



California

Drug Threat Assessment

UPDATE

May 2002

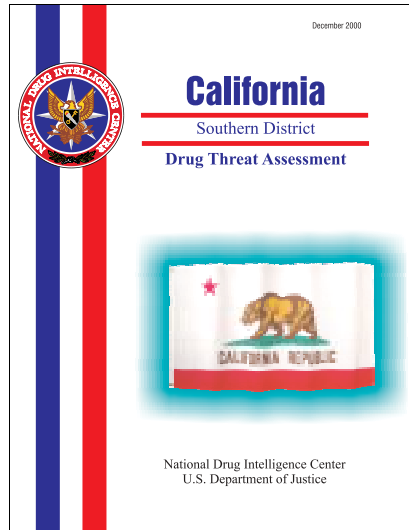
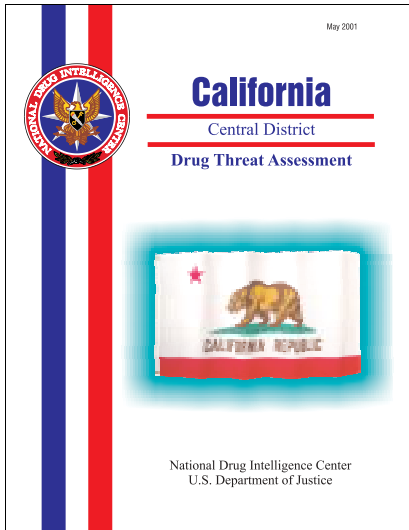
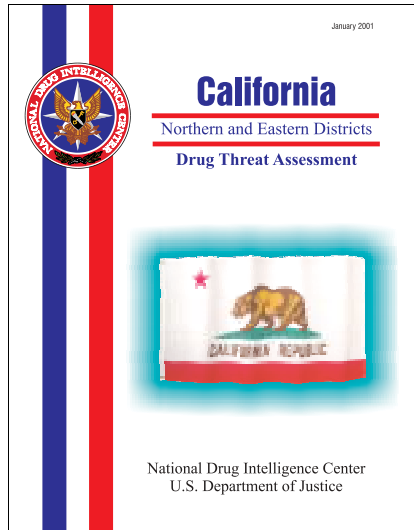


National Drug Intelligence Center
U.S. Department of Justice

Preface

This report is a brief update to the three California drug threat assessments, which are strategic assessments of the status and outlook of the drug threat to California. Analytical judgment determined the threat posed by each drug type or category, taking into account the most current quantitative and qualitative information on availability, demand, production or cultivation, transportation, and distribution, as well as the effects of a particular drug on abusers and society as a whole. While NDIC sought to incorporate the latest available information, a time lag often exists between collection and publication of data. NDIC anticipates that this update will be useful to policymakers, law enforcement personnel, and treatment providers at the federal, state, and local levels.

The *California Northern and Eastern Districts Drug Threat Assessment* was produced in January 2001, the *California Central District Drug Threat Assessment* in May 2001, and the *California Southern District Drug Threat Assessment* in December 2000. They are available on NDIC's web site www.usdoj.gov/ndic or by contacting the NDIC dissemination line at 814-532-4541.





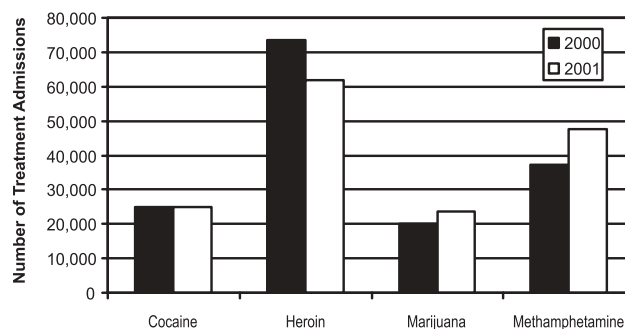
California Drug Threat Assessment Update

Overview

California is one of the most active drug smuggling and production areas in the United States. The state's vast transportation infrastructure and its proximity to both Mexico and the Pacific Ocean are conducive to drug trafficking, particularly the movement of large quantities of methamphetamine, cocaine, heroin, marijuana, and other dangerous drugs to drug markets within and outside California. Southern California, primarily Los Angeles, is a national level transportation hub and distribution center for illicit drugs. As a result, all drugs of abuse are readily available in the state.

Methamphetamine poses the most significant drug threat to California. Cocaine and heroin are prevalent throughout the state, and prices and purity levels for each are relatively stable. Marijuana is the most readily available and widely abused drug. Other dangerous drugs such as MDMA and GHB are emerging threats throughout the state.

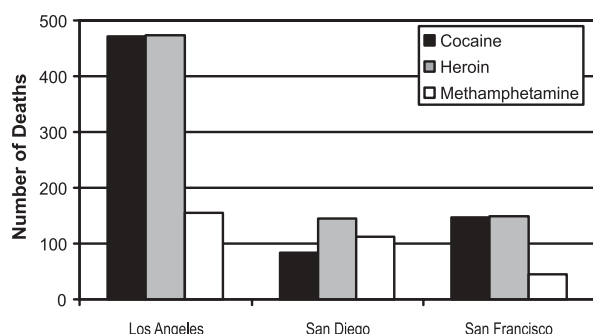
**Chart 1. Drug-Related Treatment Admissions
California, 2000–2001**



Source: California Alcohol and Drug Data System.

Methamphetamine

Methamphetamine is the most significant drug threat to California. The rise in the number of methamphetamine super laboratories has increased significantly in the past 2 years, straining the capacity of law enforcement agencies to adequately conduct investigations and clean up the hazardous chemicals

**Chart 2. Drug-Related Deaths
Selected California Cities, 2000**

Source: Drug Abuse Warning Network.

associated with methamphetamine production. The level of methamphetamine abuse in the state is high, and treatment admissions for methamphetamine abuse continue to increase. According to the California Alcohol and Drug Data System, in 2001 there were 47,703 methamphetamine treatment admissions compared with 37,292 admissions in 2000. The number of methamphetamine-related deaths is also high. According to the U.S. Department of Health and Human Services Drug Abuse Warning Network (DAWN) mortality data, during 2000 there were 155 methamphetamine-related deaths in Los Angeles, 112 in San Diego, and 45 in San Francisco.

Methamphetamine produced in Mexico and California is readily available in urban, suburban, and rural areas of the state. Purity levels of low-grade methamphetamine range between 18 percent and 40 percent, while purity levels of high-grade methamphetamine (crystal methamphetamine) range between 93 percent and 98 percent. Crystal methamphetamine (powdered methamphetamine that has been washed with acetone), also known as ice or glass, is available throughout the state. According to the Drug Enforcement Administration (DEA), in the first quarter of fiscal year (FY) 2002, high-grade methamphetamine sold for \$13,500 to \$18,000 per pound. Low-grade methamphetamine sold for \$3,000 to \$7,000 per pound. Southeast Asian methamphetamine tablets (Ya Ba) have been seized in cities throughout California—most notably San Diego and San Francisco.

Methamphetamine production is a significant problem throughout California. In 2001 an estimated 1,290 methamphetamine laboratories were seized in the state, according to reporting received by the Los Angeles County Regional Criminal Information Clearinghouse through April 5, 2002. Of these, 202 were superlabs—laboratories capable of producing more than 10 pounds of methamphetamine in 24 hours. Riverside and San Bernardino Counties and the California Central Valley are at the center of large-scale methamphetamine production in California and are commonly referred to as the “methamphetamine capital of the United States.”

**Table 1. Methamphetamine Laboratory
Seizures, California, 1999–2001**

	1999	2000	2001*
Superlabs	183	158	202
Laboratories	2,075	1,674	1,290
Superlabs Percent of Total	8.82	9.44	15.66

Source: Los Angeles County Regional Criminal Information.

*2001 laboratory seizure figures reported through April 5, 2002.

Note: Superlabs account for 80 percent of in-state production.

Methamphetamine production has a profound environmental impact on the state. Chemicals from large-scale laboratory dump sites have killed livestock, contaminated streams, and destroyed large trees and vegetation. In 2001 the California Department of Toxic Substances Control conducted over 2,000 methamphetamine laboratory and dump site cleanups, costing California taxpayers nearly \$5.5 million (\$2,450 per laboratory on average). This does not include the remediation of buildings, surroundings, and environment, which is typically more expensive and time-consuming.

Mexican drug trafficking organizations (DTOs) and criminal groups dominate methamphetamine production and distribution in the state. These organizations and groups use established smuggling and distribution networks to supply

methamphetamine to markets throughout California. Local independent dealers, street gangs, and outlaw motorcycle gangs also distribute the drug.

Cocaine

The trafficking and abuse of powdered and crack cocaine also pose a significant problem in the state, particularly in Los Angeles. The overall level of cocaine abuse in California is relatively stable but at a high level. According to the California Alcohol and Drug Data System, in 2001 there were 24,903 treatment admissions for powdered and crack cocaine abuse, a slight decrease from 25,069 in 2000. Cocaine is the second leading cause of drug-related deaths in Los Angeles and San Francisco. According to DAWN mortality data, in 2000 there were 471 cocaine-related deaths in Los Angeles, 84 in San Diego, and 146 in San Francisco.

Powdered cocaine is readily available throughout all areas of the state, and crack cocaine is readily available primarily in urban areas. Purity levels of powdered cocaine range from 15 percent to 95 percent, while the purity of crack cocaine falls between 16 percent and 99 percent. According to DEA, in the first quarter of FY2002, powdered cocaine sold for \$13,000 to \$21,000 per kilogram at the wholesale level and \$50 to \$100 per gram at the retail level. Crack is generally not sold at the wholesale level but is sold for \$10 to \$80 per rock at the retail level.

Mexican DTOs smuggle large quantities of cocaine into California destined for drug markets in the state and throughout the country. Several areas, particularly Los Angeles, serve as significant transportation and distribution centers for cocaine markets in the state and throughout the country. Most of the cocaine available in the state is smuggled through U.S.–Mexico land ports of entry in commercial and private vehicles. In FY2001 the U.S. Customs Service seized 6,455 pounds of cocaine at California land ports of entry.

Mexican DTOs and criminal groups are the primary suppliers of powdered cocaine to California. They dominate wholesale and retail

powdered cocaine distribution, while street gangs dominate the retail level distribution of crack cocaine throughout the state.

Heroin

Substance abuse indicators reveal that heroin abuse remains at high levels throughout California and accounts for the highest number of drug-related treatment admissions. According to the California Alcohol and Drug Data System, in 2001 there were 61,853 treatment admissions for heroin abuse, a decrease from 73,669 in 2000. Heroin is the leading cause of drug-related deaths in Los Angeles, San Diego, and San Francisco. According to DAWN mortality data, in 2000 there were 473 heroin-related deaths in Los Angeles, 145 in San Diego, and 148 in San Francisco.

Mexican black tar heroin is the dominant type available throughout the state; however, other types, including Mexican brown powder, South American, Southeast Asian, and Southwest Asian heroin have been seized. According to DEA, heroin sold for \$15,000 (Mexican black tar) to \$75,000 (South American) per kilogram in the first quarter of FY2002. Heroin purity varies by location, ranging from 10 percent to 68 percent.

Southern California, primarily Los Angeles, is a major transportation and distribution hub for Mexican black tar and brown powdered heroin destined for drug markets in California and throughout the United States. South American heroin, produced and supplied by Colombian DTOs, is also transported and distributed in the area, to a much lesser extent. The area also serves as a transshipment point for Southeast and Southwest Asian heroin, primarily to markets in the eastern United States. In FY2001 the U.S. Customs Service seized 188 pounds of heroin, most of which was Mexican black tar, at ports of entry in Southern California.

Mexican DTOs and criminal groups are the predominant wholesale and retail suppliers and distributors of Mexican black tar and brown powdered heroin in California. Colombian DTOs produce and supply South American heroin, which is

available to a lesser extent. In addition, Southeast Asian criminal groups supply limited quantities of Southeast Asian heroin to California drug markets, usually via package delivery services from Laos and Thailand. Southwest Asian heroin, though limited, is transshipped through California for markets in the eastern United States.

Marijuana

Marijuana is the most widely available and commonly abused illicit drug in California. Marijuana treatment admissions are at relatively high levels and are increasing. According to the California Alcohol and Drug Data System, marijuana treatment admissions increased from 20,143 in 2000 to 23,531 in 2001.

Marijuana produced in California and in Mexico is available in every part of the state. High quality marijuana from Canada (BC Bud) is also available in some areas of the state. California-produced marijuana is preferred by abusers because of its ready availability and high THC, (tetrahydrocannabinol) content. California-produced marijuana usually contains 10 percent to 20 percent THC, while Mexico-produced marijuana contains 2 percent to 5 percent. Canada-produced marijuana typically has 28 percent to 30 percent THC content. According to DEA, in the southern half of the state, California-produced marijuana sold for \$1,000 to \$4,000 per pound and Mexico-produced marijuana sold for \$250 to \$400 per pound in the first quarter of FY2002. In the northern half of the state, California-produced marijuana sold for \$1,500 to \$4,000 per pound and Mexico-produced marijuana sold for \$380 to \$1400 per pound. Canada-produced marijuana sold for \$3,000 to \$6,000 in areas throughout the state.

Mexican DTOs operate large-scale cannabis cultivation operations in national forests as well as in rural and suburban areas throughout the state. Some of these organizations hire illegal immigrants to manage and watch over the cannabis cultivation sites. The use of public lands to

cultivate cannabis is appealing to these operators because the risk of asset forfeiture is substantially minimized.

Mexican DTOs transport most of the Mexico-produced marijuana available in California. These organizations also distribute the drug at the wholesale level. Canada-produced marijuana is transported into the state by Caucasian criminal groups and independent dealers, who distribute it at the wholesale level. Mexican DTOs and Mexican and Caucasian criminal groups are involved in the wholesale distribution of California-produced marijuana. Various groups including Mexican DTOs; Hispanic, Caucasian, Jamaican, and African American criminal groups; and street gangs distribute marijuana at the retail level.

Other Dangerous Drugs

The use of club drugs such as MDMA, GHB, and ketamine and hallucinogens such as LSD and PCP is increasing. Teenagers and young adults most frequently abuse these drugs. The diversion and abuse of pharmaceuticals are also serious and growing concerns in the state.

MDMA

Most MDMA (3,4-methylenedioxymethamphetamine) available in California is produced outside the United States, typically in laboratories in the Netherlands and Belgium, and transported through express mail services and by couriers on commercial airlines. Russian and Israeli DTOs smuggle most of the MDMA currently available in the state. These organizations generally transport the drug to California, primarily Los Angeles, using couriers on commercial air flights. However, law enforcement reporting reveals that MDMA increasingly is being transported from Europe to Mexico and then smuggled across the Southwest border into California. Once in the state, MDMA is distributed regionally and throughout the country.

MDMA, also known as ecstasy, Adam, XTC, E, and X, is a stimulant and low-level hallucinogen. Sometimes called the hug drug, MDMA purportedly helps abusers to be more “in touch” with others and “opens channels of communication.” However, abuse of the drug can cause psychological problems similar to those associated with methamphetamine and cocaine abuse including confusion, depression, sleeplessness, anxiety, and paranoia. The physical effects can include muscle tension, involuntary teeth clenching, blurred vision, and increased heart rate and blood pressure. MDMA abuse also can cause a marked increase in body temperature leading to muscle breakdown, kidney failure, cardiovascular system failure, stroke, or seizure as reported in some fatal cases. Research suggests that MDMA abuse may result in long-term and sometimes permanent damage to parts of the brain that are critical to thought and memory.

MDMA typically is sold and abused at raves and nightclubs. However, the drug is increasingly available at a number of other venues including open-air markets, schools, colleges, and private parties. According to DEA, MDMA tablets, with a purity of 85 percent to 95 percent, sell for approximately \$7 each at the wholesale level and \$20 each at the retail level.

GHB

Young adult Caucasian males—particularly college students—are the primary distributors of GHB (gamma-hydroxybutyrate) throughout the state. GHB, also known as liquid ecstasy, soap, scoop, Georgia homeboy, grievous bodily harm, liquid x, and goop, is a central nervous system depressant. The drug typically is used by young adults in many cities throughout the state and has been used in the commission of drug-facilitated sexual assaults because of its sedative properties. According to DEA, a dose of GHB sells for \$5 to \$20 at the retail level.

Ketamine

Ketamine is smuggled into California from Mexico generally by local independent dealers. According to DEA, the drug is often sold at raves for \$20 per dose (0.2 gram) and is generally abused by adolescents and young adults. Ketamine is an injectable anesthetic that, when taken in large doses, causes reactions similar to those experienced with PCP. Ketamine has also been used in the commission of drug-facilitated sexual assaults because of its sedative properties.

LSD

The hallucinogen LSD (lysergic acid diethylamide) is produced by a small, tightly knit group of chemists in Northern California and is distributed in the state and throughout the country via package delivery services and couriers in private vehicles. LSD is readily available on college campuses and in suburban middle and high schools and, according to DEA, sells for \$5 to \$10 per dose. LSD often is applied to blotter paper and candy and disguised as breath freshener drops.

PCP

The hallucinogen PCP (phencyclidine) available in California is primarily produced and distributed by Los Angeles-based African American street gangs. However, law enforcement officials in Monterey, San Benito, San Jose, Santa Cruz, and Watsonville have noted an increase in the availability of PCP crystal—the pure powder form of the drug—that is being produced in the state by Mexican nationals. PCP is commonly smoked in cigarettes that have been dipped into the liquid form of the drug. According to DEA, one PCP-laced cigarette sells for \$20 to \$30 at the retail level. PCP users often display unpredictable and violent behavior, posing a threat to law enforcement officers and others.

Diverted Pharmaceuticals

Pharmaceuticals, particularly hydrocodone (Vicodin, Lortab) and oxycodone (OxyContin), are diverted, distributed, and abused in many areas of the state. Many pharmaceuticals that are controlled in the United States are easily obtainable in Mexico at pharmacies where records of transactions are not kept and prescriptions are not required.

Outlook

California will remain one of the most active drug smuggling and production areas in the nation. The state's major air, land, and sea ports of entry as well as its highly developed transportation system enable methamphetamine, cocaine, heroin, marijuana, and other dangerous drugs to be transported from and through California en route to drug markets within and outside the state. All drugs of abuse will remain readily available in the state.

The production, distribution, and abuse of methamphetamine will continue to pose the greatest drug threat to California. Methamphetamine production will further expand in urban, suburban, and rural areas to meet demand for the drug, leading to additional adverse social, environmental, and economic consequences. Moreover, methamphetamine production will continue to deplete state and local budgets to cover the costs associated with methamphetamine laboratory and dump site cleanups.

Cocaine—both powdered and crack—will remain a serious threat to California, primarily

to urban areas of the state. Mexican DTOs will continue to dominate the wholesale and retail distribution of powdered cocaine; however, Hispanic gangs may begin to challenge their dominance in retail distribution. Street gangs continue to convert and sell crack cocaine.

Heroin abuse will remain at relatively high levels. Demand will be met largely by Mexican black tar heroin, the predominant type available in California. Mexican DTOs and criminal groups will continue to supply the majority of this heroin in California as well as throughout the United States, using Southern California as a major transportation hub and distribution center.

The widespread availability and abuse of marijuana will continue in California. Domestic cannabis cultivation is widespread, and marijuana producers, particularly Mexican DTOs, will increasingly use public lands, including national and state forests, for cultivation. Moreover, the demand for higher potency domestically produced marijuana will likely increase.

The increasing availability of other dangerous drugs—including club drugs such as MDMA and GHB and hallucinogens such as LSD and PCP—will pose new challenges to law enforcement officials if abuse of these drugs continues to increase. The diversion and abuse of pharmaceutical drugs, particularly prescription pain relievers, will also continue to pose challenges to law enforcement due to the state's proximity to unregulated pharmacies in Mexico.

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