reducing marijuana use in grades 9-12. However, prescription medication abuse or misuse decreased in grades 9-12, from 17.6% in 2013 to 14.5% in 2015, compared to 16.8% nationally.



2. STATE CRIME LABORATORY

The number of drug cases submitted to the State Crime Laboratory (Crime Lab) increased by 26% from 2013 to 2015, but during the same time period, drug cases involving heroin increased by more than 400%.



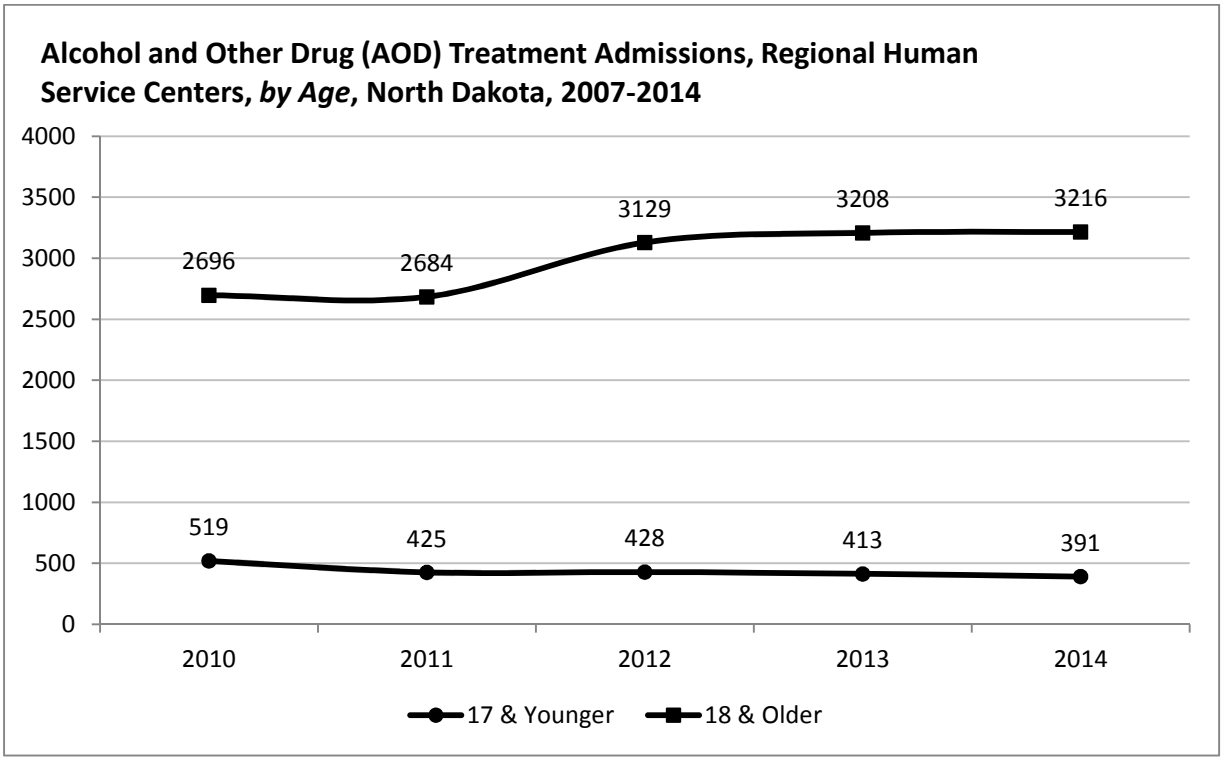
A breakdown of the samples analyzed by the Crime Lab is below. The Crime Lab is now also seeing cases involving Fentanyl.

SAMPLES ANALYZED	2011	2012	2013	2014	2015
Amphetamine/methamphetamine	730	1,644	2,502	3,968	4,527
Marijuana	3,828	4,882	4,793	5,826	5,143
Cocaine	167	222	123	223	191
Heroin	56	48	99	310	508
Synthetic Drugs	906	1,559	305	302	209
Other dangerous drugs	908	2,077	1,610	896	965
Insufficient sample/negative	520	415	380	519	533
Fentanyl/Fentanyl analogs	-	-	-	14	23
TOTAL:	**7,115**	**10,847**	**9,812**	**12,058**	**12,099**

3. DEPARTMENT OF HUMAN SERVICES

Data was collected through the eight (8) Regional Human Service Centers (RHSCs), part of Field Services with the Department of Human Services. This report includes only those people served at the RHSCs or their subcontractors. People served by private providers are not included.

Over time, the number of adult admissions into Alcohol and Other Drug (AOD) treatment services[1] shows a slight increase while the number of adolescent admissions shows a decrease. See below.



[1] "Alcohol and Other Drug Treatment Admissions" include those who entered into a substance abuse treatment program during a calendar year. Individuals served in alcohol and other drug treatment services at the ND RHSCs were counted for each admission into treatment services if the primary substance they reported in the first admission differed from the primary substance they reported at the subsequent admission.

The following two tables show the top substances (primary, secondary, tertiary and quaternary) used, as reported by adults and adolescents who were admitted into AOD treatment services in calendar years 2011-2015.

For adults, alcohol continues to be the top substance reported, while marijuana continues to be the top substance reported by adolescents for the five calendar years. Reports of methamphetamine (meth) have increased in the five calendar years for adults. There is a similar trend in adolescents, however there was a slight decrease in 2015. Reported use of opioids has remained fairly steady for both adults and adolescents across the last 5 years.

Top Five Substances Reported by Adults (age 18 and older)									
2011		2012		2013		2014		2015	
Substance	%	Substance	%	Substance	%	Substance	%	Substance	%
Alcohol	80%	Alcohol	76%	Alcohol	74%	Alcohol	69%	Alcohol	65%
Marijuana	49%	Marijuana	50%	Marijuana	49%	Marijuana	50%	Marijuana	49%
Meth	17%	Meth	21%	Meth	29%	Meth	35%	Meth	39%
Opioids	11%	Opioids	12%	Opioids	13%	Opioids	13%	Opioids	11%
Heroin	1%	Heroin	1%	Heroin	2%	Heroin	3%	Heroin	6%

Top Four Substances Reported by Adolescents (age 17 and younger)									
2011		2012		2013		2014		2015	
Substance	%	Substance	%	Substance	%	Substance	%	Substance	%
Marijuana	80%	Marijuana	82%	Marijuana	82%	Marijuana	90%	Marijuana	91%
Alcohol	57%	Alcohol	53%	Alcohol	50%	Alcohol	40%	Alcohol	44%
Opioids	6%	Opioids	4%	Opioids	5%	Meth	8%	Meth	7%
Meth	1%	Meth	2%	Meth	4%	Opioids	6%	Opioids	3%

4. BUREAU OF CRIMINAL INVESTIGATION

With the oil boom, the state's population increased. This led to an increase in the demand for drugs and resulted in an escalation of the price of black market prescription narcotics. Drug addicts began to seek alternatives, increasingly turning to heroin. There has been a notable increase in drug trafficking organizations (DTOs), with direct connections to cartels in Mexico. These DTOs are operating predominantly in the western part of North Dakota. Other drug trafficking and use has increased as well including prescription drug abuse, cocaine, heroin, and high potency marijuana. The recent downturn in oil production has had the effect of significantly reducing the transient population in the oil-producing counties, but the state's drug task forces report that there has not been a similar decrease in organized drug activity in those areas.

The Bureau of Criminal Investigation (BCI) produces an annual Crime & Homicide Report[2] compiled from data provided by the law enforcement agencies serving the state. Drug arrests have increased by 488% in the past 25 years, from 745 in 1990 to 4,382 in 2015. It is the analysis of those arrests, however, which helps identify trends. In the past five years, heroin and methamphetamine related drug violations have skyrocketed.

DRUG VIOLATIONS						
Drug Type	**2010**	**2011**	**2012**	**2013**	**2014**	**2015**
Marijuana	2,090	2,385	2,557	2,776	3,380	3,519
Heroin	4	19	17	26	90	177
Cocaine	35	47	58	49	75	100
Amphetamines/Methamphetamines	246	257	434	812	1,230	1,633

The BCI teamed with federal and local law enforcement in establishing joint drug trafficking operations targeting the DTOs. The task force investigations have resulted in several successful multi-state prosecutions.

The 63rd Legislative Assembly appropriated $9.6M in oil and gas impact funds to the Attorney General's office to provide grants to criminal justice agencies to combat crime and address critical needs related to the increase in oil activity. The grants provided local agencies with nearly $5 million in equipment and supplies, $2.5 million in personnel (including 14 new officers), $164,000 in overtime, and $146,000 in housing.

[2] The annual Crime & Homicide reports from 1999 to date are available at www.ag.nd.gov.

5. DEPARTMENT OF CORRECTIONS AND REHABILITATION

This analysis examines the number of admissions for drug offenses for the year (excluding parole violators), the number of offenders court ordered or referred to chemical dependency treatment, and the number of offenders completing chemical dependency treatment.

ND Department of Corrections and Rehabilitation, Adult Services Division, Inmates

	CY 11	CY 12	CY 13	CY 14	CY 15
Number of offenders with a drug offense *	334	421	466	660	779
Average length of incarceration (months) ordered by a court to be served	27.6	27.5	26.4	28.3	26.7
Average "time to serve" (months) for drug offenders **	22.01	21.0	19.9	21.1	19.2

* Offender count is based on prison admissions for drug offenses for the calendar year and excludes parole violators. There is only one admission reported per inmate. "Drug offense" is alcohol or other drug. Treatment numbers are not limited to offenders admitted for drug or alcohol offenses.

** Time to serve is the difference between the date of admission and the projected good time release date.

ND Department of Corrections and Rehabilitation, Adult Services Division, Parole & Probation

SUPERVISION (Drug Offenders)	**CY 11**	**CY 12**	**CY 13**	**CY 14**	**CY 15**
Parole	332	316	406	428	559
Probation	974	1065	1203	1748	1948
Total	**1306**	**1381**	**1609**	**2176**	**2507**
TREATMENT ORDERED (All Offenders Admitted During CY)	**CY 11**	**CY 12**	**CY 13**	**CY 14**	**CY 15**
Parole	386	134	382	412	545
Probation	1547	852	878	1212	1334
AVERAGE LENGTH OF SENTENCE IN YEARS (Drug Offenders)	**CY 11**	**CY 12**	**CY 13**	**CY 14**	**CY 15**
Parole	0.78	0.93	0.9	1.0	0.9
Probation	2.5	2.7	2.4	2.3	2.2
AVERAGE LENGTH OF SUPERVISION IN YEARS (Drug Offenders)	**CY 11**	**CY 12**	**CY 13**	**CY 14**	**CY 15**
Parole	0.4	0.6	0.4	0.6	0.4
Probation	0.7	1.2	0.7	1.1	0.7

STATE RESOURCES

STATE EPIDEMIOLOGICAL OUTCOMES WORKGROUP

The State Epidemiological Outcomes Workgroup (SEOW) is coordinated through the ND Department of Human Services, Behavioral Health Division. The SEOW, a 48-member advisory committee, identifies, analyzes and communicates key substance abuse and related behavioral health data to guide programs, policies and practices.

The SEOW compiles an annual Epidemiological Profile. The data summarized in the Epidemiological Profile characterizes substance use consumption patterns, consequences and risk factors in the state. These substances include alcohol, tobacco, and other drugs such as methamphetamines, marijuana and prescription drugs.

The SEOW Epidemiological Profile reports are available online at www.prevention.nd.gov/data.

PRESCRIPTION DRUG TAKE BACK PROGRAM

North Dakota was the first state in the nation to offer a year-round state-wide prescription drug disposal program. Since the Take Back program launched in December 2009 through mid-2015, more than 9,497 pounds of unused medications have been collected and destroyed. The Drug Enforcement Agency eased the previous prohibition on pharmacists accepting return of dispensed controlled medications such as oxycodone and valium. The Attorney General partnered with the Pharmacists Association and the ND Board of Pharmacy to expand the Take Back program by adding the Yellow Jug program, in which participating pharmacies provide a secure container at the pharmacy counter, to facilitate the disposal of unused and unwanted medications. The Yellow Jug program launched in 2016.

REDUCING PHARMACEUTICALS IN THE COMMUNITY

The Reducing Pharmaceutical Narcotics Task Force is a group of over 40 public and private organizations, including the medical community, law enforcement, treatment providers, educators, policymakers, and other community partners. The Task Force has been meeting quarterly since 2011 and working towards increasing Take-Back Program locations, improving access to the Prescription Drug Monitoring Program, and supporting legislative efforts in passing the Good Samaritan Bill and naloxone rescue kits. The task force is coordinated by the Department of Human Services. ❖