

OFFICE OF NATIONAL DRUG CONTROL POLICY

PULSE CHECK
National Trends in Drug Abuse

Fall 1999

Executive Office of the President
Office of national Drug Control Policy
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Office of Programs, Budget, Research, and Evaluation

October 17, 1999

Key Findings

Twice annually, the Office of National Drug Control Policy issues *Pulse Check*, a report describing current trends in illicit drug use and in the illicit drug market. The report is based on information gathered through conversations with ethnographers, epidemiologists, law enforcement officials, and treatment providers working throughout the United States. These experts describe patterns they have seen in their local communities in the six months prior to being contacted. Following are highlights of reports on heroin, cocaine, marijuana, methamphetamine, and any emerging drugs.

Heroin

- Heroin use continues to increase in many areas, though less rapidly in parts of the South and Midwest. Most areas are experiencing shifts in the mix of users, with more young initiates and more suburban users added to a traditionally older user cohort. While most of the initiates and young users inhale the drug, there are also new injectors. In San Francisco, sources also report an increasing number of young, middle class users smoking Black Tar heroin. The trend toward new, young users has been reported in the Northeast in *Pulse Check* reports for the last two years. This trend now appears to be spreading to other areas of the country. Ethnographic sources in Texas, Seattle, Miami, Kansas City, Atlanta and Chicago also report heroin use among teens and young adults.
- Many areas throughout the country have active heroin markets. Prices range from as low as \$30 per gram in Manhattan to a high of \$200 to \$300 per gram in Minneapolis. Purity varies considerably, with very low purity in the South and continued high purity in the Northeast and Northwest.
- Treatment providers report more heroin users entering treatment, particularly in the Northeast. However, the younger users reported by law enforcement and ethnographic or epidemiological sources have not yet impacted on treatment facilities. Providers in all regions report that the majority of heroin users in treatment are still older, established users, with prior treatment experience.
- While many drugs may be sold in the same location in a city, dealers who handle both of these drugs at the same time have in the past been unusual in most areas. Over the last two years *Pulse Check* sources have reported that an increasing number of drug dealers distribute both heroin and cocaine. What is characterized by law enforcement as “one-stop shopping” in Chicago is also found in other locations. However, most sources report that even when heroin and cocaine are dealt together, there are still specialized markets for marijuana and methamphetamine.

Cocaine

- Crack use continues to decline or remain stable in all but one area. In general crack users are an older cohort, rather than new initiates or young users. One exception is some increased use among young females in areas along the Southwest border.

- Crack availability is high in all areas and its price has remained stable since the last *Pulse Check*. Pieces or rocks are sold for \$5 to \$20 depending on the size of the nugget and are sold in bags, balloons, vials or simply handed to the buyer as loose “bits.” As in the last two *Pulse Check* reports, sources report that increasingly crack users buy cocaine in powdered form to “make their own” rather than buy a finished product. By making crack themselves, users are able to obtain a better value as well as more reliable purity.
- Cocaine powder is used less frequently than crack in all but a few locations, and is used most frequently by heroin injectors who add it in a combined injection (a “speedball”). Cocaine powder is also consumed by young adults who snort it in clubs or similar social settings. While this group of cocaine users has not been widespread in recent *Pulse Check* reports, it is resurfacing in Miami, Baltimore, Seattle, and Austin. One area reports the availability of what is called a “teener,” a package of 1.75 grams of powder which at \$50 is within the financial reach of young users.
- Though cocaine and crack use are stabilizing nationwide, one of these two drugs remains the primary drug of abuse for people entering treatment in most areas, second only to alcohol. Users in treatment are described as older, often polydrug users and experienced in treatment. They appear to be persons who established crack addiction over the prior 5 to 10 years during the height of the crack epidemic and now are seeking treatment.

Marijuana

- Marijuana attracts the most diverse group of users of any of the drugs examined in this report. It is more prevalent among young users, but is also used by persons of all ages.
- Local hydroponic growers are now found operating almost everywhere, producing a higher quality product than either the local, outdoor grown or the imported product from Mexico or the Caribbean. More exotic varieties like a British Columbian product are also available and command higher prices than the more typical \$100 to \$150 per ounce for domestic marijuana. This variety known as “BC” or “bud” is highly valued for its potency, and in Seattle is reportedly exchanged with Mexican traffickers for cocaine.
- Marijuana is available through two sources: a network of friends and associates who sell small amounts of locally available marijuana and use the drug themselves, and; street sales of a range of weights from small units (ounces, single marijuana cigarettes) to larger quantities (pounds).
- As reported in the past two years of *Pulse Check*, marijuana continues to be used in combination with cocaine or PCP or dipped in substances like formaldehyde. These “treated” marijuana products cost more than ordinary joints or bags of marijuana and often carry unusual names like “amp,” “wet” or “primos.” Treated marijuana is also mixed with tobacco and rolled into a larger “blunt” or cigar-like product.

Methamphetamine

- Methamphetamine continues to be a significant drug problem in the West and Northwest, but is almost undetectable in most areas of the East and South. In the West and Northwest, methamphetamine use is high, though may be stabilizing.
- Methamphetamine is used by a more diverse set of users than reported in 1996 when ONDCP conducted a special *Pulse Check* survey on methamphetamine in the Western states. While that survey found it to be more confined to White males in their 20s and 30s, it is now reported among both males and females and in the Hispanic population. In those Eastern and Southern cities where methamphetamine use is reported in this *Pulse Check* at very low levels (Baltimore, Atlanta), it is still found among either “biker” groups of older White males or club goers as part of the battery of club drugs consumed in nightclubs and at raves.
- Manufacture of methamphetamine occurs in rural U.S. areas or in Mexico. Local labs tend to be small, easily dismantled and temporary.

Emerging Drugs

- Few drugs were reported as new or emerging in the six month period represented in this survey. Areas continue to report club drug use among young users, i.e., LSD, MDMA, Ketamine, GHB, though not at levels higher than last reported.

Methadone

- Thirty-eight of fifty states currently have methadone maintenance or detoxification programs. The majority of programs offer both maintenance and detoxification services.
- There are no waiting lists reported in the sample of programs surveyed from the West, but 40% or more of the programs in the Northeast and Midwest report waiting lists.
- Methadone clients are older addicts entering treatment primarily for problems related to heroin use (80%). A small number of clients enter with their primary addiction to other opiates such as demerol or dilaudid (5%), codeine compounds (6%) or illicit methadone (4%).
- Ethnographic and law enforcement sources report the presence of illicit methadone sales in many areas. While program clients area cited as the most frequent source of sales, there appears to be no clearly organized market. Buyers tend to be addicts who do not wish to enter treatment rather than users buying methadone to “get high.”