Northwest High Intensity
Drug Trafficking Area Program

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Methamphetamine and Related Crime: The Impacts of Methamphetamine Abuse

THREAT ASSESSMENT - MARCH 2006

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Methamphetamine and Related Crimes:
The Impacts of Methamphetamine Abuse

Contributions

The following agencies, programs, and resources were crucial for the completion of this document:

Drug Enforcement Administration
El Paso Intelligence Center
Office of the Washington State Attorney General
Washington State Department of Corrections
Washington State Department of Ecology
Washington State Department of Health
Washington State Patrol

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I. Purpose

The methamphetamine epidemic that has swept across the United States has roots and has presented a wide range of challenges in Washington State for years. While local production of methamphetamine has appeared to decrease as indicated by the reduction of reported laboratories, demand has continued to increase. The methamphetamine threat is a complex problem that is not easily solved with associated costs that are staggering. Methamphetamine production and abuse causes legal, medical, environmental, and social problems. Significant time and resources are consumed in order to investigate and dismantle methamphetamine labs, make arrests, prosecute lawbreakers, provide treatment for those addicted to the drug, and clean-up lab sites. The many societal consequences also include a disturbing number of methamphetamine arrests in which children are found living in appalling conditions. These children are often the victims of neglect and abuse, while some have also been exposed to the toxic chemicals used in the production process as well as the finished product. Methamphetamine labs also pose a significant danger to the environment, the community, and public service responders. This assessment will outline the current methamphetamine threat and will identify the crimes that are most often associated with methamphetamine abuse as well as the public impacts the drug is having in Washington State.

II. Overview of Current Methamphetamine Situation

U.S. Attorney General Alberto Gonzales recently declared that, "in terms of damage to children and to our society, meth is now the most dangerous drug in America."

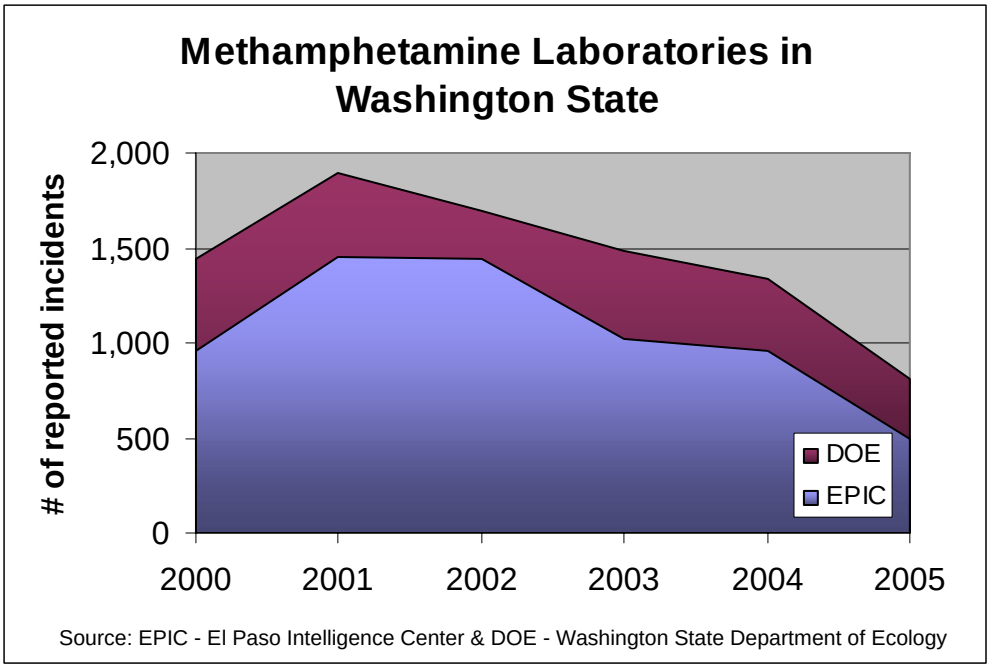
The National Association of Counties (NACo) conducted a survey of law enforcement and county child welfare officials in order to determine the impact methamphetamine has had on these county services and their communities. The NACo report declares that, "The methamphetamine epidemic in the United States, which began in the West and is moving East, is having a devastating effect on our country. The increasingly widespread production, distribution and use of methamphetamine is now affecting urban, suburban and rural communities nationwide." In the National Crime Prevention Council's (NCPC) 2002 report, *Responding to Methamphetamine - Washington State's Promising Example*, it was stated that:

> *"What sets Washington State apart is its commitment to coalesce local, state, and federal efforts to combat meth in a comprehensive, statewide initiative. There, state, county, and community agencies have teamed up with congressional leaders, federal agencies, and national and local nonprofit organizations to launch the Washington Meth Initiative, a plan to integrate law enforcement, prevention/intervention, and treatment to address the methamphetamine problem."*

The methamphetamine market in Washington State was originally dominated by outlaw motorcycle gangs and local producers who were active chiefly in California and the Pacific Northwest. However, it has developed to include major producers in Mexico who are responsible for the organized trafficking of methamphetamine and the hundreds of small producers in nearly all areas of the state. Clandestine laboratories can now be found all across the nation, including rural, city, and suburban areas. Methamphetamine can be manufactured in barns, garages, the back rooms of businesses, apartments, hotel and motel rooms, storage facilities, vacant buildings, wilderness areas (both public and private), and vehicles.

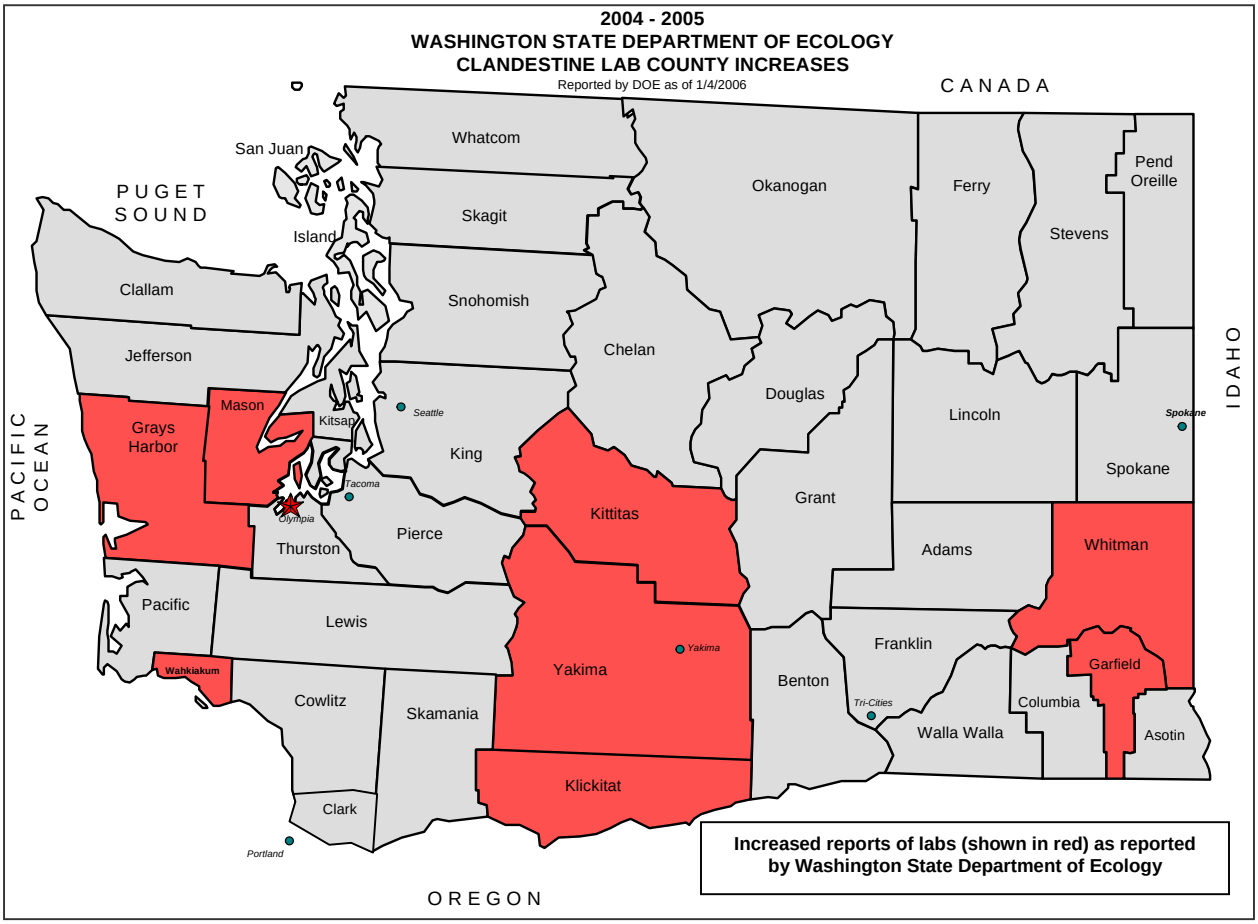
Decline in Reported Methamphetamine Laboratories

The number of reported methamphetamine laboratories in Washington State began decreasing in 2002, at which time the state ranked 3rd nationally in laboratory-related seizures as reported by the El Paso Intelligence Center (EPIC). Washington's ranking dropped to 7th in the nation with a total of 504 reported laboratory-related seizures in 2005. Data from the Washington State Department of Ecology (DOE), which tracks clandestine laboratory-related incidents and sizes by county, shows that such incidents peaked at 1,890 in 2001, but has since continued to decrease with 806 methamphetamine incidents reported in 2005. *(Disparities in seizure statistics are likely a result of differences in data collection and reporting methodologies.)*



Several factors have led to the successful reduction of local methamphetamine production in Washington State. These include the impact of successful law enforcement efforts, an increase in community awareness (due to media coverage, public service announcements and wide-spread public education efforts), harsher sentencing for methamphetamine production offenses, legislative efforts that increase the difficulty in obtaining precursor chemicals, an

increase in the regulation of chemical manufacturers and distributors of precursor chemicals, an increase in the availability of methamphetamine produced outside of the state and the successful implementation of the Washington Meth Initiative, including the establishment of 'Meth Action Teams' in each county across Washington State. The Northwest High Intensity Drug Trafficking Area (HIDTA) program has facilitated the organization of law enforcement, prevention and treatment, legislative, and educational efforts designed to combat the significant methamphetamine threat.



Precursors

Many chemicals and precursors used in methamphetamine production can be purchased legally or stolen. Pseudoephedrine and ephedrine are the most commonly diverted precursor chemicals used in methamphetamine production in Washington. Data found in the National Drug Intelligence Center (NDIC) 2005 *National Drug Threat Survey* (NDTS) indicate that a significant majority of State and local law enforcement agencies in Washington report that pseudoephedrine (77.8%) and ephedrine (66.7%) are commonly diverted in or from their jurisdictions for use in the production of illicit methamphetamine.

The diversion of methamphetamine precursors from Canada to the illicit market is also a continuing problem. Although the movement of pseudoephedrine from Canada to the United States has decreased, increasing quantities of ephedrine are being smuggled across the U.S.-Canada border. Data reported for the western sector of the U.S.-Canada border (west of the Cascade Mountain Range) indicates that 1,462 pounds of ephedrine have been seized in Calendar Year (CY) 2005, representing a 48 percent increase from CY 2004. Intelligence indicates that precursors that are smuggled into the United States are intended for delivery to California-based super-labs.

Chemical reagents and solvents are commonly diverted for use in illicit methamphetamine production in Washington as well. According to NDTS 2005 data, 79.4 percent of State and local law enforcement agencies in Washington report that anhydrous ammonia is a commonly diverted solvent for use in illicit methamphetamine production in their jurisdictions, and 63.5 percent report that red phosphorous is a commonly diverted reagent. Methamphetamine laboratory operators have also continued the trend of producing their own anhydrous ammonia using ammonia sulfate, ammonia nitrate, and household lye. Other operators purchase anhydrous ammonia from agricultural supply stores and marinas or steal anhydrous ammonia from farmers in eastern Washington. Anhydrous ammonia theft has recently expanded to include thefts from fish

packing plants along Washington's coast and in Puget Sound ports. Lithium, another chemical used in methamphetamine production, is often extracted from batteries sold at many retail stores. Iodine is easily purchased at local feed stores. An increasingly popular method of acquiring precursor chemicals in Washington is through Internet sales.

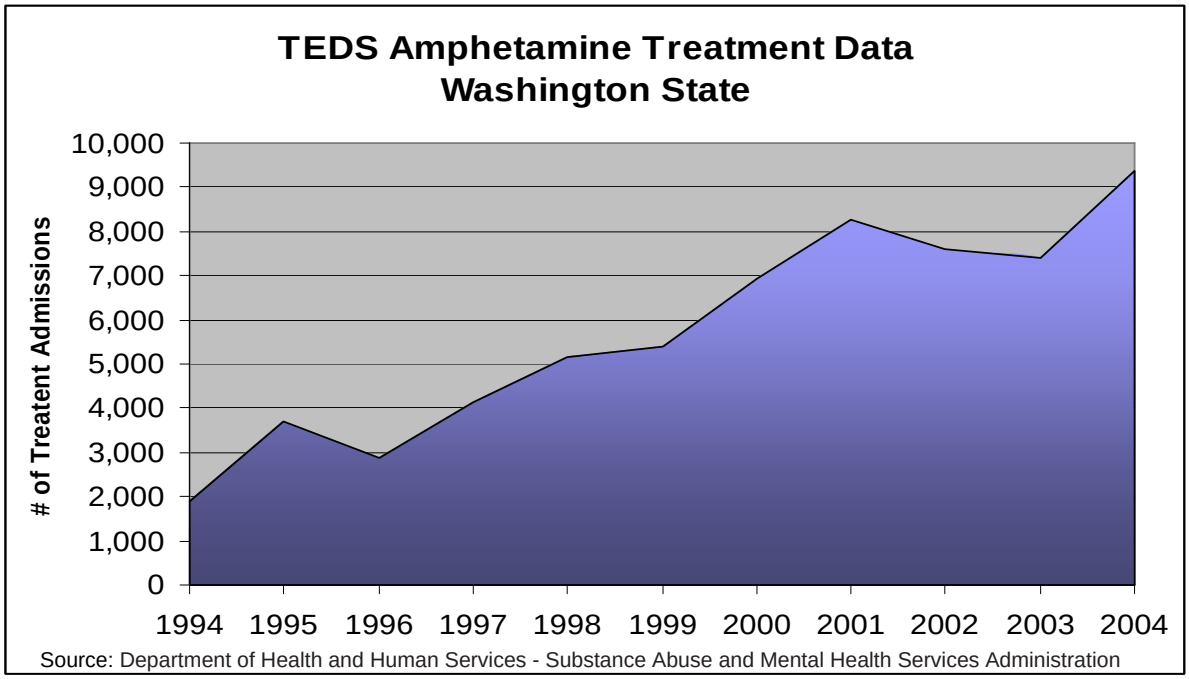
Continued Demand and Availability

In spite of a decrease in reported methamphetamine laboratories in Washington, high purity, low cost methamphetamine remains readily available throughout the state. NDTS 2005 data show that 98.4 percent of State and local law enforcement agencies in Washington described methamphetamine availability as high or moderate in their jurisdictions. Most of the methamphetamine available in Washington is produced in large-scale super-labs located primarily in Mexico and California. Methamphetamine produced locally in Washington by Caucasian criminal groups or independent operators is also available, but to a lesser extent. Crystal methamphetamine, a highly pure and addictive form of the drug known as "Ice" has also become increasingly available in Washington. In spite of decreased reports of methamphetamine laboratories in Washington State, the level of methamphetamine abuse therefore remains high.

Demand for the drug has apparently prompted more importation of methamphetamine from other areas, including rural areas of Washington and other states. As efforts to combat methamphetamine increased, production operations have shifted to areas with fewer resources and less attention dedicated to combating methamphetamine. Decreasing super-lab seizures in the United States, coupled with increasing methamphetamine seizures along the Southwest Border, indicate that methamphetamine super-labs are being relocated to Mexico.

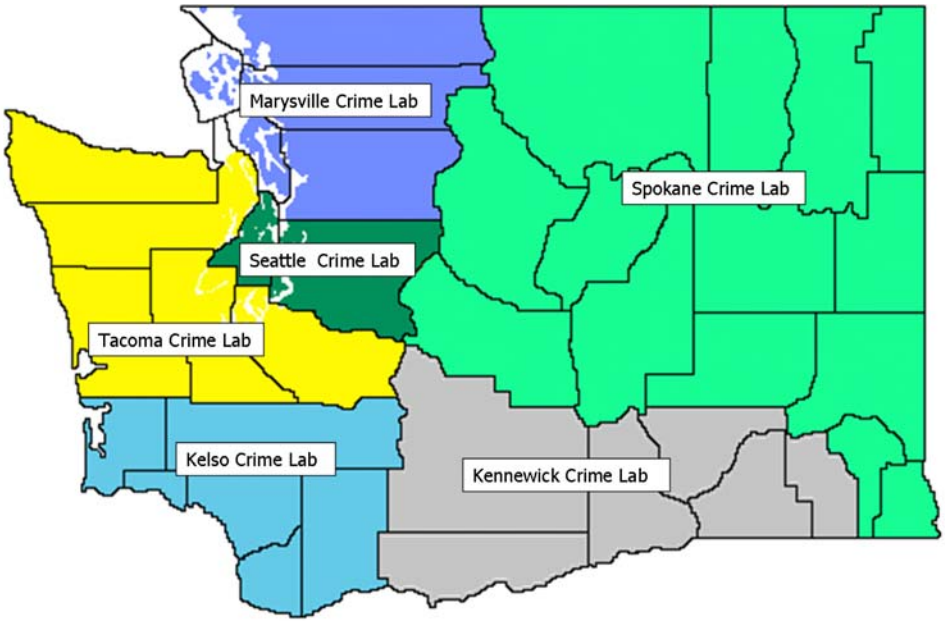
Health and law enforcement-related indicators reflect continued high levels of methamphetamine abuse in the state. The number of treatment admissions for

methamphetamine addiction in Washington has remained at a high level. The Washington State Department of Health and Social Services (DSHS) Division of Alcohol and Substance Abuse (DASA) reports that the number of aggregate adult and youth treatment admissions to publicly funded facilities for methamphetamine addiction has increased each year, from 4,056 admissions in State Fiscal Year (SFY) 1998 to 8,052 in SFY 2004. Data from the national Treatment Episode Data Set (TEDS) indicates a significant increase in treatment admissions in 2004 (9,362) ending the previous downward trend from a peak in 2001 (8,260).



The Federal-wide Drug Seizure System (FDSS) data indicate that the overall amount of methamphetamine seized by Federal law enforcement officials in Washington increased from 48.3 kilograms in CY 1999 to 206 kilograms in CY 2003, but has decreased to 75.5 kilograms in CY 2005. FDSS data also indicate that Washington ranked 9th in the nation (based on weight) for Federal seizures of methamphetamine in CY 2005, down from 4th in CY 2003.

INVESTIGATIVE ASSISTANCE DIVISION
Regional Drug Trends by Laboratory Submissions
2004 Statistics compiled by the Washington State Patrol Crime Laboratory and the Investigative Assistance Division

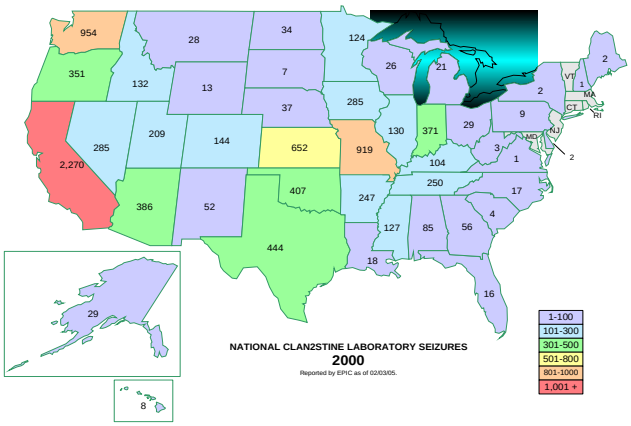


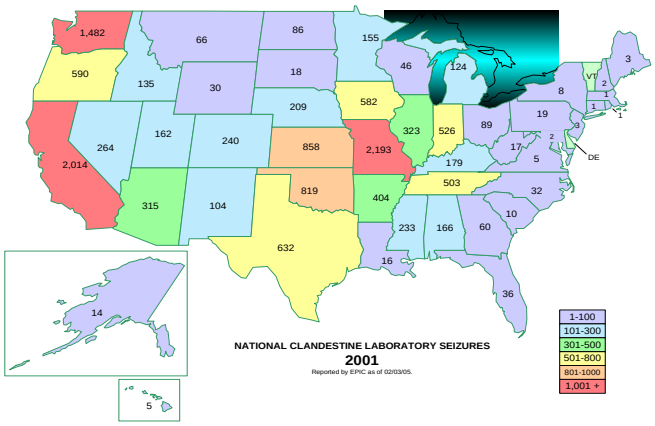
Drugs	Seattle Crime Lab	Tacoma Crime Lab	Vancouver Crime Lab	Kennewick Crime Lab	Spokane Crime Lab	Marysville Crime Lab
Meth	37.2%	55.6%	81.3%	54.4%	59.9%	34.8%
Cocaine	45.0%	17.8%	6.2%	23.1%	28.5%	22.3%
Heroin	5.6%	6.8%	6.4%	3.8%	3.1%	6.0%
Oxycodone	1.8%	0.8%	0.9%	1.0%	1.7%	2.2%
Marijuana	18.8%	23.0%	5.0%	30.2%	25.1%	13.2%
PCP/LSD	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%
MDA/MDMA	1.5%	0.6%	0.3%	0.0%	0.6%	0.8%
Submissions	3,068	1,980	2,159	2,271	2,008	3,177

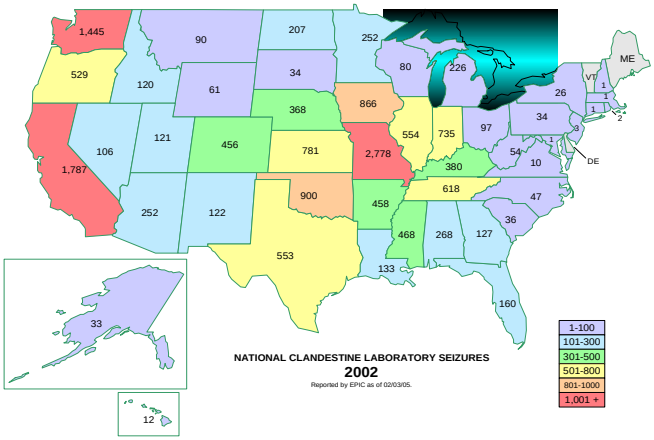
Data obtained from the Washington State Patrol (WSP) Crime Laboratories also indicate that methamphetamine availability continues to increase. In 2004, the state average for laboratory submissions that tested positive for methamphetamine was over 50 percent of the total drug exhibits analyzed.

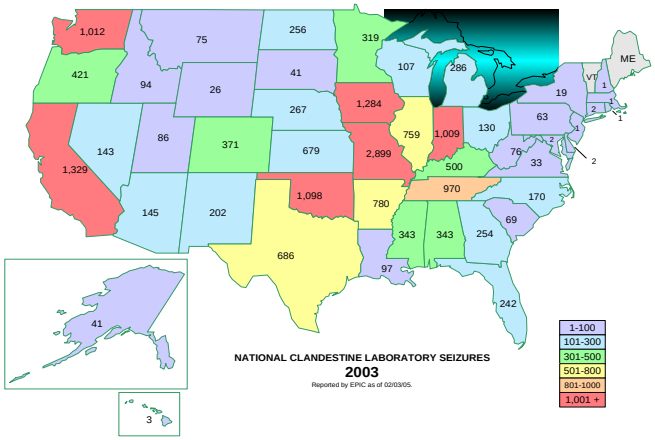
The methamphetamine epidemic has grown to a national scale. As law enforcement pressure on methamphetamine producers has increased there has been a concurrent movement of methamphetamine production and availability into areas with fewer resources and programs targeting methamphetamine-related activity.

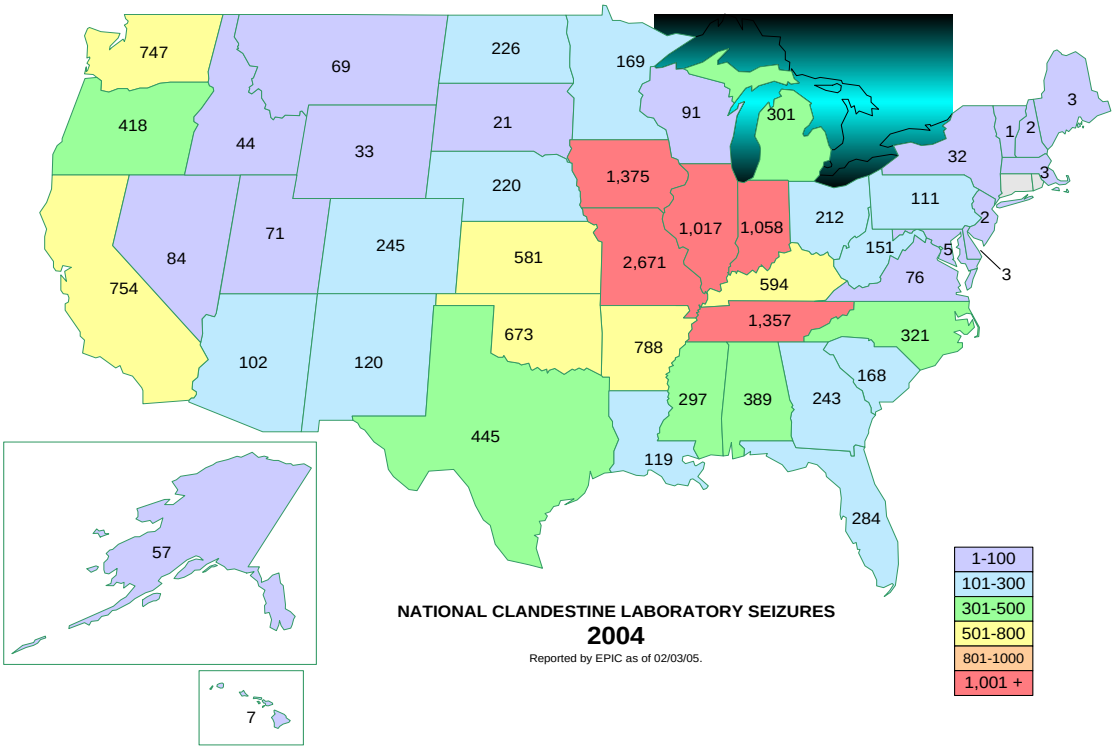
Nationwide Methamphetamine Production Shift











III. Methamphetamine-Related Criminal Activity

Even though the use of methamphetamine is itself a crime, there are other crimes that have increased significantly as a result of the abuse of this drug. Washington State respondents to the NACo survey reported that robbery/burglary (100%), identity theft (100%), domestic violence (82%), and assault (73%) have increased in their counties as a direct result of methamphetamine. The Washington Association of Sheriffs and Police Chiefs (WASPC) report, *Crime in Washington State for 2004*, indicates that the rate of violent crime has remained constant since 2001 at 3.5 incidents per 1,000 population. However, property crime totals for Washington State increased 3.4 percent between 2003 and 2004 and automotive theft increased 6.7 percent for the same time period.

The Cost of Property Crimes

The exact amount of direct loss due to property crimes is difficult to estimate. Not all property crimes are reported, especially those committed against friends and family members. Victims of property crime are faced with two separate costs. The first is the actual value of the lost property, and the second is the value of lost productivity or time at work. Victims of property crimes spend many hours attempting to repair damage, dealing with insurance companies, working with law enforcement, remedying their loss and, in the case of identity thefts, repairing their credit. Often victims suffer lost work time and lost income as a result. Furthermore, victims of identity theft can suffer for years after the 'theft' has occurred. Identity theft victims must often deal with criminal charges committed in their name, fines, suspended licenses, higher insurance rates, difficulty obtaining credit, higher interest rates, and loss of employment and/or difficulty obtaining employment. Indirectly, all residents pay for such losses through higher insurance premiums, higher credit card fees, and higher prices charged by retailers that are also victims of methamphetamine-related crimes such as shoplifting, theft, and fraud.

Uniform Crime Report 2004 - Washington State Ranking		
Crime	**Rate per 100,000 residents**	**National Ranking**
Property Crime	**4849.2**	**2**
Forcible Rape	**46.1**	**4**
Larceny / Theft	**3175**	**4**
Auto Theft	**696.9**	**4**
Burglary	**977.3**	**12**
Robbery	**94.6**	**25**
Violent Crime	**343.8**	**27**
Aggravated Assault	**200.2**	**30**
Murder	**3.1**	**32**

(Source: Uniform Crime Report – Crime in the United States 2004)

Crime statistics reported by the Federal Bureau of Investigation (FBI) in the *Uniform Crime Report – Crime in the United States 2004* indicate that Washington State ranked 27th in the nation for the number of violent crimes, with 343.8 incidents reported per 100,000 residents, while ranking 2nd for property crime. *(Please note that rankings do not take into account many variables that affect crime rates and are only used as a general comparison.)*

Summary of relationship between drugs and crime		
Drugs/crime relationship	**Definition**	**Examples**
Drug-defined offenses	Violations of laws prohibiting or regulating the possession, use, distribution, or manufacture of illegal drugs.	Drug possession or use. Marijuana cultivation. Methamphetamine production. Cocaine, heroin, or marijuana sales.
Drug-related offenses	Offenses to which a drug's pharmacologic effects contribute; offenses motivated by the user's need for money to support continued use; and offenses connected to drug distribution itself.	Violent behavior resulting from drug effects. Stealing to get money to buy drugs. Violence against rival drug dealers.
Drug-using lifestyle	A lifestyle in which the likelihood and frequency of involvement in illegal activity are increased because drug users may not participate in the legitimate economy and are exposed to situations that encourage crime.	A life orientation with an emphasis on short-term goals supported by illegal activities. Opportunities to offend resulting from contacts with offenders and illegal markets. Criminal skills learned from other offenders.

(Source: ONDCP)

Typically, a significant proportion of methamphetamine-related property crimes can be attributed to the users' need to fund their drug purchases. To support their addictions, 'tweakers' often participate in spur-of-the-moment crimes such as purse snatching, strong-arm robberies, assaults with a weapon, burglaries, and thefts of motor vehicles. However, many violent crimes are more likely a result of the pharmacological effects of methamphetamine use as the methamphetamine abuser is the most dangerous and potentially violent when 'tweaking.' It is important to understand that crime, violence, and drug use are strongly interconnected. According to the Drug Enforcement Administration (DEA), most drug-related crimes are not committed by individuals trying to pay for drugs; they are committed by people under the influence of drugs. In fact, Arrestee Drug Abuse Monitoring (ADAM) Program data indicate that in 2003, 67.3 percent of adult male arrestees in Seattle, and 69.5 percent in Spokane (compared with the national median of 67.0 percent) tested positive for drug use involving any of the following drugs: cocaine, marijuana, methamphetamine, opiates, and phencyclidine (PCP). Both Seattle and Spokane adult male arrestees tested positive for methamphetamine more frequently than the national median. ADAM program data indicate that 12.1 percent of adult male arrestees in Seattle tested positive for methamphetamine in 2003, while 32.1 percent tested positive in Spokane. Both percentages significantly exceeded the national median of 4.7 percent of the adult male arrestee population who tested positive for methamphetamine in 2003. ADAM data also show that 19.2 percent of adult

Tweaking

As the euphoric effects of methamphetamine diminish, abusers enter the 'tweaking' stage in which they are prone to violence, delusions, paranoia, and feelings of emptiness and dysphoria. During the 'tweaking' stage, the user often has not slept in days and, consequently, is extremely irritable. The 'tweaker' also craves more methamphetamine, which results in frustration and contributes to anxiety and restlessness. In this stage the methamphetamine abuser may become violent without provocation. Case histories indicate that 'tweakers' have reacted negatively to the mere sight of police uniform. (Source: NDIC)

male arrestees in Seattle and 38.5 percent in Spokane reported the use of methamphetamine within the previous year in 2003. The percentages in both cities were dramatically higher than the national median of 7.7 percent.

Assault

Reports indicate that the incidence of assault in Washington State has increased as a result of methamphetamine abuse. Methamphetamine is a powerful stimulant that affects the central nervous system and can induce anxiety, insomnia, paranoia, hallucinations, mood swings, delusions, and violent behavior, particularly during the 'tweaking' stage of abuse. During the commission of other crimes, methamphetamine abusers can become violent and, especially during the 'tweaking' phase, individuals can become violent without provocation. It is during 'tweaking' that hostage situations can easily occur. If the abuser feels cornered, with no means of escape, the 'tweaker' is likely to take a hostage, often an associate, a relative, or a police officer. In extreme cases, the individual may physically assault the hostage.

In January 2004 a 47-year-old woman from Cosmopolis, Grays Harbor County, was sentenced to six months in jail for second degree assault after pointing a rifle at family members, a mental health counselor, and a law enforcement official while under the influence of methamphetamine. The woman initially had phoned the police to report a burglary (which had not occurred), but then yelled at the responding officer, claiming he was harassing her. Court documents stated that the woman claimed she was being targeted by the "drug world." The woman's behavior became increasingly erratic and paranoid until she was taken into custody following an hour-long standoff with police. (Source: *The Daily World*)

Robbery/Burglary

Besides the violent behavior resulting from methamphetamine abuse, abusers also often commit violent crimes in order to obtain money to purchase methamphetamine. Of the NACo respondents from Washington State, 100

percent indicated that robberies and burglaries have increased in their jurisdictions because of methamphetamine.

Domestic Violence

The NACo report further indicated that over 80 percent of the law enforcement officials surveyed in Washington reported that incidents of domestic violence have increased due to methamphetamine. Domestic disputes, generally regarded as dangerous situations for law enforcement, become intensified when a 'tweaker' is involved because of that individual's unpredictability.

Child Abuse/Neglect

The Office of the Washington State Attorney General has reported significant increases in the number of methamphetamine-related dependency cases around the state. Assistant Attorneys General, who represent the Department of Social and Health Services in the Bellingham, Kennewick, and Vancouver offices report that 80 to 100 percent of all new cases involve parents using methamphetamine. The Washington State Attorney General also reported that in Benton and Franklin Counties, 160 of the 250 children in foster care have been placed because their parents use methamphetamine; and parents that use methamphetamine have helped drive a 62 percent increase in the foster care population over the past decade.

Above: This toddler was rescued during a raid on a meth lab and was found covered in battery grease from playing with an old car battery. Inside and outdoors, laboratory paraphernalia and chemicals were found within the child's easy access. The toddler also tested positive for meth. (Source: DEA)

Identity Theft

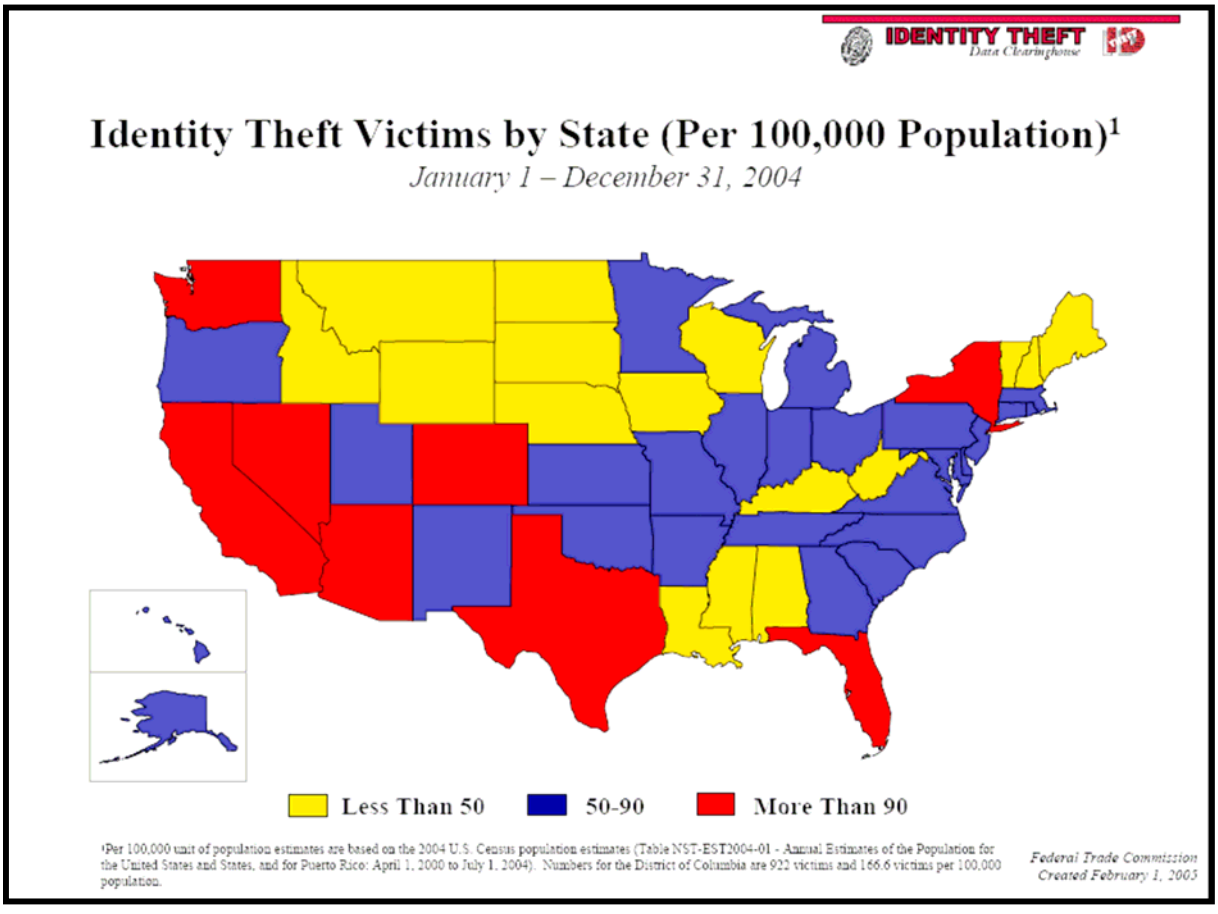
There also appears to be a strong association involving identity theft and methamphetamine abuse. Individuals addicted to methamphetamine engage in what is considered to be a 'low risk, high reward' crime in order to fund their addictions. Reports also indicate that very sophisticated identity theft rings have developed, driven by methamphetamine addiction. It has been reported that in Pierce County 80 to 90 percent of identity theft defendants have pending or prior charges involving methamphetamine. Several law enforcement agencies in Washington State have also reported that a significant majority of identity theft cases (80 to 100 percent) are methamphetamine related.

> Steven Massey was convicted for his role as ringleader of an ID theft gang in 2000 and used methamphetamine to manage his operation. Massey knew where to find meth addicts, and he made them a simple proposal: I'll take mail in trade for meth. Massey assembled and directed a 'small army' of methamphetamine addicts prowling neighborhoods, stealing mail out of hundreds of mailboxes, and raiding the local recycling center for pre-approved credit card applications. Others in the ring broke into cars to steal purses and wallets -- not for the money, but for the ID documents. By the time Massey was arrested, investigators say he had gained access to over 400 credit card accounts and netted close to $400,000. Massey eventually pleaded guilty to conspiracy to commit computer fraud and to mail theft. (Source: MSNBC – March 2004.)

The Federal Trade Commission reported that in 2004 Washington State ranked 8th in the nation (as ranked per 100,000 of the population) for identity theft victims. There were a total of 5,654 identity theft victims, equating to 91.1 victims per 100,000 population, reported in Washington State in 2004. The most impacted cities in terms of number of victims were Seattle (753), Vancouver (329), Tacoma (326), Spokane (240), and Bellevue (141) . The age groups more susceptible to victimization were between the ages of 18 to 29 (26%), followed closely by individuals aged 30 to 39 (25%), and those aged 40 to 49 (22%). The

remainder were between the ages of 50 to 59 (15%), 65 and over (6%), 60 to 64 (4%), and those under 18 (3%).

The ways in which a victim's information is used varies greatly. The most common uses reported in Washington State for 2004 include: credit card fraud (28%), bank fraud (24%), phone or utilities fraud (18%), employment-related fraud (7.7%), government documents or benefits fraud (7%), loan fraud (4%), and other (22%) – (to include: illegal/criminal, internet/email, medical, apartment/house related, insurance, property rental fraud, bankruptcy, child support, magazines, and securities/other investments). *(The percentages add up to more than 100 because approximately 19 percent of victims from Washington State reported experiencing more than one type of identity theft.)*



Automotive Theft

Automotive theft is another crime that has been shown to have an association with methamphetamine abuse. According to crime statistics reported by the FBI in the *Uniform Crime Report – Crime in the United States 2004*, Washington State ranked 4th in the nation for the number of auto thefts with 696.9 incidents reported per 100,000 residents. WSP reported 31,107 stolen vehicles from January to September 2005. Intelligence indicates that a significant number of auto thefts in which the vehicle is recovered can be attributed to methamphetamine. Cars are stolen in order to commit other crimes such as burglary or car prowling, and often the vehicle is dumped prior to being reported stolen. Addicts are generally looking for items that can be easily stolen and sold including materials that have identifying information that can be used for identity theft.

A Seattle man, who led police on an Eastside car chase, was ordered imprisoned by a Superior Court Judge for a maximum allowable seven years. The sentence was ordered following his guilty plea in January 2006 to charges of residential burglary, two counts of theft, attempting to elude a police vehicle, stealing a car and reckless endangerment. The 24-year-old man was accused of being behind the wheel of a stolen blue sedan as it weaved through traffic, veering into oncoming lanes, up on the sidewalk and through a golf course as he tried to evade police in Bellevue, Kirkland and Bothell in October 2005. He told police he had mental problems and had been using methamphetamine instead of taking his medication. King County prosecutors said he was convicted in a similar chase in 2004 in Shoreline. (Source: Seattle PI - 10/8/05 & Seattle Times – 3/4/06)

IV. Additional Social Impacts

Production Chemical Hazards

Substances used in methamphetamine production include various acids, sodium hydroxide, flammable solvents, anhydrous ammonia, lithium and sodium metals, red phosphorous, and propane cylinders and containers. Some of the more dangerous chemicals used in the production of methamphetamine include acetone, alcohol (gasoline additives or rubbing), brake cleaner (toluene), engine starter (ether), drain cleaner (sulfuric acid), iodine, anhydrous ammonia, lye (sodium hydroxide), and muriatic acid. Although many of these items are readily accessible at local retailers, they pose serious health hazards if ingested, can create dangerous gases, fire or, explosions if mixed improperly, and if handled or stored improperly can lead to serious health hazards.

Methamphetamine labs also commonly comprise a wide assortment of contaminated glass vials, hypodermic needles, and other hazardous debris. All of these materials must be properly disposed of to protect public health and the environment. The toxic waste generated by methamphetamine production poses an environmental risk in that an estimated six pounds of waste is produced for every pound of methamphetamine manufactured. Methamphetamine 'cooks' have been known to leave the waste at the lab site, dump it alongside roads, or leave it in garbage bags for the local trash collector. The potential for these chemicals to reach ground water and to affect the environment is great. In addition, innocent and unsuspecting citizens are often exposed and injured when they attempt to dispose of the waste.

The *Acute Public Health Consequences of Methamphetamine Laboratories* report for January 2000 to June 2004, which includes 16 states, describes examples of methamphetamine-associated events, and summarizes the events reported to the Agency for Toxic Substances and Disease Registry (ATSDR). ATSDR maintains the Hazardous Substances Emergency Events Surveillance (HSEES) system to collect and analyze data about the public health

consequences (e.g., morbidity, mortality, and evacuations) of acute hazardous substance-release events. Methamphetamine events were reported in 15 of the 16 HSEES states, with Washington State reporting the most with 399 events (22%). According to this report, methamphetamine events consistently had a higher percentage of persons with injuries (i.e., victims) than did non-meth events. Of the total 1,791 methamphetamine-related events reported from all participating states, 558 (31%) resulted in a total of 947 injured persons. Persons most frequently injured were police officers, 531 (56%), and members of the general public, 314 (33%).

Methamphetamine 'cooks' are not typically concerned with safety and many do not fully comprehend the chemical properties of the precursor chemicals they use. In the process of stealing ammonia, thieves have been known to employ any means necessary to penetrate pressurized storage containers and often transport liquid ammonia in unsafe vessels such as buckets or coolers.

The potential for fire in the manufacture of methamphetamine is extremely high. Both the inappropriate mixing of chemicals and the exposure of some of these substances to heat can result in explosions and fires. Another unexpected impact associated with methamphetamine production is the financial burden being put on burn units across the country. When methamphetamine production accidents such as fires or explosions occur, the facilities that treat the injured are left with a heavy financial burden since the vast majority of methamphetamine-related victims lack health insurance. The Vanderbilt University Burn Center in Nashville estimates that in 2005 a third of their burn cases were methamphetamine-related. The cost for uninsured patients is typically uncompensated, leaving the facilities to suffer financial losses due to the significant costs associated with methamphetamine-related injuries. The average cost for methamphetamine-related patients at the Vanderbilt University Burn Center is estimated at $10,000 per day.

Hazards of Methamphetamine Production								
Typical Chemicals Found in Lab Sites	**Common Legitimate Uses**	**Poison**	**Flammable**	**Toxic Vapors**	**Explosive**	**Corrosive**	**Skin Absorption**	**Common Health Hazards**
Acetone	Fingernail polish remover, solvents	X	X	X			X	Reproductive disorders
Methonol	Brake cleaner fluid, fuel	X	X	X			X	Blindness, eye damage
Ammonia	Disinfectants	X		X		X	X	Blistering, lung damage
Benzene	Dye, varnishes, lacquers	X	X		X	X	X	Carcinogen, Leukemia
Ether	Starters fluid, anesthetic	X	X		X			Respiratory failure
Freon	Refrigerant, propellants	X		X		X		Frostbite, lung damage
Hydriodic Acid	Driveway cleaner	X		X		X	X	Burns, thyroid damage
Hydrochloric Acid (HCl gas)	Iron ore processing, mining	X		X		X	X	Respiratory, liver damage
Iodine Crystals	Antiseptic, catalyst	X	X		X	X		Birth defects, kidney failure
Lithium Metal	Lithium batteries	X				X	X	Burns, Pulmonary edema
Muriatic Acid	Swimming pool cleaners	X		X		X		Burns, Toxic vapors
Phosophine Gas	Pesticides	X		X			X	Respiratory failure
Pseudophedrine	Cold medicines	X						Abuse: Health damage
Red Phosphorus	Matches, fireworks	X	X	X	X			Unstable, flammable
Sodium Hydroxide	Drain cleaners, lye	X		X		X	X	Burns, skin ulcers
Sulfuric Acid	Battery acid	X		X		X	X	Burns, thyroid damage
Toluene	Paint thinners, solvents	X	X	X	X		X	Fetal damage, pneumonia
Liquid Lab Waste	None	X	X	X	X	X	X	Unknown long term effects

Some officials report that increases in automobile fires likely stem from the accidental ignition of ether in mobile methamphetamine laboratories. The risk of fire and explosion also extends to laboratory clean-up. Law enforcement officials and unsuspecting citizens are at risk when they come upon an active or partially-disposed methamphetamine laboratory.

Not all methamphetamine ‘cooks’ manufacture in their own residences. Some have been known to cook in state and federal parks in order to reduce the risk of detection. Other cooks have been known to rent motel or hotel rooms to manufacture methamphetamine, typically overnight or over a weekend, exposing other guests and cleaning staff to toxic fumes and the risks of fire and explosion. Additionally, future residents of the room are at risk if the room is not properly decontaminated.

Clean-up Costs

In Washington State, after a methamphetamine laboratory has been discovered, investigated, and removed, the Washington State Department of Health and local Health Departments and Districts must then determine the level of contamination for the property. If the Health Department declares the property ‘unfit for use’ and the contamination is above five micrograms per square foot, a certified contractor must be used to decontaminate the property (certified contractors typically range from $1,500 to $5,000 and the typical time required for clean-up is 4 to 6 weeks). In 2003 DOE estimated that cleaning up methamphetamine laboratories costs Washington State two million dollars each year.

Through consolidation, DOE has significantly reduced the disposal cost of methamphetamine waste in the last few years from more than $11,000 per lab site to about $750. However, the total costs for clean-up, decontamination of an affected residence (to include re-furnishing costs, clean-up contractors, and testing), and the costs associated with loss of occupancy (either by the owners or potential tenants) during the lengthy process of clean-up are significant.

In one study, conducted by the Oregon-based economic research firm ECONorthwest located in Multnomah County, Oregon, total costs for clean-up per residential methamphetamine laboratory exceeded $20,000. Rental or hotel property owners are often burdened with clean-up cost and lost revenue. It is dependent on the homeowners' insurance policy whether or not costs associated with methamphetamine laboratories are covered. Furthermore, the potential liability is considerable if a landlord doesn't take proper steps to clean a residence before it is reoccupied. There is also potential reduction in the value of the property even when clean-up is complete. Based on one study there appears to be a 15 percent value loss due to the stigma of a home associated with a methamphetamine laboratory, remediated, and then offered for sale.

Methamphetamine Laboratory Cleanup Costs in Multnomah County, Oregon

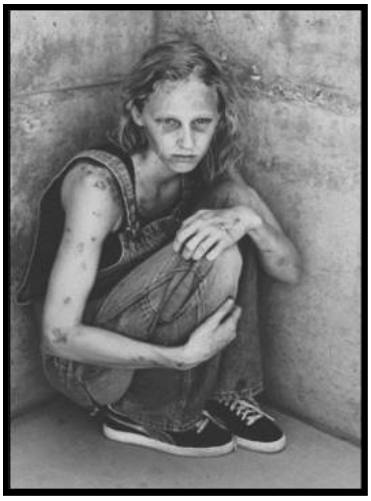
Measure	2004
Cleanup Cost per Home Meth Lab:	
State Fees	$1,400
Testing Costs	3,000
Decontamination	7,000
Cost of Furnishings	6,000
Lost Rent	3,120
Total Cost per Home Meth Lab	$20,520
Housing Units Cleaned and Certified Fit in 2004	56
Total Cost of Decontaminations	$1,149,120
Cost per household in the county	$4.08

Source: ECONorthwest analysis of DHS data.

Reduction in Volunteer Firefighters

One unexpected impact of methamphetamine production has affected Washington State Fire and Emergency Services. There are 387 fire districts in Washington State that are largely staffed by volunteers. Many fire departments throughout the state depend on these volunteers; however, many volunteers have decided that the HAZMAT risks from potential exposure to methamphetamine production are far too great. The Washington State Board of Volunteer Firefighters reports that the optimal staffing for volunteer positions is approximately 28,000. In 2002, there were 18,545 volunteer firefighters in the State. In 2004, the number of volunteer firefighters dropped to 17,389. Recruitment levels continue to be low, leaving communities vulnerable to longer response times for service. Another issue regarding methamphetamine-related responses is related to the fact that the time necessary to staff responses (8-10 hours) is overwhelming. In Cowlitz County, volunteers are putting in upwards of 750 hours a year, most of which can be directly attributed to the methamphetamine problem, and it is estimated that nearly 80 percent of all calls in the county are somehow drug-related.

The Impact of Methamphetamine on Children



One of the most disturbing consequences of methamphetamine is the damaging effect it has on children. Methamphetamine is a major cause of child abuse and neglect. In the May 2000 Governor's Council on Substance Abuse Report, *Methamphetamine Abuse in Washington*, it was reported that residential methamphetamine laboratory clean-up crews estimate they find evidence that children are or have been at the lab site in at least 35 percent of the labs they are called to investigate. According to EPIC, 36 children were found at methamphetamine laboratories in Washington State in 2005. Children found in

the homes of methamphetamine addicts often are neglected and are typically found living in hazardous, unsanitary conditions. Children of addicts also face the risk of injury and abuse, given the tendency of those using methamphetamine to be paranoid and violent. Because of the drug's sexually arousing effects, the incidence of sexual and physical abuse, as well as the presence of pornography (which is accessible to the children), is significantly higher in homes where methamphetamine is used. Used syringes are also frequently found and pose a significant health risk to children who may contract Hepatitis C or HIV. Children whose parents operate methamphetamine laboratories are subject to even greater risk due to residential contamination, potential for fire and explosion, accessible drugs, a constant flow of strangers, other criminal activities, and the presence of weapons. Unlabeled chemicals, heating elements, and incapacitated caregivers are also commonplace in 'meth houses.'

Methamphetamine hurts children and families over the long-term. As a part of the NACo survey, county officials nationwide were asked if the particular nature of the methamphetamine-using parent has increased the difficulty of family reunification; and 59 percent said yes. The exact number of children placed in foster care by the state because of neglect and abuse attributed to methamphetamine is not available, but anecdotal evidence suggests that the costs associated with methamphetamine-related placements are significant, and there are indications that in some areas the majority of placements are methamphetamine-related.

Officer and Community Safety Issues

Methamphetamine is a powerful stimulant that can induce anxiety, insomnia, paranoia, hallucinations, mood swings, delusions, and violent behavior, particularly during the 'tweaking' stage of abuse. Methamphetamine users in fact often reach a state of toxic psychosis with symptoms similar those associated with paranoid schizophrenia; in such cases, the user may become belligerent, delusional, and highly dangerous. Law enforcement officers can be further at risk if they are unfamiliar with the physical signs of someone under the influence of methamphetamine. Unlike someone who is intoxicated from alcohol with glassy eyes, slurred speech, and difficulty even standing up, the movements and actions of an individual using methamphetamine appear super-exaggerated. Their eyes are clear, speech is concise, and movements are hurried. However, under closer inspection, one will notice that their eye movement is much faster than normal and may include rolling. Those under the influence of methamphetamine usually speak in a quick but quivery voice, and their movements are typically quick and jerky. Movements are often exaggerated because of over-stimulation, and their thinking is scattered and subject to paranoid delusions.

Those under the influence of methamphetamine do not need provocation to react violently; and confrontation increases the chances of a violent reaction. Law enforcement officers should consider the potential for violence after determining that a suspect is 'tweaking.' For example, case histories indicate that 'tweakers' react negatively to the sight of a police uniform. Hallucinations experienced by those under the influence of methamphetamine can be so vivid that the line between hallucination and reality may be blurred. Confrontation between 'tweakers' and law enforcement often results in a verbal or physical assault on officers.

An additional threat may stem from the tendency of methamphetamine users to arm themselves for their personal safety. Interviews with methamphetamine

abusers have confirmed that these individuals often maintain weapons in their automobiles, as well as in their residences. The Oregon Narcotics Enforcement Association reports that approximately 20 percent of methamphetamine users admit to carrying a weapon. Analysis of highway interdictions where methamphetamine was found in the state of Washington in 2004 disclosed that weapons were found in 50 percent of seizures. Finally, there have also been reports of booby traps or attack dogs present at methamphetamine laboratories, increasing the potential threat to law enforcement officials and unsuspecting neighbors or children.

Methamphetamine and Impaired Driving

Many motor vehicle violations and accidents involve persons abusing methamphetamine. Paranoid and hallucinating, their delusional state makes moving shapes and shadows appear threatening, and they are very likely to increase their speed and exhibit erratic driving patterns as they attempt to evade the images. Another dangerous time for methamphetamine users to be behind the wheel is during the 'crash' phase where they become extremely tired, leading

In July 2003, the driver of a fuel tanker, suspected to have been using methamphetamine for an extended period before falling asleep at the wheel, crashed the tanker into an overpass on Interstate 5 in Lynnwood. The tanker, which carried 11,000 gallons of gasoline, caught fire and exploded following the impact, causing the freeway to be closed in both directions for 18 hours. The driver escaped serious injury and no others were hurt. However, the cost of road repairs was estimated at more than $1 million. The driver was cited with reckless driving for this incident. In an unrelated incident in December 2003, the same driver was charged with unlawful possession and unlawful manufacturing of a controlled substance after law enforcement investigators discovered a methamphetamine laboratory in his garage.

(Source: KOMO News, 12/2003)

to accidents caused by falling asleep while driving. Data from the WSP Toxicology Lab indicates that 18 percent of drivers arrested for impaired driving in Washington State in 2003 tested positive for methamphetamine and that the number of impaired drivers testing positive for methamphetamine has continued to increase. Cocaine, methamphetamine, and other amphetamines collectively comprise the drug class of "stimulants," which follow marijuana as the second most frequently observed illicit drug type used by impaired Washington drivers. According to the Fatal Accident Reporting System (FARS) data, between 1993 and 2002 stimulants accounted for 41.6 percent of all drugs found in drivers involved in fatal crashes in Washington State.

Law Enforcement, Adjudication and Incarceration

Responses to the NACo survey disclosed that the law enforcement workload has increased in 82 percent of the Nation's counties due to the increase in the presence of methamphetamine. The increases in law enforcement activities that have been attributed to the use of and addiction to methamphetamine are consequently putting a heavy financial burden on local law enforcement agencies. All agencies surveyed in Washington State indicated that the use of methamphetamine in their counties has led to increased workloads for public safety staff. With the increase in workloads, respondents indicated it has been necessary to change work assignments, work longer shifts, and pay more overtime.

All of the 11 respondents to the NACo survey from Washington State reported that arrests in which there was a link to methamphetamine have increased in the recent five-year and three-year periods. Seven (64%) reported that arrests have continued to increase in the last year. When asked to estimate the percentage of total arrests made in their respective counties in the last five years that could be attributed to methamphetamine, three responded 10 to 20 percent, three responded 30 to 40 percent, and two responded 50 to 75 percent. One each responded 0 to 10 percent, 20 to 30 percent, and 75 to 100 percent.

States are required to provide legal counsel to indigent offenders charged with a felony. Many defendants charged with methamphetamine offenses do not have adequate financial resources to hire a private attorney. As a result, thousands of methamphetamine-related defendants utilize the services of a public defender or a court-appointed attorney.

The costs incurred by taxpayers increases with imprisonment. According to the Washington State Department of Corrections, the average yearly cost per incarcerated offender (for fiscal year 2005) was $27,170. Based on June 2005 data, drug crimes that involve methamphetamine make up approximately 36 percent of all drug convictions (6.4% of all convictions). As of September 30, 2005, the total confinement population for the Washington State Department of Corrections was 17,788 and rough estimates of incarceration costs for methamphetamine-related drug crimes total nearly $31 million per year. Jail-associated confinement costs across Washington State for methamphetamine-related crimes are high as well. For example, Jefferson County Jail costs over the past two years have reportedly risen from $30,000 to more than $210,000 a year; and most of the additional costs can be directly attributed to methamphetamine. Also, those individuals suspected of methamphetamine-related crimes account for approximately 60 percent of the inmates, and most are repeat offenders.

When respondents to the NACo survey from Washington State were asked to estimate the current percentage of jail inmates incarcerated because of methamphetamine-related crimes, three responded 20 to 30 percent; two responded 10 to 20 percent; two responded 50 to 75 percent; one each responded 0 to 10 percent, 40 to 50 percent, 75 to 100 percent; and one either did not know or did not respond.

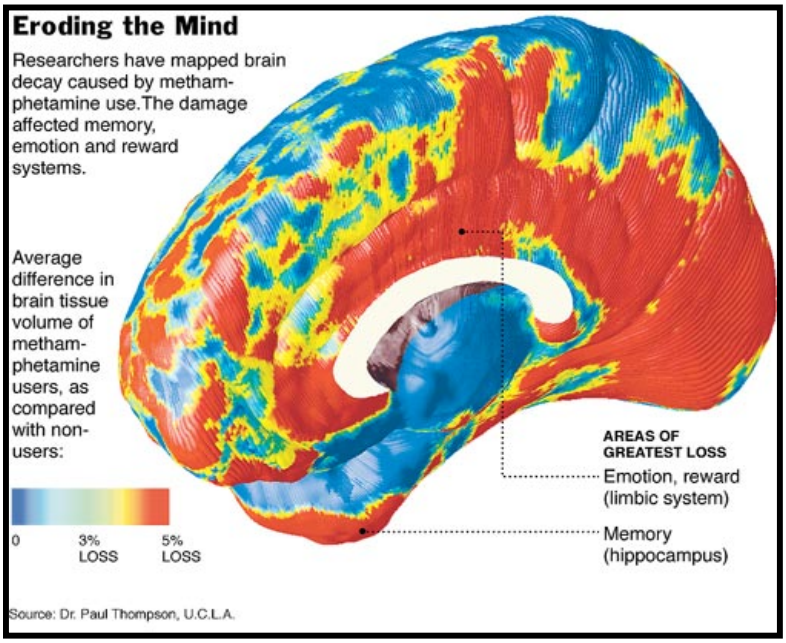
Health Consequences

Several health risks (both direct and indirect) are associated with methamphetamine use. The most visible health affects involve the adverse consequences that result from chronic and continued use of the drug. Methamphetamine increases metabolism and suppresses appetite, which attracts some users; however, this can result in uncontrolled weight loss. This weight loss is often severe, leaving the user gaunt, weak, and vulnerable to other illnesses. Methamphetamine's potential for energy enhancement is related to its ability to increase heart rate and respiration and change body temperature. While the user benefits from this surplus of energy, he or she may suffer heart spasms, chest pain, hypothermia, hypertension, and convulsions. Because methamphetamine is a stimulant, it strongly affects the central nervous system and motor skills, leading to judgment errors and an increased risk of being involved in accidents. Other negative impacts include memory loss, sleep loss, paranoia, depression, and irritability. Methamphetamine can also produce an assortment of abnormal physical sensations. One of the most common is called *formication*—the delusion of insects crawling under the skin. The phenomenon is referred to as "crank bugs" or "meth mites." While the exact cause is not well understood, some researchers have suggested that the toxic components in methamphetamine accumulate in the skin cells. Methamphetamine users typically pick or scratch in response to the sensation, ultimately leading to open sores and abscesses.

Other significant health risks include overdose (toxic psychosis) and rapid addiction. All people differ in their tolerances for foreign substances; some individuals can overdose on a small amount of the drug while others experience a greater high. The risk of overdose is significant due also to variations in potency and purity of the methamphetamine available. Methamphetamine is known to be highly addictive. Similar to the variance found with overdose levels, the addiction curve will depend on the individual; however, consistent and prolonged use is extremely likely to result in addiction.

Chronic use of methamphetamine can result in serious health risks. Long-term users have a higher incidence of kidney failure, strokes, liver damage, and heart problems. Long periods of elevated metabolic activity as well as the toxic ingredients of methamphetamine take a significant toll on the human body. Dental problems are very common for methamphetamine users, as methamphetamine use has been associated with severe oral health effects. The American Dental Association reports that rampant tooth decay associated with methamphetamine use is attributed to: the acidic nature of the drug, the drug's xerostomic (dry mouth) effect, its propensity to cause cravings for high calorie carbonated beverages, tooth grinding and clenching, and its long duration of action, leading to extended periods of poor oral hygiene. Lastly, organs are poisoned and damaged from heavy methamphetamine use and many users die prematurely.

The brain is not spared from the damaging effects of methamphetamine. A University of California Los Angeles School of Medicine imaging study illustrated and mapped the extent of brain damage caused by methamphetamine use. This study revealed severe brain-tissue deficits in both the limbic region—responsible for mood, motivation, behavior, and emotion—with an average loss of 11.3 percent, and the hippocampus—responsible for memory formation—with an average loss of 7.8 percent.



The route of administration chosen by the user may have specific health consequences as well. Intravenous drug users have an increased risk of transmitting HIV and Hepatitis B and C. Chronic intravenous users may also suffer from collapsed veins.

Ethnographic research with gay and bisexual methamphetamine users indicates that methamphetamine use may escalate sexual risk-taking behaviors and lead to an increase in transmission of infections and sexually transmitted diseases including HIV, Hepatitis C, and syphilis.

Some of the indirect health risks associated with methamphetamine may negatively affect innocent individuals. Research indicates that women who continue to use methamphetamine during pregnancy have a higher frequency of premature birth, low birth weight, cerebral infarctions, and congenital anomalies.

The use of methamphetamine during pregnancy impacts the fetus by reducing blood flow and/or by a direct toxic effect on the developing fetus.

Another indirect impact relevant to children involves direct exposure and ingestion of methamphetamine. Manufacturing or consuming methamphetamine via smoking in the presence of children puts them at risk, and detectable levels of methamphetamine can often be found in the urine of children from homes where methamphetamine is used and/or produced. Accidental consumption is another risk. Children exposed to methamphetamine typically display symptoms of tachycardia, agitation, inconsolable crying, irritability, and vomiting.

According to the Washington State Department of Social and Health Services, the monthly costs for providing chemical dependency treatment are $167 per client for stimulant abusers. In SFY 2004 there were 6,512 adults and 1,540 youth admitted to DASA-funded treatment for methamphetamine; the costs for methamphetamine-related treatment are thus estimated at $1.3 million per month.

Economic Impacts

The impacts of methamphetamine are far reaching, ranging from drug-induced mental illnesses to violent criminal behavior, the release of toxins into the environment, and the destruction of the social fabric of families. The economic impacts are also immense. It is nearly impossible to accurately calculate the true economic impact that methamphetamine inflicts. In one study by the Oregon-based economic research firm ECONorthwest, the direct costs of methamphetamine abuse in Multnomah County, Oregon were estimated at over $102.3 million in 2004 (including the costs of property crimes, fires, incremental foster care, methamphetamine laboratory, and certain healthcare costs). This total actually exceeds all the individual income taxes paid by County residents. These costs are largely shouldered, not by the methamphetamine abuser, but by the community through direct economic losses, higher insurance premiums,

reduced law enforcement resources, and other substantial impacts. This study also reported that the Multnomah County “meth tax,” an estimated $363 per household, was more than the average 2004 Multnomah County individual state income tax. However, this estimate does not take into account the costs associated with treatment, education, law enforcement, adjudication, and incarceration in response to methamphetamine abuse.

Effects in the Workplace

A report by researchers at the University of Arkansas identified five categories in which methamphetamine use most significantly affects the workplace. The greatest impact was found to be in employee absenteeism, and it was reported that employees using methamphetamine are five times more likely to be absent than non-using employees. The second most substantial impact relates to lost productivity; the report indicates that it takes four methamphetamine users to do the same amount of work as three non-using employees. Employee theft entails the third impact, with methamphetamine users significantly more likely to steal from their employers. Fourth, insurance premiums that employers must pay are higher if there are employees who use methamphetamine. The fifth reported impact involved an increase in workers' compensation costs, because methamphetamine users are more likely to file claims and those claims are oftentimes more expensive.

V. Combating Methamphetamine

Legislative Efforts

Legislative efforts have been successful in reducing the availability of precursor chemicals, increasing penalties for production, and helping to protect endangered youth. A series of laws have been passed in Washington State since 1997 that have addressed methamphetamine-related issues:

Senate Bill 5191, effective July 27, 1997, increased penalties for methamphetamine crimes. This bill also stipulated that three thousand dollars of the imposed fine may not be suspended, and the first three thousand dollars must be deposited with the law enforcement agency responsible for the laboratory cleanup.

House Bill 2628, effective June 11, 1998, increased sentences for manufacturing methamphetamine from a range of 21-27 months to 51-68 months for a first offense.

Senate Bill 6260, effective June 8, 2000, increased penalties by adding a 24-month sentence enhancement for manufacturing a controlled substance when children are present.

Senate Bill 5017, effective July 22, 2001, regulated the sale of products that contain ephedrine, pseudoephedrine, or phenylpropanolamine to no more than three packages or a single package that contains more than three grams in any 24-hour period. This bill also included legislation that states that any person who possesses more than fifteen grams (of those listed above) is guilty of a gross misdemeanor.

House Bill 1370, effective July 22, 2001, provided reporting and record keeping requirements for the sale of precursor drugs and made selling or possessing certain amounts of ephedrine, pseudoephedrine, or

phenylpropanolamine a gross misdemeanor. The effect of this law has been to curb the sale of the precursors from retail establishments in wholesale amounts to individuals who use the precursors to manufacture methamphetamine and to provide record keeping for regulators and law enforcement agencies that can be used for enforcement purposes.

Senate Bill 6232, effective March 26, 2002, revised crimes relating to the possession of ammonia and established that the unlawful storage of pressurized ammonia gas solution is a class C felony.

Senate Bill 6233, effective March 26, 2002, made the possession of ephedrine, pseudoephedrine, pressurized ammonia gas, or gas solution with the intent to manufacture methamphetamine illegal.

House Bill 2610, effective March 28, 2002, provided criminal penalties for the endangerment of children and dependent persons with a controlled substance to also include ephedrine, pseudoephedrine, or anhydrous ammonia that is being used in the manufacture of methamphetamine (class B felony).

House Bill 2338, effective June 13, 2002, reduced prison sentences for non-violent drug offenders and offered treatment programs as an alternative.

Senate Bill 6478, is follow-on legislation that became effective July 1, 2004, further increasing record keeping responsibilities, putting stricter limits on retailers who sell medications without registering with the state, and limiting the sales of such ingredients to 10 percent of the retailer's total sales. This legislation was developed as a result of suspicious transaction reports disclosing that the sales of precursors by 380 convenience stores in the state appeared to be greatly exceeding the demand for cold remedies.

House Bill 2266, which became fully effective January 1, 2006, further restricts access to certain precursor drugs used to manufacture methamphetamine to ensure that they are only sold at retail to individuals

who will use them for legitimate purposes upon production of proper identification. Part of this legislation became effective October 1, 2005, and mandated that any product containing any detectable quantity of ephedrine, pseudoephedrine, or phenylpropanolamine, or their salts, isomers, or salts of isomers, be kept in a location not directly accessible by customers.

Senate Bill 6239, which was passed by the legislature in March 2006, and when signed by the Governor will assist local communities in combating the methamphetamine problem and facilitate the clean-up of contaminated meth-sites. It also enhances criminal penalties for meth-related crimes, and provides improved drug treatment for addicts committed to rehabilitation.

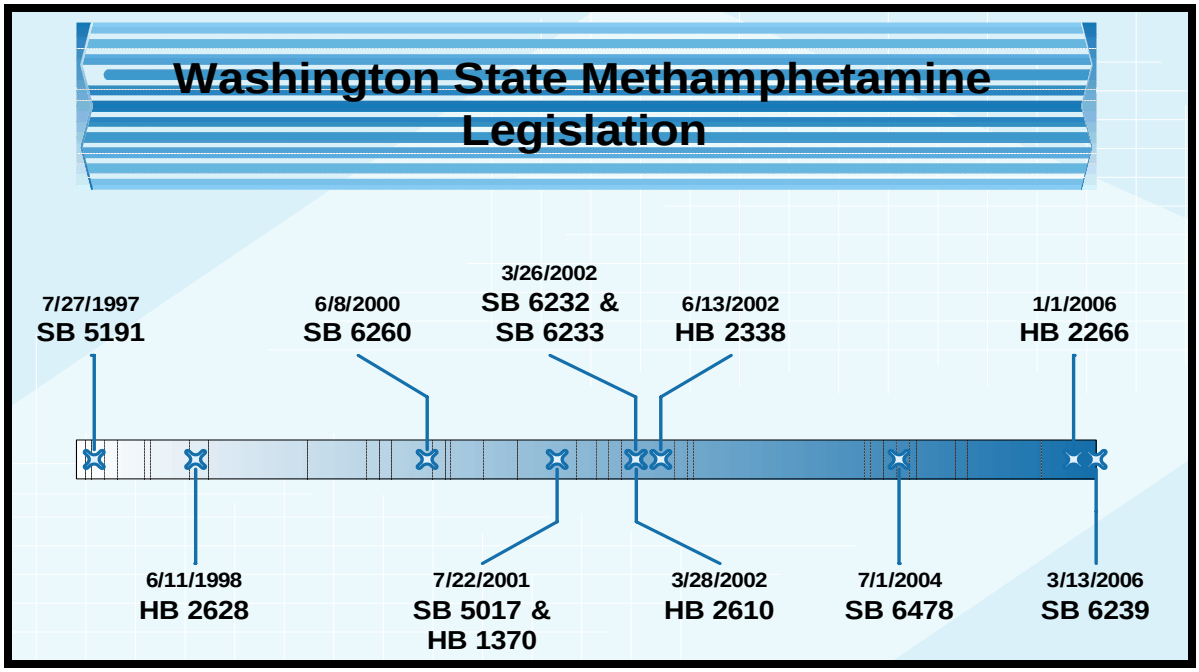
Since many of these laws and their vigorous enforcement had the effect of causing methamphetamine manufacturers to seek other sources for precursors, the laws in place in surrounding states and Canada have had a direct impact on the availability of precursors in the State of Washington. As the state laws tightened, more precursors began to flow in from Canada and outlying states. In 2002, the Canadian government created the Precursor Control Regulation under the Controlled Drugs and Substances Act to establish a regulatory framework for Canada to address domestic and international concerns in controlling precursors. The intent of the phased-in regulation is to reduce diversion, deny criminal organizations the ability to legally purchase these chemicals, increase public safety, and reduce risks and harm to the environment.

The State of Oregon's precursor substance law (effective January 1, 2002) established restrictions on the most commonly used precursors/chemicals for methamphetamine production including iodine and MSM (not currently identified in State of Washington legislation). The effect of this legislation has resulted in a dramatic increase of customers from Oregon purchasing tincture of iodine and methlsulfonylmenthame (MSM) at feed and tack stores in southwest Washington.

DEA and other federal, state, and local law enforcement agencies have targeted wholesalers who distribute large quantities of precursors (the mark-up price per case being particularly lucrative). In this state, some of the larger wholesalers have either been prosecuted or have stopped their egregious sales to avoid possible prosecution. Some of the better known national initiatives have been "Operation Mountain Express" and "Operation Northern Star," each of which have had an effect on the controls of the sale of precursors.

Federal Legislation

Methamphetamine is a Schedule II drug under the Controlled Substance Act of 1970. A Schedule II Controlled Substance has high potential for abuse, is currently accepted for medical use in treatment in the United States, and may lead to severe psychological or physical dependence. The chemicals that are used to produce methamphetamine also are controlled under the Comprehensive Methamphetamine Control Act of 1996 (MCA). This legislation broadened the restrictions on listed chemicals used in the production of methamphetamine, increased penalties for the trafficking and manufacturing of methamphetamine and listed chemicals, and expanded the controls of products containing the licit chemicals ephedrine, pseudoephedrine, and phenylpropanolamine (PPA). The Methamphetamine Anti-Proliferation Act was then passed in July 2000. The act strengthens sentencing guidelines and provides training for Federal and State law enforcement officers involved in methamphetamine investigations and the handling of the chemicals used in clandestine methamphetamine laboratories. It also puts in place controls on the distribution of the chemical ingredients used in methamphetamine production and expands substance abuse prevention efforts. House Bill 798, entitled the Methamphetamine Remediation Research Act of 2005, has been passed by the House and is awaiting a vote from the Senate. This bill authorizes research by the Environmental Protection Agency and the National Institute of Standards and Technology on how best to clean former methamphetamine laboratories and to set guidelines on who should be responsible for the clean up. Finally, the Talent-Feinstein Bill (S. 103), which is included in the Patriot Act, limits access to the key ingredients used to make methamphetamine and was signed into law on March 13, 2006. This restricts the sale of medicines containing pseudoephedrine, ephedrine, and PPA by placing them behind the counter, requiring purchasers to show identification, and limiting how much one person can buy to 9 grams a month and 3.6 grams in a single day. This Bill also includes additional resources for law enforcement and local and state governments, provides services for children affected by methamphetamine, and enhances environmental regulations and international enforcement. (Source: ONDCP & GovTrack)



Senate Bill 5191 – *increased penalties for methamphetamine crimes. (Three thousand dollars of the imposed fine may not be suspended, and the first three thousand dollars must be deposited with the law enforcement agency responsible for the laboratory cleanup.)*

House Bill 2628 – *increased penalties for manufacture of methamphetamine (from a range of 21-27 to 51-68 months for a first offense).*

Senate Bill 6260 *– increased penalties (24-month sentence enhancement) for manufacturing a controlled substance when children are present.*

Senate Bill 5017 – *regulated the sale of products that contain ephedrine, pseudoephedrine, or phenylpropanolamine to no more than three packages or a single package that contains more than three grams in any 24-hour period. Also includes that any person who possesses more than fifteen grams (of those listed above) is guilty of a gross misdemeanor.*

House Bill 1370 – *provided reporting and record keeping requirements for the sale of precursor drugs and made selling or possessing certain amounts of ephedrine, pseudoephedrine, or phenylpropanolamine a gross misdemeanor.*

Senate Bill 6232 – *revised crimes relating to the possession of ammonia and established that the unlawful storage of pressurized ammonia gas solution is a class C felony.*

Senate Bill 6233 – *made the possession of ephedrine, pseudoephedrine, pressurized ammonia gas, or gas solution with the intent to manufacture methamphetamine illegal.*

House Bill 2610 – *provided criminal penalties for the endangerment of children and dependent persons with a controlled substance to also include ephedrine, pseudoephedrine, or anhydrous ammonia that is being used in the manufacture of methamphetamine (class B felony).*

House Bill 2338 – *reduced the prison sentences for non-violent drug offenders and offered treatment programs as an alternative.*

Senate Bill 6478 – *further increased record keeping responsibilities and put stricter limits on retailers who sell medications without registering with the state and limited the selling of such ingredients to 10 percent of the retailer's total sales.*

House Bill 2266 – *further restricts access to certain precursor drugs used to manufacture methamphetamine to ensure that they are only sold at retail to individuals who will use them for legitimate purposes upon production of proper identification.*

Senate Bill 6239 - *assists local communities to fight meth and facilitate the clean-up of contaminated meth sites. It also enhances criminal penalties for meth-related crimes, and provides improved drug treatment for addicts committed to rehabilitation.*

‘Operation: Allied Against Meth’

The Washington State Attorney General initiated *Operation: Allied Against Meth* as a statewide anti-methamphetamine strategy intended to assist local communities in the fight against the production and sale of methamphetamine, which includes:

- The hiring of two additional Assistant Attorneys General assigned to the enforcement and prosecution of methamphetamine and methamphetamine-related crimes.
- A new education program that will partner with community-based organizations and industry associations to increase awareness and prevent the use of methamphetamine. This program will coordinate with existing community Methamphetamine Action Teams to help them in their efforts to educate citizens and mobilize their local communities, and will partner with organizations that represent realtors, builders, farmers, labor, tribes, and others to educate their members through materials and presentations about what they can do to prevent methamphetamine crimes.
- Creation of a team of local and state law enforcement officials which have evaluated and recommended meth-prevention tools, including drafting legislation for the 2006 legislative session. Topics addressed included: tools to enable local law enforcement to foreclose and seize properties that have been identified as lab sites, clean them up, and then re-sell properties to fund anti-methamphetamine programs; improve community notification and make it easier for local communities to foreclose or seize properties and assets of convicted drug traffickers; and work with local law enforcement, prosecutors, and court officers to draft Drug Endangered Children protocols that are appropriate for each county, given resource constraints. The findings of the *“Operation: Allied Against Meth”* Task Force were presented in a detailed report and are available on-line on the Attorney General’s website: http://www.atg.wa.gov/oaam/FinalReport.pdf.

Northwest HIDTA Initiatives / Programs

The Northwest HIDTA Border Initiative has impacted the route of entry for methamphetamine precursors entering the state from Canada. Precursors from Canada are increasingly being seized on maritime routes, in eastern portions of Washington, and also in other states. One major pseudoephedrine seizure resulted in the indictment of eight individuals in March 2004 for 'Conspiracy to Import' 540 pounds of pseudoephedrine into the United States from Canada in July 2003. The pseudoephedrine was destined for a super-lab in the Yakima, Washington area. The investigation identified smuggling methods and routes utilized to transport pseudoephedrine, methamphetamine, and currency across the U.S.-Canada border.

All Northwest HIDTA initiatives have a methamphetamine component and one, the WSP Pro-Active Meth Team Initiative, which provides crucial clandestine laboratory and investigative support to Washington State law enforcement agencies in HIDTA counties that are unable to afford personnel and specialized training to respond to methamphetamine laboratories, is solely dedicated to methamphetamine.

As the methamphetamine threat from clandestine laboratories has declined, the transportation of methamphetamine from other states has increased. The Northwest HIDTA has quickly established a new initiative to interdict drug traffic on the roadways with supplemental funding. The Pacific Northwest Highway Interdiction Program has been an effective tool aimed toward the disruption of drug transportation and the distribution elements of drug trafficking organizations. The Washington State Patrol is also the lead agency for this initiative. This initiative covers a vast operational area, which encompasses the major highway corridors used for the transportation of drugs not only in Washington State but also in the Pacific Northwest region of the United States including Idaho, Montana, and Oregon.

As an example of the importance of interdiction operations, on February 13, 2005, twenty-four suspects were arrested for conspiracy and possession with intent to distribute methamphetamine and cocaine within the United States. This was the result of two and a half years of multi-agency cooperation to investigate a significant drug trafficking organization involved in bringing large quantities of methamphetamine and cocaine from Mexico through the Tri-Cities to the greater Spokane area, and then distributing these drugs to customers throughout the Northwest United States. Agents and officers obtained ten federal search warrants for residences in Spokane and Franklin Counties, as well as Washington County and Kootenai County, Idaho. During the investigation, execution of search warrants and other enforcement operations, agents and officers seized ten pounds of methamphetamine, eight pounds of cocaine, one semi-automatic handgun, ten vehicles, and approximately $60,000 in U.S. currency. Also, agents and officers were able to establish a direct link between this criminal organization and drug traffickers operating from Mexico.

Other Northwest HIDTA activities include funding and managing the Meth Hotline for the State of Washington, which has allowed citizens to assist law enforcement efforts regarding methamphetamine investigations. In 2005, there were a total of 254 calls to the Meth Hotline, 61 percent of which were referred to local, state or federal law enforcement agencies for investigative action.

Another crucial element in combating the methamphetamine threat is the control of methamphetamine precursors and chemicals. The Northwest HIDTA participates in the National Methamphetamine Chemicals Initiative and has also been a key participant in the Clandestine Lab Working Group since 1998. The Clandestine Lab Working Group is a coalition of law enforcement, the Washington State Department of Ecology, the Washington State Department of Health, prosecutors, and licensed contractors for methamphetamine lab and dumpsite cleanup that have come together to identify strategies to combat the

methamphetamine problem in Washington State. The Clandestine Lab Working Group, the Washington State Methamphetamine Initiative, Meth Action Teams, State Drug Task Forces, and other allied community groups have been an effective force in establishing state legislation to increase sentencing for meth cooks, protect drug endangered children, and establish regulations to limit over-the-counter purchases of pseudoephedrine. The Northwest HIDTA is one of several sponsors of the annual State Meth Summit and is represented on the Governor's Meth Coordinating Committee.

Additionally, the Northwest HIDTA partners with task forces and community-based 'Meth Action Teams' that have established alliances with businesses that sell products containing the ingredients used in the illicit production of methamphetamine in order to identify pseudoephedrine 'smurfing' efforts. All 39 Washington State counties have implemented citizen-based, interdisciplinary Meth Action Teams and 26 counties have implemented the Washington Meth Watch Retailers' Program. The Washington Meth Watch Retailers' program—a companion element to the Washington Meth Watch Public Education program—for instance generated nearly 75 percent of the investigative tips received that led to over 50 percent of the methamphetamine laboratories search warrants executed by the Spokane County Meth Lab Team in 2003 and 2004.

VI. Outlook

The impacts of methamphetamine adversely affect all citizens of Washington State in one way or another. Everyone suffers from higher insurance rates, higher retail prices, and higher health care costs. Furthermore, government resources must shift from other public needs such as education, parks, and public safety to combat methamphetamine. The human tragedy that has resulted from this dangerous drug is staggering. Countless lives and families have been destroyed because of methamphetamine and the resultant societal impacts continue to escalate. Continued support of enforcement, legislative, prevention, education, and treatment efforts must be a priority, not only in Washington State, but also on a national level. The Washington State Attorney General's '*Operation: Allied Against Meth*' is another important mechanism for the cooperative effort in combating methamphetamine. It is imperative that partnerships are fostered and supported in a combined strategy to address this threat. Additionally as a part of the National Methamphetamine Chemicals Initiative, the formation of the Northwest Precursor Committee has been proposed, which would provide a forum for the exchange of law enforcement-sensitive intelligence regarding the trafficking of precursor chemicals used in the manufacturing of methamphetamine and will also include topics such as lab remediation and public health standards, drug endangered children, and the trafficking of methamphetamine. A coordinated regional approach is necessary to successfully combat the methamphetamine threat and the Northwest Precursor Committee, which would include Washington, Oregon and Idaho, would also serve as a forum for the coordination of law enforcement strategies and assist in continuing to foster partnerships. Although reported methamphetamine laboratories have decreased in Washington State, the level of availability remains high. Law enforcement and public education efforts must continue to thwart methamphetamine production operations and increased resources must be devoted to those areas (especially rural) that have seen local increases in methamphetamine laboratories. Increased interdiction efforts must be considered

a priority to reduce the availability of methamphetamine and methamphetamine precursors in the state. Additionally, interdiction efforts must be coupled with investigative resources to detect and dismantle the drug trafficking organizations that transport and distribute methamphetamine. Additional emphasis must be aimed to enhance and support prevention and education efforts. Demand reduction prevents and lessens the impacts caused by methamphetamine abuse and addiction. As methamphetamine takes foot in other areas in the United States, Canada, and Mexico, it is likely that the local threat will increase as well due to increased availability. Trend analysis to identify the current threat and create comprehensive and adaptive strategies should continue and be used in updated assessments. It is imperative for a proactive and aggressive multi-disciplinary campaign to be adopted across North America and that agencies work together in a cooperative effort in the fight against methamphetamine.