

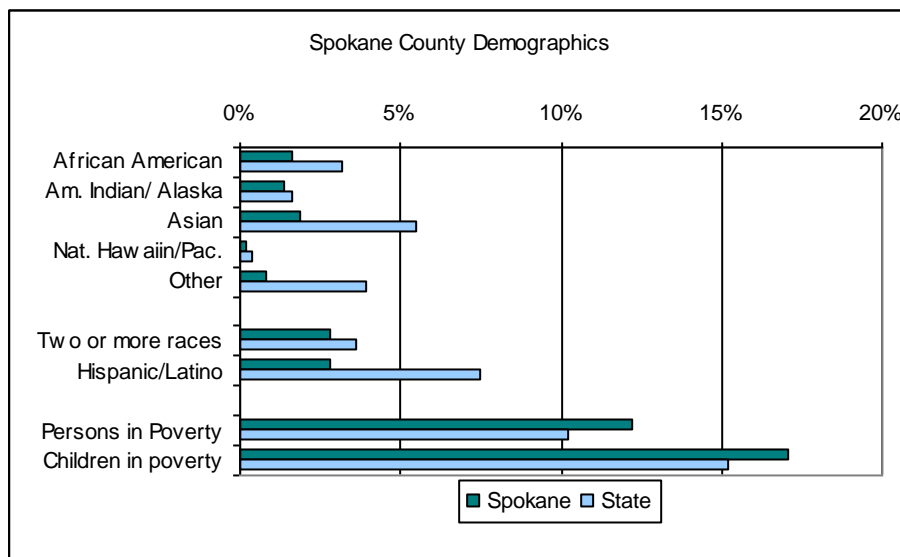
## SPOKANE COUNTY – DRUG USE EPIDEMIOLOGY

### LOCATION AND POPULATION OVERVIEW

Spokane County is located on the Eastern border of Washington 70 miles south of the Canadian border. The city of Spokane is the largest city in the inland northwest. Interstate 90 runs east-west through the County, beginning in Seattle and continuing east across Idaho and Montana.

The County's total population is 417,939, up 15.7% from 1990. The city of Spokane is home to 195,629 people. The economy is diverse and includes manufacturing, high tech, agriculture and employment at several colleges.

According to the 2000 census, the County has a higher proportion of Caucasians than the State, with lower proportions of other racial/ethnic groups except for American Indians which make up the same proportion of the County as the State average. Higher rates of poverty are found in the County than on average Statewide.



### ALCOHOL AND OTHER DRUG USE - ADULT

#### Alcohol Use

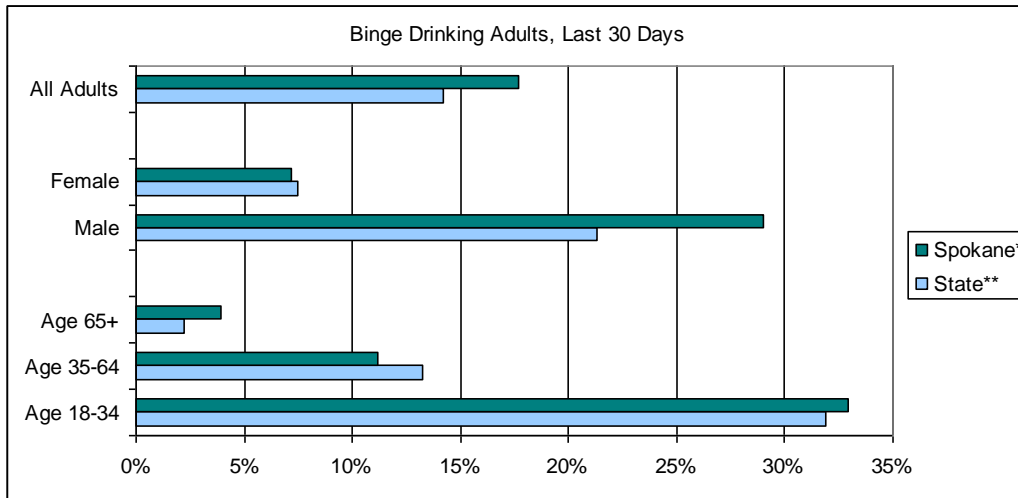
##### Recent Arrestees

The Arrestee Drug Abuse Monitoring Program includes data for adult male arrestee's self-reported alcohol use in 2001<sup>1</sup>. A majority reported binge drinking in the prior month, 59%, with 35% at risk for alcohol dependence according to a clinically based dependency screening tool.

##### Binge Drinking

Among those who drink, binge drinking, consumption of five or more drinks at a sitting, is reported more often among County residents compared with the State as a whole, 18%<sup>1</sup> versus 14%<sup>2</sup>. Twenty nine percent of males who drink report binge drinking in the previous month, compared with 7% of females in the County. Younger adults were much more likely to

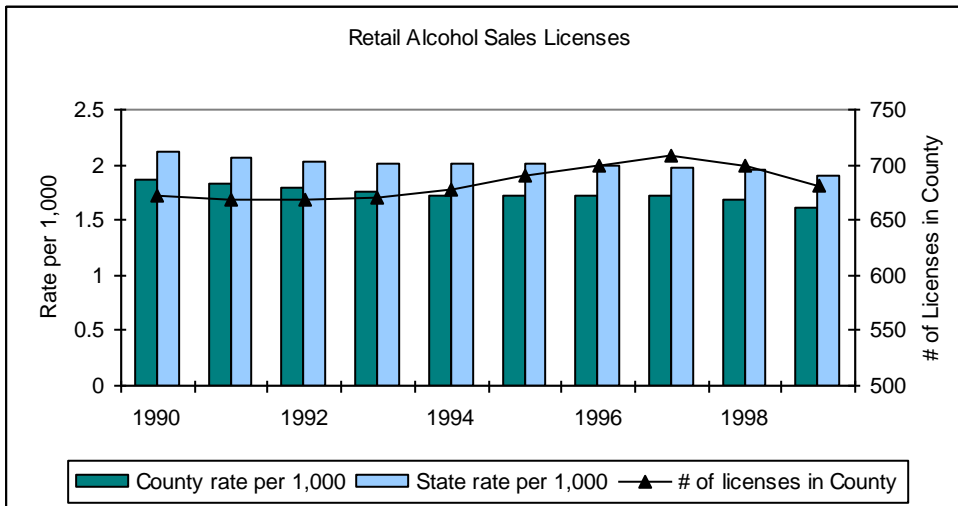
report binge drinking than older adults. Data were collected from the County and the State as part of the Behavioral Risk Factors Surveillance System survey conducted by the Washington State Department of Health.



\*1997, 1999 & 2001 BRFSS data combined \*\* 1999 BRFSS data

**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. Retail alcohol sales licenses declined slightly in Spokane County, and remained lower than the State's average. A total of 681 licenses were active in 1999.



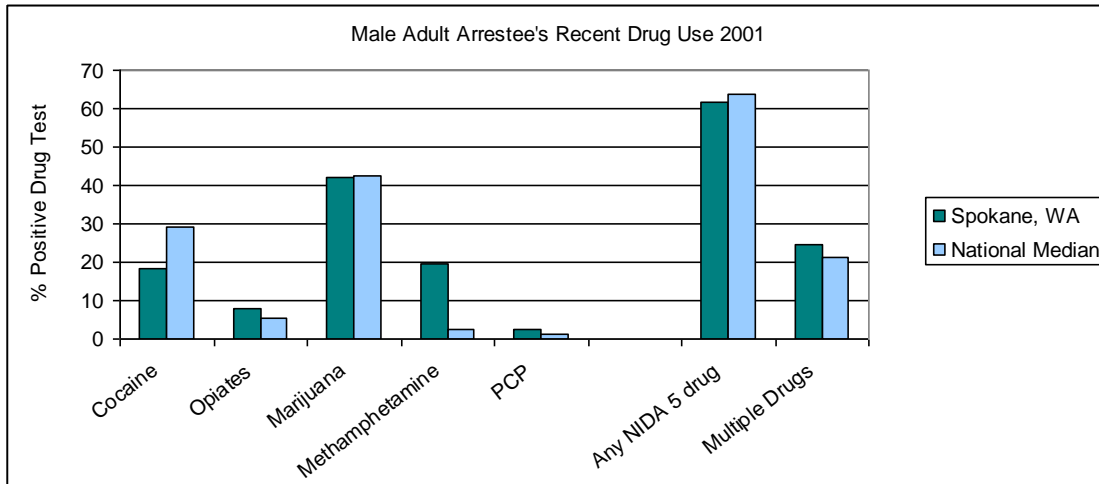
**Other Drug Use**

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, are 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 are unavailable for the County. Data from new arrestees are an important indicator of drug use among a subset of the population.

### Recent Arrestees

The results of drug tests among adult, male arrestees are shown in the figure below. Overall, 61.6% of all adult male arrestees tested positive for one of the 'NIDA 5' drugs, with a quarter testing positive for two or more drugs<sup>1</sup>. Marijuana was the single most common drug detected, with 42.1% of arrestees in Spokane testing positive. Methamphetamine was the second most common drug detected in Spokane, 19.5%, much higher than the national median, similar to Portland, Oregon and substantially higher than Seattle. Cocaine was found in the drug tests of 18.5% of new arrestees, lower than the national median and lower than Seattle and Portland. Opiates were detected in 8.1% of arrestees, slightly higher than the national median.



Source: National Institute of Justice, Arrestee Drug Abuse Monitoring Program

Interviewees were also asked to self-report which substances they had used. A majority, 63%, of male arrestees in Spokane reported using marijuana in the past year, with 53% reporting use in the past month. For methamphetamine 30% reported use in the past year and 23% in the past month. Heroin use was less common, 10% in last year, 7% in the past month.

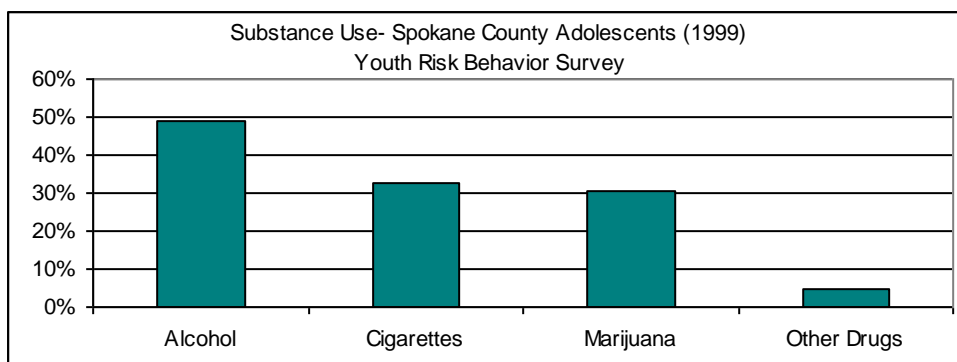
No recent data are available on the level of illegal drug use among all adults. Publicly funded treatment data, reported elsewhere in this report are the best approximation of drug use among adults.

### Syringe exchange

Syringe exchange staff report that approximately 247,000 syringes were exchanged at the fixed and mobile sites in 2001. Approximately 6,000 contacts with clients were made for the same year (L. Everson, personal communication, July 2002).

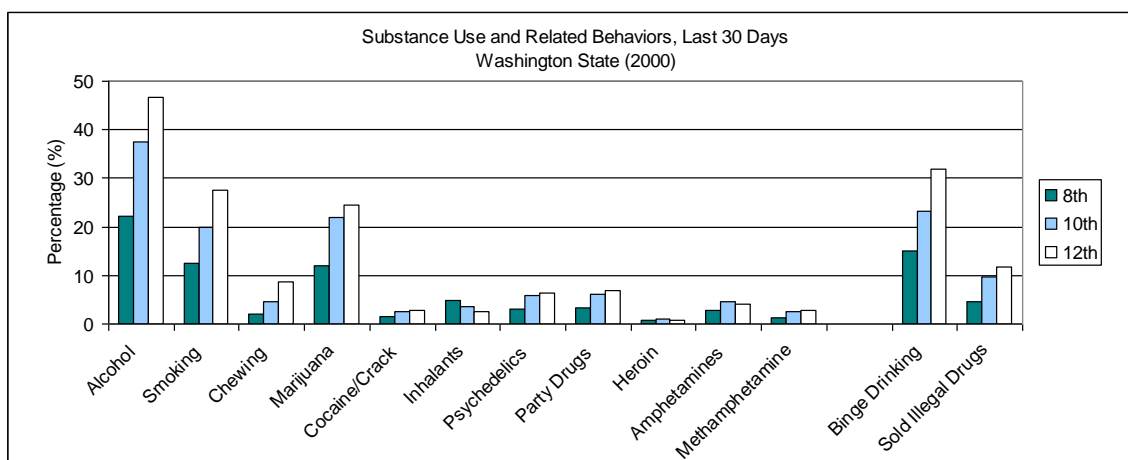
### Alcohol and Other Drug Use- Youth

Data on youth substance use is available from the 1999 Youth Risk Behavior Survey<sup>1</sup>. The most commonly used drugs were alcohol, used by almost half of all adolescents who responded, and cigarette use, reported by almost a third of youth. Marijuana was the most common illegal drug, with 30.6% reporting use in the past 30 days.



Statewide data are available by grade level and by specific substance. State data on youth drug use from the Washington State Survey of Adolescent Health Behaviors administered in 2000, indicates that the most commonly used drugs are alcohol and marijuana<sup>1</sup>. Other commonly used illegal drugs include psychedelics and party drugs, combined, these two drug categories were noted by more than 10% of 10<sup>th</sup> and 12<sup>th</sup> graders as being used in the past 30 days.

Two problem behaviors are identified in the figure below. Binge drinking, five or more drinks consumed at a time, was mentioned by a third of 12<sup>th</sup> graders, almost a quarter of 10<sup>th</sup> graders and 15% of 8<sup>th</sup> graders. Selling illegal drugs was mentioned by 10% of 10<sup>th</sup> graders and 12% of 12<sup>th</sup> graders. A recognized limitation of school based surveys is that those with the most serious behavioral and substance using problems are more likely to drop out of school and are therefore less likely to be surveyed in the higher grades; the result being an under reporting of such problems.



## **POISON CENTER**

The Washington Poison Center receives calls from throughout Washington State made to its toll free number. In 2001, there were 902 calls from Spokane County residents related to commonly abused illegal, prescription and over-the counter drugs to the Poison Center<sup>1</sup>. (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. Opiates were the most common abuse-able prescription drug mentioned, with 239 calls. A quarter of calls related to opiates mentioned oxycodone specifically, the most of any opiate type identified.

Calls regarding street drugs and stimulants were dominated by substances lumped into the category of amphetamines, 69 of 116 calls. Poison center staff report that this is used as a 'catch all' term for stimulants 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). It is likely that most of the drugs

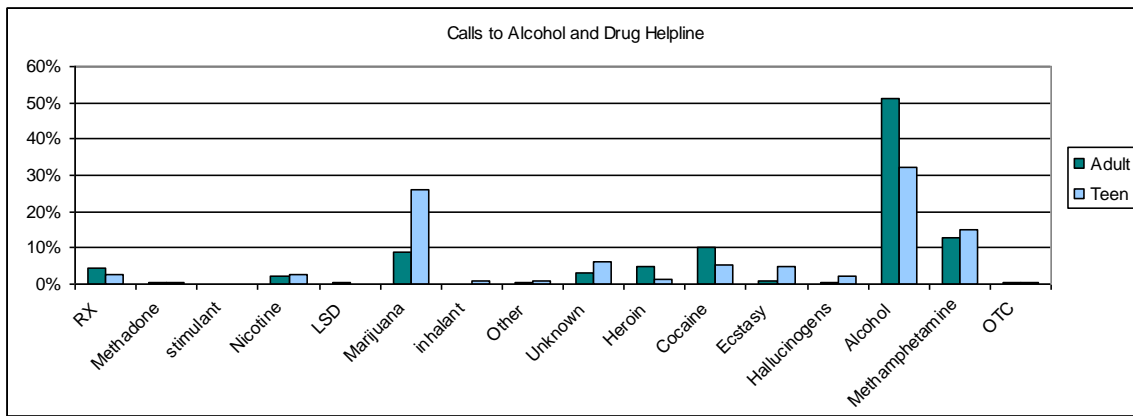
identified generally as amphetamines were actually methamphetamine. The number of calls for other drugs were quite small.

Drug Category	Drug Name	Total # of Exposures
<b>Prescription &amp; Over the Counter</b>		<b>786</b>
	Antihistamines	140
	Opiates	239
	Dextromethorphan- cough med.	123
	Benzodiazepine	161
	Other depressants/sedatives	123
<b>Street Drugs</b>		<b>116</b>
	Amphetamine	69
	Marijuana	14
	Cocaine	8
	Mushrooms: hallucinogenic	4
	Heroin	8
	PCP	3
	LSD	2
	Nitrous oxide	2
	GHB & analog/precursor	2
	Ketamine and analogs	3
	Methamphetamine	1
<b>Sub-total- Street, Prescription and Over the Counter Drugs (Summed from above)</b>		<b>902</b>
<b>Alcoholic Beverages</b>		<b>112</b>

### ***ALCOHOL AND DRUG HELPLINE***

Youth calls to the Helpline made up 84% of the 4,612 calls in 2001. Youth cited alcohol as the reason for their call most often, followed by marijuana and methamphetamine, both of which were mentioned more often by youth than adults. Other drugs mentioned by relatively large numbers of youth include ecstasy, 5% or 190 calls, and cocaine, 5% or 198 calls. A much higher proportion of calls were made about youths' use of cocaine and ecstasy compared to the proportion receiving treatment.

Adults called about alcohol half of the time, followed by methamphetamine, cocaine and marijuana. More adults called about alcohol, cocaine, heroin and prescription drugs than youth. The number and proportion of calls to the helpline vary based on a number of factors including prevalence of local use of the drug, recent publicity about the helpline as well as publicity about a specific drug. Relative to most other counties, Spokane residents called in high numbers and had a higher proportion of calls about youth substance use.



**NEED FOR TREATMENT AND TREATMENT GAP**

Treatment Services

Forty nine State certified chemical dependency treatment agencies were located in Spokane County as of the beginning of 2002. The full range of substances of abuse are addressed by these agencies, various treatment modalities are available and a number of programs exist for specific sub-populations such as pregnant and parenting women, people with co-occurring mental health and substance use problems, and American Indians. Sub-acute detoxification, inpatient treatment and outpatient treatment are available in the County. Opiate substitution treatment is available in the County; it is the primary form of treatment for heroin addiction and is provided by the Spokane Regional Health District. Drug courts are available for youth and adults in Spokane County.

Treatment Gap

The estimated gap in Spokane County between needed treatment and actual treatment utilization is 84.6% for those under 200% of the Federal Poverty Level, well above the State’s, (see the table below)<sup>7</sup>. This means that only 15.4% of people who are in need of alcohol or other drug treatment services receive such services. The treatment gap in Spokane County is the biggest for any large county in the State.

Region	Number of adults <200% FPL and 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
Spokane County	80,367	12.80%	1,585	8,702	84.60%
State Total	868,734	11.12%	25,395	71,207	73.70%

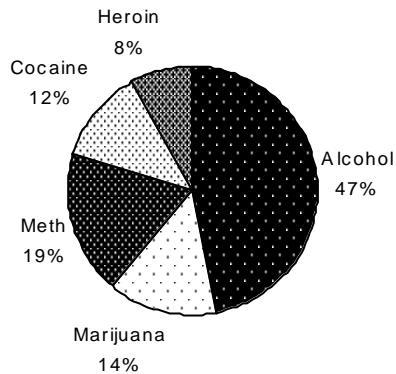
\*Federal Poverty Level, 200% FPL = \$36,200 for a family of four in WA (2002)

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 these 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.

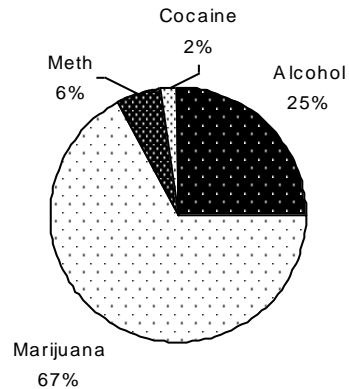
**ALCOHOL AND DRUG TREATMENT ADMISSIONS**

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.

Adult Publicly Funded Treatment Admissions 2001



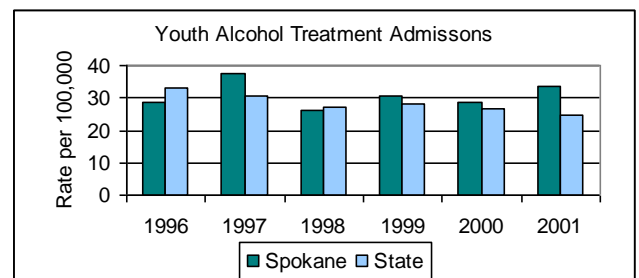
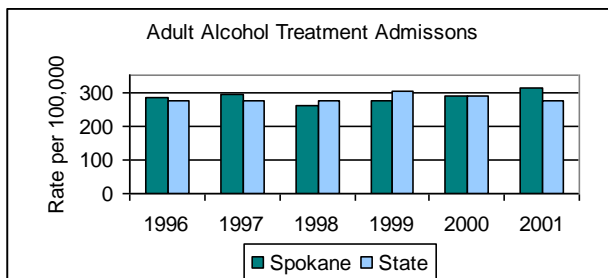
Youth Publicly Funded Treatment Admissions 2001



Overall, Alcohol is the most common drug treated in the County for adults, followed by methamphetamine, marijuana, cocaine and heroin (publicly funded treatment)<sup>2</sup>. For youth, marijuana makes up two-thirds of admissions followed by alcohol, methamphetamine and cocaine.

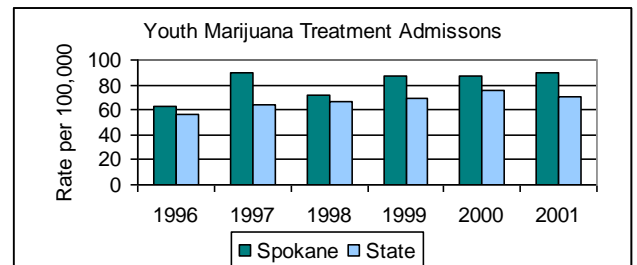
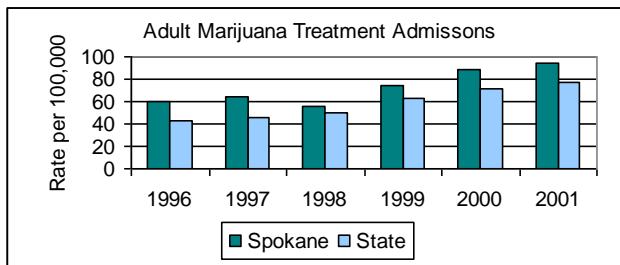
Alcohol

Treatment admissions for alcohol increased slightly and remained slightly above State averages for adults in Spokane County. Almost half of all adult treatment admissions were for alcohol. For youth, in 2001, a quarter of treatment admissions were for alcohol, with a total of 141 youth admitted. Statewide youth alcohol treatment admissions have been declining, while in the County the rate has fluctuated around the State average.



Marijuana

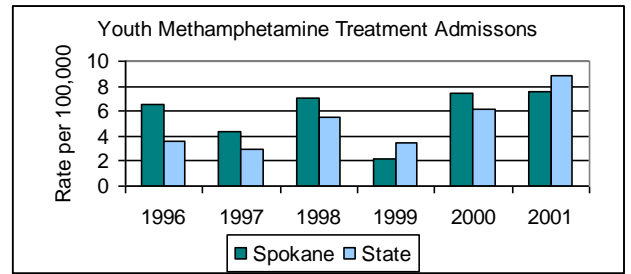
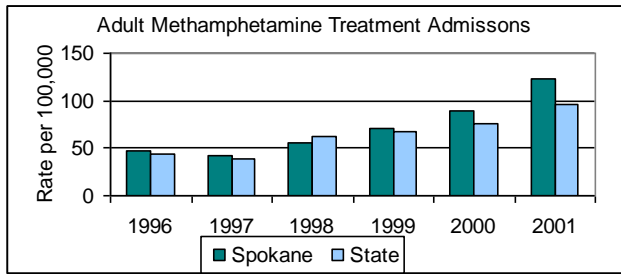
Adult and youth rates of admission for marijuana have increased in the County and the State, with the County rates increasing more quickly and to a higher level. In 2001, there were only slightly more adult admissions for marijuana in the County, 397, than youth admissions, 379.



Methamphetamine

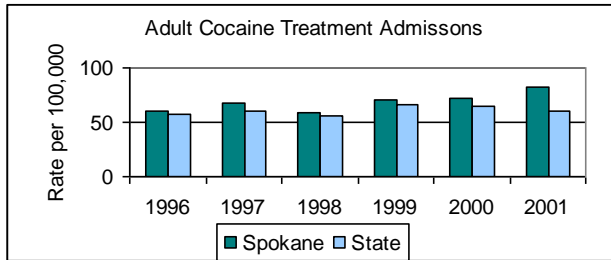
As the State rate doubled, the County rate of methamphetamine admissions increased even faster, with a total of 522 admissions in 2001. Methamphetamine was the illegal drug treated

most often among adults in the County, with 19% of all treatment admissions. Youth treatment admissions have fluctuated, in tandem with the State rate, with 32 youth admitted for treatment in 2001.



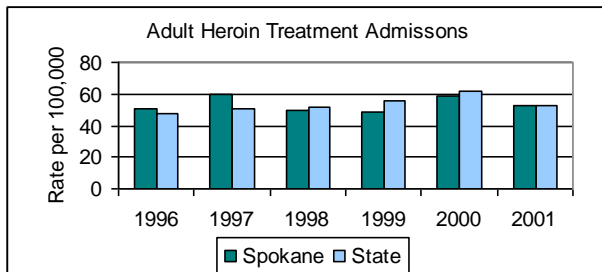
### Cocaine

The rate of treatment admissions for cocaine increased gradually and was well above the State's. Youth treatment admissions were infrequent with a total of 62 youth admitted between 1996 and 2001.



### Heroin

Rates for heroin treatment admissions fluctuated with a rate of 53 in 2001, similar to the County rate in 1996 and identical to the State rate in 2001. There were only 14 youth treatment admissions where heroin was primary during the same five year time frame.



## DRUG TRAFFICKING AND PRODUCTION

### Trafficking

Mexican nationals are involved in the trafficking of multiple types of drugs including heroin, cocaine, marijuana and methamphetamine. In addition, marijuana is grown locally and is also available from sources up and down the west coast including British Columbia, Canada<sup>2</sup>. Statewide, approximately one third of methamphetamine used is produced within the State. Law enforcement reported two known drug trafficking organizations in 2001 operating in the County.

Notable law enforcement activity reported by the DEA during January-June 2002 includes<sup>2</sup>:

- March 2002, DEA Spokane Regional Office seized 1,001 pounds of BC Bud (record seizures were made in this quarter).
- May 2002, psilocybin mushroom grow operation was encountered in the adjoining county of Pend Orielle.



DEA provided the following information on drug trafficking, prices and availability in Spokane County January-June 2002:

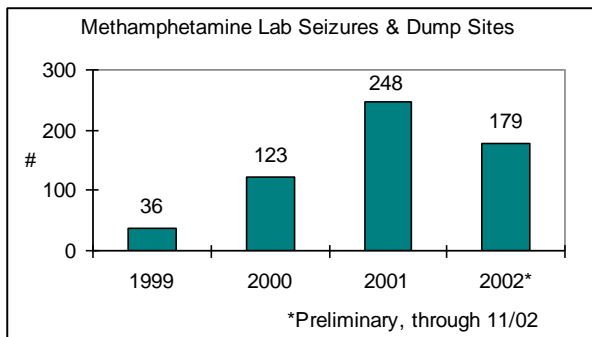
- Heroin is exclusively Mexican black tar, with the purity of seizures in the 30%-70% range.
- Cocaine HCl (powder) availability is reported to be low due to the abundance of methamphetamine, while purity ranges from 60-80%.
- Crack cocaine is 'readily available' in Spokane, including on American Indian Reservations. Prices range from \$225-\$250 per quarter ounce, with an average purity of 75%. Commercial airlines represent one of the ways in which crack is brought into Spokane.
- The most common variety of marijuana available in Spokane is 'BC Bud'.
- Methamphetamine represents the majority of the DEA's caseload in Spokane. Crystal methamphetamine (ice) is one form available and the average price for one ounce ranges from \$1,200-\$1,500.
- MDMA (Ecstasy) sells for \$20-\$100 for 10 pills in Spokane.

Marijuana Cultivation

In 2001, 26 cultivation seizures of marijuana were made in Spokane, a substantial increase from 2 in 2000.

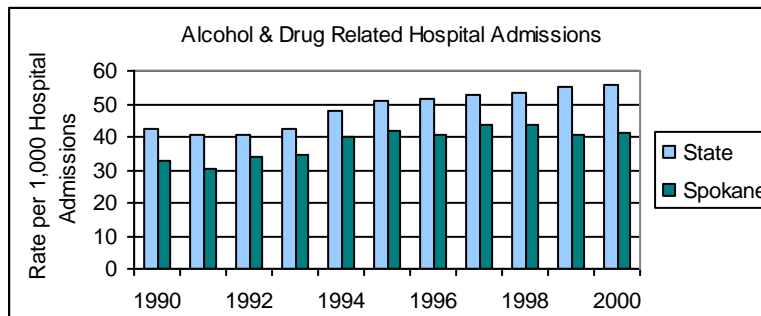
Methamphetamine Laboratories

The biggest increase among all large counties in the State for methamphetamine laboratories and dump site reports was in Spokane County in 2001. The rate was 59 per 100,000 county residents compared to in average of 32 per 100,000 for the State in 2001. Preliminary data for the first 11 months of 2002 indicates that substantially fewer manufacturing and dump sites are likely to be found compared to the prior year.



**HOSPITAL ADMISSIONS FOR ALCOHOL AND OTHER DRUGS**

Hospital admissions related to alcohol and other drugs increased, but remained below State averages, with 41 per 1,000 hospital admissions in the County compared to 56 per 1,000 Statewide in 2000.



## SUMMARY

Alcohol and marijuana are commonly used by adults and youth. Indicators point to substantial methamphetamine use including high rates of methamphetamine laboratories and dump sites as well as treatment admissions for adults. Use rates among adult male arrestees was high for methamphetamine and many calls were made to the helpline and the Poison Center regarding methamphetamine and amphetamines. Marijuana and cocaine treatment rates for adults are higher than the State's. The treatment gap in the County is even larger than the State's, with only 15% who need treatment actually receiving it. Calls to the helpline mirror much of the treatment data, with additional information about ecstasy, which 190 youth called about, 5% of all youth calls. Treatment admissions for ecstasy are rare.

### Sources and Data Notes

<sup>1</sup> Arrestee Drug Abuse Monitoring Program (2002). Drug use and related matters among adult arrestees, 2002.

<sup>2</sup> Washington State Department of Health, Center for Health Statistics, Behavioral Risk Factor Surveillance System, supported in part by Centers for Disease Control and Prevention Cooperative Agreement U58/CCU002118-(1997, 1999, 2000, 2001)

<sup>3</sup> Washington State Department of Health (1999). *Behavioral Risk Factor Surveillance System, Washington Statewide Survey Data Washington State*. Olympia, WA: Author. [<http://www.doh.wa.gov/EHSPHL/CHS/CHS-data/brfss/Links/WA99STRP.pdf>]

<sup>4</sup> Washington State Department of Health (2000). Youth Risk Behavior Survey.

<http://www.spokanecounty.org/health/CA/factsheets/YRBS.pdf>

<sup>5</sup> Washington State Department of Social and Health Services, Management Services Administration, Research and Data Analysis Division (2001). *Risk and Protection Profile for Substance Abuse Prevention Planning in Spokane County* (Rep. No. 4.40-32). Olympia, WA: Author.

<sup>6</sup> 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.

<sup>7</sup> 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 exclude 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.

<sup>8</sup> Northwest High Intensity Drug Trafficking Area (2002). *Threat Assessment 2002*. Seattle, WA: Author.

<sup>9</sup> Drug Enforcement Administration (2002). Memo: trends in the Traffic- Washington State and Portland, Oregon Metropolitan Area, January-June 2002.

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