



ADAI RESEARCH BRIEF

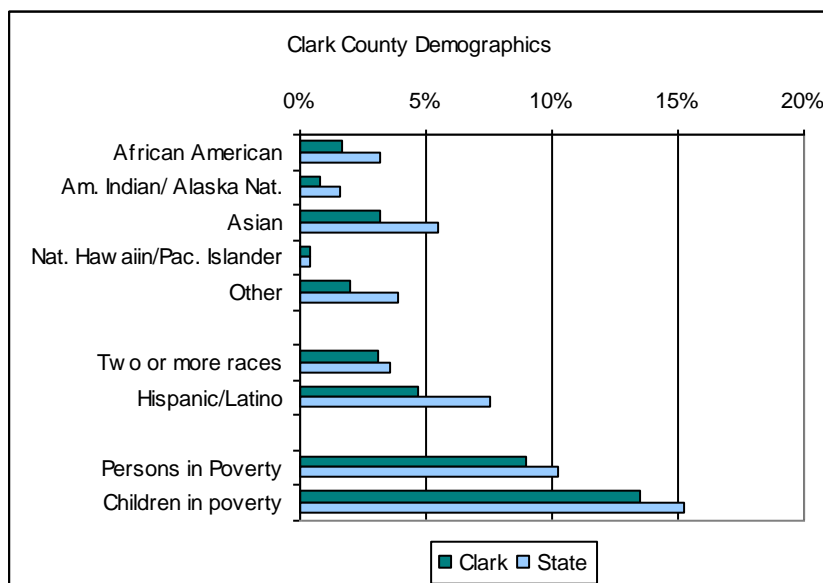
No. 04-02 February 2004

CLARK COUNTY – DRUG USE EPIDEMIOLOGY

LOCATION AND POPULATION OVERVIEW

Clark County, located in Southwestern Washington, is 628 square miles in size. The land varies from riverfront along the southern boundary to the foothills of the Cascade Mountain Range along the eastern boundary. Interstate 5 cuts across the western part of the County, running through the city of Vancouver.

Clark has the fifth largest population of Washington counties with 345,238 people, an increase of 45% since 1990¹. This increase in population is the largest in the State and more than double the rate of the State as a whole. The incorporated areas make up 182,170 of the County's population, with the largest city, Vancouver contributing 145,000 people. The U.S. Census, due to the proximity and interconnectedness between the populations and economies, considers Vancouver part of the Portland Primary Metropolitan Statistical Area. With Portland so close to Vancouver, there is much crossover between the cities in terms of employment and leisure activities.



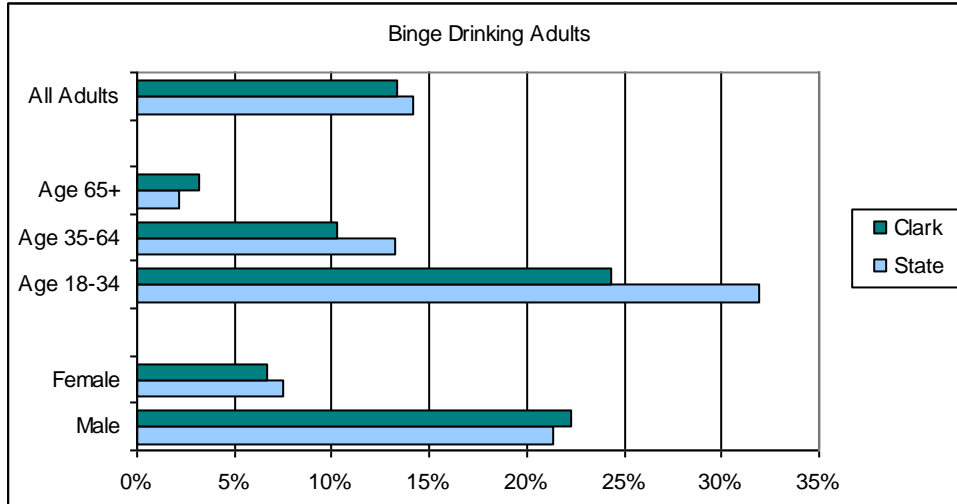
In 2000, the proportion of Caucasians was higher than the State average. Less than five percent of residents are Hispanic, African American, American Indian/Alaska Native or Asian. There were slightly lower levels of poverty in the County than the State.

ALCOHOL AND OTHER DRUG USE TRENDS - ADULTS

Alcohol Use

Adult Binge Drinking

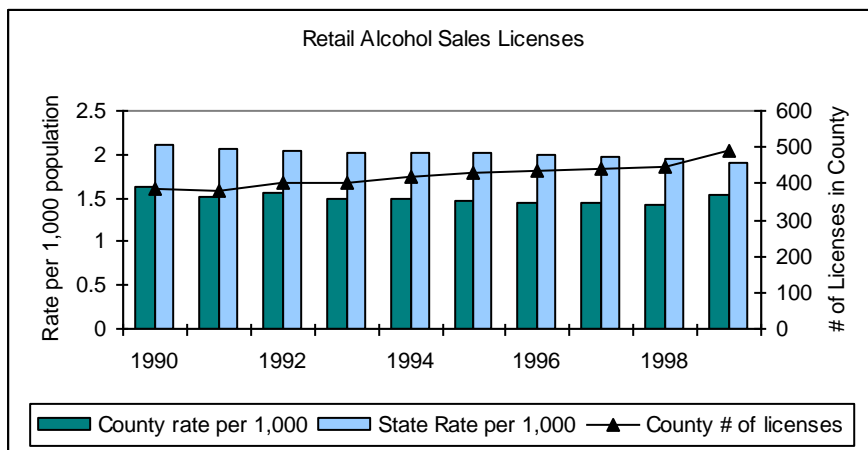
Binge drinking was reported by 13% of adults who reported any current alcohol use in 1999 according to a County health survey¹. Binge drinking, five or more drinks on a single occasion, is a sign of problematic use of alcohol. Males 18-34 were the most likely to report recent binge drinking.



Alcohol Retail Sales Licenses

The number of alcohol retail sales licenses in a county is an important measure of the availability of alcohol. Sales licenses indicate the number of active licenses at locations including restaurants, grocery stores and wine shops, it does not include liquor stores.

Clark County had seen a steady decrease in the number, per capita, of locations that can sell alcohol until 1999, when the rate increased to a level not seen since 1992. The rate in 1999 was 1.53 liquor licenses per 1,000 residents, a total of 490 licenses¹. This rate is still well below the State rate of 1.91, though the State rate has continued to decline since 1990.



Other Drug Use

Illegal drug users are generally a hidden population. Estimates of the prevalence of illegal drug use can be difficult to obtain. Population surveys are one way to estimate the number of drug users, however no recent survey data are available on the level of illegal drug use among adults in the County. Indicator data provide indirect evidence of the nature of substance abuse and are available from organizations that work with drug users.

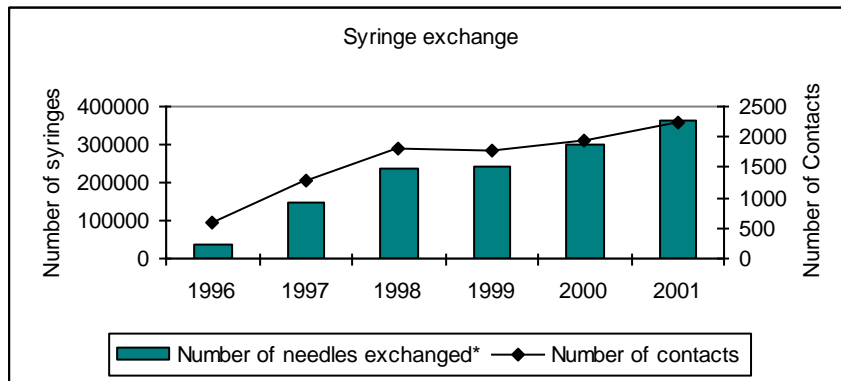
Treatment data, presented later in this report, is the best approximation of drug use currently available. Mortality data are an indicator of the serious effects of drug use, currently data on deaths due to specific drugs is unavailable for the County. Data from drug courts point to trends in drugs used by people coming into contact with law enforcement. Methamphetamine

is the most common drug seen among those in drug court, with heroin being increasingly common during 2002.

Anecdotal data from service providers can provide additional insight into drug trends not available via indicator data. Outreach workers who work with men who have sex with men note increasing use of a range of drugs often referred to as 'club drugs', specifically GHB, ketamine, and ecstasy/MDMA.

Needle Exchange

Syringe exchange is based in the city of Vancouver and has increased the number of syringes exchanged every year. In 2001, 362,481 syringes were exchanged during 2,224 contacts with clients. Staff report that the most common drugs used by injectors who utilized the exchange are heroin and methamphetamine. Virtually all clients are reported to be injection drug users.



*number of needles that were provided to clients, note this is slightly different (+/- 1%) than the number that were turned in

Needle exchange staff have been focused on decreasing re-use of syringes in order to reduce infections and the spread of diseases. Staff have tracked clients' self report about this issue since October of 1997. In 1998, 62% of clients reported using syringes only once, by 2001 this proportion had increased to 75%. The proportion of clients who reported using a syringe 10 or more times dropped from 9% to 1% during this same timeframe. In 2001, a minority of repeat clients reused needles (22%) compared with more than half (51%) of new clients (D. Spellman, personal communication, July 2002).

ALCOHOL AND OTHER DRUG USE TRENDS AND ATTITUDES - YOUTH

Limited data on alcohol and other drug use is available from a survey conducted in several local school districts within Clark County in 1999¹. Almost a third of 12th graders reported using alcohol frequently or getting drunk recently, while a similar proportion reported using an illegal drug three or more times in the previous year. Treatment data, presented in a later section, points to alcohol and marijuana as the most commonly used drugs among those youth admitted to treatment.

Alcohol Use

Almost one third of 12th graders reported using alcohol three or more times in the past month or getting drunk in the prior two weeks. One in eight 8th graders had driven after drinking or ridden with a drinking driver, by 12th grade the proportion had risen to 21%. Illicit drugs were used three or more times in the prior year by 15% of all youth, for 12th graders it was 30%.

Alcohol Use and Related Behaviors Among Selected Youth in Clark County, 1999

Indicator	Total	Male	Female	6th grade	8th grade	10th grade	12th grade
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Alcohol used 3+ times last month, or drunk in past 2 weeks	19%	21%	17%	7%	15%	26%	31%
Driven after drinking or ridden with drinking driver 3 or more times in past year	14%	14%	13%	7%	12%	16%	21%

Other Drug Use

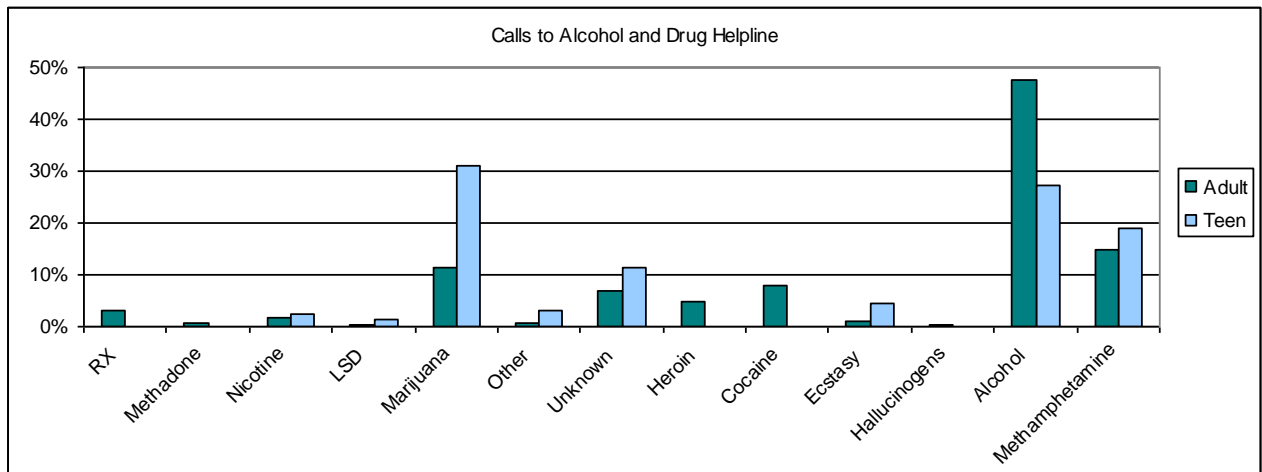
Use of any illicit drug, three or more times in the prior year, was reported by 15% of youth. Rates of drug use increased from 1% in 6th grade to 30% in 12th grade⁴.

Illegal Drug Use Among Selected Youth in Clark County, 1999

Indicator	Total	Male	Female	6th grade	8th grade	10th grade	12th grade
Illicit drugs used 3 or more times in past year	15%	16%	14%	1%	9%	24%	30%

ALCOHOL AND DRUG HELPLINE

In 2001 there were 701 calls to the 24 Hour Alcohol and Drug Helpline, 571 were made by an adult or someone concerned about an adult, with the remaining calls made by a teenager or pertaining to a teenager’s drug use. More adults called about alcohol, and only adults called about heroin and cocaine. Teenagers were slightly more likely to call about methamphetamine and were much more likely to call about marijuana. Note that the number of calls related to teenagers were small, with 41 calls about marijuana. The number and types of calls vary greatly statewide and are impacted substantially by local referrals, education, prevention, and intervention efforts.



POISON CENTER

The Washington Poison Center receives calls from throughout Washington State made to its toll free number. In 2001 there were 396 calls from Clark County residents related to commonly abused illegal, prescription and over-the counter drugs to the Poison Center¹. (See the end of this document for important details about this data source.) The majority of these were for over-the-counter and prescription medicines.

Calls regarding street drugs and stimulants were dominated by substances lumped into the category of amphetamines, 42 of 62 calls. Poison center staff report that this is used as a

'catch all' term for stimulants, including methamphetamine, that are not identified more specifically and does not necessarily refer to amphetamines as commonly referred to by those in the substance abuse field (N. Hasting, August 19, 2002, personal communication). The number of calls for other street drugs were quite small.

Drug Category	Drug Name	Total # of Exposures
Prescription(Rx) and Over the Counter Drugs(OTC)		334
	Antihistamines- (Rx & OTC)	102
	Opiates (Rx)	72
	Dextromethorphan- cold & cough preparations	108
	Benzodiazepine	26
	Other depressants/sedatives	26
Street Drugs		62
	Amphetamine	42
	Marijuana	6
	Cocaine	5
	Mushrooms: hallucinogenic	3
	Heroin	3
	PCP	1
	LSD	1
	Nitrous oxide	1
Sub-total- Street, Rx and OTC Drugs (Summed from above)		396
Alcoholic Beverages		48

NEED FOR TREATMENT AND THE TREATMENT GAP

Treatment Services

Eighteen State certified chemical dependency treatment agencies were located in the County as of the beginning of 2002, this includes two Department of Corrections programs and the Veteran's Administration program. An additional program providing opiate substitution treatment is available for Washington State publicly funded clients in Portland, Oregon. Adult drug court was first piloted in May of 1999, and was fully funded in September of 2000. The caseload for drug court as of the end of 2002 is 125 clients.

Six sub-acute detoxification beds were available in 2002. However, no medical detoxification is available in Vancouver. Northwest Deaf Addictions center is the only deaf specific treatment center in Washington and one of only four in the U.S., inpatient treatment is available at the center. No other inpatient treatment is available for adults in the County. Male adolescent inpatient treatment is available in the County, but no inpatient services are available for female adolescents.

Treatment gap

The estimated gap in Clark County between needed treatment and actual treatment utilization is 77.1% for those under 200% of the Federal Poverty Level, slightly above the State as a whole, (see the table below)⁶. This means that only 22.9% of people who are in need of alcohol or other drug treatment services receive such services.

Region	Number of adults <200% FPL & eligible for DASA services	% of adults <200% FPL and in need of Treatment	Number of adults <200% FPL Receiving Treatment	Number of Adults not Receiving Treatment	Treatment Gap
Clark	46,824	11.1%	1,135	3,798	77.1%
State Total	868,734	11.1%	25,395	71,207	73.7%

*Federal Poverty Level, 200% FPL = \$36,200 for a family of four in WA (2002)

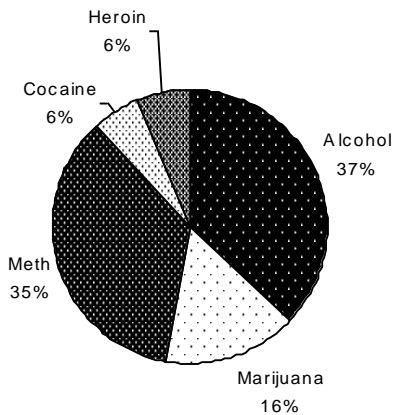
This estimate of treatment gap is based upon the Washington Needs Assessment Household Survey of substance use and treatment need done in 1993-94 and adjusts for new population numbers. There are some limitations to this data because patterns of drug utilization are known to have changed since this survey, e.g. the rise in methamphetamine use. However, this is the best available data on estimating the need for treatment services in the State.

ALCOHOL AND OTHER DRUG TREATMENT ADMISSIONS

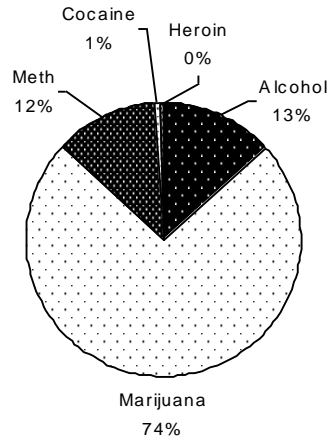
Admission to treatment reflects many factors including treatment demand (self referral and professional/court referrals), treatment availability (locally and regionally), funding, outreach and intervention programs, and changes in local and state policies. It is very important to note that available data is only for publicly funded treatment, it is likely that those receiving privately funded treatment differ in terms of demographics and the types of substances abused. Data on those receiving privately funded treatment are unavailable.

Among adults, alcohol is the most common drug treated in the County, followed by methamphetamine, marijuana, heroin and cocaine (publicly funded treatment)¹. Among youth, three quarters of treatment admissions were for marijuana followed by alcohol and methamphetamine; cocaine and heroin make up less than 1% of admissions.

Adult Publicly Funded Treatment Admissions 2001

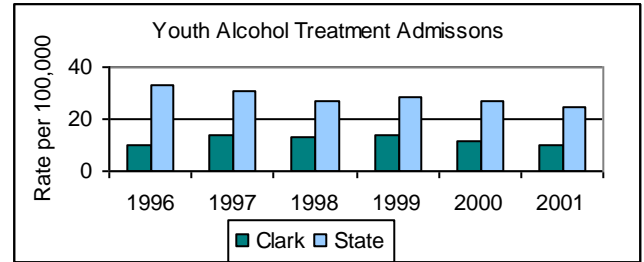
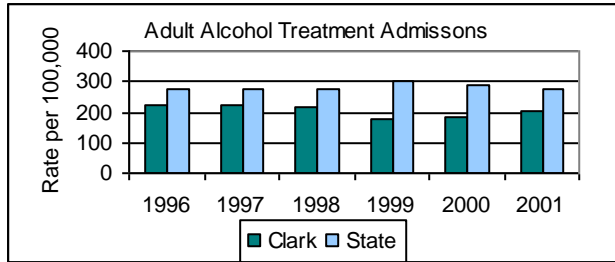


Youth Publicly Funded Treatment Admissions 2001



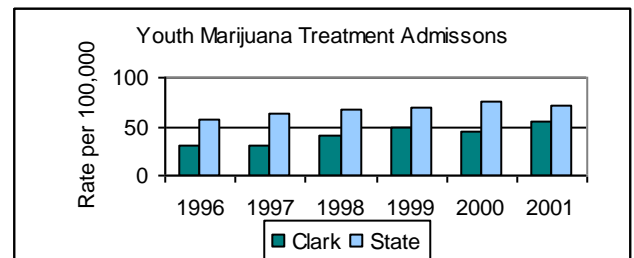
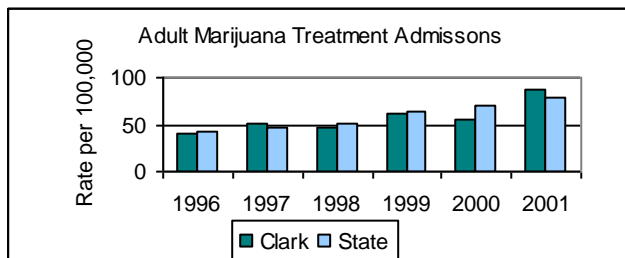
Alcohol

Treatment admissions for problematic alcohol use declined from 1996 to 2001. The rate of admissions was well below the State average for youth and adults. Alcohol was the most common substance reported as the primary drug among adults admitted to treatment, with 37% of all treatment admissions in 2001. Alcohol was the second most common for youth, 13% in 2001. The proportion of treatment admissions for alcohol were lower than the State average for both youth and adults.



Marijuana

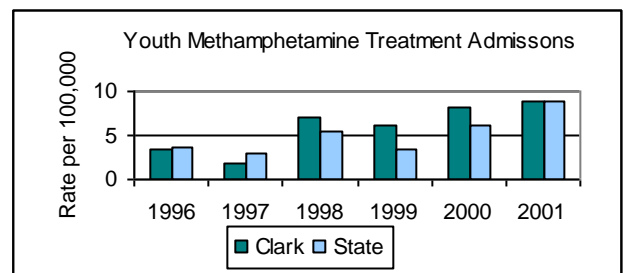
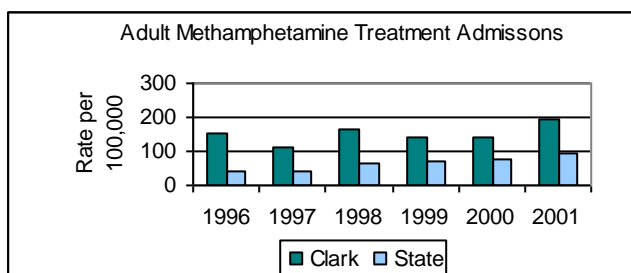
The rate of marijuana treatment admissions increased for youth and adults in recent years. The increase in adult admissions was substantial, more than doubling from 1996 to 2001, when the rate was 87 per 100,000. Youth admissions also increased substantially from 31 per 100,000 to 55 per 100,000 during the same timeframe. In 2001, the County rate surpassed the State rate for adults, while youth treatment admissions remained at lower than the State rate. In 2001, 193 youth and 307 adults reported marijuana as their primary drug at admission to treatment.



Treatment providers note that many clients who initially enter treatment for another drug realize that their primary drug is actually marijuana in the midst of treatment. This indicates possible under-reporting of marijuana as the primary drug for some clients.

Methamphetamine

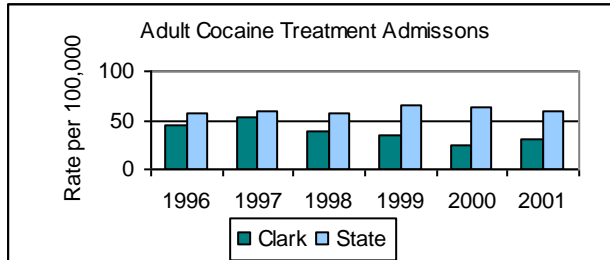
Methamphetamine has long been a problem among adults in the County as evidenced by sustained high levels of treatment admissions. Much higher levels of treatment for methamphetamine among adults are evident in the County compared to the State. Statewide the rate more than doubled in six years, yet it is still half that of the County for adults. Adult treatment admissions have been at a sustained high level for years, with a 34% increase in 2001. Youth treatment admissions have tripled, though the overall number is relatively small, with 31 admissions in 2001.



Treatment providers noted that they are seeing many younger users from the cities of Camas and Washougal during 2002. They believe the poor state of the economy, particularly logging, is resulting in higher levels of drug use. Another issue of concern was the use of 'crystal' methamphetamine among men who have sex with men. Outreach services and a support group are available for this community. Several providers mentioned that culturally competent services for this population are lacking locally.

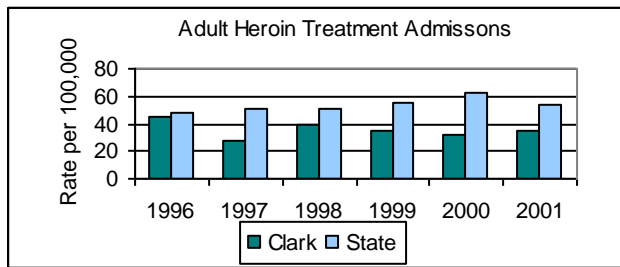
Cocaine

Adult cocaine treatment admissions have shown an overall trend downward, remaining well below the State's. In 2001 109 adults were admitted to treatment with cocaine as their primary drug, 6% of all County admissions. Youth treatment admissions have totaled 14 over the six year period.



Heroin

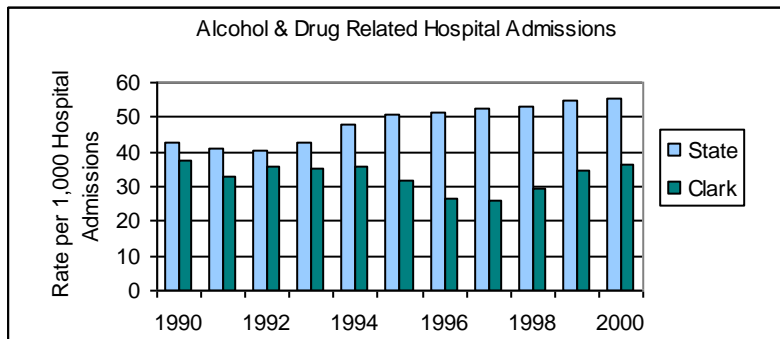
The rate of heroin treatment admissions for adults has fluctuated, remaining level overall and below the State's. The 125 primary heroin treatment admissions in 2001 represented 6% of all adult admissions.



Treatment providers believe they have seen an increase during 2002 in the numbers of young adults, ages 18 to 25, who are using heroin, from the city of Camas in particular.

HOSPITAL ADMISSIONS FOR ALCOHOL AND OTHER DRUGS

The proportion of alcohol and other drug related hospital admissions have shown some variability, with a rate of 36 per 1,000 hospital admissions in 2000. This is the highest level since 1990, but is well below the State rate, which increased almost continuously through most of the 1990's and was 56 in 2000.



DRUG TRAFFICKING, PRICES AND PRODUCTION

Trafficking

Mexican nationals are involved in the trafficking of multiple types of drugs including heroin, cocaine, marijuana and methamphetamine throughout Washington. In addition, marijuana is grown locally and is also available from sources up and down the west coast including British Columbia, Canada. Approximately one third of methamphetamine in Washington used is produced in the State. In March of 2001 a 'super lab' with enough materials to produce 20 pounds of methamphetamine was found within the city limits of Vancouver.

Law enforcement reported seven known drug trafficking organizations in 2001¹.

Prices of Illegal Drugs in 2001

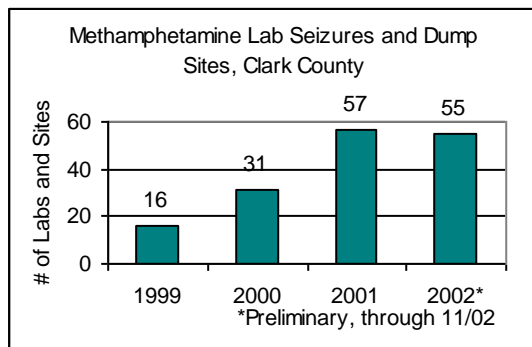
Prices for illegal drugs were reported by the Clark-Skamania Drug Task Force to the Northwest High Intensity Drug Trafficking Area. Pound quantities of marijuana are priced similarly to other areas of the State, no other area reported prices for small quantities. Sources of marijuana were not reported for the County. Most areas of the State report Mexican and British Columbia marijuana, with 'B.C. Bud' generally selling at higher prices. Methamphetamine ounce prices vary greatly in the County from \$500 to \$1,200. These prices encompass most of the price range from around the State, though a few counties reported lower prices.

Drug	Unit	Price
Methamphetamine	Ounce	\$500-1,200
Marijuana	1/8 Ounce	\$40
	Pound	\$2,500-3,000

Production

Methamphetamine Laboratories

Compared to the surrounding counties of Skamania and Cowlitz, Clark has the highest number of methamphetamine laboratory seizures and clean-up sites. From 1999 to 2001 Clark had 104 total labs or dump sites reported to the Department of Ecology. From 1999 to 2001 there was more than a threefold increase in labs and dumpsites. Through November of 2002, 55 sites were reported, indicating that 2002 is likely to surpass the numbers for 2001, though the rate of increase appears to have slowed substantially.



The neighboring counties of Skamania and Cowlitz had 5 and 23 seizures respectively 1999 to 2001. These smaller numbers reflect the smaller populations, but may also reflect fewer law enforcement resources available to find laboratories as much as they represent the true level of methamphetamine production locally. Cowlitz had a high and steady level of adult treatment admissions, while Skamania's adult treatment admissions were similar to the State's in 2001 (Skamania's small population results in fluctuating rates). In the city of Portland, Oregon, directly to the south of Clark County there were 66 methamphetamine labs investigated in 2000¹.

Marijuana Cultivation

The Northwest High Intensity Drug Trafficking Area reports 30 marijuana cultivation seizures in 2000 and 23 in 2001 in the County. It is believed that this represents a small fraction of locally grown marijuana.

SUMMARY

Among adults, alcohol, methamphetamine, and marijuana are the dominant drugs of abuse. Among youth marijuana dominates treatment admissions, with alcohol and methamphetamine also common. According to law enforcement and treatment administrators, methamphetamine has long been a major problem in the County; this is supported by the stable and high rate of methamphetamine treatment admissions. Adult marijuana treatment admissions have been increasing. Methamphetamine laboratories and dumpsites have increased more than threefold from 1999 to 2001. Licenses for alcohol sales increased slightly in number, but have not kept pace with population growth. The number of visits to the needle exchange by injection drug users increased almost four-fold over the past six years, with most clients using heroin and methamphetamine. The number of hospital admissions for alcohol and drug-related issues has remained below the State's.

Sources and Data Notes

- ¹ 2000 US Census. www.census.gov.
- ² 1999 Clark County Behavioral Risk Factor Surveillance System Report.
- ³ Washington State Department of Social and Health Services Research and Data Analysis, CORE-GIS Data System, May 2001
- ⁴ Search Institute (2000). *Building on our future: Youth asset survey findings and analysis, May 12, 2000*. Vancouver, WA: Author.
Data note: Survey conducted in the Fall of 1999, participants included: Vancouver School District, Evergreen School District, Washougal School District, Camas School District, Battle Ground School District, Washington State School for the Blind, Washington State School for the Deaf, and Clark County homeless shelters.
- ⁵ Washington Poison Center. *American Association of Poison Control Centers, Toxic Exposure Surveillance System, Annual Report 2001, Washington Poison Center*. Seattle, WA: Author.
Data note: The majority of calls to the Poison Center are made from private residences regarding poisonings that occur in the home, health care facilities represent the second largest group calling the poison center. Calls related to symptomatic exposure or intoxication from drugs of abuse are more likely to be placed by health care facilities compared to information only calls which are more likely to be placed from residences (information only calls are not included in the data presented). Most calls from health care facilities are regarding serious cases or unusual presentations in which substance specific medical advice or consultation is desired. Not every poisoning or exposure is reported to the Poison Center and the total numbers reported do not equal the total number of poisonings that actually occurred statewide. Therefore data do not indicate the prevalence of symptomatic exposures to substances used, but rather point to serious or unusual situations involving substances. Multiple substances may be recorded for each call. Information requests related to pill identification are referred to the FDA.
- ⁶ Washington State Department of Social and Health Services Division of Alcohol and Substance Abuse, Tobacco, Alcohol and Other Drug Abuse Trends in Washington State 2002 Report.
Data note: These data excludes Detox, Transitional Housing and Group Care Enhancement, private pay admissions. Includes total admissions – counts may be duplicated for an individual based on multiple admissions or multiple modalities of care.
- ⁷ Northwest High Intensity Drug Trafficking Area Threat Assessment 2002.
- ⁸ Portland Police Bureau, Drugs and Vice Division Statistics.
<http://www.portlandpolicebureau.com/dvdstats.html>

Clark County – Drug Use Epidemiology, February, 2004. (ADAI Research Brief 04-02). Prepared by Caleb Banta-Green, MPH, MSW. Seattle: Alcohol & Drug Abuse Institute, University of Washington. Preparation of this report was funded in part by the Washington State Department of Social & Health Services' Division of Alcohol & Substance Abuse. URL: http://depts.washington.edu/adai/pubs/arb/arb04_02.pdf