



## NEW HAMPSHIRE DRUG CONTROL UPDATE

*This report reflects significant trends, data, and major issues relating to drugs in the State of New Hampshire.*

### New Hampshire At-a-Glance:

- In 2007-2008, New Hampshire was one of the top ten states for rates of drug-use in several categories, including: past-month illicit drug use among persons age 12 or older; past-month illicit drug use among young adults age 18-25; past-year non-medical use of pain relievers among young adults age 18-25; and illicit drug dependence among persons age 12 or older.  
*Source: National Survey on Drug Use and Health 2007-2008*
- In all age groups, New Hampshire residents surveyed perceived low risk from smoking marijuana once a month (Individuals aged 12 or older, 12-17, 18-25, and 26 or older.)  
*Source: National Survey on Drug Use and Health 2007-2008*
- Approximately 11 percent of New Hampshire residents reported past-month use of illicit drugs; the national average was 8 percent.
- Opiates are the most commonly cited drugs among primary drug treatment admissions in New Hampshire.

## Drug Use Trends in New Hampshire

**Drug Use in New Hampshire:** The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs), and mental health in the United States. In the most recent Survey, 10.73 percent of New Hampshire residents reported using illicit drugs in the past month. The national average was 8.02 percent. New Hampshire's rate was one of the 10 highest among the states. Additionally, 3.57 percent of New Hampshire residents reported using an illicit drug other than marijuana in the past month (the national average was 3.58 percent).

*Source: Substance Abuse and Mental Health Services Administration - State Estimates of Substance Use from the 2007-2008 National Survey on Drug Use and Health: <http://oas.samhsa.gov/2k8state/Cover.pdf>*

**Drug-Induced Deaths:** As a direct consequence of drug use, 187 persons died in New Hampshire in 2007. This is greater than the number of persons in New Hampshire who died from motor vehicle accidents (138) and firearms (78) in the same year. New Hampshire drug-induced deaths (14.2 per 100,000 population) exceeded the national rate (12.7 per 100,000).

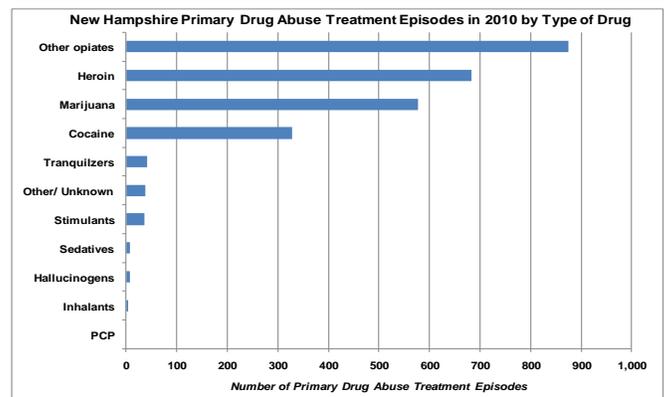
*Source: Centers for Disease Control and Prevention - National Vital Statistics Reports Volume 58, Number 19 for 2007: [http://www.cdc.gov/nchs/data/nvsr/nvsr58/nvsr58\\_19.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr58/nvsr58_19.pdf)*

## Substance Abuse Treatment Admissions Data

### New Hampshire primary treatment admissions:

The graph at right depicts substance abuse primary treatment admissions in New Hampshire in 2010. The data show that opiates (including prescription drugs) are the most commonly cited drugs among primary drug treatment admissions in the state, followed by heroin and marijuana.

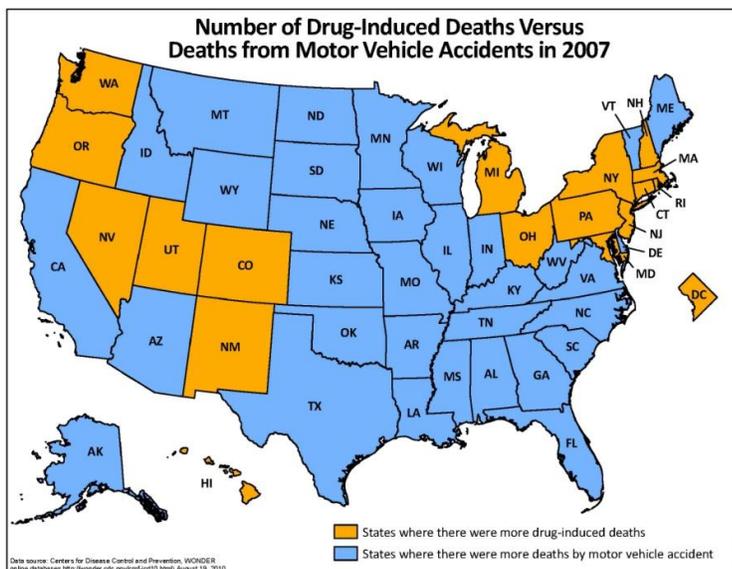
*Source: Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: <http://oas.samhsa.gov/dasis.htm>*



## Prescription Drug Abuse

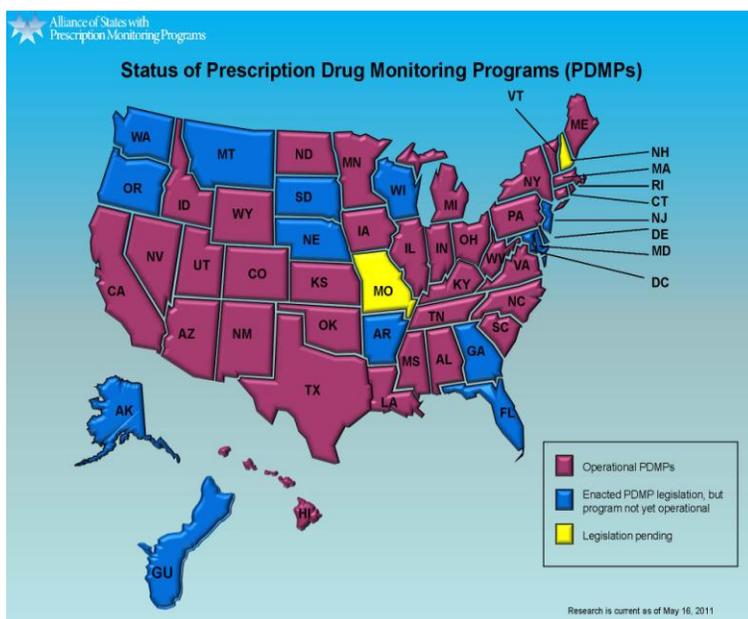
### ONDCP's Efforts to Combat Prescription Drug Abuse

Prescription drug abuse is the fastest-growing drug problem in the Nation. The Administration's Prescription Drug Abuse Prevention Plan, entitled, **"Epidemic: Responding to America's Prescription Drug Abuse Crisis,"** provides a national framework for reducing prescription drug diversion and abuse by supporting the expansion of state-based prescription drug monitoring programs; recommending secure, more convenient, and environmentally responsible disposal methods to remove expired, unused, or unneeded medications from the home; supporting education for patients and healthcare providers; and reducing the prevalence of pill mills and doctor shopping through enforcement efforts.



### State-Level Action: Prescription Drug Monitoring Programs (PDMPs)

PDMPs track controlled substances prescribed by authorized practitioners and dispensed by pharmacies. PDMPs serve a number of functions, including assisting in patient care, providing early warning signs of drug epidemics, and detecting drug diversion and insurance fraud. Thirty-five states have operational PDMP programs established by state legislation and funded by a combination of state and Federal funds. An additional 13 states have a prescription drug monitoring program authorized, but not yet operational. Adequate resourcing, increasing the number of states with operational PDMPs, and development of state-to-state information-sharing systems would significantly help reduce prescription drug diversion and abuse.



**New Hampshire does not have a prescription monitoring program.**

### State-Level Action: Drug Take-Back Programs

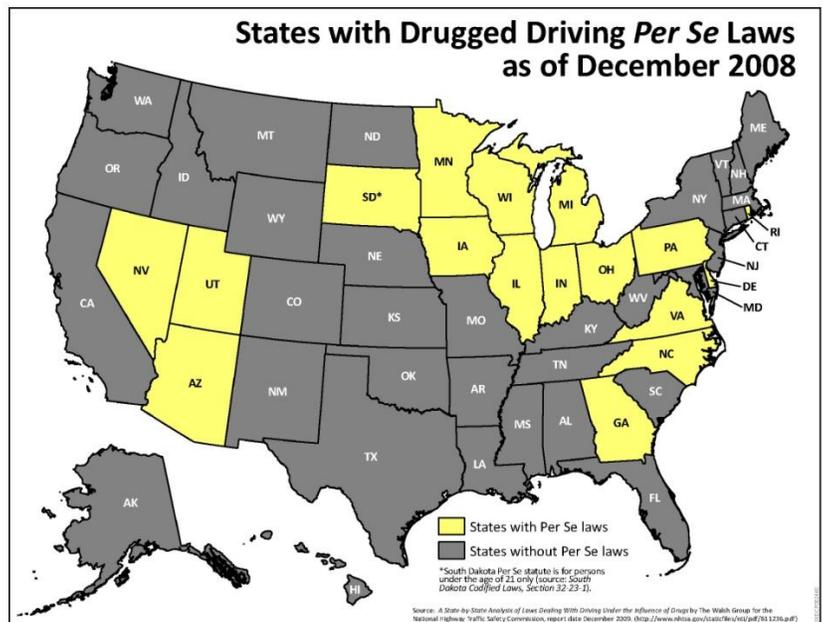
A comprehensive plan to address prescription drug abuse must include proper disposal of unused, unneeded, or expired medications. Providing individuals with a secure and convenient way to dispose of controlled substances will help prevent diversion and abuse of these substances and demonstrate sound environmental stewardship. Federal rulemaking is underway and will further enhance the viability and scope of state and

community take-back programs. In the meantime, states are encouraged to work with the DEA to conduct additional take-back events and educate the public about safe and effective drug return and disposal.

## Drugged Driving

### ONDCP Action on Drugged Driving

In 2007, the National Highway Traffic Safety Administration (NHTSA) found that one in eight weekend, nighttime drivers tested positive for illicit drugs. According to recent Fatal Accident Reporting System (FARS) data, one in three motor vehicle fatalities (33 percent) with known drug test results tested positive for drugs in 2009. Recognizing this growing problem, ONDCP is working to raise awareness of the dangers of drugged driving, provide increased training to law enforcement in identifying drugged drivers, and encourage states to consider *Per Se* laws to facilitate effective enforcement and prosecution of those who drive with drugs in their systems.



### State-Level Action: Enacting *Per Se* Standards for Impairment

Although all 50 states have laws against drugged driving, law enforcement often lacks adequate tools to enforce and prosecute drugged driving. ONDCP encourages states to develop and implement *Per Se* standards that make it illegal to drive a vehicle after taking illegal drugs. This is the same standard used successfully for 12 million commercial drivers in the United States over the past two decades. *Per Se* standards have been adopted in 17 states.

**New Hampshire does not have a *Per Se* standard.** Under Section 265-A:2 of the Revised Statutes Annotated Title XXI Motor Vehicles, no person shall drive or attempt to drive or operate a vehicle while under the influence of intoxicating liquor or any controlled drug or any combination of intoxicating liquor and controlled drugs. Proof Required: that the defendant was driving or attempting to drive a vehicle in New Hampshire, and while driving the vehicle, the defendant was under the influence of any controlled drug.

Source: *A State-by-State Analysis of Laws Dealing With Driving Under the Influence of Drugs*, by the Walsh Group for the National Highway Traffic Safety Administration.

## ONDCP Support for Community-Based Prevention

### National Anti-Drug Media Campaign

ONDCP's National Youth Anti-Drug Media Campaign provides consistent and credible messages (including those in Native American and Alaska Native communities) to young people about drug abuse and its consequences. *Above the Influence*, a major component of the Campaign, informs and inspires youth to reject illicit drugs and drinking via a mix of national and local advertising vehicles. The Campaign, in close partnership with local community-based, youth-serving organizations, also conducts teen-targeted *Above the Influence* activities to assist local groups with youth drug prevention work in their respective communities.

## The Drug Free Communities (DFC) Program

Recognizing that local problems require local solutions, Drug Free Communities (DFC) organizations mobilize communities to prevent youth drug use by creating local data-driven strategies to reduce drug use in the community. ONDCP works to foster the growth of new coalitions and support existing coalitions through the DFC grants. In FY 2011, the following New Hampshire coalitions received grants from ONDCP:

- Bridging the Gaps- Rochester Community Coalition for Alcohol and Drug Prevention
- CADY, Inc. (Communities for Alcohol and Drug Free Youth)
- Communities United for Substance Abuse Prevention
- Community Alliance for Teen Safety (Derry)
- Concord Substance Abuse Coalition
- Dover Coalition for Youth
- Drug Advisory Council Coalition/Community Safeguard
- Franklin Mayor's Drug and Alcohol Abuse Task Force
- Hinsdale Prevention Coalition
- Monadnock Alcohol and Drug Abuse Coalition
- North Country Health Consortium / Coos County Coalition for Substance Abuse Prevention
- Raymond Coalition for Youth
- Sanborn/Timberlane Safe and Drug Free Community Coalition
- Winchester We've Got Your Back

Source: Office of National Drug Control Policy [http://www.ondcp.gov/dfc/grantee\\_map.html](http://www.ondcp.gov/dfc/grantee_map.html)

## ONDCP High Intensity Drug Trafficking Area (HIDTA) County Info

The High Intensity Drug Trafficking Areas (HIDTA) program enhances and coordinates drug control efforts among local, state, and Federal law enforcement agencies. In designated HIDTA counties, the program provides agencies with coordination, equipment, technology, and additional resources to combat drug trafficking and its harmful consequences in critical regions of the United States.

### New England HIDTA

New Hampshire county: Hillsborough

- New Hampshire continues to benefit from the innovative and timely collocation of the HIDTA ISC and the Commonwealth of Massachusetts Fusion Center. The combined operation provides an enhanced and increased level of available information for all states participating in the New England HIDTA.
- Additionally, the NE HIDTA is developing a strategy and increasing law enforcement training opportunities to address the serious issue of Drugged Driving.

## Federal Grant Awards Available to Reduce Drug Use in the State of New Hampshire

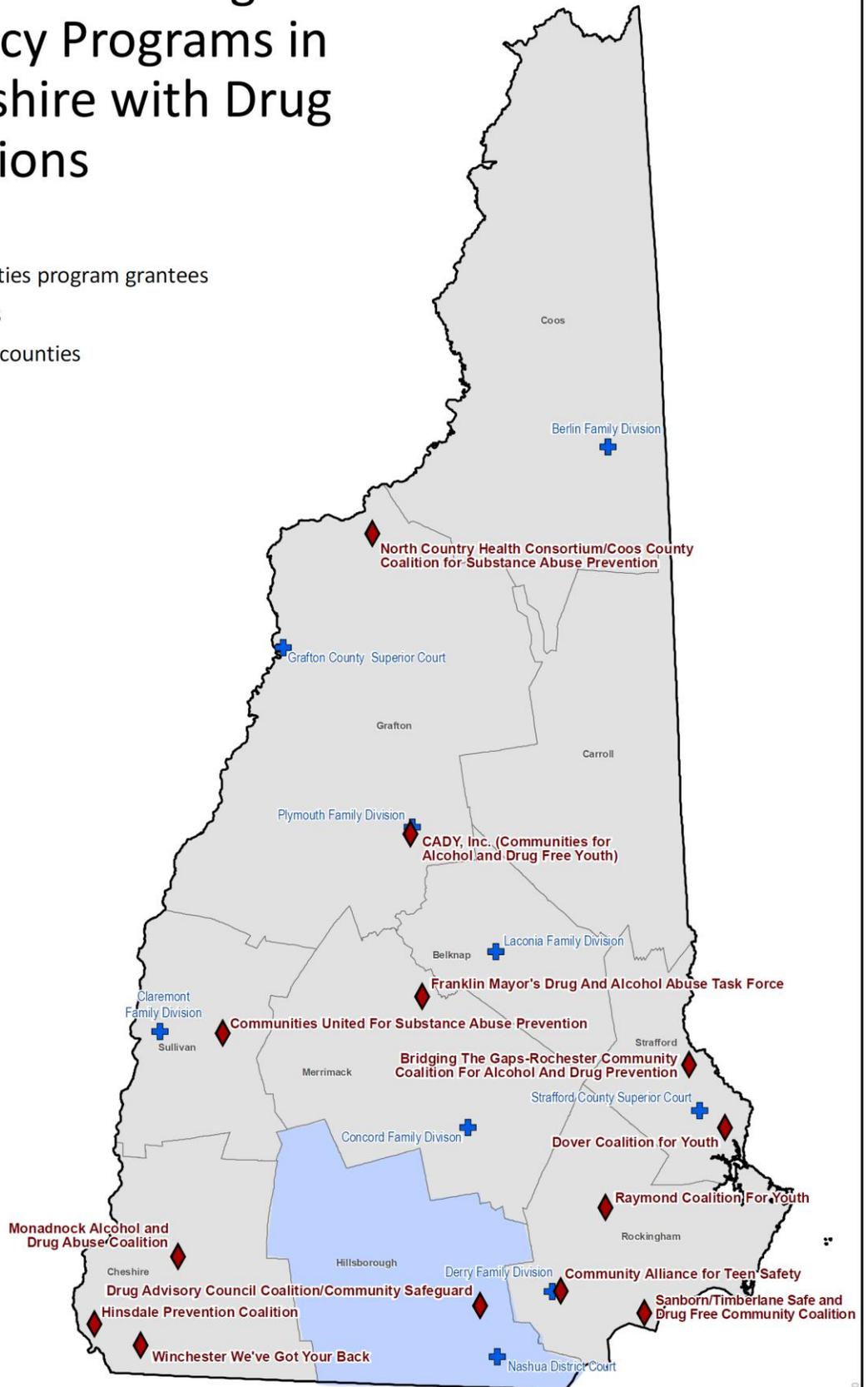
The Federal Government awards competitive grants to help states in their efforts to reduce drug use and its harmful consequences. In FY 2010, direct support was provided to state and local governments, schools, and law enforcement organizations in your state for this purpose. Some Federal grant programs are dedicated to reducing drug use and its harmful consequences while others can be used for reducing drug use or for other purposes. In FY 2010, your state received support under the grant programs shown below.

Federal Grant Awards		2010
<b>Department of Education</b>		
<b>Safe and Drug-Free Schools and Communities_National Programs</b>		<b>253,143</b>
Alcohol Abuse Reduction Grants		128,143
Building State And Local Leadership Capacity for Preventing Youth Substance Use and Violence		125,000
<b>Department of Health and Human Services</b>		
<b>Administration for Children and Families</b>		<b>675,880</b>
Promoting Safe and Stable Families		675,880
<b>National Institutes of Health</b>		<b>4,636,306</b>
Discovery and Applied Research for Technological Innovations to Improve Human Health		980,297
Drug Abuse and Addiction Research Programs		3,656,009
<b>Substance Abuse and Mental Health Services Administration</b>		<b>12,464,952</b>
Block Grants for Prevention and Treatment of Substance Abuse		6,744,716
Projects for Assistance in Transition from Homelessness (PATH)		300,000
Substance Abuse and Mental Health Services_Projects of Regional and National Significance		2,344,988
Substance Abuse and Mental Health Services-Access to Recovery		3,075,248
<b>Department of Housing and Urban Development</b>		
<b>Assistant Secretary for Community Planning and Development</b>		<b>323,952</b>
Shelter Plus Care		323,952
<b>Assistant Secretary for Housing--Federal Housing Commissioner</b>		<b>461,040</b>
Shelter Plus Care		461,040
<b>Department of Justice</b>		
<b>Office of Justice Programs</b>		<b>8,340,065</b>
Congressionally Recommended Awards		2,075,000
Criminal and Juvenile Justice and Mental Health Collaboration Program		227,122
Drug Court Discretionary Grant Program		350,000
Edward Byrne Memorial Justice Assistance Grant Program		2,266,139
Enforcing Underage Drinking Laws Program		356,400
Juvenile Accountability Block Grants		363,100
Juvenile Mentoring Program		532,726
National Institute of Justice Research Evaluation and Development Project Grants		700,572
Residential Substance Abuse Treatment for State Prisoners		156,088
Second Chance Act Prisoner Reentry Initiative		1,312,918
<b>Executive Office of the President</b>		
<b>Substance Abuse and Mental Health Services Administration</b>		<b>1,844,513</b>
Drug-Free Communities Support Program Grants		1,844,513
<b>Grand Total</b>		<b>28,999,851</b>

**Note:** Report as of 11/30/2010. FY 2009 includes additional grant awards under the Recovery Act. The Federal, State and Local Shares of Medicaid and the Federal Medicare Programs are not included above. File updated 6/7/2011.

# Office of National Drug Control Policy Programs in New Hampshire with Drug Court Locations

-  Drug Free Communities program grantees
-  Drug Court locations
-  New England HIDTA counties
-  County Boundaries



Source: National Drug Court Institute and ONDCP, September 2011

ONDCP/002870