State of Missouri
Department of Public Safety
Office of the Director

Edward Byrne Memorial Justice Assistance Grant (JAG) Program

Missouri Statewide Drug and Violent Crime Strategy
FY2011

FOREWORD

On behalf of the state of Missouri and the Missouri Department of Public Safety, it is my pleasure to present the 2010/2011 Missouri Statewide Drug and Violent Crime Strategy. Since 1987, the Edward Byrne Memorial Justice Assistance Grant (JAG) Program (formerly known as the Edward Byrne Memorial Formula Grant and Local Law Enforcement Block Grant Programs) continues to be an essential resource in our continuing effort to meet the public safety needs of the state's criminal justice community. The Missouri Department of Public Safety remains committed to assisting criminal justice agencies in making Missouri a safer place. The JAG Program, and the addition of Recovery-JAG monies in 2009, made it possible for Missouri to aggressively address the many public safety issues associated with illicit drugs and violent crime.

Since the inception of the first statewide drug strategy in 1986, Missouri has implemented many programs focused on drug awareness/education, enforcement, prosecution, detention, and rehabilitation and treatment efforts. These programs have helped improve the quality of life for Missouri's citizens. With the continued funding of the JAG, the Missouri Department of Public Safety will be able to address the current and future needs of the state relating to drugs and violent crime.

The Missouri Department of Public Safety will continue its commitment to coordinate with federal, state and local criminal justice entities in an effort to combat the drug and crime problem in Missouri. We will continue to fund existing programs that are successful and add new programs, as funding becomes available, that will address the problems and needs identified in the strategic planning process.

The Missouri Department of Public Safety remains committed to our vision, "By embracing the challenges of the future, the Department of Public Safety and the law enforcement community working together will provide the protection and service to create a quality of life in which all people feel safe and secure." The JAG Program helps us realize this vision.

John Britt, Director
Missouri Department of Public Safety

State of Missouri
Department of Public Safety
Office of the Director
Criminal Justice/Law Enforcement Program

Edward Byrne Memorial Justice Assistance Grant (JAG) Program

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SECTION I: Executive Summary

In 1987, the Missouri Department of Public Safety initiated an administrative section within the Office of the Director, whose primary responsibility was to oversee and coordinate the dissemination of federal funding awards made to Missouri. This administrative section was implemented and titled as the Criminal Justice/Law Enforcement Program (formerly known as the Narcotics Assistance Control Programs or NCAP) in response to the establishment of the federal Edward Byrne Memorial and Local Law Enforcement Assistance Grant Programs authorized by Title I of the Omnibus Crime Control and Safe Streets Act of 1968, 42 U.S.C. 3711 et seq. Additionally, the furtherance of the overall mission of the Missouri Department of Public Safety, as defined in Chapter 650 of the Missouri Revised Statutes, became and continues to be the directive for the Criminal Justice/Law Enforcement Program. That mission is to provide a safe and secure environment for all individuals, through efficient and effective law enforcement.

Throughout the years, the Missouri Department of Public Safety (DPS), through the Criminal Justice/Law Enforcement Program, has been involved in an on-going effort to identify the criminal justice needs of state and local units of government. As a result of this process, the Criminal Justice/Law Enforcement Program has provided the financial and technical assistance required to initiate state and local level responses to crime and drug related issues. This response, which parallels the established objectives of the Edward Byrne Memorial Justice Assistance Grant (JAG) Program as outlined by the U.S. Department of Justice - Office of Justice Programs, is the foundation for project initiatives within Missouri. It remains the priority of the Criminal Justice/Law Enforcement Program to identify state and local initiatives which assist the state of Missouri in the enforcement of drug control or controlled substance laws, initiatives which emphasize the prevention and control of violent crime and serious offenders, and initiatives which improve the effectiveness of the state and local criminal justice system.

In compliance with section 522(a) of the Omnibus Crime Control and Safe Streets Act, the Criminal Justice/Law Enforcement Program FY11 State Annual Report (SAR), will outline the impact of JAG Program funding on the criminal justice system within the jurisdictions of state and local government. During the reporting period covered in this annual report, July 1, 2010 through June 30, 2011, the Criminal Justice/Law Enforcement Program provided funding assistance in four authorized purpose areas. The total monetary award for this reporting period was $5,812,481.42 for which the Criminal Justice/Law Enforcement Program was able to provide financial assistance to 32 state and local level projects through the 2010 JAG solicitation.

This level of funding provided financial assistance to 28 Law Enforcement Programs (27 Multi-Jurisdictional Drug Task Forces), 2 Prosecution & Court Programs, 1 Prevention & Education Program, and 1 Planning, Evaluation, and Technology Improvement Programs. The total funds expended during this reporting period represent grant awards utilizing JAG Program monies from federal fiscal years 2008 and 2009.

The Missouri Department of Public Safety-Criminal Justice/Law Enforcement Program continues to be an essential component of the statewide effort to address violent crime and drugs. Through the JAG Program, Missouri has the financial capability to maintain essential projects that provide needed services for the criminal justice community. In addition to the initiatives previously described, the Criminal Justice/Law Enforcement Program places an equally high priority on the development and continuation of projects and partnerships that enhance a state or local unit of government's ability to implement aggressive responses to the public safety needs of their respective service areas. The Criminal Justice/Law Enforcement Program strives to implement progressive demand reduction, community, multi-jurisdictional, judicial, correctional, analytical and informational-based response strategies to the public safety threats of crime and drugs.

INTRODUCTION

The Missouri Department of Public Safety, Office of the Director manages the distribution of federal funds provided to the State by the U.S. Department of Justice (DOJ), Office of Justice Programs (OJP), Bureau of Justice Assistance (BJA), Edward Byrne Memorial Justice Assistance Grant (JAG) Program. The unit responsible for the management of these funds is the Criminal Justice/Law Enforcement Program. Since 1987, the Edward Byrne Memorial Formula and Local Law Enforcement Block Grant Programs have provided criminal justice agencies with financial resources to confront drugs and violence. In FY2005, the Edward Byrne Memorial Justice Assistance Grant (JAG) Program blended the previous Edward Byrne Memorial Formula (Byrne) and Local Law Enforcement Block Grant Programs in an effort to streamline justice funding and grant administration. The Missouri Department of Public Safety, Office of the Director is committed to assisting state and local efforts to make Missouri a safer place. Dealing head-on with illicit drugs and violent crime is critical to this effort and federal grant monies make this possible.

The Missouri Department of Public Safety has undertaken a comprehensive approach to utilizing the JAG Program dollars. Enforcement/interdiction, prevention/education, treatment, criminal litigation, improving criminal history records, and improving statewide illicit drug and violent crime data are a few of the focus areas for the FY 2011 Strategy. By addressing these issues, we believe we can receive the most benefit for the citizens of Missouri.

Since the beginning of Byrne/JAG funding in 1987, the Missouri Department of Public Safety (DPS), Criminal Justice/Law Enforcement Program (CJ/LE), has developed a comprehensive strategic approach to the drug and violent crime problems facing Missouri. The 2011 Strategy is an overview of a four-year plan.

The State of Missouri has, and will continue to, build on past years' successes by supporting effective programs, which are committed to the overall objectives of a safer Missouri. DPS – CJ/LE will continue to evaluate the effectiveness of each state and local program receiving federal money to ensure that the goals and objectives of each program are addressing the needs of Missouri citizens.

The Missouri DPS is responsible for development and administration of the JAG Program. This responsibility is conducted in accordance with RSMO 650.005, Section 8, which provides all powers, duties, and functions for administering Federal grants, planning, and the like related to public laws 90-351 through 90-455 and related acts of Congress be assumed by the Director of Public Safety. The Program is entering its 24th year of funding.

Following is the organizational outline of the DPS-CJ/LE section and associated financial commitments.

Director of Public Safety: 2% with JAG funding to provide administrative support to CJ/LE.

Deputy Director of Public Safety: 5% with JAG funding to supervise the CJ/LE manager and provide administrative support to CJ/LE.

Legislative Director: 2% with JAG funding to provide legislative support and direction as it relates to CJ/LE.

Legal Counsel: 2% with JAG funding to provide legal representation and counsel as it relates to CJ/LE.

Accountant II: 5% with JAG funding to provide administrative and financial support to CJ/LE.

Program Manager: 100% with JAG funding to plan, coordinate, and provide oversight for all criminal justice related programs. Responsible for CJ/LE budgeting, strategy development, program monitoring, and evaluation.

Program Specialist I: 100% with JAG funding to assist with planning, coordination, and provide oversight assistance for all criminal justice-related programs. Assists with CJ/LE budgeting, strategy development, program monitoring, and evaluation.

Program Specialist I: 100% with JAG funding to assist with coordinating the Department of Defense Property Programs which make excess military equipment available to law enforcement for counter-narcotic programs.

Program Representative I: 100% with JAG funding to provide assistance and support in administration of CJ/LE, assists both program specialists, with budgeting, program monitoring, and evaluation.

Part Time Clerical Support: 100% with JAG funding to assist in the administration of all criminal justice related programs. The Assistant will assists with dissemination of program announcements and maintenance of Grants Management System.

Part Time Warehouse Aid(s): 100% with JAG funding to assist with coordinating the Department of Defense Property Programs, which make excess military equipment available to law enforcement for counter-narcotic programs.

Part Time Warehouse Clerk: 100% with JAG funding to assist with coordinating the Department of Defense Property Programs, which make excess military equipment available to law enforcement for counter-narcotic programs.

SECTION II: Data and Analysis

INTRODUCTION

The Missouri Department of Public Safety (DPS) has undertaken a comprehensive approach to utilizing JAG federal grant dollars to address the illicit drug problem in the State. Enforcement / interdiction, prevention / education, treatment, criminal litigation, improving criminal history records, and improving statewide illicit drug and violent crime data are a few of the Department's focus areas. It is believed Missouri citizens can receive the most benefit by addressing these issues.

Illicit drug use and demand drive the impact of drugs and their industries in Missouri. Because of this relationship, an analysis of illicit drug use is critical for an assessment of Missouri's drug problem. The demographic characteristics, perceived risk, emergency room and treatment trends, regional variance, and prevalence by young persons are assessed for marijuana, cocaine / crack cocaine, methamphetamine, heroin / opiates, hallucinogens, and other illicit drug use.

A study titled *Nature and Extent of the Illicit Drug Problem in Missouri* was conducted by DPS and the Missouri Statistical Analysis Center (SAC) to provide baseline information to evaluate Edward Byrne Memorial Justice Assistance Grant (JAG) funded programs targeted at illicit drug enforcement and prevention of use. This section provides results of that study and focuses on three primary issues: illicit drug use, societal impact of drug use, and extent of drug industries in the State.

DATA SOURCES

In order to make a statewide assessment of drug use, several analyses were conducted of drug treatment data stored in the Consumer Information Management Outcomes and Reporting (CIMOR)[1] system maintained by the Missouri Department of Mental Health (DMH). This system captures data on clients admitted to fifty-eight State-supported treatment facilities for alcohol and drug abuse dependency problems. As part of the CIMOR data collection effort, drugs which clients abuse (up to three: primary, secondary, tertiary) are captured. Patterns of illicit drug use, demographic profiles of users, and trends were analyzed with CIMOR data. In 2010, 29,922 clients were admitted for treatment of illicit drug use. A total of 46,142 illicit drugs were mentioned by these clients. Of these, 23,109 illicit drugs were mentioned by clients as primary contributors to their abuse problems.

Another information system used to assess illicit drug use was the Patient Abstract Information System[2] maintained by Department of Health and Senior Services (DHSS). This information system captures data on patients admitted to licensed hospitals in Missouri including cases handled through hospital emergency rooms. Data were obtained on all patients admitted to these facilities from 2005 through 2009 where use of illicit drugs was mentioned as part of their diagnosis.

Data from two statewide surveys were also analyzed to identify the extent of drug use in Missouri. The Missouri Department of Elementary and Secondary Education (DESE) High School Drug Survey[3] was used to identify marijuana, cocaine, methamphetamine, and heroin use by Missouri high school seniors. Trends of use were analyzed from 1991 through 2007 for these four drugs. Data collected in a 2006 Prevalence of Drug Use Survey[4] conducted by the Missouri State Highway Patrol was used to identify citizens' perspectives of the extent of the drug problem and their awareness of use by family members, friends, or acquaintances.

The societal impact of drug use in Missouri is manifested in many ways. A significant impact is seen in the resources and effort expended by the criminal justice system to control the problem. To assess this impact, trends and types of drug arrests, criminal laboratory cases, juvenile court referrals, and incarcerated persons were

analyzed. Drug use also impacts the health care system in Missouri. Unfortunately, no single data source or indicator could be relied on to provide a definitive assessment of these problems and their impact on Missouri's citizens. Instead, this study was based on data from existing federal, state, and local information systems primarily associated with law enforcement, juvenile justice, corrections, and public health agencies.

To identify illicit drugs' societal impact, several data sources were analyzed. Law enforcement's response to illicit drugs in Missouri was analyzed using Uniform Crime Reporting (UCR)[5] arrest data. An analysis of DPS' Crime Laboratory Quarterly Report System[6] data describing drug cases processed by Missouri crime laboratories were analyzed to identify the impact criminal justice service agencies. Juvenile Court Information System[7] data describing referrals of juveniles for drug violations were analyzed to identify the impact of drugs on Missouri's juvenile justice system. Illicit drugs' impact on the State's penal system was identified through analysis of Department of Corrections (DOC) Offender Management Information System[8] data for clients incarcerated for drug violations. The relationship of crime and drug use was analyzed in a 2002 survey of jail inmates conducted by the Bureau of Justice Statistics[9].

Illicit drugs impact the State's health infrastructure and public health of Missouri citizens. Analysis of DHS hospital admission data[2] describing persons diagnosed with illicit drug-related health problems identified the impact on Missouri's hospital infrastructure. An analysis of Missouri Bureau of AIDS / HIV Prevention[10] data describing cases involving HIV / AIDS contracted through illicit drug use identified the impact on State-supported facilities that care for HIV / AIDS afflicted persons.

The illicit drug industry also has an impact on Missouri's economy and the criminal justice system. To determine the extent of drug industries in the State, an analysis was conducted of data contained in the Multi-jurisdictional Drug Task Force (MJDTF) Quarterly Report Information System[11] supported under the Edward Byrne Memorial Justice Assistance Grant (JAG). These reports request information on trends in quantity and estimated street value of drugs seized as well as types of drug cases and arrests processed. Reliance also was placed on information collected in DPS' Crime Laboratory Quarterly Report System[6]. Data in this system provides information related to trends in illicit drug case processing as well as identification of new illicit drug types coming on the scene or older ones experiencing a rejuvenation of use.

This study also utilized data collected in the Missouri MJDTF Drug Industry Survey[12] to identify the extent of drug industries. In this survey, representatives or points of contact were requested to identify drug industries causing significant problems in their jurisdictions and to provide detailed profiles on those drug industries considered to be major or moderate problems in their operational area. Seriousness and locations of each industry, demographic characteristics of industry participants, and organization levels were analyzed to assess drug industries in the State. An analysis of marijuana cultivation and methamphetamine clandestine laboratories was conducted to determine the trends and extent of illicit drug production within the State. An analysis of interstate distribution / trafficking was conducted to determine trends and extent of the foreign produced illicit drugs sold in Missouri and trafficked across the State's roadway system. The distribution and point-of-sale drug trafficking was analyzed to identify the extent of illicit drug sales in Missouri. This analysis included distribution and sale of marijuana, cocaine / crack cocaine, methamphetamine, heroin / opiates, hallucinogens, ecstasy, pharmaceutical drugs, and drugs new to Missouri's illicit market.

Substantial reliance was also placed on research at the federal level to provide additional insights into drug industry problem areas. Most helpful were the National Drug Intelligence Center (NDIC) publications *National Drug Threat Assessment 2009*[13] and *Midwest High Intensity Drug Trafficking Area*[14]. Also, *Street Drugs*[15], a drug identification guide was utilized for invaluable updated drug information.

The final level of analysis consisted of viewing illicit drug problems on a regional basis. Results of this analysis were incorporated into both the assessment of the nature and extent of illicit drug use and impact of this use. Reliance was placed on viewing these problem areas based on Metropolitan Statistical Areas (MSAs). MSAs are

developed by the U.S. Bureau of Census and were defined as areas having a large population nucleus together with adjacent communities having a high degree of economic and social integration with that nucleus. For this report, MSA boundaries are modified to include counties within drug task force jurisdictions which cover counties outside of Bureau of Census boundaries. Missouri's seven MSAs, modified to include adjoining task force counties, are: St. Louis MSA which consists of ten counties and the City of St. Louis; the Kansas City MSA which consists of ten counties; the Columbia MSA with three counties; the Springfield MSA consisting of nine counties; the Joplin MSA consisting of five counties; and the St. Joseph MSA with twelve counties. For regional analysis, the remaining sixty-four counties were grouped together and entitled Non-MSA Region. Appendix A identifies specific counties associated with these regional groupings as well as a map displaying their location in the State.

Prior to discussing findings of this assessment, it is worthwhile to describe Missouri's population and geographical characteristics. Missouri covers an area of 68,886 square miles. It is approximately 270 miles from east to west and 310 miles from north to south. Missouri has two very large urban population centers, a number of smaller urban population centers, and vast rural areas all representing diverse cultures and life-styles.

It is estimated Missouri's 2010 population was over 5.9 million. Of the total population, over one-half live in the two largest MSAs, 33.9% in the St. Louis MSA and 19.9% in the Kansas City MSA. Five MSAs contain 16.3% of the population while the Non-MSA regions of the State account for 29.9% of the total.

ILLICIT DRUG USE IN MISSOURI

The illicit drug problem in the State of Missouri is well recognized by its citizens. In a public opinion survey conducted by the Missouri State Highway Patrol in 2008[16], Missouri citizens were asked to rank several social issues facing the United States. These social concerns were ranked in the following order from most to least problematic: crime, drug abuse, health care, public education, problems relating to economy, homeland defense / security, illegal immigration, alcohol abuse, taking care of needed / elderly, and damage to the environment. The responses were analyzed based on their being ranked as one of the top three problem areas in the nation.

This section contains an assessment of the major types of illicit drugs currently in use in the State. These include: marijuana, cocaine / crack, methamphetamine, heroin / opiates, hallucinogens (LSD, PCP, mescaline, psilocybin, etc.), and other types of drugs.

Marijuana

Marijuana is one of the most abused drugs in the State. In 2009, the Missouri Department of Health and Senior Services recorded 24,370 illicit drug mentions during admissions of Missouri residents to instate hospitals for medical treatment. In the diagnosis of 5,897 patients, marijuana was mentioned as a factor. Of all illicit drugs diagnosed in 2009, marijuana accounted for 24.2%. It was the third most diagnosed drug associated with statewide hospital admissions in 2009.

Marijuana was the greatest contributing factor to people seeking treatment for illicit drug abuse and dependency. Department of Mental Health states that in 2010, 29,922 clients were admitted to State-supported facilities for use of one or more illicit drugs. A total of 23,109 primary drug mentions were made by these clients. There were 10,269 clients who indicated marijuana contributed to their drug abuse problem. As a result, marijuana accounted for 44.4% of all primary drug mentions.

A greater proportion of marijuana mentions are associated with drug dependency and treatment centers than hospital admissions. This may indicate marijuana has a greater direct effect on a person's socio-psychological well-being as compared to their physical health.

Marijuana is used by all demographic groups in Missouri. Of the 10,269 clients in treatment programs who indicated marijuana as a problem, 73.6% were male and 26.3% were female (Table 1). In addition, 65.0% were Caucasian, 30.1% were African American, and 5.0% were either American Indian or another race. The majority of clients were 17 years of age and older (83.4%) while 16.6% were 16 years of age or younger.

Indications that marijuana is the drug of choice by Missouri's youth compared to other illicit drugs. The average age of clients receiving treatment for illicit drug use in 2010 was 30.5 years. However, for the 10,269 clients with a marijuana problem, the average age was 26.4 years. Clients with a marijuana problem first used it at a younger age than clients first used other illicit drugs. The average age of clients' first use of marijuana was 14.4 years compared to 18.7 years for clients' first use of other illicit drugs.

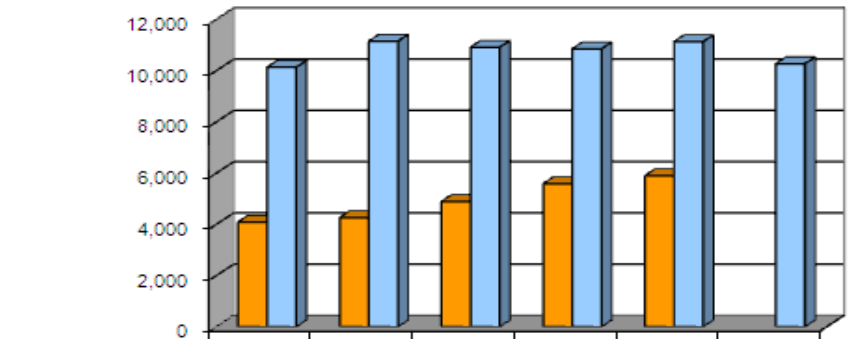
A statewide survey conducted by the Missouri Department of Public Safety in 2006 indicates that marijuana was perceived by respondents to have the least amount of risk associated with its use compared to other drugs. Of the respondents, 24.3% felt marijuana used once or twice presented a great risk to users. Occasional use of marijuana was perceived to be a great risk by 36.0% of the respondents. Yet regular marijuana use was perceived by 74.7% of the respondents to present a great physical risk to users. Of the survey respondents who have a friend, relative, or acquaintance who uses or sells any illegal drugs, 69.1% know they use and sell marijuana.

Table 1
Mentions of Drugs In Drug Treatment Admissions
By Demographic Characteristics Of Clients and Drug Type
2010

Gender	Marijuana	Cocaine	Methamphetamine	Heroin/Opiates	Hallucinogens
Male	73.6%	60.2%	55.8%	57.6%	54.0%
Female	26.3%	39.8%	44.2%	42.4%	46.0%
Race					
Cauacasian	65.0%	36.1%	95.2%	74.3%	58.6%
African American	30.1%	59.9%	1.5%	23.2%	38.5%
American Indian	0.0%	0.1%	0.3%	0.2%	0.0%
Other	4.7%	3.9%	3.0%	2.3%	2.9%
Age Group					
16 Years & Younger	16.6%	0.8%	1.0%	0.9%	3.6%
17 Years & Older	83.4%	99.2%	99.0%	99.1%	96.4%

Trend analyses were conducted identifying patterns of marijuana use in the State over the past several years. The number of persons admitted to hospitals diagnosed with marijuana as a contributing factor has steadily increased since 2005 (Figure 1). Marijuana mentions increased 14.8% from 2006 to 2007, and 14.1% from 2007 to 2008, and 5.6% from 2008 to 2009. An examination of trends of persons seeking treatment in State-supported facilities for primary problems with marijuana indicate use of this drug increased from 2004 through 2006. Treatments of marijuana decreased in 2007 and 2008, but increased in 2009 by 2.6%. There was a 7.7% decrease in 2010 from 2009.

Figure 1
Marijuana Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	4,088	4,261	4,893	5,584	5,897	
Treatment Mentions	10,130	11,149	10,913	10,849	11,131	10,269

A regional analysis was conducted based on hospital inpatients and outpatients receiving treatment for drug abuse in 2009. The greatest number of marijuana mentions given in hospital admissions in 2009 was found to be disproportionately greater in small, urban MSAs and Non-MSAs. Joplin MSA mentioned marijuana most (28.1%), followed by Non-MSA (26.5%), Kansas City MSA (25.0%), St. Louis MSA (23.3%), Springfield MSA (20.0%), Columbia (17.39%), and St. Joseph (16.8%) counties.

A statewide survey conducted by the DESE substantiates marijuana use by youth. This survey indicated the proportion of Missouri high school seniors who used marijuana in the past 30 days declined from the high of 28% in 1997 to 18% in 2005 but increased again in 2007 to 19.0% An increase also occurred in 2009 with a 24.2% rise from 2007 (Table 2).

Table 2
Proportion Of Missouri High School Seniors
Who Used Marijuana In Past 30 Days
1997 Through 2009

1997	**28.0%**
1999	**26.0%**
2001	**24.0%**
2003	**22.0%**
2005	**18.0%**
2007	**19.0%**
2009	**24.2%**

Cocaine

According to the National Survey on Drug Use and Health 200917 there were 1.6 million current cocaine users ages 12 and older. This is a decrease from 2008 with 1.9 million current cocaine users. In 2006 the estimated user of cocaine was at a high with 2.4 million.

Cocaine is a significantly abused drug in Missouri. In 2009, the DHSS recorded 24,370 illicit drug mentions during medical treatment admissions of Missouri residents to instate hospitals. In the diagnosis of 3,474 patients, cocaine was mentioned as a factor. Of all illicit drugs diagnosed in 2009, cocaine accounted for 14.3% of the total. It was the second most diagnosed drug associated with statewide hospital admissions in 2009.

Cocaine was a contributing factor for many persons seeking treatment for illicit drug abuse and dependency. Department of Mental Health states that in 2010, 29,922 clients were admitted to State-supported facilities for use of one or more illicit drugs. A total of 23,109 primary drug mentions were made by these clients. Cocaine was indicated by 2,708 clients as a contributor to their drug abuse problem. As a result, cocaine accounted for 11.7% of all primary drug mentions.

A disproportionately high number of females used cocaine compared to other major types of illicit drugs. In 2010, over one-third (39.8%) of the 2,708 clients having a cocaine dependency problem admitted to State-supported treatment programs were female (Table 1). Of the 2,708 clients, 59.9% were African American while 36.1% were Caucasian. Nearly all clients were 17 years of age or older (99.2%). Only 0.8% were 16 years of age or younger.

Compared to other illicit drugs, cocaine is a drug of choice by older adults in Missouri. The average age of clients receiving treatment for cocaine in 2010 was 30.5 years as compared to the 31.4 years for clients receiving treatment for other illicit drugs. In addition, clients with a cocaine problem first used it at an older age than clients first used other illicit drugs. The average age of clients' first use of cocaine was 24.7 years compared to 18.7 years for clients' first use of any illicit drug.

In the statewide survey of prevalence of drug use conducted by the DPS, respondents who have a friend, relative, or acquaintance who uses or sells any illegal drugs, 17.8% know they use or sell cocaine. In addition, 11.9% of the respondents have a friend, relative, or acquaintance that uses or sells crack. The survey also indicates cocaine / crack use is perceived to pose a great risk, physical or otherwise, to users. Of the respondents, 98.2% believe regular cocaine / crack use poses a great risk to users.

Trend analyses were conducted identifying patterns of cocaine use in Missouri over the past several years. When examining these trends, it is apparent that use of this drug may be on the decline. As seen in Figure 2, the number of persons admitted to hospitals diagnosed with a cocaine problem decreased 16.2% in 2007 (7,332), 37.9% in 2008 (4,555), and 23.7% in 2009 (3,474). The number of people seeking treatment in State-supported facilities for primary problems with cocaine also indicates a trend of decreasing cocaine use. Compared to the previous year, persons seeking cocaine treatment decreased 20.7% in 2008 (4,432), 23.9% in 2009 (3,373), and 19.7% in 2010 (2,708).

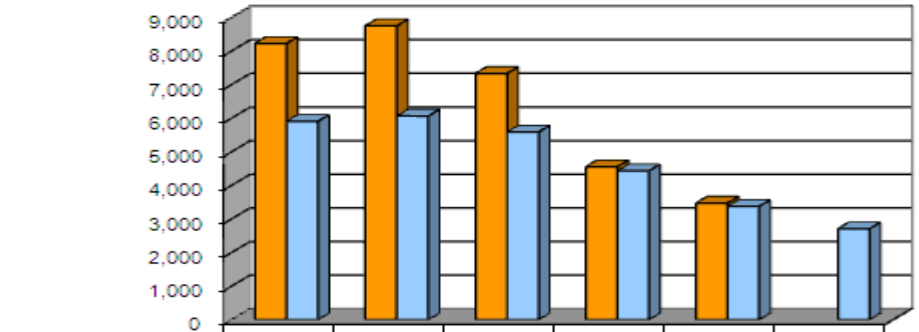
A regional analysis conducted of patients obtaining treatment for drug abuse at Missouri hospitals in 2009 found cocaine use to be proportionately greater in large urban MSAs. The greatest proportion of cocaine mentions in hospital admissions was in Columbia MSA counties (27.2%) followed by St. Louis MSA (18.8%) counties. Kansas City MSA counties had the next greatest proportion of cocaine mentions (18.1%) followed by Joplin (7.5), St. Joseph MSA (6.9%), Non-MSA (6.6%), and Springfield MSA (6.3%) counties.

An analysis of cocaine ingestion methods by clients receiving drug abuse treatment in 2010 at State-supported facilities indicated 80.8% smoked cocaine. Of these clients, another 13.0% inhaled it, 3.5% ingested it orally, and 2.7% injected it. Because crack cocaine is typically smoked, these proportions suggest the most common form of cocaine used by clients in treatment was crack cocaine.

A statewide survey conducted by the DESE indicates cocaine is used by a significant proportion of youth. The proportion of Missouri high school seniors who used cocaine in the past 30 days increased from 2.0% in 1995 to

4% in 1997 (Table 3). In 1999, the proportion rose significantly to 7.0%, but in 2001 and 2003 it decreased back to 2.0%. The proportion of high school seniors who used cocaine in the past 30 days increased to 3.6% in 2007 and lowered again in 2009 to 2.4%.

Figure 2
Cocaine Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	8,225	8,750	7,332	4,555	3,474	
Treatment Mentions	5,907	6,064	5,588	4,432	3,373	2,708

Table 3
Proportion Of Missouri High School Seniors
Who Used Cocaine In Past 30 Days
1993 Through 2009

1993	**2.0%**
1995	**2.0%**
1997	**4.0%**
1999	**7.0%**
2001	**2.0%**
2003	**2.0%**
2005	**2.1%**
2007	**3.6%**
2009	**2.4%**

Methamphetamine

Methamphetamine and amphetamine are frequently abused in Missouri. A total of 24,370 illicit drug mentions were recorded by the DHSS during admissions of Missouri residents to instate hospitals for medical treatment in 2009. In the diagnosis of 1,839 patients, methamphetamine and amphetamine were mentioned as a factor in 7.6% of all illicit drugs diagnosed in 2009. These drugs were the fourth most diagnosed drugs associated with statewide hospital admissions in 2009.

Methamphetamine and amphetamine were a contributing factor for people seeking treatment for illicit drug use. Department of Mental Health states that a total of 29,922 clients were admitted for use of one or more illicit drugs to State-supported facilities in 2010 and 23,109 primary drug mentions were made by these clients.

Methamphetamine and amphetamines contributed to the drug abuse problem of 4,073 clients, or 17.6% of all primary drug mentions.

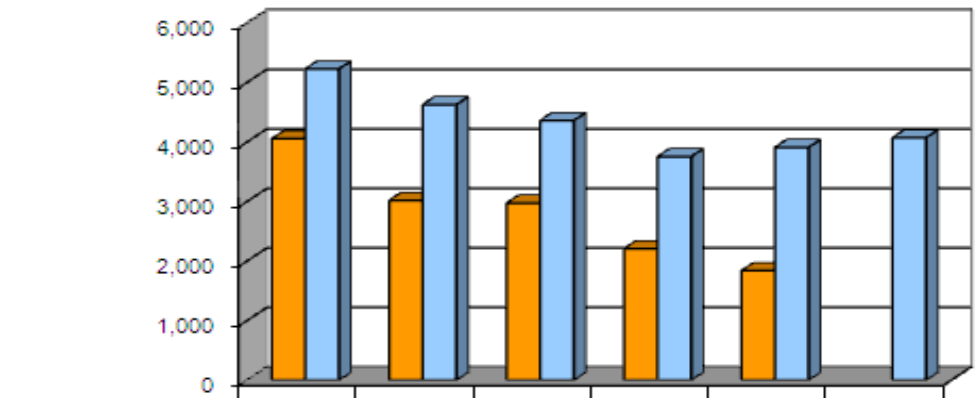
Of the 4,073 clients in treatment programs with methamphetamine or amphetamine problems, 55.8% were male and 44.2% were female (Table 1). Indications are methamphetamine and amphetamines are disproportionately used by Missouri's Caucasian adult population. Of the total clients, 95.2% were Caucasian, 1.5% were African American, and 3.3% were other races. Clients age 17 years and older accounted for 99.0% of all clients.

The average age of people seeking drug treatment for methamphetamine and amphetamine abuse in 2010 was slightly older than the average age of clients receiving treatment for other illicit drugs. The average age of clients receiving treatment for illicit drugs in 2010 was 30.5 years while the average age of clients with a methamphetamine or amphetamine problem was 32.9 years. Also, clients with a methamphetamine or amphetamine problem first used them at a slightly older age than clients first used any illicit drugs. The average age of clients' first use of methamphetamine or amphetamines is 20.6 years compared to 18.7 years for clients' first use of any illicit drug.

A statewide drug prevalence survey conducted by the DPS indicates methamphetamine is widely abused in Missouri. Of the survey respondents who have a friend, relative, or acquaintance who uses or sells any illegal drugs, 12.8% know they use or sell methamphetamine. This survey also indicates methamphetamine use is perceived to pose a great risk, or great risk physically or in other ways. Of the respondents, 99.0% believe regular methamphetamine use poses a great risk to users.

Methamphetamine and amphetamine use appears to be decreasing. The number of persons admitted to hospitals diagnosed with methamphetamine or amphetamine as a contributing factor declined from 4,055 in 2005 to 3,021 in 2006, a decrease of 25.5% (Figure 3). In the next three years methamphetamine and amphetamine continued to decrease. Use of these drugs decreased 1.5% from 2006 to 2007, followed by a 25.8% decrease in 2008 (2,209), and 16.7% decrease in 2009. The number of persons seeking primary drug treatment in State-supported facilities also indicates a decrease in the use of methamphetamine and amphetamines in recent years. Admissions decreased 11.5% to 4,630 in 2006, and 13.9% to 3,756 in 2008 (Figure 3). However, in 2009 the number of methamphetamine and amphetamine admissions increased to 3,912, an increase of 4.2%.

Figure 3
Methamphetamine Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	4,055	3,021	2,976	2,209	1,839	
Treatment Mentions	5,229	4,630	4,363	3,756	3,912	4,073

A regional analysis of patients obtaining treatment for drug abuse at Missouri hospitals in 2009 indicates the greatest number of methamphetamine mentions given in hospital admissions occurs in small urban MSAs and Non-MSAs. Joplin MSA patients sought treatment for methamphetamine most often (22.9%). Patients in Springfield MSA counties were next (11.9%), followed by patients in Kansas City MSA (11.2%), Non-MSA (10.1%), St. Joseph MSA (9.0%), Columbia MSA (4.4%), and St. Louis MSA (2.1%) counties.

An analysis was conducted of methamphetamine and amphetamine ingestion methods used by clients receiving drug abuse treatment in 2010 at State-supported facilities. Of the 4,073 clients having a problem with these drugs, 43.7% smoked methamphetamine or amphetamines, 40.7% injected the drugs, 10.2% inhaled them, 4.8% took methamphetamine or amphetamine orally, and 0.7% used other ingestion methods.

A statewide survey conducted in 2009 by the DESE indicates 4.8% of Missouri high school seniors have used methamphetamine one or more times during their life.

Heroin / Opiates

Heroin and opiate use is a serious problem in Missouri. In 2009, a total of 24,370 illicit drug mentions were recorded by the DHSS during hospital admissions of Missouri residents for medical treatment. In the diagnosis of 24,370 patients, heroin and opiates were mentioned as factors, and of all illicit drugs diagnosed in 2009, heroin and opiates accounted for 44.5% (10,837). These drugs were the most diagnosed drugs associated with statewide hospital admissions in that year.

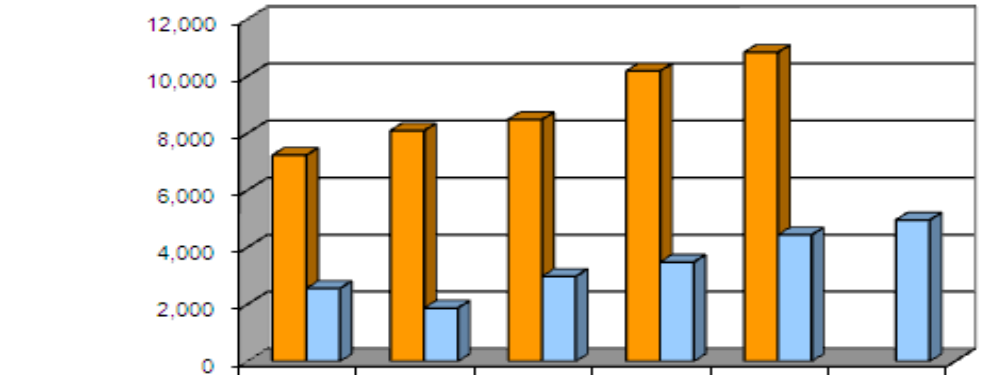
Heroin and opiates also were a significant contributing factor for people seeking treatment for illicit drug use. Department of Mental Health states that in 2010, 29,922 clients admitted to State-supported facilities had 23,109 primary drug mentions. Heroin and opiates contributed to the drug abuse problem of 4,955 clients, or 21.4% of all primary drug mentions (Table 1). Of the 4,955 clients in treatment programs with a heroin or opiate problem, 57.6% were male and 42.4% were female. In addition, 74.3% were Caucasian, 23.2% were African American, and 2.5% were American Indian or another race. Clients aged 17 years and older accounted for 99.1% of all clients while those 16 years or younger accounted for 0.9% of all clients. According to the National Institute on Drug Abuse19, the average age of heroin related deaths is 35. Caucasian males make up the biggest portion of heroin related deaths. Following Caucasian males are African males with the second biggest portion of heroin related deaths.

The average age of clients receiving treatment for heroin or opiates in 2010 was 31.5, only slightly older than that of clients receiving treatment for all drugs (30.5). However, clients with a heroin or opiate problem first used it at a much older age than clients first used other illicit drugs. The average age of clients' first use of heroin or opiates is 22.1 years compared to 18.7 years for clients' first use of all illicit drugs.

A statewide survey of drug use prevalence conducted by the DPS indicates many citizens are aware of persons that abuse heroin. Of the survey respondents who have a friend, relative, or acquaintance who uses or sells any illegal drugs, 4.4% know they use or sell heroin. The survey also indicates heroin use is perceived to pose a great risk, physical or otherwise, to users. Of the respondents, 96.5% believe regular heroin use poses a great risk to users.

When examining trends in heroin and opiate use, it is apparent that use of these drugs has continually increased in recent years. The number of persons admitted to hospitals diagnosed with heroin or opiates as a contributing factor increased, 4.8% in 2007, 20.1% in 2008, and 6.4% in 2009 (Figure 4). The number of persons receiving treatment in State-supported facilities for primary problems with heroin and opiates has also increased in recent years. In 2007, admissions rose 59.5% over 2006 admissions. Heroin and opiate treatments admissions continued to increase in 2008 (+16.7%) and 2009 (+27.4%). The number of persons receiving treatment for heroin or opiates increased 11.7% in 2010 to 4,955.

Figure 4
Heroin / Opiates Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	7,229	8,090	8,481	10,182	10,837	
Treatment Mentions	2,557	1,869	2,981	3,481	4,434	4,955

A regional analysis of persons obtaining illicit drug abuse treatment in 2009 at Missouri hospitals indicated the greatest number of heroin / opiate mentions given in hospital admissions in 2009 occurred in rural Non-MSAs and small urban MSAs. Springfield MSA patients mentioned heroin / opiates most often (50.5%). Patients in St. Louis MSA counties were next (49.9%), followed by Columbia MSA (42.7%), Non-MSA (44.6%), Kansas City MSA (35.9%), Joplin MSA (30.1%), and St. Joseph MSA (26.3%) counties.

Heroin and opiates ingestion methods used by clients receiving drug abuse treatment in 2010 at State-supported facilities were also analyzed. Of the 4,955 clients having a problem with these drugs, 49.5% injected heroin or opiates, 24.2% took the drugs orally, 22.3% inhaled heroin or opiates, 1.3% smoked them, and 2.7% used other ingestion methods.

A statewide survey conducted in 2009 by the DESE indicates a small but significant number of Missouri high school seniors have used heroin one or more times during their life. The proportion of seniors who used heroin increased to 3.1% in 2005 from 1.0% in 2003. This proportion has continued to increase as 4.8% of seniors in 2009 had used heroin one or more times in their lifetime.

Hallucinogens

Hallucinogens are abused in Missouri less than other illicit drugs discussed in this section. In 2009, a total of 24,370 illicit drug mentions were recorded by the DHSS during admissions of Missouri residents to instate hospitals. In the diagnosis of 102 patients, hallucinogens were mentioned as a factor. Of all illicit drugs diagnosed in 2009, hallucinogens accounted for 0.4% of the total. These drugs were the least diagnosed drugs associated with statewide hospital admissions.

Hallucinogens were a minor contributing factor for people seeking treatment for illicit drug use compared to other drugs. Department of Mental Health states that in 2010, 23,109 primary drug mentions were made by 29,922 clients admitted for use of one or more illicit drugs to State-supported facilities. Hallucinogens contributed to the drug abuse problem of 589 clients, or 2.5% of all primary drug mentions.

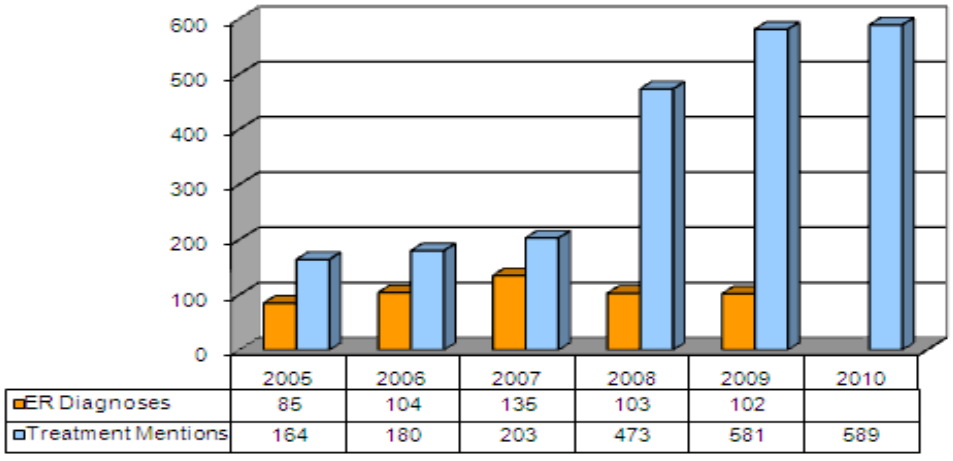
The average age of clients receiving treatment for illicit drugs in 2010 was 30.5 years while the average age of the 589 clients with a hallucinogen problem was 31.3 year. The average age of clients' first use of hallucinogens was 22.2 years compared to the average age of clients' first use of other drugs was 18.7 years.

The number of persons admitted to hospitals diagnosed with hallucinogens as a contributing factor has remained fairly constant during recent years, staying around 100 mentions each year (Figure 5). In 2007, however, hallucinogens peaked at 135 mentions. The number of persons admitted to State-supported facilities for treatment of primary problems with hallucinogens began an upward swing in 2006 that has continued through 2010. The greatest increases have been in the last two years. Compared to each previous year, hallucinogen mentions increased 133% in 2008 (473) and 22.8% in 2009 (581). In 2010 there was another increase of 1.4% (589).

A regional analysis of persons admitted to hospitals for illicit drug problems in 2009 indicated hallucinogen mentions given in hospital admissions in 2009 was found to be about the same in small and large urban MSAs and Non-MSAs. All MSAs recorded less than 1% of all patients admitted to hospitals for mentions of hallucinogens.

An analysis was conducted based on how hallucinogens were ingested by clients receiving drug abuse treatment in 2010 at State-supported facilities. Of the 589 clients having a problem with these drugs, 56.5% orally ingested them, 39.9% smoked them, 1.7% injected them, 1.9% inhaled them, and 0.0% administered these drugs by other means.

Figure 5
Hallucinogens Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	85	104	135	103	102	
Treatment Mentions	164	180	203	473	581	589

Other Illicit Drugs

Other specific illicit drugs are abused in Missouri less than those previously discussed except for hallucinogens. This general group of drugs includes inhalants, sedatives (including barbiturates), and tranquilizers (including benzodiazepines). In 2009, a total of 24,370 illicit drug mentions were recorded by the DHSS during admissions of Missouri residents to instate hospitals. In the diagnosis of 549 patients, drugs in this group were mentioned as a factor, or 2.3% of the total mentions. Barbiturates were mentioned as a factor in the diagnosis of 469 patients, or 1.9%, of all recorded illicit drug mentions.

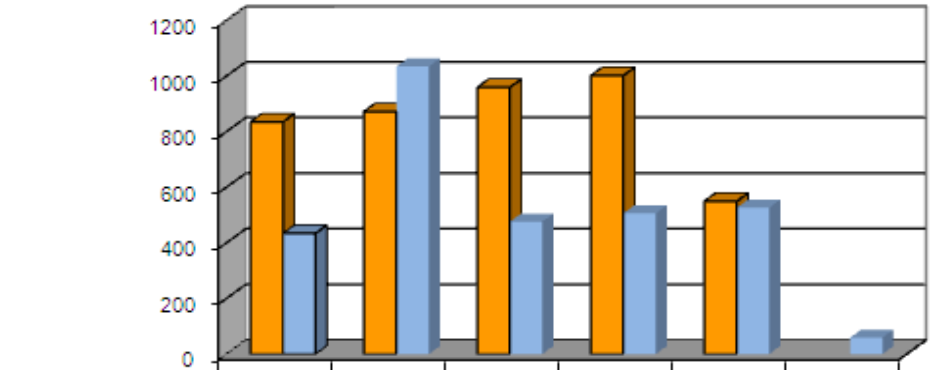
Drugs in this group were a less significant contributing factor for people seeking treatment for illicit drug use compared to marijuana, cocaine, or heroin and opiates. Department of Mental Health states that in 2010, 23,109 primary drug mentions were made by 29,922 clients admitted for use of one or more illicit drugs to State-supported facilities. These drugs contributed to the abuse problem of 59 clients, or 0.3% of all primary drug mentions.

The number of persons admitted to hospitals diagnosed with illicit drugs as a contributing factor increased from 2005 through 2008 and then decreased in 2009 (Figure 6). Most recently, the number of other drugs diagnosed in hospital admissions decreased 45.2% from 2008 (1,001) to 2009 (549). The number of persons seeking treatment in State-supported facilities for primary problems with these drugs appears to have reached a peak in 2006 and has remained fairly constant since. In 2006, the number of persons seeking treatment for other illicit drugs was 1,034, or 138.2% from 2005. But in 2007 the number of persons seeking treatment decreased 54.0% to 476 mentions. The numbers of persons has remained at similar levels through 2008 (506) and 2009 (526) but decreased by 88.7% in 2010 to 59 mentions.

The number of other drug mentions given in hospital admissions in 2009 was found to be disproportionately greater in small MSAs and Non-MSAs. Patients in St. Joseph MSA counties mentioned other drugs most often (36.5%). This was followed by Non-MSA (2.6%), Kansas City MSA (1.9%), Columbia MSA (1.9%), Joplin MSA (1.5%), Springfield MSA (1.2%) and St. Louis MSA (1.0%) counties.

A statewide survey conducted in 2009 by the DESE indicated of all high school seniors, 12.0% had used ecstasy, 4.5% had used illicit steroids, and 9.9% had used inhalants at least once in their lifetime.

Figure 6
Other Drug Abuse Emergency Room Diagnoses And Treatment Admission Mentions
2005 Through 2010



	2005	2006	2007	2008	2009	2010
ER Diagnoses	835	872	959	1,001	549	
Treatment Mentions	434	1034	476	506	526	59

IMPACT OF ILLICIT DRUG USE

Illicit drug use has a major impact on Missouri's criminal justice system. The enactment of legal sanctions for use of illicit drugs is one of the primary ways society attempts to control and reduce this problem. A substantial amount of resources and effort has been expended by the criminal justice system in detection, apprehension, conviction, and incarceration of illicit drug abusers as well as those associated with illicit drug industries. Illicit drug use also has an impact on the health care system, including hospitals and treatment centers in the State. Serious diseases and complications also can result from drug use such as AIDS.

Criminal Justice System

Since 2006, drug arrests in Missouri have continued to decrease (Figure 7). In 2007, the number of arrests decreased 12.0% from 2006. This was followed by an 8.4% decrease in 2008 (36,933) and a 2.7% decrease in 2009 (35,949), as compared to each previous year. Likewise, the drug arrest rate has continued to decrease since 2006 (Figure 8). In 2007, the drug arrest rate decreased to 693.7 per 100,000 population, a 12.0% decrease from the previous year. The arrest rates decreased 7.9% in 2008 (638.9) and 3.1% in 2009 (618.9). The arrest rate continued to decrease in 2010 (578.8) by 6.5%.

The number of possession and sale / manufacture drug arrests made by law enforcement agencies is indicative of the demand for illicit drugs. In 2010, 33,349 drug arrests were made by Missouri law enforcement agencies. Of these arrests, 28,542, or 85.6%, were for drug possession. Another 4,807 arrests (14.4%) were for sale or manufacture of drugs.

Figure 7
Number of Missouri Drug Offense Arrests
2005 Through 2010

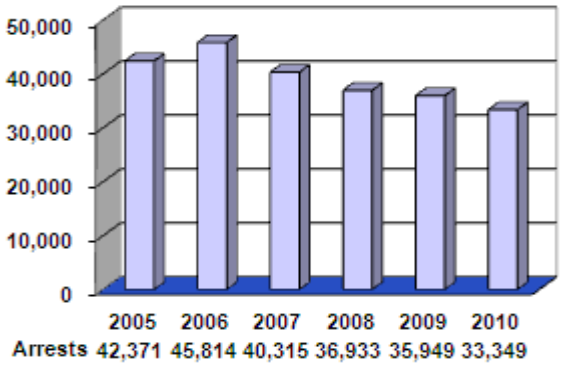
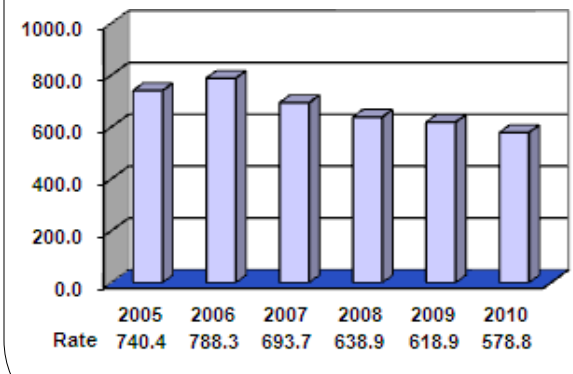


Figure 8
Rate of Missouri Drug Offense Arrests
2005 Through 2010



To support drug enforcement by the criminal justice system, a substantial number of cases were tested by Missouri crime laboratories to identify illicit drugs. An analysis of cases processed by Missouri crime laboratories identifies what proportion of their case load resulted in detection of illicit drugs. In 2010, 22,319 cases were processed in thirteen State crime laboratories. Of these cases, 20,992 (94.1%) resulted in detection of one or more illicit drugs. In 5.9% of the cases, no tests were made for illicit drugs or, if tests for illicit drugs were performed, none were found. Illicit drug case loads processed by Missouri crime laboratories have fluctuated over the past few years. Crime laboratory cases with identified illicit drugs increased 4.5% in 2004 from 2003 but since have decreased continually. Most recently, the number of cases with identified illicit drugs decreased 5.6% from 2008 to 2009 and has continued to decline in 2010 (Figure 9). In 2010, 23,162 drug mentions were made in the 22,319 crime laboratory cases which resulted in detection of one or more illicit drugs. Marijuana was the most frequent drug type mentioned, accounting for 37.0% of the total mentions (Figure10).

Figure 9
Cases Processed By Missouri Crime Laboratories
With Identified Drug
2004 Through 2010

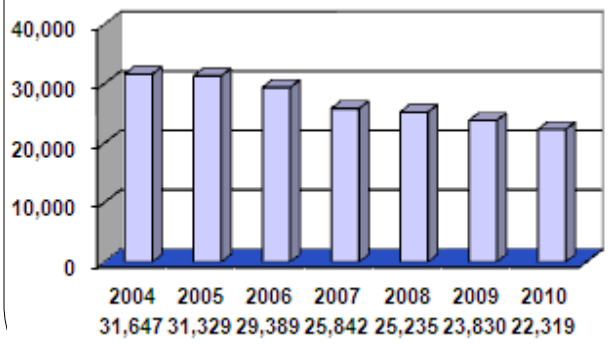
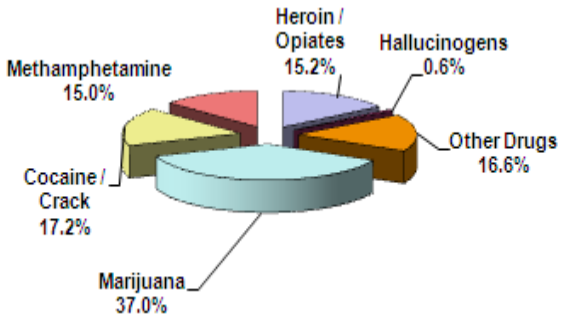
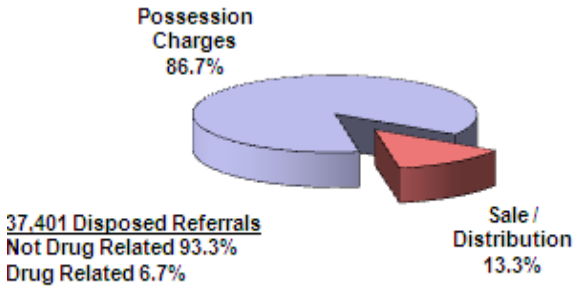


Figure 10
Illicit Drugs Identified In Missouri Crime Laboratory Cases
By Drug Type
FY 2010



Youth involvement with drugs is a serious problem for Missouri's juvenile justice system. Using data from the Juvenile Court Referral Information System, an analysis was conducted for juveniles receiving a final court referral disposition. Of the 37,401 disposed referrals in 2009, dangerous drug violations were associated with 2,498, or 6.7% (Figure 11). Of these dangerous drug law violation referrals, 86.7% were associated with possession of dangerous drugs and 13.3% were related to sale and distribution.

Figure 11
Missouri Juvenile Court Referral
2009



Dangerous drug referrals handled by the Missouri juvenile court system fluctuated from 2002 through 2006 but have decreased in the most recent years (Figure 12). Compared to each previous year, juvenile court referrals decreased 5.7% in 2007 and 9.7% in 2008. However in 2009, the dangerous drug referrals increased 1.1% since 2008. One of the most severe sanctions societies can impose on illicit drug users and illicit drug industry law violators convicted of such offenses is incarceration. In Missouri, a substantial amount of State penal institutions' resources and facilities have been devoted to incarcerating drug law violators. Of the 9,529 custody clients in 2010, 27.0% were incarcerated as a result of being convicted on one or more drug law violations. An examination of trends associated with incarcerating drug law violators indicates a significant decrease of drug law violators since 2007. Incarcerated drug violators decreased 31.5% from 6,153 in 2007 to 2,556 in 2008. The number of violators remained at about the same number in 2009 (2,627) as in 2008. In 2010, there were 2,657 new admissions, just thirty more than in 2009.

Figure 12
Missouri Juvenile Court Referrals For
Drug Related Law Violations
2003 Through 2009

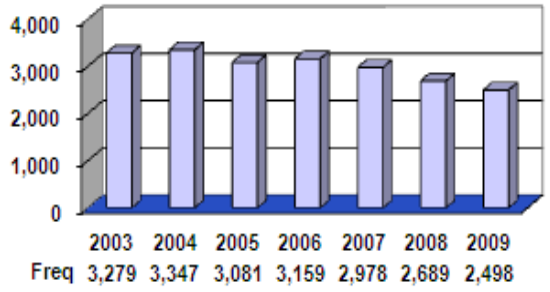
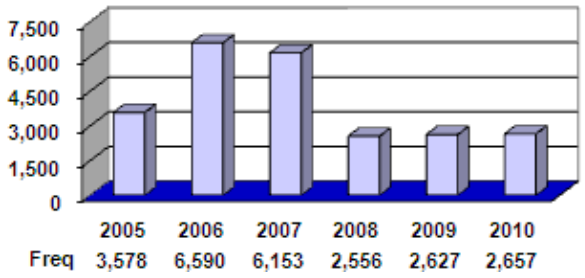


Figure 13
Department Of Corrections Clients
Sentenced For Drug Violations
2005 Through 2010



Health Care System

In many cases, illicit drug use results in adverse physical and psychological reactions causing the person to require medical treatment. To identify the impact on health care in Missouri, an analysis was conducted of data describing hospital admissions for illicit drug diagnoses. Of the 24,370 illicit drugs mention given in hospital admission diagnoses in 2009, heroin / opiate were most frequently mentioned and accounted for 44.5% of the total mentions (Figure 14). The next most frequently mentioned illicit drugs were cocaine (14.2%), marijuana (24.2%), and methamphetamine (7.6%).

To identify trends of the impact the State's health care system, an analysis was conducted on these same data. This analysis indicated that since 2006 the number illicit drug diagnoses in hospital admissions has decreased annually (Figure 15). Drug mentions decreased 1.3% in 2007 and also decreased 4.5% in 2008 as compared to each previous year.

Figure 14
Missouri Hospital Illicit Drug Mentions In Patient
Diagnoses By Drug Type
2009

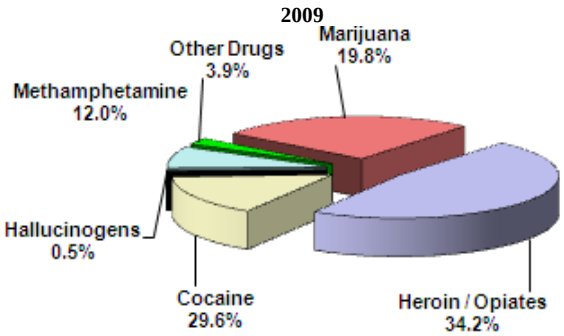


Figure 15
Diagnoses Of Illicit Drug Abuse In
Missouri Hospital Emergency Room Admissions
2005 Through 2009

Over time, drug dependency tends to impair users psychological well-being, adversely affects their interpersonal relationships, and dramatically reduces their ability to function as productive members of society. During 2010, 43 state-supported agencies operated approximately 260 treatment sites located throughout Missouri with programs designed to assist individuals break their cycle of drug dependency. In addition, a number of private institutions in the State provide similar types of programs. All State-supported programs treat persons having dependencies on alcohol, other legal drugs, and illicit drugs. In some cases, the individual may be dependent on more than one type of drug.

Certain types of illicit drug ingestion practices cause life threatening consequences to the drug abuser as well as other people they come in contact with. The intravenous injection of illicit drugs can transmit HIV and AIDS as well as a number of other serious diseases such as hepatitis. During 2009, 437 AIDS cases and 277 HIV cases were diagnosed in Missouri where intravenous drug use was suspected as the primary means of infection (Table 4). Another 420 AIDS cases and 218 HIV cases were diagnosed involving both male homosexual activity and drug use via injection.

There also have been serious indirect consequences resulting from the spread of HIV and AIDS through the intravenous use of illicit drugs. A substantial number of women and young men support their illicit drug habits through prostitution. When these persons contact HIV/AIDS through intravenous drug use, they transmit the disease to numerous sex partners they come in contact with. Sexual contact is another way this deadly disease is transmitted. In addition, a number of infected drug dealers who also are intravenous drug users frequently transmit the HIV virus. Persons come to them to acquire drugs and, rather than use money to obtain them, provide them with sexual favors.

Table 4
HIV / AIDS Cases Contracted By Intravenous Drug Use
2001 Through 2009

Year	IV Drug Use Cases		Homosexual IV Drug Use Cases	
	HIV	AIDS	HIV	AIDS
2001	392	680	265	794
2002	418	739	287	830
2003	422	762	264	844
2004	314	374	209	379
2005	316	390	209	395
2006	315	405	217	399
2007	302	418	220	405
2008	228	436	210	408
2009	277	437	218	420

ILLICIT DRUG INDUSTRY IN MISSOURI

Missouri has a substantial illicit drug industry. It not only supports illicit drug users in the State, but also involves exportation and distribution of illicit drugs on an interstate basis. A variety of data sources were used to assess Missouri's drug industries. Reliance was placed on existing law enforcement arrest and illicit drug activity information systems and quarterly program progress reports. Published federal and state law enforcement agency reports describing State illicit drug industries and results of a 2011 drug industry profile survey sent to multi-jurisdictional drug task forces (MJDTs) were also used.

Illicit drug industries involve manufacturing, cultivating, distributing, and marketing. Of the twenty-seven MJDTF contacts that responded to the 2011 drug industry survey, all stated these industries are a moderate or major problem in Missouri (Table 5). The most problematic drug industry identified in the survey is marijuana point-of-sale. The next two most problematic are methamphetamine production and interstate drug distribution / trafficking. Hallucinogen point-of-sale is the least most problematic drug industry in the State.

Specific industries in Missouri are discussed in this section, including marijuana cultivation; clandestine methamphetamine labs; interstate illicit drug distribution / trafficking; and distribution / point-of-sale illicit drug trafficking.

Table 5
Seriousness Of Specific Illicit Drug Industries In Missouri
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Drug Industry	Major Problem	Moderate Problem	Minor Problem	No Problem
Marijuana Cultivation	3.8%	65.4%	30.8%	0.0%
Methamphetamine Production	73.1%	19.2%	7.7%	0.0%
Interstate Drug Distribution / Trafficking	50.0%	50.0%	0.0%	0.0%
Point-Of-Sale Distribution				
Marijuana	73.1%	26.9%	0.0%	0.0%
Cocaine / Crack Cocaine	32.0%	44.0%	24.0%	0.0%
Methamphetamine	80.8%	19.2%	0.0%	0.0%
Heroin / Opiates	30.8%	34.6%	26.9%	7.7%
Hallucinogens	0.0%	11.5%	76.9%	11.5%
Ecstasy / Designer Drugs	0.0%	30.8%	69.2%	0.0%
Ilicit Pharmaceutical Drugs	61.5%	38.5%	0.0%	0.0%
Crack Cocaine Processing	26.9%	30.8%	34.6%	7.7%

Marijuana Cultivation

According to the 2009 National Survey on Drug Use & Health17 marijuana was used by 16.7 million persons in the past month. Marijuana refers to the leaves and flowering buds of cannabis sativa, commonly known as the hemp plant. This plant contains cannabinoids (THC) that are responsible for the psychoactive effects of cannabis. Several varieties of marijuana are grown in Missouri for commercial use. A substantial amount of marijuana, known as ditchweed or volunteer, grows wild in the State. These wild patches are harvested as opportunity presents itself. Normally, wild marijuana has relatively low THC levels and is not extremely potent. A number of trafficking groups operating outside the harvest area purchase or harvest wild marijuana and use it to dilute more potent varieties.

Cultivated marijuana is intentionally planted, cultivated, and harvested. Both male and female marijuana plants are grown to maturity and allowed to pollinate. This variety contains moderate levels THC and is considered fairly potent. Marijuana varies significantly in its potency, depending on the source and selection of plants. The form of marijuana known as sinsemilla is planted, cultivated, and harvested, but as part of the cultivation process, male plants are pulled from the patch when they start to mature. As a result, female plants are unable to pollinate and their THC levels dramatically increase. This type of plant is considered very potent and is in high demand. The cultivation of sinsemilla is associated with both outside and inside operations but is the predominant variety grown indoors. In 1974, the average THC content of illicit marijuana was less than one percent. For the year 2007 the average THC level contained almost 10 percent. Sinsemilla potency increased in the past two decades from 6% to more than 13%, and some samples contained THC levels of up to 33 percent.

Production of both cultivated and sinsemilla marijuana has fluctuated in Missouri during the past several years. In 2010, a total of 4,008 cultivated marijuana plants were destroyed by multi-jurisdictional drug task forces (Table 6). Historically, few sinsemilla plants are eradicated by MJDTFs but in 2003, 1,318 sinsemilla plants were destroyed.

Table 6
Eradication Of Cultivated And Sinsemilla Marijuana Plants
By Multi-Jurisdictional Drug Task Forces
Fiscal Years 2003 Through 2010

Year	Cultivated Plants	Sinsemilla Plants
2003	2,606	1,318
2004	1,949	51
2005	4,499	1
2006	6,011	168
2007	2,056	794
2008	2,429	414
2009	10,763	87
2010	4,008	259

Multi-jurisdictional drug task forces were asked to submit profiles on drug industries that were major or moderate problems in their jurisdiction. Of the twenty-six responding MJDTFs that indicated marijuana cultivation was either a major or moderate problem in their jurisdictions, 77.8% indicated marijuana is grown indoors in their jurisdictional area and 88.9% indicated it was grown outdoors. Much of the outdoor cannabis cultivation in the United States occurs where growers can take advantage of an areas remoteness to minimize the risk of asset forfeiture. The by-products of outdoor marijuana crops can potentially contaminate waterways or destroy vegetation and wildlife habitat through the use of chemical fertilizers and pesticides or from the trash and human waste left behind at large cultivation sites. Also worth noting is the potential danger of fires that are started to clear timber or ground cover to prepare cultivation sites. Of the MJDTFs indicating marijuana is cultivated outdoors in their jurisdictions, 75.0% reported marijuana is grown on river or stream banks (Table 7). Also, 68.8% reported marijuana is dispersed in natural or undisturbed fields and 56.3% reported marijuana is grown in government forests.

Potentially harmful situations are associated with indoor cultivation sites. Persons are exposed to increased risk of fire or electrocution from rewiring electrical bypasses in grow houses. They may also be exposed to toxic molds found in grow houses due to high levels of humidity. Of the MJDTFs indicating marijuana is cultivated indoors in their jurisdictions, 100.0% stated it is grown in residences, and 71.4% indicated it is grown in garages.

Table 7
Location of Outdoor and Indoor Marijuana Cultivation
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Outdoor Locations	
Natural / Undisturbed Fields	68.8%
Cultivated / Fallow Farmland	50.0%
River / Stream Banks	75.0%
Dispersed In Existing Crops	50.0%
Government Forest	56.3%
Along Railroad Lines	18.8%
Along Roadsides	18.8%
Other	12.5%
Indoor Locations	
Private Residences	100.0%
Garages	71.4%
Barns / Outbuildings	64.3%
Abandoned Buildings	35.7%
Other	7.1%

MJDTFs survey responses indicate marijuana is cultivated predominantly by Caucasians between the ages of 26 and 35. Of the MJDTFs indicating marijuana cultivation is a major or moderate problem, 94.4% indicated males were involved in this industry, 85.5% indicated Caucasians were involved, and 37.2% indicated persons aged 26 through 35 were involved (Table 8).

Of those MJDTFs indicating marijuana cultivation is a major or moderate problem, 16.7% indicated this industry is moderately organized (Figure 16). Another 55.6% of surveyed MJDTFs indicated marijuana cultivation is loosely organized or unorganized.

In over half (55.6%) of the areas served by MJDTFs marijuana cultivation is remaining constant. In other regions, however, those MJDTFs indicating this industry is a major or moderate problem, 44.4% indicate this industry has slightly increased (Figure 17).

Table 8
Demographic Characteristics of Persons Involved In Marijuana Cultivation
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**94.4%**
	Female	**0.0%**
	Both	**5.6%**
Race		
	Caucasian	**85.5%**
	African American	**2.8%**
	Hispanic	**11.9%**
	Asian	**0.3%**
	Other	**0.3%**
Age Group		
	17 & Under	**1.9%**
	18 - 25	**30.0%**
	26 - 35	**37.2%**
	36 - 50	**25.9%**
	Over 50	**6.0%**

Figure 16
Organization Levels Associated With Marijuana Cultivation
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

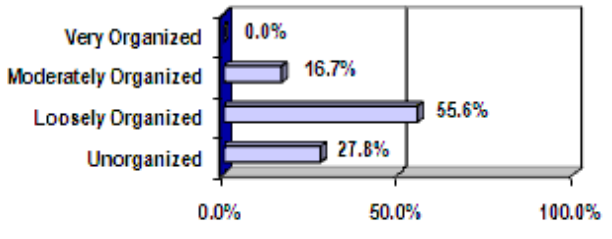
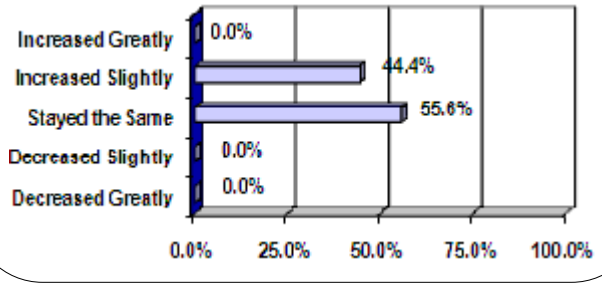


Figure 17
Trends of Marijuana Cultivation Industry
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Methamphetamine Clandestine Laboratories

Since the late 1990's, methamphetamine labs have created a problem for many communities across the United States. Not only is methamphetamine itself dangerous, but the methods of making methamphetamine are volatile, hazardous and toxic. The adoption of new processing methods has, no doubt, played a significant role in this increase. Five methods are typically used to produce methamphetamine in clandestine laboratories. Four of these methods involve chemical reduction of ephedrine / pseudoephedrine, but use different precursor chemicals. Mexican methamphetamine trafficking organizations typically utilize hydriodic acid and red phosphorous to reduce ephedrine / pseudoephedrine. When hydriodic acid supplies are limited, high quality methamphetamine is produced using iodine in its place. Another method, known as hypo-reduction, also uses iodine but with hypo-phosphorous acid in place of red phosphorous. This method is particularly dangerous due to the volatility of phosphine gas produced during the reduction process, and many times fires and explosions result. The Birch method utilizes anhydrous ammonia and sodium or lithium metal to reduce ephedrine or pseudoephedrine to produce high grade methamphetamine. This method can yield a finished product in two hours and requires no sophisticated equipment and many of the ingredients do not arouse suspicion when purchased in small quantities. The P2P is the one method of methamphetamine production that does not involve ephedrine or pseudoephedrine reduction. Rather, processing of principal chemicals including phenyl-2-propanone, aluminum, methylamine, and mercuric acid yields low quality methamphetamine. This method has been most commonly utilized by outlaw motorcycle gangs. There is another method of making methamphetamine that does not require a heating element or open flame. Ephedrine or pseudoephedrine tablets are crushed and combined with household chemicals and then shaken in a soda bottle. The chemical reaction that produces methamphetamine is known as the Shake and Bake method.

Threats posed by methamphetamine production equate those presented to users of this drug. In the production of methamphetamine, fire and explosion hazards typically occur due to the flammability of precursor chemicals. Environmental hazards occur as a result of improper storage or disposal of precursor chemicals in rivers, fields, and forests. Because clandestine laboratories are commonly constructed in private residences, exposure to toxic precursor chemicals can impact the health of the methamphetamine producers and their family members. Communities are affected by the aftermath and vacated remains associated with these laboratories. It is estimated that every pound of methamphetamine produced results in 5 to 7 pounds of toxic waste that create a severe environmental cost. Dump site chemicals contaminate water supplies, kill livestock, destroy forest lands, and render areas uninhabitable.

Nationally, methamphetamine clandestine laboratories are widely found throughout the Pacific, Southwest, and Central (including Missouri) regions of the country. Powdered methamphetamine is the most commonly found form although use of crystal methamphetamine, known as ice, is increasing in the Kansas City area.

From analyses based on multi-jurisdictional drug task force program progress reports, a substantial portion of this industry is centered in both urban and rural MSA regions of the State. During Fiscal Year 2010, 1,449 clandestine methamphetamine laboratories were destroyed by multi-jurisdictional drug task forces in Missouri. Of these, 30.0% were destroyed in St. Louis MSA counties. Another 54.7% of the clandestine methamphetamine labs were destroyed in the non-MSA counties, and 0.3% were destroyed in the Joplin MSA. Kansas City MSA counties accounted for 1.7% of the total destroyed clandestine methamphetamine labs, followed by Springfield MSA (4.7%), St. Joseph MSA (0.3%) and Columbia MSA (1.6%) counties.

In 2010, 1,960 methamphetamine clandestine laboratory seizures or dump sites of chemicals, equipment, or glassware were reported in Missouri. Figure 18 identifies the counties where these seizures occurred. There has been a high concentration of methamphetamine laboratory seizures in the southeast portions of the State as well as in the St. Louis area.

The number of methamphetamine clandestine laboratories seized by the statewide multi-jurisdictional drug task forces decreased from 2004 through 2008 but has shown a general trend of increased use in 2009 and 2010 (Figure 19). Seizures increased 26.4% in 2009 followed by an increase of 20.1% in 2010 as compared to each previous year.

Figure 18
Clandestine Methamphetamine Laboratory Seizures
By County and MSHP Troop
2010

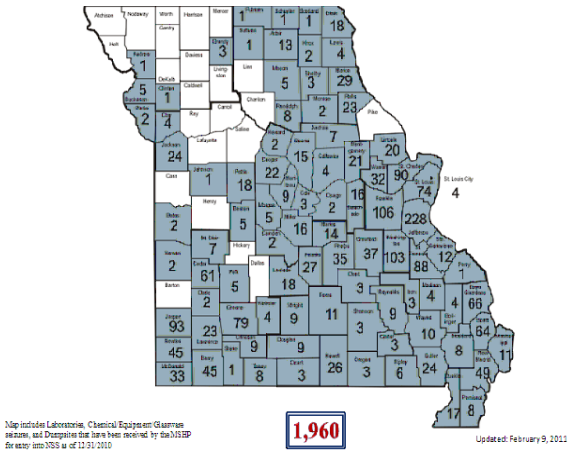
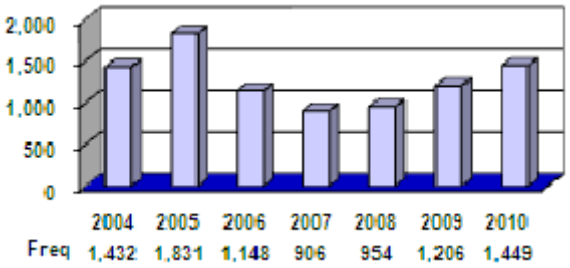


Figure 19
Clandestine Methamphetamine Laboratories Seized
By Multi-Jurisdictional Drug Task Forces
FY 2004 through FY 2010



An examination of Missouri crime laboratory case processing data suggests methamphetamine manufacturing has decreased in the State over the past few years. In 2010, Missouri crime laboratories processed only 426 clandestine lab cases in which methamphetamine final product, methamphetamine precursor chemicals, or both final product and precursor chemicals were detected (Table 9). This compares to a total of 1,307 such cases in 2002.

All MJDTFs that perceived this industry to be a major or moderate problem indicated methamphetamine labs are found indoors although 87.5% stated they are found outdoors as well. Several outdoor and indoor locations for methamphetamine laboratories were noted by the MJDTFs responding to the drug industry survey. All task forces indicated methamphetamine labs are found in vehicles (Table 10). Other common outdoor areas indicated by MJDTFs as methamphetamine lab sites are gravel roads and wooded areas or rural fields. All MJDTFs indicated indoor methamphetamine labs are found in single family residences and apartment / condominiums. Task forces also indicated common indoor sites for methamphetamine lab sites are garages, abandoned buildings, and hotels or motels.

Table 9
Cases with Methamphetamine Products And Precursors
Detected By Missouri Crime Laboratories
FY 2002 through FY 2010

Year		Product Only	Precursor Only	Both
2002	414	266	627	1,307
2003	373	190	570	1,133
2004	454	179	539	1,172
2005	417	190	576	1,183
2006	276	179	373	828
2007	109	99	199	407
2008	114	75	245	434
2009	104	93	250	447
2010	142	63	221	426

Table 10
Locations Used For Clandestine
Methamphetamine Production As Perceived By
Multi-Jurisdictional Drug Task Forces
2011

Outdoor Locations		
	Wooded Areas / Rural Fields	**90.5%**
	Campgrounds	**38.1%**
	River Banks / Accesses	**76.2%**
	Farmland 5	**4.2%**
	Caves	**23.8%**
	Public Parks	**47.6%**
	Gravel Roads	**90.5%**
	Vehicles	**100.0%**
	Government Forest	**47.6%**
	Other	**0.0%**
Indoor Locations		
	Hotels / Motels	**83.3%**
	Workplaces	**16.7%**
	Abandoned Buildings	**87.5%**
	Barns / Outbuildings	**79.2%**
	Garages	**91.7%**
	Single Family Residences	**100.0%**
	Apartments / Condominiums	**70.8%**
	Commercial Storage Unit	**29.2%**
	Other	**4.2%**

Task forces indicated participants in this industry use several methods to produce methamphetamine but most prefer the Birch reduction method. Of the MJDTFs indicating clandestine methamphetamine laboratories are a serious or moderate problem in their jurisdictions, 91.7% stated that Birch reduction method was the most used (Figure 20). In addition, all task forces indicated that powder methamphetamine is the most popular to produce.

In the 2011 drug industry survey, MJDTFs were asked what types of precursor chemicals are used in clandestine methamphetamine laboratories seized in their jurisdictions. Of the respondents indicating this industry is a major or moderate problem, all indicated ether, camping fuels / liquid, cold capsules /ephedrine, red devil lye and lithium batteries are most commonly used to produce the drug (Table 11).

Figure 20
Types of Chemical Processing Associated With Methamphetamine Production
As Perceived By Multi-Jurisdictional Drug Task Force
2011

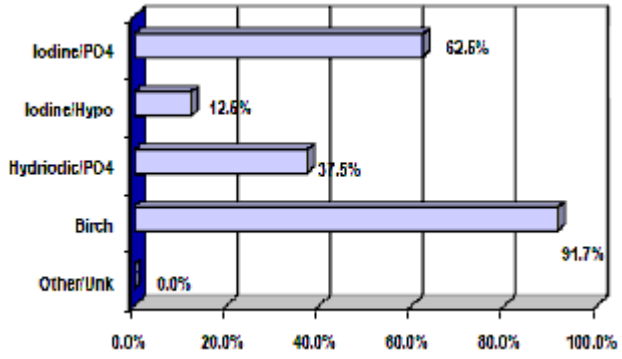


Table 11
Clandestine Methamphetamine Precursor Chemicals
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Precursor Chemicals	
Anhydrous Ammonia	87.5%
Ether / Starting Fluid	95.8%
Liquid Iodine	66.7%
Highway Flares	41.7%
Lithium Batteries	100.0%
Camping Fuels	100.0%
Cold Capsules / Ephedrine	100.0%
Organic Solvent	83.3%
Acids	91.7%
Red Devil Dye	100.0%
Hydrogen Peroxide	62.5%
Ammonia Sulfate	50.0%
Ammonia Nitrate	75.0%

The sources of precursor chemicals used to process methamphetamine in clandestine laboratories vary. Retail stores and drug stores are the most common source of precursor chemicals according to 95.8% of MJDTFs that indicated methamphetamine production is a major or moderate problem in their jurisdictions (Table 12). Other common sources of precursor chemicals identified by task forces include farm supply stores and chemical warehouses. Portable field tanks (72.7%) are the most common source of anhydrous ammonia identified by task forces with a major or moderate clandestine methamphetamine laboratory problem. Other anhydrous ammonia sources include farm co-ops (50.0%) or its home-made by methamphetamine cooks (50.0%).

Persons involved in producing methamphetamine are predominately both Caucasian males and females between the ages of 26 and 50. Of the MJDTFs stating this industry is a major or moderate problem in their jurisdictions, 70.8% indicated participants are male, 95.8% indicated participants are Caucasian, and 39.5% indicated their ages range from 26 through 35 (Table 13).

Table 12
Sources of Methamphetamine Precursor Chemicals
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Precursor Chemical Sources		Anhydrous Ammonia	
Mail Order	4.2%	Field Tanks	72.7%
Catalogs / Farm Supply	66.7%	Farm Supply Stores	13.6%
Stores / Veterinarian	12.5%	Farm Co-ops	50.0%
Suppliers / Retail	95.8%	Bulk Fertilizer Plants	31.8%
Discount Chemical Supply	8.3%	Poultry Processing Plants	0.0%
Hardware Warehouse	83.3%	Imported From Other States	13.6%
Drug Stores	95.8%	Home Made	50.0%
Overseas Pharmaceutical	4.2%	Other	0.0%
Other	0.0%		

Table 13
Demographic Characteristics of Persons Involved In Clandestine Methamphetamine Production As Perceived By Multi-Jurisdictional Drug Task Forces 2011

Gender		
	Male	**70.8%**
	Female	**0.0%**
	Both	**29.2%**
Race		
	Caucasian	**95.8%**
	African American	**0.9%**
	Hispanic	**3.1%**
	Asian	**0.4%**
	Other	**0.8%**
Age Group		
	17 & Under	**0.8%**
	18 - 25	**24.0%**
	26 - 35	**39.5%**
	36 - 50	**28.7%**
	Over 50	**6.8%**

One half of the task forces indicated persons in this industry are loosely organized (62.5%) and may share processing techniques or equipment (Figure 21). Another third (29.2%) of the respondent MJDTFs indicated participants in this industry are somewhat organized.

Clandestine methamphetamine production appears to be increasing in most regions of the State (Figure 22). Of the MJDTFs that indicated this industry is a moderate or major problem, over half of the MJDTFs (73.8%) indicated this industry had a recent slight or great increase in growth in their jurisdiction (Figure 22).

Figure 21
Organization Levels Associated With Clandestine Methamphetamine Production As Perceived By Multi-Jurisdictional Drug Task Forces 2011

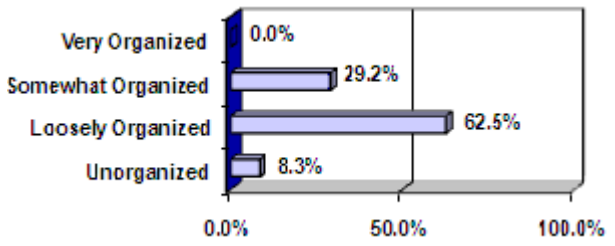
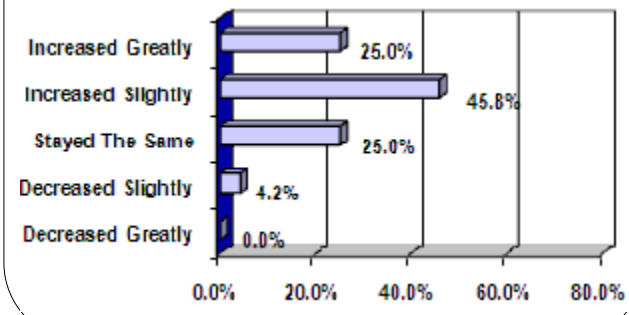


Figure 22
Trends of Clandestine Methamphetamine Production As Perceived By Multi-Jurisdictional Drug Task Forces 2011



Missouri Interstate Distribution Trafficking

Missouri serves as a conduit for transportation of significant amounts of illicit drugs between out-of-state points of origin and destination. Missouri's central location in the nation and extensive interstate roadway system increases its likelihood of being involved in illicit interstate drug trafficking.

Different transportation methods are used to move illicit drugs through Missouri. Illicit drugs primarily are moved by land and air. Roadways are utilized for interstate drug trafficking more extensively than other transportation systems. Both private individuals and commercial operators transport illicit drugs, sometimes knowingly and other times unknowingly. Marijuana is distributed / trafficked in all MJDTFs jurisdictions (Table 14). Other widely distributed / trafficked drugs identified by task forces were cocaine/crack cocaine (80.8%) and methamphetamine (84.6%).

Table 14
Types of Drugs Transported Across Missouri
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Cocaine / Crack	**80.8%**
Marijuana	**100.0%**
Methamphetamine	**84.6%**
Ecstasy / Designer Drugs	**42.3%**
Heroin / Opiates	**57.7%**
Pharmaceuticals	**23.1%**
Hallucinogens	**23.1%**
Khat	**7.7%**

MJDTFs were asked to identify vehicle types and transportation systems commonly used to transport illicit drugs across the State. Of the MJDTFs indicating interstate drug distribution / trafficking is a major or moderate problem, 92.3% stated drugs are transported by noncommercial vehicles on interstate roadways (Table 15). Other common vehicle types used for drug distribution / trafficking are commercial vehicles (69.2%) and mail couriers (65.4%).

Table 15
Vehicle Types Used To Transport Drugs Across Missouri
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Vehicle Type	
Non Commercial Vehicles	**92.3%**
Commercial Vehicles	**69.2%**
Mail Couriers	**65.4%**
Bus Lines	**11.5%**
Train Lines	**7.7%**
Commercial Airlines	**3.8%**
Private Airlines	**3.8%**

Interstate drug distribution / trafficking is conducted by both males and females of most races and age groups. Of the MJDTFs indicating this industry is a major or moderate problem, 42.3% indicated only males distribute / traffic drugs while 57.7% stated both males and females participate (Table 16). Of the MJDTFs with a moderate or major drug distribution / trafficking problem, 34.2% indicated Caucasians are participants and 37.2% stated Hispanics participate. Of these same MJDTFs, 43.8% indicated persons aged 26 through 35 were most commonly involved in this industry.

Table 16
Demographic Characteristics of Persons Involved In Interstate Drug Distribution / Trafficking As Perceived By Multi-Jurisdictional Drug Task Forces 2011

Gender		
	Male	**42.3%**
	Female	**0.0%**
	Both	**57.7%**
Race		
	Caucasian3	**4.2%**
	African American	**28.9%**
	Hispanic	**37.2%**
	Asian	**0.8%**
	Other	**0.8%**
Age Group		
	17 & Under	**2.7%**
	18 - 25	**27.3%**
	26 - 35	**43.8%**
	36 - 50	**21.6%**
	Over 50	**7.8%**

Interstate drug distribution is more organized than other illicit drug industries. Of the MJDTFs indicating interstate drug distribution is a major or moderate problem, 80.8% indicated this industry is very or somewhat organized. Also 34.6% of the MJDTFs stated that gangs are involved with interstate drug distribution / trafficking. Street gangs and ethnic / nationalist gangs were most associated with this industry.

According to Missouri drug task forces, interstate drug distribution / trafficking industry may be increasing in the State. Of the MJDTFs that believe this industry is a major or moderate problem in their jurisdictions, over half (53.9%) responded drug distribution / trafficking is slightly or greatly increasing (Figure 23). In addition, 53.8% of the responding task forces consider the purity of distributed / trafficked drugs to be staying the same while 42.3% believe purities of transported drugs are increasing (Figure 24).

Figure 23
Growth Trends Of Interstate Drug Distribution / Trafficking As Perceived By Multi-Jurisdictional Drug Task Forces 2011

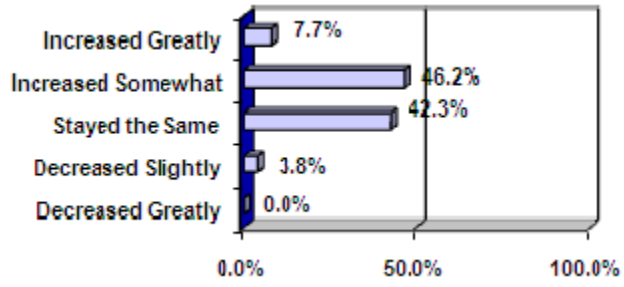
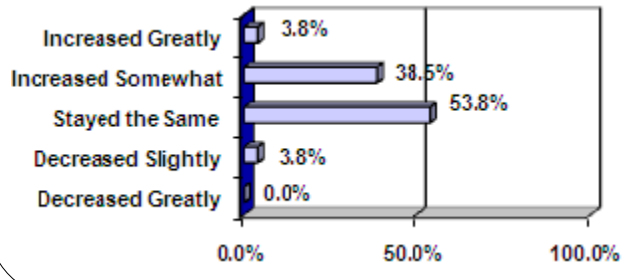


Figure 24
Purity Trends Of Interstate Drug Distribution / Trafficking As Perceived By Multi-Jurisdictional Drug Task Forces 2011



Distribution and Point-of-Sale Drug Trafficking

A large portion of Missouri's illicit drug industry is devoted to distributing and selling these products to individuals for their own consumption. Distribution and point-of-sale trafficking patterns vary by the type of illicit drug involved. Due to that fact, distribution and point-of-sale patterns for each major illicit drug used in Missouri are presented separately.

Marijuana

Marijuana is one of the most widely distributed and sold drugs in Missouri. Locally cultivated marijuana provides the bulk of the drug distributed and sold in the State and most traffickers prefer to distribute and sell cultivated marijuana, especially sinsemilla. The NDIC reports marijuana traffickers also distribute and sell bulk quantities of foreign marijuana, primarily grown in Mexico, Colombia, and Jamaica, that is transported from Southwestern United States. Mexican and Colombian marijuana entering southwestern U.S. cities (San Diego and Phoenix) is trafficked to Kansas City and on to other Missouri areas. St. Louis is a destination city for Jamaican marijuana.

Analyses of marijuana quantities seized by multi-jurisdictional drug task forces indicate this industry is substantial and law enforcement efforts to remove the drug are increasing dramatically (Table 17). In Fiscal Year 2008, 375,502 ounces of marijuana were seized compared to 179,389 ounces in Fiscal Year 2007. In Fiscal Year 2010, 177,414 ounces of marijuana were seized. This is an increase of 12.4% from 2009.

Table 17
Ounces of Drugs Seized By
Multijurisdictional Drug Task Forces
FY 2003 Through FY 2010

Fiscal Year	Marijuana	Cocaine	Crack	Meth	Heroin / Opiates	LSD	PCP	Ecstasy*
2003	167,457	5,166	353	2,324	8	24	54	6,435
2004	324,671	4,759	414	4,918	223	<1	50	459
2005	176,497	14,598	833	3,059	575	1	5	1,470
2006	311,138	14,232	5,919	3,200	1,331	8	535	1,743
2007	179,389	17,968	667	6,721	739	<1	531	11,440
2008	375,502	14,016	291	508	180	<1	275	13,195
2008	157,861	5,610	297	2,815	589	19	897	566
2010	177,414	3,235	192	1,895	67	63	569	3

All MJDTFs perceive point-of-sale marijuana to be a major or moderate problem in Missouri. Marijuana sales most commonly take place in homes or streets / parking lots. Private residences were identified by 100.0% of the MJDTFs as locations of marijuana sales while 88.0% identified streets / parking lots as locations (Table 18). Sale of marijuana from vehicles was noted by 92.0% of the MJDTFs.

Table 18
Location Of Marijuana Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**100.0%**
Streets / Parking Lots	**88.0%**
Vehicles	**92.0%**
Hotels / Motels	**80.0%**
Bars / Nightclubs	**68.0%**
Work Places	**56.0%**
Schools / Playgrounds	**36.0%**

Marijuana point-of-sale distribution is conducted by persons of both sexes and all age groups. Of the MJDTFs indicating this industry is a major or moderate, 41.7% indicated only males were involved (Table 19). These MJDTFs also indicated Caucasians are most commonly involved (47.6%), followed by African Americans (29.7%) and Hispanics (28.4%). Over one third (32.8%) of the responding MJDTFs identified persons aged 18 through 25 as participating in this industry and 36.3% stated persons aged 26 through 35 are involved.

Table 19
Demographic Characteristics Of Persons Involved In
Marijuana Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**41.7%**
	Female	**0.0%**
	Both	**58.3%**
Race		
	Caucasian4	**7.6%**
	African American	**29.7%**
	Hispanic	**28.4%**
	Asian	**0.4%**
	Other	**0.2%**
Age Group		
	17 & Under	**7.9%**
	18 - 25	**32.8%**
	26 - 35	**36.3%**
	36 - 50	**22.9%**
	Over 50	**4.2%**

According to Missouri drug task forces, marijuana sale / distribution is organized to some degree in all areas of the State. Of the MJDTFs indicating marijuana point-of-sale distribution is a major or moderate problem, over half (65.2%) indicated sellers were very organized or somewhat organized and another third (34.8%) indicated this industry is loosely organized (Figure 25). However, 88.5% of these MJDTFs indicated gangs are associated with marijuana sale and distribution.

Growth of this industry is increasing in some areas served by MJDTFs but remains constant in others. Of the MJDTFs indicating this industry is a major or moderate problem over one-half (70.9%) responded marijuana point-of-sale distribution is greatly or slightly increasing (Figure 26). Another 29.2% of these MJDTFs indicated this industry is remaining constant.

Figure 25
Organization Levels Associated With
Marijuana Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

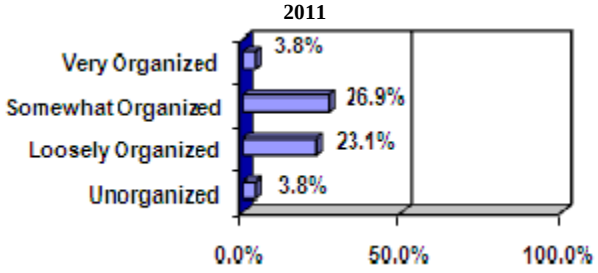
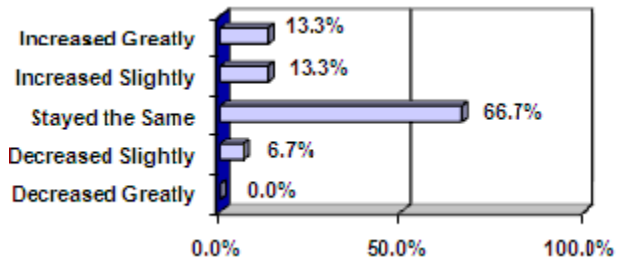


Figure 26
Growth Trends Of Marijuana Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Cocaine / Crack Cocaine

Cocaine is not produced in any significant amounts in the U. S. Instead, cocaine is extracted from the Erythroxylon bush that grows primarily in Columbia, Peru, and Bolivia. Once extracted from Erythroxylon leaves and processed, cocaine is smuggled overland through Mexico or by sea and air transport along eastern Pacific and western Caribbean maritime routes. According to the NDIC, cocaine smuggled overland through Mexico enters the U.S. through Texas, California, and Arizona ports of entry (POE). From these POE, cocaine then is transported to Atlanta, Chicago, Dallas, Houston, and New York. Cocaine smuggled via Caribbean maritime routes enters the U.S. in Miami and is transported to Atlanta, New York, and Philadelphia. Cocaine is smuggled throughout the U.S. from various distribution cities. A large portion of powder cocaine ending up in the Midwest, including Missouri, is distributed from Chicago, Houston, and Phoenix.

Analyses of cocaine quantities seized by multi-jurisdictional drug task forces indicate distribution of this drug is second only to marijuana. In Fiscal Year 2009, task forces seized 5,610 ounces of cocaine (Table 17). Smaller quantities of cocaine were seized by MJDTFs in Fiscal Year 2010 when 3,235 ounces were seized. This is a 42.3% decrease from 2009.

Cocaine distribution / point-of-sale of cocaine and crack cocaine occurs throughout Missouri. Of the MJDTFs that responded to the illicit drug industry survey, nearly all (76.0%) believe this industry is a moderate or major problem in their jurisdictions (Table 5). In the same survey, task forces indicated cocaine / crack are sold at many different locations. Of the MJDTFs indicating this industry was a major or moderate problem, 94.7% identified cocaine / crack sales commonly occur in private residences (Table 20). Other locations are streets / parking lots (94.7%) and from vehicles (84.2%).

Cocaine and crack cocaine are commonly distributed by African American males between the ages of 26 and 35. Of the MJDTFs that indicated these are major or moderate problems in their areas, over two-thirds (65.2%) reported African Americans participate in this industry (Table 21). A little over half of these task forces (56.6%) indicated only males participate, and 38.5% identified participants in this industry are between the ages of 26 and 35.

Table 20
Location Of Cocaine / Crack Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**94.7%**
Streets / Parking Lots	**94.7%**
Vehicles	**84.2%**
Hotels / Motels	**68.4%**
Bars / Nightclubs	**42.1%**
Work Places	**26.3%**
Schools / Playgrounds	**10.5%**

Table 21
Demographic Characteristics Of Persons Involved In
Cocaine / Crack Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**52.6%**
	Female	**0.0%**
	Both	**47.4%**
Race		
	Caucasian	**24.7%**
	African American	**65.2%**
	Hispanic	**10.0%**
	Asian	**0.8%**
	Other	**0.3%**
Age Group		
	17 & Under	**3.6%**
	18 - 25	**35.7%**
	26 - 35	**38.5%**
	36 - 50	**20.0%**
	Over 50	**2.7%**

Cocaine and crack cocaine distribution / point-of-sale trafficking is moderately to well organized in the State. Of the MJDTFs indicating this industry is a major or moderate problem, 64.7% indicated participants are somewhat organized and 17.6% indicated industry participants are very organized (Figure 27).

Many Missouri drug task forces believe cocaine / crack point-of-sale distribution to be increasing in the State. Over a third (44.4%) of MJDTFs respondents to the drug industry survey indicated cocaine and crack cocaine distribution / point-of-sale trafficking is slightly increasing in their jurisdictions while another 16.7% perceived this industry has greatly increased (Figure 28).

Crack is a crystal form of cocaine that can be converted from powder or rock cocaine with heat. Typically, precursor cocaine is heated on stove tops or in microwave ovens without flammable solvents. Crack processing is typically conducted late in the cocaine distribution process. Of the MJDTFs that indicated cocaine / crack cocaine point-of-sale distribution was a major or moderate problem, 76.0% indicated crack processing was a major or moderate problem in their jurisdictions (Table 5). Of these MJDTFs, 93.3% indicated powder cocaine was the precursor to crack and 20.0% indicated rock cocaine was a precursor.

Figure 27
Organization Levels Associated With
Cocaine / Crack Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

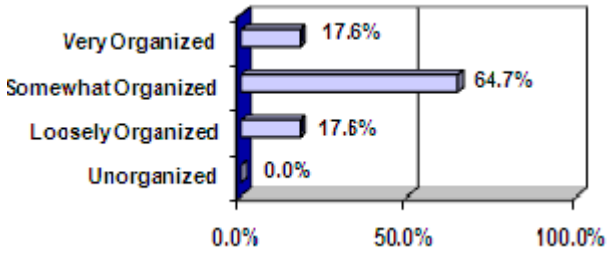
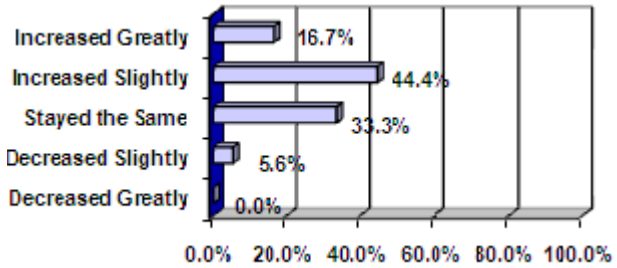


Figure 28
Growth Trends Of Cocaine / Crack Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Crack cocaine processing is most commonly conducted in industry participants' homes. Of the MJDTFs that believe this industry is a major or moderate problem, 100.0% indicated crack processing occurs in single family residence and 80.0% indicated it occurs in apartments or condominiums (Table 22).

Table 22
Location Of Crack Cocaine Processing
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Single Family Residences	**100.0%**
Apartments / Condominiums	**80.0%**
Hotels / Motels	**46.7%**
Work Places	**6.7%**
Abandoned Buildings	**6.7%**
Garages	**6.7%**

In Missouri, cocaine is processed into crack cocaine by young to middle-aged African American males. Of the MJDTFs indicating this industry as a major or moderate problem, 73.3% identified males as participants in crack cocaine processing and 93.7% identified African American participants (Table 23). Nearly one-half (42.7%) of these task forces indicated persons aged 26 through 35 are involved.

Crack processing in Missouri is moderate to well organized according to drug task forces. Of the MJDTFs identifying this industry as a major or moderate problem, 46.7% indicated participants are somewhat organized (Figure 29). These task forces also indicated gangs are involved to some extent in crack processing. Of the MJDTFs indicating this industry is a major or moderate problem, 33.3% stated gangs are involved in crack processing and 100% of the task forces identified street gangs forces to be involved with crack processing.

Crack cocaine processing appears to be increasing in some parts of the State. Of the MJDTFs indicating this industry is a major or moderate problem, 66.7% responded it stayed constant while 26.6% of the MJDTFs indicated the industry increased in their jurisdictions (Figure 30).

Table 23
Demographic Characteristics Of Persons Involved In Crack Processing
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**73.3%**
	Female	**0.0%**
	Both	**26.7%**
Race		
	Caucasian	**6.2%**
	African American	**93.7%**
	Hispanic	**1.7%**
	Asian	**0.0%**
	Other	**0.1%**
Age Group		
	17 & Under	**1.1%**
	18 - 25	**44.3%**
	26 - 35	**42.7%**
	36 - 50	**12.2%**
	Over 50	**1.4%**

Figure 29
Organization Levels Associated With
Crack Cocaine Processing
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

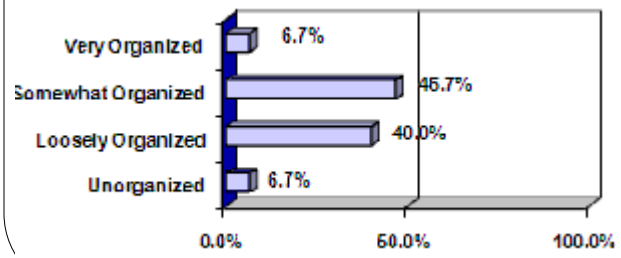
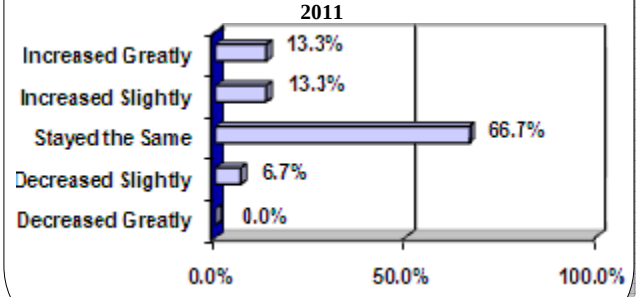


Figure 30
Growth Trends Of Crack Cocaine Processing
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Methamphetamine

The distribution and point-of-sale of methamphetamine, along with its related industry (methamphetamine clandestine laboratories), are two of the most widespread illicit drug industries in the State. According to the NDIC, Missouri is one of several central U.S. states that is a primary market area for the drug and methamphetamine manufactured in Missouri is distributed regionally and to other parts of the country. Also, the NDIC has reported increasing trafficking of methamphetamine produced in Southern California and Mexico to Kansas City and St. Louis by Mexican criminal groups.

Analyses of methamphetamine amounts seized by multi-jurisdictional task drug force investigations indicate distribution of this drug is significant in Missouri, but may be decreasing. From Fiscal Years 2003 through 2004, seized ounces of methamphetamine increased from 2,324 to 4,918 but decreased in 2005 and 2006 (Table 17). Seizures of methamphetamine again increased in 2007 when 6,721 ounces was taken. Seized methamphetamine decreased to 508 ounces in 2008 but increased to 2,816 ounces in 2009. Seizures of methamphetamine also decreased in 2010 to 1,895 ounces. Except for 2008, seized doses of pseudoephedrine, a common methamphetamine precursor, have continually

decreased since 2004 (Table 24). This decrease is probably a result of State legislation enacted in 2005 that limits purchases of only 9 mg (30 tablets) of pseudoephedrine per month. Seizures of anhydrous ammonia, another precursor of methamphetamine, decreased in 2009 when only 119 gallons were seized compared to 2008 when 3,928 gallons of anhydrous ammonia were seized. Gallons of seized anhydrous ammonia increased in 2010 to 293 gallons.

Methamphetamine point-of-sale distribution is a serious problem in the State. Of all responding MJDTFs, 100.0% stated this industry is a major or moderate problem in their jurisdictions (Table 5). These task forces indicated methamphetamine is distributed at many locations. Of the MJDTFs that indicated this industry is a major or moderate problem, 96.2% identified private residences as point-of-sale locations (Table 25). Other common methamphetamine distribution locations identified by MJDTFs included sales from vehicles and on streets / parking lots.

Task force survey results indicate Caucasian males and females are typically involved in distributing and selling methamphetamine. Of the MJDTFs indicating this industry is a major or moderate problem, 78.8% indicated participants in this illicit industry were Caucasian (Table 26). These task forces also indicated methamphetamine distributors are typically between the ages of 18 and 35. Of the task forces stating this industry is a major or moderate problem in their jurisdiction, 37.9% stated participants are between the ages of 26 and 35 and 31.9% stated they are aged 18 through 25.

Table 24
Doses of Drugs Seized By
Multijurisdictional Drug Task Forces
FY 2003 through FY 2010

Fiscal Year	Heroin / Opiates	LSD	PCP	Ecstasy	Gallons Pseudo Ephedrine	Anhydrous Ammonia	Other Drugs
2003	246	1,325	0	4,149	655,279	3,251	14,473
2004	73	259	0	17,695	896,015	1,779	10,371
2005	1,569	1,134	82	4,559	67,065	2,114	25,604
2006	1,111	710	40	19,579	48,418	1,631	65,310
2007	1,419	573	215	11,440	10,222	2,205	16,607
2008	983	174	42	13,195	50,957	3,928	11,330
2009	1,249	294	1	20,332	14,009	119	23,964
2010	3,901	805	6	14,305	14,322	293	8,248

Table 25
Location Of Methamphetamine Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	96.2%
Vehicles	92.3%
Streets / Parking Lots	76.9%
Hotels / Motels	69.2%
Work Places	46.2%
Bars / Night Clubs	57.7%
Schools / Playgrounds	19.2%

Table 26
Demographic Characteristics Of Persons
Involved In Methamphetamine Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**32.0%**
	Female	**0.0%**
	Both	**68.0%**
Race		
	Caucasian	**78.8%**
	African American	**3.7%**
	Hispanic	**19.3%**
	Asian	**0.0%**
	Other	**0.2%**
Age Group		
	17 & Under	**2.5%**
	18 - 25	**31.9%**
	26 - 35	**37.9%**
	36 - 50	**23.5%**
	Over 50	**5.0%**

The level of organization associated with methamphetamine point-of-sale distribution in Missouri varies from loosely organized to very organized. Of the MJDTFs identifying this industry as a major or moderate problem, over half (61.6%) indicated participants are somewhat to very organized and (38.5%) indicated participants are loosely organized (Figure 31). Several gangs are involved with this industry according to the surveyed task forces. Of the MJDTFs that responded methamphetamine point-of-sale distribution is a major or moderate problem in their jurisdictions, 60.0% stated motorcycle gangs are involved in this industry. Another 46.7% stated street gangs are involved and 26.7% stated ethic / nationalist gangs participate.

Methamphetamine point-of-sale distribution is increasing throughout the State. Of the MJDTFs indicating this industry is a major or moderate problem, 77.0% noted it has slightly or greatly increase (Figure 32).

Figure 31
Organization Levels Associated With Methamphetamine
Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

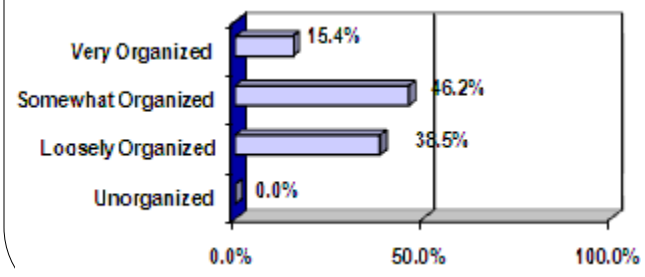
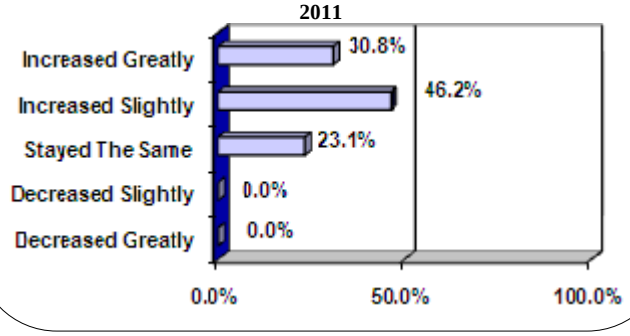


Figure 32
Growth Trends Of Methamphetamine
Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Heroin / Opiates

Like cocaine, heroin and its derivatives are imported into Missouri for distribution / point-of-sale. Most heroin entering the U.S. originates from South America and Mexico, and is smuggled into the U.S. via ports of entry along the Mexico border. This heroin is then transported directly to U.S. cities for further distribution. Heroin also originates from Southwestern and Southeastern Asia and is usually smuggled into the U.S. east and west coast cities via commercial air carriers. It is then transported to regional distribution centers. Asian heroin entering Missouri generally is distributed from Chicago.

Analyses of heroin / opiate quantities seized by multi-jurisdictional drug task forces indicate distribution of these drugs is limited in Missouri compared to marijuana, cocaine, or methamphetamine. In Fiscal Year 2010, task forces seized 67 ounces of heroin / opiates (Table 17), a significant decrease from 2009 when 589 ounces of heroin were seized. The greatest amount of heroin recently seized was in Fiscal Year 2006 when 1,331 ounces of heroin / opiates were seized. Doses of heroin seized increased 27.1% from 983 doses in 2008 to 1,249 doses in 2009 (Table 24).

An analysis of industry profiles conducted by multi-jurisdictional drug task forces indicates heroin / opiates distribution and point-of-sale is a problem in specific regions. Of the surveyed MJDTFs, more than half (65.4%) responded this industry is a major or moderate problem (Table 5). Sale of heroin / opiates are limited to several common locations according to the surveyed task forces. Of the MJDTFs that regard this industry as a major or moderate problem, 100.0% indicate sales occur in private residences. These task forces also identified sales commonly occur from vehicles and on streets / parking lots (Table 27).

Table 27
Location Of Heroin / Opiates Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**100.0%**
Vehicles	**88.9%**
Streets / Parking Lots	**77.8%**
Bars / Night Clubs	**50.0%**
Hotels / Motels	**55.6%**
Work Places	**38.9%**
Schools / Playgrounds	**33.3%**

Persons involved with heroin / opiates point-of-sale distribution are typically whites or blacks over 17 years of age. Of the MJDTFs identifying this industry as a major or moderate problem, 55.6% stated that both males and females were involved (Table 28). In addition, almost half (40.0%) of these task forces indicated Caucasians are involved and half (50.0%) indicated African Americans are involved. Persons aged 18 through 35 were identified as industry participants by 77.9% of the MJDTFs.

Table 28
Demographic Characteristics Of Persons
Involved In Heroin / Opiates Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**44.4%**
	Female	**0.0%**
	Both	**55.6%**
Race		
	Caucasian	**40.0%**
	African American	**49.9%**
	Hispanic	**9.0%**
	Asian	**0.5%**
	Other	**0.4%**
Age Group		
	17 & Under	**4.8%**
	18 - 25	**39.3%**
	26 - 35	**38.6%**
	36 - 50	**16.0%**
	Over 50	**1.2%**

Multiple levels of organization are associated with heroin / opiates point-of-sale distribution in Missouri. Of the MJDTFs identifying this industry as a major or moderate problem, 56.3% indicated heroin / opiates point-of-sale distribution is very organized to somewhat organized (Figure 33). Another 37.5% of these MJDTFs stated this industry is loosely organized and 6.3% indicated the industry is unorganized. Street gangs and ethnic / nationalist gangs are involved in this industry according to all MJDTFs with a major or moderate heroin / opiate point-of-sale distribution problem.

Generally this industry is increasing in those areas where it already is a major or moderate problem. Of the MJDTFs indicating heroin / opiates point-of-sale distribution is a major or moderate problem, 77.8% noted the industry has increased (Figure 34). However 16.7% of the MJDTFs indicated the industry remained the same in their jurisdictions.

Figure 33
Organization Levels Associated With Heroin / Opiates Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

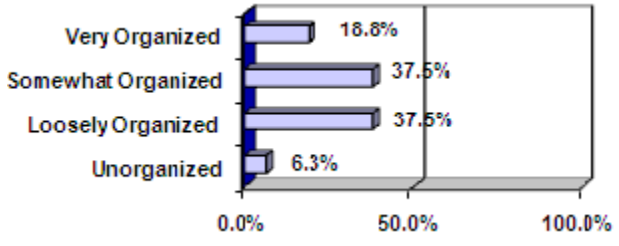
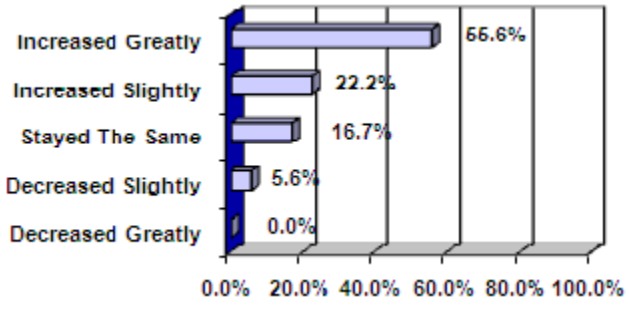


Figure 34
Growth Trends Of Heroin / Opiates Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Hallucinogens

LSD (lysergic acid diethylamide) and PCP (phencyclidine) are the more commonly abused hallucinogens in Missouri. The NDIC reports LSD is produced by a small network of chemists located in California and the Pacific Northwest. LSD is produced less extensively throughout the country by individuals. It typically is sold in crystal, tablet, or liquid forms. Liquid LSD is ingested in sugar cubes, gelatin squares, or blotter paper available in single to multi-thousand dosage units. The NDIC reports PCP is produced by California street gangs. PCP encountered in Missouri is sold as PCP laced cigarettes, cigars, or marijuana as well as in liquid, tablet, and powder forms.

An analysis of LSD and PCP quantities seized by multi-jurisdictional drug task forces indicates distribution of these drugs is not widespread in Missouri. In Fiscal Year 2010, task forces seized 569 ounces of PCP and 63 ounces of LSD (Table 17). The number of doses of hallucinogenic drugs seized by MJDTFs increased in 2010 to 805 doses compared to 294 in 2009, a 173.0% rise (Table 24).

Of the MJDTFs responding to a drug industry survey, only 11.5% identified hallucinogen point-of-sale distribution as a major or moderate problem in their jurisdictions (Table 5). These task forces also stated hallucinogens are sold primarily from private residences, streets / parking lots, and vehicles. Of the MJDTFs with a major or moderate problem with this industry, 100.0% stated hallucinogens are sold from private residences (Table 29).

Hallucinogen dealers are typically younger white males and females. Of the MJDTFs indicating hallucinogen point-of-sale distribution is a major or moderate problem, all stated either males or males and females are involved in this industry (Table 30). Nearly all (83.3%) of these task forces indicated industry participants are Caucasian and (71.7%) indicated participants are between the ages of 18 and 25.

Hallucinogens point-of-sale distribution is not widespread in Missouri and loosely organized. Twenty-five percent of the MJDTFs that indicted this industry is a major or moderate problem in their jurisdictions also indicated this industry is somewhat organized. Street gangs were reported to be involved in this industry by 60.0% of these task forces and outlaw motorcycle was identified to be involved by 40.0%. Although it is not known if gang involvement is specific to LSD or PCP point-of-sale distribution, it is conceivable that one gang type is associated with LSD and another with PCP.

Hallucinogens point-of-sale distribution does not appear to be increasing in Missouri. Of the MJDTFs that indicated this industry is a major or moderate problem, 77.8% responded this illicit industry has remained constant (Figure 35).

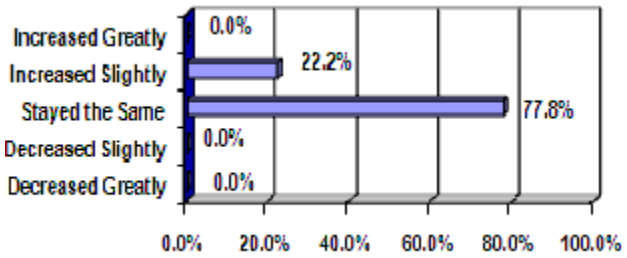
Table 29
Location Of Hallucinogens Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**100.0%**
Vehicles	**54.5%**
Streets / Parking Lots	**36.4%**
Bars / Night Clubs	**18.2%**
Hotels / Motels	**18.2%**
Work Places	**27.3%**
Schools / Playgrounds	**27.3%**

Table 30
Demographic Characteristics Of Persons
Involved In Hallucinogens Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**66.7%**
	Female	**0.0%**
	Both	**33.3%**
Race		
	Caucasian	**83.3%**
	African American	**6.6%**
	Hispanic	**8.3%**
	Asian	**1.6%**
	Other	**0.0%**
Age Group		
	17 & Under	**11.6%**
	18 - 25	**71.7%**
	26 - 35	**15.0%**
	36 - 50	**1.7%**
	Over 50	**0.0%**

Figure 35
Growth Trends Of Hallucinogens Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Ecstasy

According to the NDIC ecstasy use in the country has increased in recent years. Ecstasy is a stimulant with mild hallucinogenic properties taken orally in tablet or capsule form. According to the DEA, clandestine laboratories in rural areas of the Netherlands and Belgium produce approximately 80 percent of ecstasy consumed worldwide. Other countries where laboratories have been found include Canada, Australia, Germany, and several Eastern European countries. Ecstasy is smuggled into New York, Los Angeles, and Miami on commercial airlines from Europe, Canada, and Mexico. From these U.S. cities, it is distributed to other states by couriers on domestic commercial flights or mail / package services.

An analysis of ecstasy and designer drugs seized by MJDTFs indicates distribution of these drugs is increasing in Missouri. A very large seizure (Table 17) of 36,613 ounces of ecstasy was made in Fiscal Year 2005. In Fiscal Year 2010, only 3 ounces of ecstasy were seized by drug task forces. A large seizure 14,305 doses of ecstasy was made in Fiscal Year 2010 (Table 24). This was an decrease of 29.6% from Fiscal Year 2009 when 20,332 doses of ecstasy was seized.

In an industry profile survey completed by multi-jurisdictional drug task forces, 30.8% of the respondents reported ecstasy was a major or moderate problem in their jurisdictions (Table 5). These task forces also stated that ecstasy is most commonly sold from private residences, vehicles, or streets and parking lots. Of the MJDTFs that stated a major or moderate problem with this industry, 91.7% indicated ecstasy was sold from private residences and 83.3% indicated it was sold from vehicles (Table 31).

Most MJDTFs survey respondents reported ecstasy is distributed by young white adults. Of the MJDTFs indicating ecstasy point-of-sale distribution is a major or moderate problem, (63.6%) identified both males and females as industry participants (Table 32). Over half (63.8%) of these task forces identified Caucasians as participants and 79.3% identified persons aged 25 or younger were involved in ecstasy point-of-sale distribution.

Point-of-sale distribution of ecstasy / designer drugs is not a very organized industry in Missouri. Of the MJDTFs noting this industry as a major or moderate problem, only 11.1% indicated the industry is somewhat organized while 88.9% indicated ecstasy / designer drugs point-of-sale distribution is loosely organized or unorganized (Figure 36). Of the MJDTFs stating this industry is a major or moderate problem in their jurisdictions, 60.0% indicated street gangs were involved, 20.0% identified ethnic / nationalist gangs as participants, and 40.0% stated outlaw motorcycle gangs were involved.

Ecstasy / designer drugs point-of-sale distribution appears to be increasing in Missouri. Over half (72.7%) of the MJDTFs with a major or moderate problem with this industry stated it has remained the same (Figure 37).

Table 31
Location Of Ecstasy / Designer Drug
Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**91.7%**
Bars / Night Clubs	**58.3%**
Vehicles	**83.3%**
Streets / Parking Lots	**66.7%**
Hotels / Motels	**58.3%**
Work Places	**25.0%**
Schools / Playgrounds	**25.0%**

Table 32
Demographic Characteristics Of Persons
Involved In Ecstasy / Designer Drugs
Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**36.4%**
	Female	**0.0%**
	Both	**63.6%**
Race		
	Caucasian	**63.8%**
	African American	**26.3%**
	Hispanic	**8.7%**
	Asian	**0.6%**
	Other	**0.6%**
Age Group		
	17 & Under	**15.6%**
	18 - 25	**63.7%**
	26 - 35	**16.2%**
	36 - 50	**4.3%**
	Over 50	**0.0%**

Figure 36
Organization Levels Associated With
Ecstasy / Designer Drugs Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

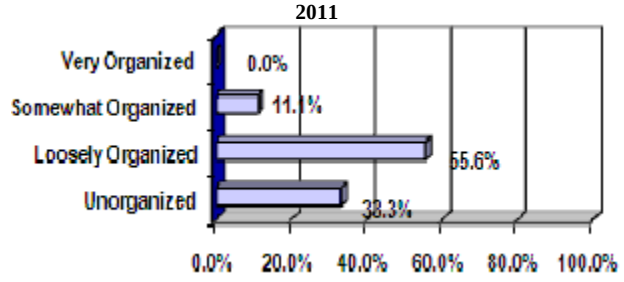
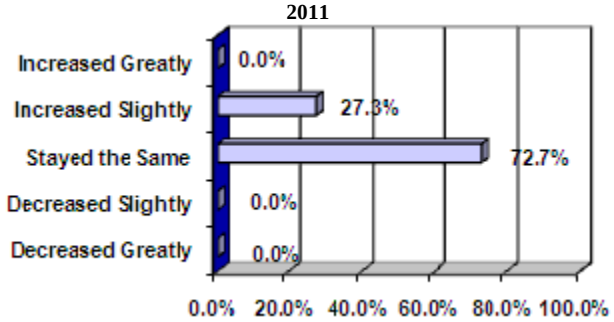


Figure 37
Growth Trends Of Ecstasy / Designer Drugs
Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



Pharmaceuticals

Pharmaceutical drugs include narcotics, depressants, and stimulants that are available by medical prescription. Illicit use and distribution and point-of-sale of pharmaceuticals is becoming a problem in parts of the State. The NDIC reports the most abused pharmaceutical drugs are illegally obtained from forged prescriptions, improper prescribing, and theft. Pharmaceuticals are increasingly being smuggled from Mexico or obtained from Internet pharmacies supplied by sources in Mexico or other foreign countries. According to the 2008 edition of *Street Drugs*, a new trend among young people is meeting at parties to exchange prescription medications to experience affects of either one or multiple types of medications.

Illicit use of pharmaceutical drugs is widespread in Missouri. Of the MJDTFs responding to a drug industry survey, 100.0% indicated point-of-sale distribution of pharmaceutical drugs is a major or moderate problem in their jurisdictions

(Table 5). In Fiscal Year 2010, 8,248 doses of pharmaceutical drugs were seized by MJDTFs compared to 10,371 doses seized in 2004 (Table 24).

The most commonly abused pharmaceutical narcotic identified by Missouri task forces is OxyContin. Of the task forces that have a major or moderate problem with point-of-sale distribution of pharmaceutical drugs, all identified OxyContin as an abused narcotic (Table 33). The NDIC reports OxyContin is frequently abused as a heroin substitute, and the drug has euphoric effects, mitigates pain, and decreases withdrawal effects associated with heroin abstinence. OxyContin is produced in oral tablets but abusers often crush these to inhale the powder. Tablets also are dissolved in water and injected.

Other narcotics illegally distributed are Vicoden and morphine. Of the task forces with a major or moderate problem with pharmaceutical drugs point-of-sale distribution, 92.0% stated Vicoden is illicitly distributed and over half (56.0%) stated morphine is distributed illegally.

Commonly abused depressants include Xanax and Valium. The euphoric effects of depressants and countering stimulant effects are the primary reasons for illicit use of these drugs. Of the MJDTFs that perceived pharmaceutical point-of-sale distribution as a major or moderate problem, 96.0% indicated Xanax is illegally distributed (Table 33). Valium was identified as an illegally distributed pharmaceutical drug by 76.0% of these task forces.

Stimulants are legitimately prescribed to treat attention disorders, obesity, and narcolepsy. Because these drugs increase concentration, alertness, and energy, they are commonly misused. Adderal, Dexedrine, and Ritalin are the more commonly abused stimulants. A little under half (40.0%) of the MJDTFs that perceived point-of-sale distribution of pharmaceutical drugs as a major or moderate problem also indicated Adderal is illegally distributed (Table 33). Ritalin was identified by 16.0% of these task forces as illegally distributed in Missouri.

Table 33
Narcotics, Depressants, And Stimulants Associated With Pharmaceutical Drug Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Narcotics		Stimulants	
Oxycontin	100.0%	Adderal	40.0%
Vicodin	92.0%	Ritalin	16.0%
Morphine	56.0%	Dexedrine	0.0%
Fentanyl	64.0%	Meridia	0.0%
Dilaudid	32.0%	Other	8.0%
Codeine	32.0%		
Methadone	40.0%		
Avinza	0.0%		
Depressants		**Other Pharmaceuticals**	
Xanax	96.0%	Anabolic Steroid	20.0%
Valium	76.0%	Testosterone	8.0%
Seconal	4.0%	Dextromethorphan	0.0%
Other	12.0%	Viagra	4.0%

Locations of point-of-sale of pharmaceuticals occur primarily in homes. All MJDTFs noting this industry as a major or moderate problem identified residences as illegal pharmaceutical sale locations (Table 34). Other pharmaceutical point-of-sale locations include vehicles and streets / parking lots. Of the task forces with a major or moderate problem with this industry, 84.0% indicated illegal sales occur from vehicles and 84.0% stated sales occur on streets / parking lots.

Most distributors of illegal pharmaceutical drugs are white males and females of all ages. Of the MJDTFs noting this industry as a major or moderate problem, 87.5% identified both males and females participate in point-of-sale distribution of pharmaceutical drugs (Table 35). In addition, 76.1% of these task forces noted Caucasians are involved and 59.9% stated persons aged 18 through 35 illegally distribute pharmaceutical drugs.

Table 34
Location Of Pharmaceutical Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Private Residences	**100.0%**
Vehicles	**84.0%**
Streets / Parking Lots	**84.0%**
Hotels / Motels	**60.0%**
Work Places	**52.0%**
Bars / Night Clubs	**52.0%**
Schools / Playgrounds	**56.0%**

Table 35
Demographic Characteristics Of Persons
Involved In Pharmaceutical Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

Gender		
	Male	**4.2%**
	Female	**8.3%**
	Both	**87.5%**
Race		
	Caucasian	**76.1%**
	African American	**15.1%**
	Hispanic	**7.6%**
	Asian	**0.8%**
	Other	**0.2%**
Age Group		
	17 & Under	**8.5%**
	18 - 25	**32.1%**
	26 - 35	**27.8%**
	36 - 50	**23.3%**
	Over 50	**8.1%**

Point-of-sale distribution of pharmaceutical drugs has two distinct levels of organization in Missouri. Of the MJDTFs that indicated this industry is a major or moderate problem, 50.0% indicated industry participants are unorganized (Figure 38). Another 45.4% of these task forces indicated the industry is somewhat organized or loosely organized. Two gang types appear to be involved in pharmaceutical drug point-of-sale distribution. Of the task forces that indicated this industry is a major or moderate problem, 57.1% indicated involvement by street gang and 28.6% noted ethnic / nationalist and outlaw motorcycle gang involvement. It is not known whether either of these gang types are associated with point-of-sale distribution of a specific pharmaceutical drug.

Point-of-sale distribution of pharmaceutical drugs is increasing in most areas of Missouri. Of the MJDTFs indicating this industry is a major or moderate problem, 75.0% noted it is increasing either greatly or slightly (Figure 39).

Figure 38
Organization Levels Associated With
Pharmaceutical Drug Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011

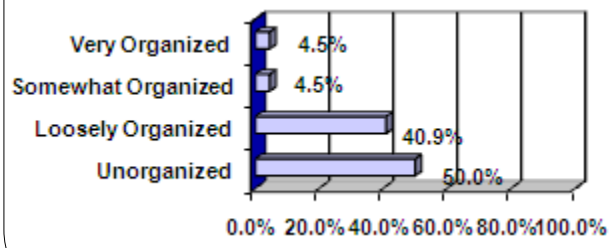
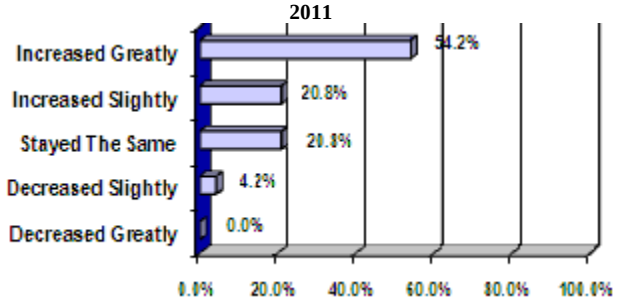


Figure 39
Growth Trends Of
Pharmaceutical Drug Point-Of-Sale Distribution
As Perceived By Multi-Jurisdictional Drug Task Forces
2011



New Illicit Drugs

Over time new illicit drugs and support industries appear in Missouri. As part of their quarterly progress reports submitted to the DPS, Missouri crime laboratories are asked to identify new illicit drugs identified in processed cases. From a review of these reports it was determined that several new illicit drugs have become widespread in Missouri. A discussion of these drugs based on NDIC publications follow.

Club Drugs

Club drugs are commonly sold and abused at dance clubs by adolescents and young adults. Included in this new group of drugs are GHB, ketamine, rohypnol, benzylpiperizine (BZP), and TFMPP. Ecstasy, discussed previously, also is considered a club drug.

Because GHB and rohypnol have sedative properties, they have been used to facilitate sexual assaults. Victims are quickly rendered unconscious when they unknowingly ingest GHB or rohypnol that had been added to their drinks by an offender. Once consciousness is regained, victims have no memory of the assault and only a sense they were sexually violated.

With the exception of Xyrem available by prescription, GHB is an illegal substance produced in domestic and foreign laboratories. GHB is known to be produced in Florida, Nevada, Texas, Oregon, and the Midwest. Foreign GHB is produced in Canada, Mexico, Europe, and Israel. Rohypnol is sold legally in several foreign countries including Mexico. Rohypnol is taken orally as tablets or crushed into powder and inhaled nasally or dissolved in liquid for injection.

Benzylpiperizine is often sold as a “dietary supplement”, but has no dietary value. Retailers claim that BZP is a “natural” product, describing it as a “herbal high”, when in fact it is entirely synthetic and has not been found to occur naturally. BZP is a recreational drug with euphoric stimulant properties. The effects produced by BZP are comparable to those produced by amphetamines.

Ketamine is legally used in veterinary medicine as a rapidly acting preoperative anesthetic and for emergency surgeries. In addition to its analgesic properties, ketamine is known to affect users as a stimulant, depressant, and

hallucinogenic. It is produced legally in the U.S., Belgium, China, Colombia, Germany, and Mexico. Because it is very difficult to produce in clandestine laboratories, ketamine is obtained by theft from domestic and foreign veterinary offices or smuggled into the U.S. from Mexico.

Cathinone

Cathinone, also known as khat, is a Schedule 1 substance obtained from the fresh leaves of a flowering evergreen shrub native to Northeast Africa and the Arabian Peninsula. Leaves are chewed quickly, usually within 48 hours following harvest because of the plant's limited shelf life. After this time period the leaves turn into cathine, a Schedule IV drug. Ingestion of the drug increases heart rate, blood pressure and reportedly sharpens concentration and increases energy. When chewed in moderation, khat alleviates fatigue and reduces appetite.

Immigrants to the U.S. from Somalia, Ethiopia, and Yemen typically use khat casually or as part of religious ceremonies. Other demographic groups have been reported to use the drug and it is expected to become increasingly available. However, because of its less appealing effects and short period of potency, popularity of this drug may be limited.

Salvia

Salvinorin A is a hallucinogen derived from the herb *Salvia Divinorum*, a member of the mint family native to Oaxaca, Mexico. While not native to the U.S., it has been grown indoors and outdoors in Hawaii and California. Salvinorin A is administered by smoking or chewing the plant or by ingesting brewed tea. The plant is typically purchased on the Internet from retailers in California, Hawaii, Missouri, New York, Washington, and Wisconsin. Although the drug is widely available, its popularity is not expected to significantly increase because of its anti-social hallucinogen effects.

Alkyl Nitrates

Alkyl nitrates, or poppers and snappers, are small bottles filled with liquid alkyl nitrates. Once used to ease chest pains or angina, alkyl nitrates are now inhaled recreationally. Unlike other inhalants that act directly on the central nervous system, nitrates act primarily to dialate blood vessels and relax muscles. And while other inhalants are used to alter mood, nitrates are used primarily as sexual enhancers. Some people use viagra along with poppers regardless of the lethal risks associated with this combination of drugs.

K2

K2 is a mixture of herbs and spices that is sprayed with synthetic cannabinoids and is known by several names such as Summit, Standard, and Citron. The mixture is typically smoked which produce effects similar to those of cannabis although it has been reported to have effects more comparable to methamphetamine. Some side effects reported by users include vomiting, rapid heartbeat, dangerous elevated blood pressure and hallucinations. However, K2 has not been tested on humans so all related side effects of the drug are unknown. Although K2 is a legal in most states, Kansas and Missouri have passed legislation to illegalize it. In 2010 the 95th Missouri General Assembly passed House Bill (HB) 1472 that added K2 (1-pentyl-3-(1-naphtholy) indole) to the Schedule 1 controlled substances list.

Mescaline

Mescaline (3, 4, 5-trimethoxyphenethylamine) a substance that is contained from that top of a cactus plant called Peyote (Lophophora williamsi). To obtain this drug cut the top of the cactus plant known as the crown of the cactus. In the crown you will find circle shaped buttons. These's buttons are dried. After the brown circular buttons are dried the drug is consumed by either smoking or chewing the substance. The substance can also be soaked in water creating a intoxicating liquid. The affects of the peyote is usually visual hallucinations. You can also experience a dream like state, laughter and sometimes anxiety. Some side affects to this drug are racing heart, vomiting, headaches, and dizziness. This drug is not physically addictive.

VIOLENT CRIME IN MISSOURI

Crime and the threat of being victimized have a continuing impact on Missouri citizens. In a public opinion survey conducted by the MSHP in 2008, Missouri citizens were asked to rank ten social issues facing America in order of importance. These issues were analyzed based on their being ranked as one of the top three problem areas in the nation (i.e., ranked 1, 2, or 3). Crime was considered the most important social issue followed by Drug Abuse and Health Care. The 2005 survey responses were quite different in ranking then 2008. Homeland Defense & Security was considered the most important social issue followed by Health Care and third ranked was Public Education.

In the 2008 survey respondents also were asked the extent to which they were concerned about being victimized by crime. Of the respondents 40.6% indicated they were seriously or moderately concerned about being victimized by crime in their residence or neighborhood. Also, respondents were concerned about being victimized by crime while traveling Missouri roadways. Of the total, 49.0% indicated they were seriously or moderately concerned. An even higher proportion was concerned about being involved in a traffic accident while traveling on Missouri roadways. Of the total, 59.0% indicated they were seriously or moderately concerned. One of the primary sources of data related to the occurrence of violent crime in Missouri is the Missouri Uniform Crime Reporting (UCR) Program. This information system contains data on the number of violent crimes reported to police as well as arrests made for violent crime incidents. In 2001, reporting to the UCR Program became mandatory for all Missouri law enforcement agencies. Law enforcement agencies' compliance to this mandate is nearly 100%. Prior to 2001, UCR statistics were based on a voluntary reporting standard and, as a result, did not contain complete statewide violent crime data. However, computational techniques were employed to *estimate* the actual amount of violent crime in Missouri. In addition, rates per 100,000 populations were used based on reporting agency crime and population data only. Caution is recommended when comparing UCR statistics from years before and after the mandate was initiated.

In the UCR Program, eight major offenses are used to measure the magnitude of crime. These offenses are included because of their frequency of occurrence and the fact they are most likely to be reported to law enforcement agencies. These eight offenses are: murder, forcible rape, robbery, aggravated assault, burglary, theft, motor vehicle theft, and arson. The first four make up the Violent Crime Index.

Violent Crime

In 2010, 27,105 violent crime index offenses occurred in the State of Missouri. In other words, one violent crime was committed every 19.4 minutes.

On a per 100,000 population basis, 486.3 violent crime index offenses were committed in 2010. Comparing the 2010 violent crime rate with 2009 (486.3 vs. 491.3), Missouri experienced a 1.0% decrease (Figure 40). Comparing annual rates of change in violent crime since 2001, Missouri has experienced a 13.9% decrease in violent crime on a per 100,000 population basis in 2010 (Figure 41).

Figure 40
Missouri Violent Crime Rate
2001- 2010

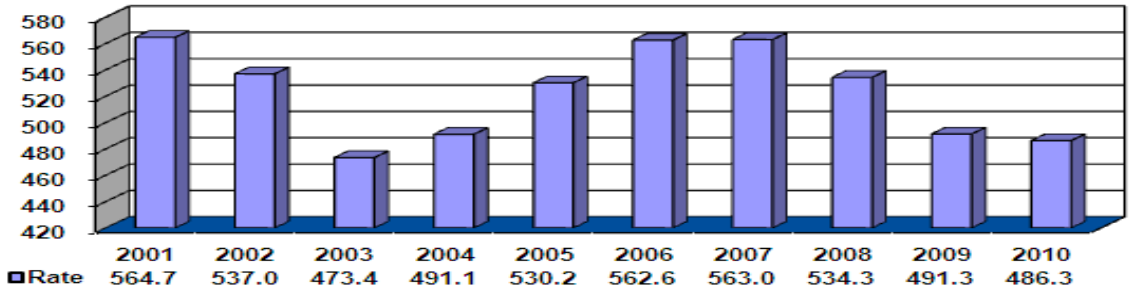
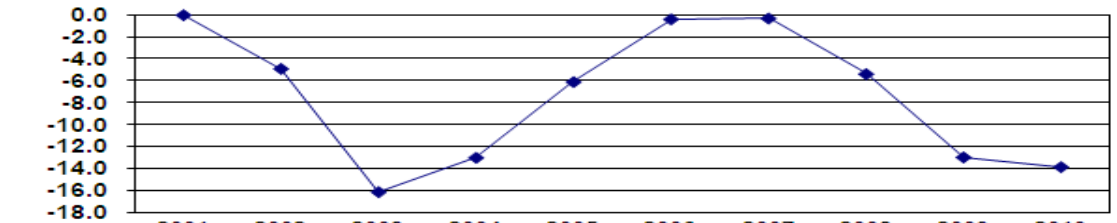


Figure 41
Missouri Violent Crime Rate
Percent of Change
2001 - 2010

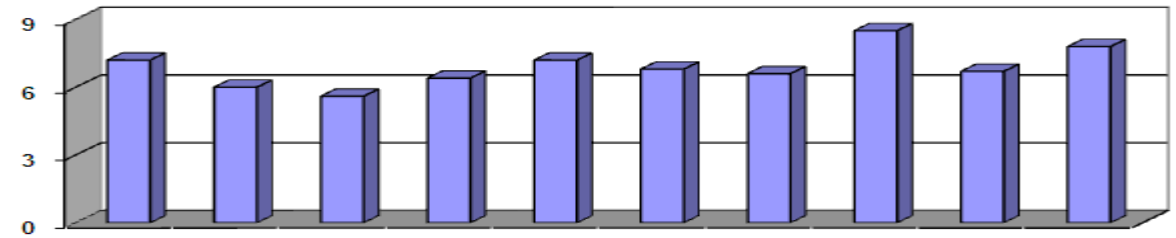


	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
% Change	0.0	-4.9	-16.2	-13.0	-6.1	-0.4	-0.3	-5.4	-13.0	-13.9

Murder

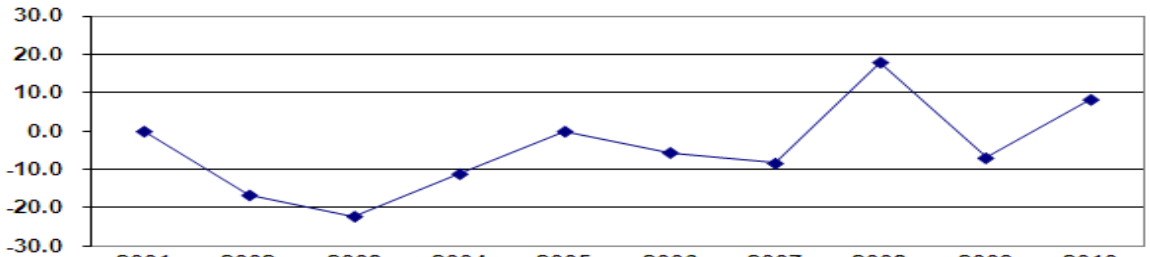
Although murder is the least frequently occurring violent index offense, it is the most important since loss of life is involved. Since 2001, the murder rate has mostly decreased except in years 2008 and 2010 (Figure 42). The murder rate increased from 6.7 in 2009 to 7.8 in 2010, a 16.4% increase. Comparing annual percents of change for this offense since base year 2001, Missouri experienced an 8.3% increase in 2010 (Figure 43).

Figure 42
Missouri Murder Rate
2001 - 2010



	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Rate	7.2	6.0	5.6	6.4	7.2	6.8	6.6	8.5	6.7	7.8

Figure 43
Missouri Murder Rate
Percent of Change
2001 - 2010

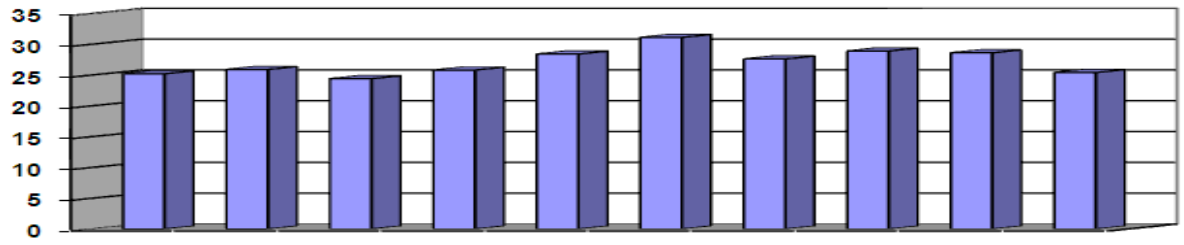


	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
% Change	0.0	-16.7	-22.2	-11.1	0.0	-5.6	-8.3	18.1	-6.9	8.3

Rape

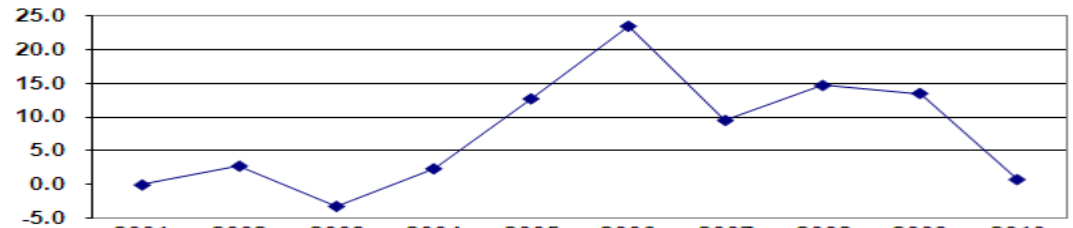
In 2001, the rape offense rate per 100,000 populations was 25.2 (Figure 44). An examination of the long-term trends associated with this offense shows an increase since that year through 2003. The rate of rape slightly decreased in 2007. Missouri experienced another rate decrease in 2010, realizing an 11.2% fall from the previous year. When examining annual rape percents of change since base year 2001, Missouri experienced a 0.8% increase in 2010 (Figure 45).

Figure 44
Missouri Rape Rate
2001 - 2010



	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Rate	25.2	25.9	24.4	25.8	28.4	31.1	27.6	28.9	28.6	25.4

Figure 45
Missouri Rape Rate
Percent of Change
2001 - 2010

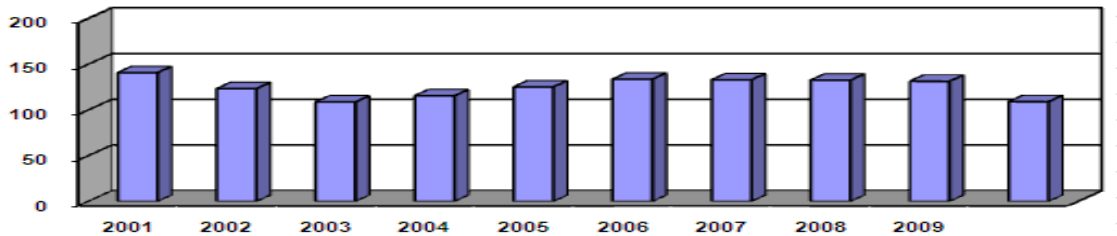


	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
% Change	0.0	2.8	-3.2	2.4	12.7	23.4	9.5	14.7	13.5	0.8

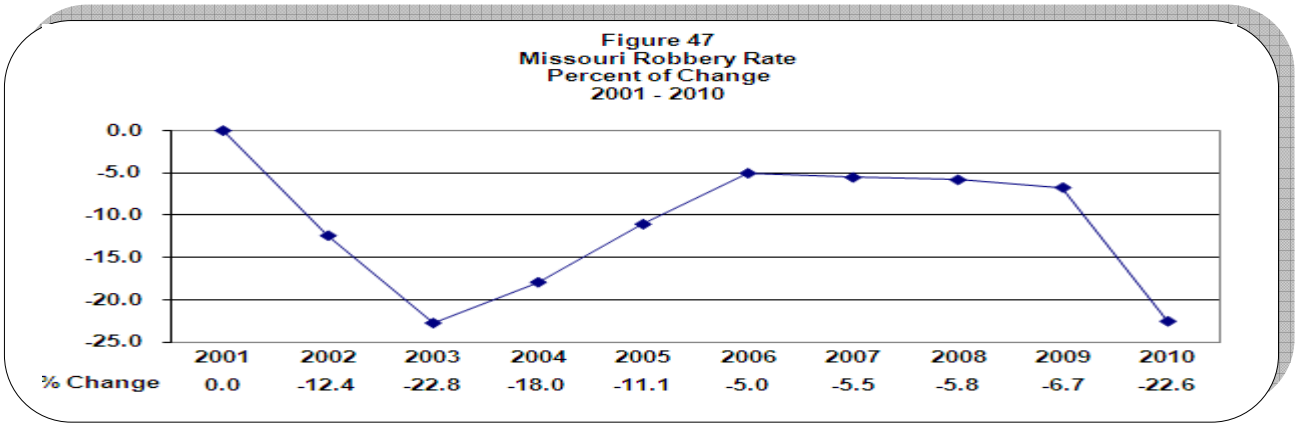
Robbery

The robbery offense rate per 100,000 populations was 140.8 in 2001 (Figure 46). It is apparent from examination of the long-term trends of robbery offense rates per 100,000 populations decreased from 2001 through 2003 but have generally increased since that year. Compared to 2009, Missouri experienced a very slight decrease (17.0%) in the robbery offense rate in 2010. When compared to base year 2001, Missouri has experienced an overall 22.6% decrease in 2010 (Figure 47).

Figure 46
Missouri Robbery Rate
2001 - 2010

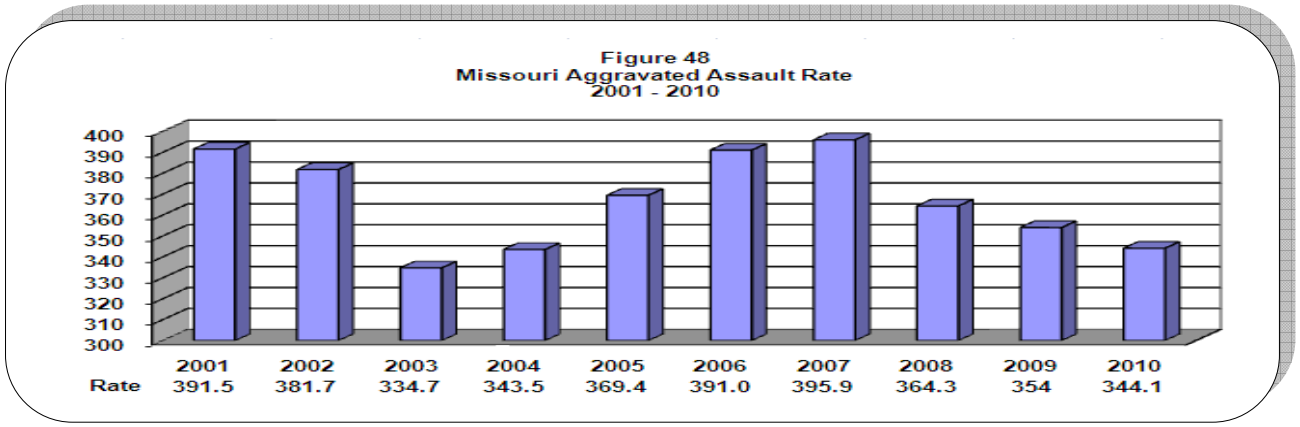


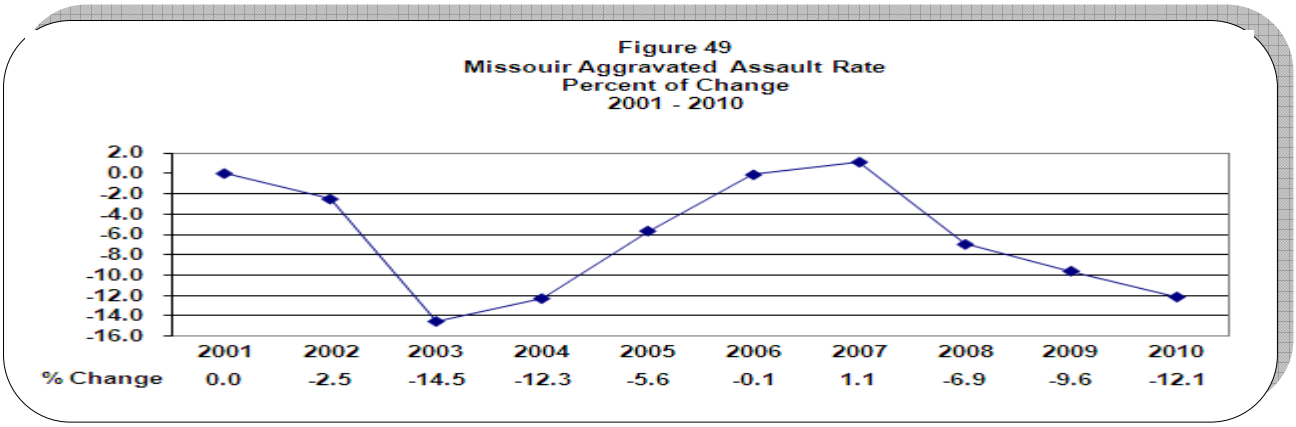
	2001	2002	2003	2004	2005	2006	2007	2008	2009	
Rate	140.8	123.3	108.7	115.5	125.2	133.7	133.0	132.6	131.3	109



Aggravated Assault

Missouri experienced 344.1 aggravated assaults per 100,000 in 2010 (Figure 48). When examining long-term trends using 2001 as a base year, aggravated assault rates have fluctuated through 2004. But since that year aggravated rates have mostly increase. In 2010 however, Missouri experienced a 2.7% decrease in aggravated assaults compared to 2009. However compared to 2001, Missouri had a 12.1% decrease in this offense type in 2010 (Figure 49).





SECTION III: Resource Needs

PROBLEM AREAS AND RESPONSES

Law Enforcement Programs (inclusive of Multi-Jurisdictional Drug Task Forces)

Problem

- Decreasing budgets and an increasing demand for law enforcement agency services requires adequate resources for illicit drug and violent crime problems throughout the State of Missouri
- Increase in Methamphetamine Laboratory discoveries
- Increase drug arrests
- Increase drug seizures
- Transportation of illicit drugs throughout the State of Missouri
- The Missouri Criminal Justice system continues to address crime and related issues in a "reactive manner"
- The Missouri Criminal Justice system continues its reactive response in a status quo fashion
- The Missouri Criminal Justice system has not adopted an innovative and aggressive philosophy in their approach to crime and drug related issues
- The Missouri Criminal Justice system is not global in their project vision

Proposed Response

- Maintain and develop programs to provide resources and manpower for Law Enforcement efforts supporting Multi-Jurisdictional Drug Task Forces, street level drug enforcement, Marijuana eradication and sting operations
- Implement and maintain current programs providing equipment to Law Enforcement
- Upgrade State and local criminal justice information systems to improve illicit drug and violent crime case processing
- Implement specialized training programs for informant handling, drug investigations, and evidence processing
- Promote cooperation between Federal, State and Local agencies to address the problems
- Focus and enhance Multi-Jurisdictional Drug Task Force programs, Interdiction programs, and single agency units to address the illicit drug problem in Missouri
- Implement specialized training programs for officer safety when encountering Methamphetamine Labs, including protective clothing and equipment
- Implement specialized training for handling and disposal of hazardous substances from Meth Labs
- Implement data collection, analysis, and evaluation components for CJ/LE strategic planning and contract administration
- Continue efforts to upgrade criminal information systems to capture data needed to perform illicit drug and violent crime strategic planning
- Promote a criminal justice philosophy that's far reaching and global in perspective
- Promote inner agency and other organizational partnerships
- Promote innovative "outside the box" thinking
- Promote new strategies and methodologies in dealing with drug and crime related problems

Prosecution and Court Programs

Problem

- The top two social concerns of Missouri citizens are drug abuse and crime
- Decreasing budgets and increased demand for criminal justice services
- Increased filing of drug related charges throughout Missouri state court systems
- Increase in enforcement and prosecution programs resulting in an increase of drug related charges
- Increased arrests and prosecution arising from increased use of illicit drugs
- Increase demand for manpower and resources
- Child abuse has been increasing at an alarming rate

- Missouri was ranked 8th in child abuse and neglect fatalities in the United States in 1997
- Funding is limited for specialized investigators and prosecutors
- Funding is limited for specialized training for investigators and prosecutors
- Funding is limited for specialized equipment needed for child abuse and neglect investigations

Proposed Response

- Maintain and enhance current community policing programs in Missouri designed to increase community and Law Enforcement partnerships
- Develop and implement new public awareness and crime prevention programs targeting drug abuse and crime
- Continue to implement Community Oriented Programs across the state of Missouri
- Implement data collection, analysis, and evaluation components for CJ/LE strategic planning and contract administration
- Promote cooperation and communication between Law Enforcement and communities
- Continue efforts to upgrade state and local criminal justice information systems to improve illicit drug and violent crime case processing
- Increase support, training and technology for court services
- Promote the enhancement of Prosecutorial and defense programs statewide
- Provide offender based education, and life skills training
- Implement data collection, analysis, and evaluation components for CJ/LE strategic planning and contract administration.
- Promote specialized investigative and prosecutorial units to investigate child abuse and neglect cases
- Promote and increase specialized training for child abuse and neglect investigations and prosecution
- Increase specialized equipment needed for child abuse and neglect investigations
- Continue efforts to upgrade state and local criminal justice information systems to improve illicit drug and violent crime case processing
- Address defendant's needs through effective case management
- Develop and continue current court delay reduction programs to relieve the back log of court cases and expedite court process.
- Implement court supervised drug treatment programs which would be alternatives to incarceration
- Continue to provide alternative sentencing programs

Prevention and Education Programs

Problem

- Increased arrests and prosecution arising from increased use of illicit drugs and violent crime
- Increased youth participation in the use and sale of illicit drugs
- Increased youth participation in the use of alcohol

Proposed Response

- Develop and continue juvenile treatment and intensive supervision programs within the Missouri Division of Youth Services
- Develop and continue adult drug treatment programs with the Missouri Department of Corrections
- Implement data collection, analysis, and evaluation components for CJ/LE strategic planning and contract administration
- Address defendant's needs through effective case management
- Implement court supervised drug treatment programs which would be alternatives to incarceration

Planning, Evaluation, and Technology Improvement Programs

Problem

- Untimely, inadequate, and incomplete reporting of criminal histories due to current reporting methods
- A need for uniform reporting standards
- Increase in drug arrests throughout Missouri causing back log for crime laboratories

- Inadequate manpower and resources

Proposed Response

- Continue efforts to upgrade State and local criminal justice information systems
- Implement data collection, analysis, and evaluation components for CJ/LE strategic planning and contract administration.
- Upgrade State and local criminal justice information systems to improve illicit drug and violent crime case processing
- Provide resources and equipment for the enhancement of over burdened crime laboratories throughout the state of Missouri to expedite the prosecution of drug offenders
- Provide funding for state-of–the-art equipment and supplies for analysis for narcotic and violent crime evidence
- Promote innovative analysis techniques
- Maintain an acceptable turn-around time for evidence processing

SECTION IV: Priorities and the National Drug Control Strategy

STRATEGIC PLAN IMPLEMENTATION STATUS

Following is an overview of the 2010 / 2011 four-year Strategic Plan.

Implementation of the 2010 / 2011 JAG funding year began with the review of project applications on March 23-24, 2011 by a grant review committee consisting of the DPS - CJ/LE Program staff and individuals from the criminal justice and private sector. Sixty-two (62) requests for funding were reviewed within the approved project categories as described below. The grant evaluation process was competitive in nature, and only those grant applications determined to coordinate with the goals and objectives of the statewide strategy were considered for funding. Thirty-two (32) grant awards were made to state and local recipients in the amount of $5,812,481.42.

In addition, thirty-three (33) requests for funding were received through the Recovery-JAG Program. Twenty-six (26) grant awards were made to local recipients in the amount of $978,211.21. Following is a brief summary on each category funded through the DPS - CJ/LE Program during the 2010 / 2011 funding cycle.

Law Enforcement Programs

The DPS - CJ/LE Program awarded $5,230,222.15 to 27 multi-jurisdictional drug task forces and $261,473.68 to 1 multi-agency law enforcement group from JAG Program monies. Of the 114 counties in the state of Missouri, 99 counties were active participants / members of these multi-jurisdictional enforcement efforts.

In addition, the DPS – CJ/LE Program awarded $978,211.51 to 26 multi-jurisdictional drug task forces from Recovery-JAG Program monies. Of the 114 counties in the state of Missouri, 98 were active participants / members of these multi-jurisdictional enforcement efforts.

The primary focus of this category is the multi-jurisdictional, multi-agency counter-drug enforcement effort. During previous funding years, the DPS - CJ/LE Program began placing more emphasis on the collaboration and partnerships required to breed success within the multi-jurisdictional approach to drug enforcement. By placing greater emphasis on the establishment of a comprehensive Memorandum of Understanding/Agreement between all partners of the multi-jurisdictional enforcement group, a more comprehensive understanding of responsibilities and expectations exists. Additionally, greater emphasis is placed on the establishment of a Board of Directors, responsible for the collective decision making process of each multi-jurisdictional enforcement group.

During 2010 / 2011, the illicit drug methamphetamine continued to be a priority for an aggressive law enforcement strategy, designed to slow or halt the spread of this drug. As the scope of the methamphetamine problem extends beyond the capabilities of a single entity, many partnerships have been forged in response to this threat to public safety, public health and the environmental sovereignty of our state. Through local, state and federal collaborations and a continued aggressive response, we anticipate the rise in methamphetamine related activity to peak and eventually decline.

During the past three fiscal years, the following statistics were collected for the Multi-Jurisdictional Drug Task Forces throughout the state as funded by the DPS – CJ/LE Program. The following statistics are an example of the data collected through the Quarterly Progress Report. More detailed information can be reviewed in Section III and IV of this report.

	FY 2009	FY 2010	FY 2011
Arrested with one or more drug charges	6,009	5,556	7,141
Arrested with no drug charges	1,314	1,248	1,936
Total drug arrests	7,323	6,804	9,077
Search warrants served	1,088	1,208	1,134
Consent searches performed	3,718	3,776	2,903
Methamphetamine labs seized/destroyed:	1,206	1,449	1,593
New drug distribution Organizations identified:	126	112	-
Number of drug trafficking disputed/dismantle:	-	-	32

OUNCES OF DRUGS SEIZED	**FY2009**	**FY 2010**	**FY 2011**
Marijuana	157,861	177,414	232,006
Methamphetamine	2,816	1,895	2,089
Cocaine	5,610	3,235	4,318
Crack	297	192	121
Heroin	589	67	467
LSD	19	63	0.85
PCP	897	569	3
Ecstasy	566	3	7
Pseudoephedrine	592	519	1,955
Anhydrous Ammonia (gallons)	5,168	13,904	0
Other Drugs	449	501	779

Total value of all drugs seized:	$99,054,784	$38,039,219	$41,450,744

Doses of Drugs Seized			
Ecstasy:	13,195	14,305	1,670
Pseudoephedrine / Ephedrine:	50,957	14,322	4,744

Gallons of Drug Precursors Seized			
Anhydrous Ammonia:	3,928	293	298

Top Five Drug Arrest Charge Codes:	**FY09**	**FY10**	**FY11**
	Poss/Marijuana	Poss/Marijuana	Sale/Methamphetamine
	Poss/Methamphetamine	Sale/Methamphetamine	Poss/Marijuana
	Sale/Methamphetamine	Poss/Methamphetamine	Poss/Methamphetamine
	Poss/Paraphernalia	Sale/Marijuana	Sale/Marijuana
	Sale/Marijuana	Poss/Other	Poss/Paraphernalia

***The above statistical data is obtained from the Quarterly Reports submitted by the multi-jurisdictional enforcement groups receiving JAG Program funding between July 1, 2010 and June 30, 2011.**

Prosecution and Court Programs

During the 2010 / 2011 funding period, Prosecution and Court programs received funding in the amount of $72,995.47. This approved purpose area provides financial assistance to two (2) projects to implement and enhance the response of criminal justice agencies to criminal activity. Training of law enforcement, prosecution, judicial, and medical staff was also provided on proper handling / processing of these cases as well as establishment of communication lines between involved criminal justice agencies leads to effective resolution of this problem.

No funding assistance provided to this purpose area from Recovery-JAG Program monies.

Prevention and Education Programs

During the 2010 / 2011 funding period, Prevention and Education programs received funding in the amount of $177,060.61. This approved purpose area provided financial assistance to one (1) project. This purpose area aids in providing the proper supplies and reference material to Missouri law enforcement, fire service and other emergency response officials to help them safely respond to methamphetamine laboratory incidents and perform their jobs with reduced risk of injury to themselves, the public, and the environment.

No funding assistance provided to this purpose area from Recovery-JAG Program monies.

Corrections and Community Corrections Programs

No funding assistance provided to this approved purpose area during the 2010 / 2011 funding cycle.

Drug Treatment Programs
No funding assistance provided to this approved purpose area during the 2010 / 2011 funding cycle.

Planning, Evaluation, and Technology Improvement Programs
During the 2010 / 2011 funding period, Planning, Evaluation, and Technology Improvement projects received funding in the amount of $70,729.51 from the JAG Program. This approved purpose area provided financial assistance to one (1) projects. The project provided a municipality with the resources to evaluate police reports and records in an attempt to identify crime trends and provide such information to local businesses and citizens to make their community safer.

Crime Victim and Witness Programs
No funding assistance provided to this approved purpose area during the 2010 / 2011 funding cycle.

SECTION V: Selected Programs

PROGRAM DESCRIPTION AND EVALUATION METHODS

The Edward Byrne Memorial Justice Assistance Grant (JAG) Program provides criminal justice authorities with substantial support in their endeavors to address Missouri's illicit drug and violent crime problems. The U.S. Department of Justice, Bureau of Justice Administration (BJA) administers this program at the federal level and the Missouri Department of Public Safety (DPS) administers it at the state level. In Missouri, this program within the Office of Director is known as the Criminal Justice/Law Enforcement (CJ/LE) Program and will be referred to as CJ/LE throughout this report.

Program evaluation is an essential CJ/LE responsibility required by its enabling legislation. To meet this responsibility, BJA has provided states with guidelines, technical training, and support for assessing JAG Programs. In Missouri, the DPS has contracted with the Missouri State Highway Patrol (MSHP), Statistical Analysis Center (SAC) to administer the evaluation component of the CJ/LE Program and play a major role in development of Missouri's drug and violent crime strategy.

The following is a description of the 2010 / 2011 JAG and Recovery-JAG project evaluation designs developed by SAC and DPS. These evaluations are mostly administrative or process in nature.

PROSECUTION AND COURT PROGRAMS

This purpose area provides financial assistance to implement and enhance the response of criminal justice agencies to criminal activity. Training of law enforcement, prosecution, judicial and medical staff on handling or processing criminal cases as well as establishment of communication between involved criminal justice agencies leads to effective problem resolution.

Efficiency evaluations designed for:

St. Louis City - Domestic Violence Investigation Project
Washington County - Special Investigator of Crimes Against Children

ST. LOUIS CITY - DOMESTIC VIOLENCE INVESTIGATION PROJECT: This project continues support of a misdemeanor domestic violence investigator to work with the St. Louis Attorney's Office domestic violence attorney. The goal of this project is to increase community safety and reduce domestic violence in the City of St. Louis through cooperative efforts of the Misdemeanor Domestic Violence Investigator and the Circuit Attorney Office Violent Unit. This goal will be achieved by two objectives: 1) Focus will be placed on domestic violence information being shared thus encouraging participation and subsequently reducing the number of cases dismissed for failure of prosecution; 2) Effort will be focused on enhancing domestic violence investigation, evidence collection, and trial preparation for prosecution.

EVALUATION DESIGN: The grantee will be evaluated on the following criteria:

- Overall project management, training, and services employed to support the project
- Number of domestic violence cases prosecuted by the St. Louis City Prosecuting Attorney's Office. At the end of the contract period, the rate of change in domestic violence cases prosecuted compared to a like period prior to the grant project
- Number of domestic violence cases investigated and directly prosecuted by the domestic violence team
- Number of non-domestic violence cases investigated and prosecuted by the domestic violence team
- Number of domestic violence victims provided information of support services
- Hours expended on domestic violence investigation, evidence collection, and trial preparation
- Other major work effort and activities performed under auspices of the project

The grantee is required to submit quarterly progress status reports on this project. Status reports should describe work completed and work in progress, as well as any impediments preventing the project from being successfully completed at the end of the contract period.

WASHINGTON COUNTY - SPECIAL INVESTIGATOR OF CRIMES AGAINST CHILDREN:
This program continues support of a special investigator to collaborate with Washington County's Prosecuting Attorney's Office to investigate crimes involving children. The overall goal of the program is to provide a high quality, consistent response to reports of child abuse of a serious nature in Washington County including all of the areas and municipalities within the county. This also includes investigations of any fatality of a child under the age of eighteen. This goal will be met by the following objectives: 1) Providing the investigator with highly recognized training in the dynamics of child abuse, child sexual abuse, child fatality, suspect interrogation, victim interviewing, evidence collection, and case/trial preparation; 2) Assisting the Child Advocacy Center of East Central Missouri in developing training for first responders to promote a better understanding of first responders duties and develop protocol for first responders; 3) Investigating incidents of child sexual and felonious physical abuse and fatality cases; and 4) Improving life conditions of victims and non-offending parents by removing contacts with offenders.

EVALUATION DESIGN: The grantee will be evaluated on the following criteria:

- Overall project management, training, and support services employed to implement the program
- Hours expended by Special Investigator on child fatality and child sexual and felonious physical child abuse cases
- Number of agencies involved in coordinated multi-disciplinary investigation teams
- Hours expended by team agencies on child abuse and child involved domestic violence cases
- Number of child sexual and felonious physical child abuse cases investigated
- Prosecution rate of child sexual and felonious physical child abuse cases
- Conviction rate of child sexual and felonious physical child abuse cases
- Other major work efforts and activities performed under auspices of the project

The grantee is required to submit quarterly status reports on this project. Status reports should describe work completed and work in progress, as well as any impediments preventing the project from being successfully completed at the end of the contract period.

PREVENTION AND EDUCATION PROGRAMS

This purpose area provides supplies and reference materials to Missouri law enforcement, fire service, and other emergency response officials to help them promote safety and educate officers and the public on issues that affect themselves and the environment.

Efficiency evaluations designed for:

Missouri Department of Natural Resources - Clandestine Drug Laboratory Collection Station

MISSOURI DEPARTMENT OF NATURAL RESOURCES - CLANDESTINE DRUG LABORATORY COLLECTION STATION: This continuing project supports the Department of Natural Resources, Environmental Services Program to expand and enhance an existing project of responding to methamphetamine clandestine laboratory clean up requests. The goal of this project is to increase safety and reduce risk of injury to the staff, the public, and the environment exposed to clandestine laboratories. This goal will be achieved by three objectives: 1) Provide proper supplies and reference material to Missouri law enforcement, fire service, and other emergency response officials; 2) Provide supplies for processing and disposal of clandestine drug lab materials to clandestine drug laboratory collection stations; and 3) Provide on-site responses to clandestine methamphetamine laboratory incidents, when requested by law enforcement, fire station, and other emergency officials.

EVALUATION DESIGN: The grantee will be evaluated on the following criteria:

- Overall project management, training, and services employed to support the project
- Amount and type of supplies purchased specifically to reduce methamphetamine laboratory related injuries of emergency responders
- Number of injury and non-injury related laboratory incidents responded to
- Amount and type of supplies purchased specifically for processing and disposal of clandestine drug laboratory materials from clandestine drug laboratory collection stations
- Number of requests for on-site assistance to clandestine methamphetamine laboratory incidents by type of requestor (law enforcement, fire service, and other emergency response officials)
- Number of on-site responses to requests for assistance to clandestine methamphetamine laboratory incidents, by type of requestor (law enforcement, fire service, and other emergency response officials)
- Other major work effort and activities performed under auspices of the project

The grantee is required to submit quarterly progress status reports on this project. Status reports should describe work completed and work in progress, as well as any impediments preventing the project from being successfully completed at the end of the contract period.

Local criminal justice agencies must be automated if their reporting to the State Central Repository is to be timely, accurate, and complete. When local agencies are automated and linked to the State Repository, they are able to search federal criminal files, state and federal wanted files, and other databases. Criminal justice databases are important tools when fighting crime and protecting citizens

Efficiency evaluation designed for:

Missouri State Highway Patrol (MSHP) - Administrative Data Analysis and Problem Identification

MSHP - ADMINISTRATIVE DATA ANALYSIS AND PROBLEM IDENTIFICATION PROGRAM: This continuing project involves establishing a series of policies, procedures, systems, and reporting recommendations. The State of Missouri will effectively manage the Edward Byrne Justice Assistance Grant (JAG) Program by analyzing drug and violent crime environment in the State; assessing effectiveness of existing programs; and offering data and interpretive analysis support for development of new programs. The Missouri State Highway Patrol, coordinating their activities with Department of Public Safety's CJ/LE Program staff, will complete the following project goals: 1) Provide base-line information to properly assess Missouri's illicit drug and violent crime problems; 2) Support successful administration of Missouri's JAG Program by providing needed research, evaluation, and data processing services; 3) Develop and implement Missouri's UCR data collection application and output report application; and 4) Enhance capabilities of Missouri's criminal justice information systems in supporting statewide illicit drug and violent crime problems and grant administration.

EVALUATION DESIGN: The grantee will be evaluated on the following criteria:

- Overall project management, training, and support services employed to implement the project.
- Assistance provided in successful development and / or modification of Missouri's drug and violent crime strategy required under the JAG Program including, but not limited to, conducting a statewide illicit drug and violent crime problem analysis and developing an annual grant report
- Number of research services provided to DPS, Missouri criminal justice authorities, and other public officials
- Assistance provided in development and implementation of evaluation criteria and information systems for programs supported under the JAG Program. Publication of a report describing all approved research designs
- Technical assistance provided in maintenance of UCR summary-based information system input, file maintenance, and output software
- Technical assistance provided for UCR training and report requirements, quality assurance reviews / audits, and assistance to local agencies in reporting procedures
- Number of seminars and conferences attended in support of the JAG Program
- Other major work effort and activities performed under auspices of this project

The grantee is required to submit quarterly progress status reports on this project. Status reports should describe work completed and work in progress, as well as any impediments preventing the project from being successfully completed at the end of the contract period.

LAW ENFORCEMENT PROGRAMS

This purpose area focuses on all aspects of law enforcement efforts, from basic patrolling to community policing to widespread drug enforcement. Within Missouri, a large percentage of JAG and Recovery-JAG Program monies focus on multi-jurisdictional, multi-agency counter drug enforcement effort and emphasis is placed on collaboration and partnerships within the multi-jurisdictional approach to drug enforcement. A comprehensive understanding of responsibilities and expectations by task force partners is established with memorandums of understanding / agreements between all partners of multi-jurisdictional enforcement groups. A board of directors is responsible for the collective decision making process of each multi-jurisdictional enforcement group.

Methamphetamine is a priority for aggressive law enforcement strategy designed to slow or halt the spread of this drug. Because problems associated with methamphetamine transcend boundaries, partnerships have been forged to address public safety, public health, and the environment sovereignty of Missouri.

Efficiency evaluation designed for:

* Jackson County - Drug Abatement Response Team (DART)

Quarterly Progress Report Automated Information System designed for:

Adair County - North Missouri (NOMO) Drug Task Force
Audrain County - East Central Drug Task Force
Barry County - Southwest Missouri Drug Task Force
Bates County - Community Narcotics Enforcement Team (CNET)
Bridgeton City - North County MEG Multi-Jurisdiction Drug Task Force
Buchanan County - Buchanan County Drug Strike Force
Camden County - Lake Area Narcotics Enforcement Group (LANEG)
Cole County - Mid-Missouri Unified Strike Team and Narcotics Group (MUSTANG)
Excelsior Springs City - Clay County Drug Task Force
Farmington City - Mineral Area Drug Task Force
Franklin County Narcotics Enforcement Unit
Greene County - Combined Ozarks Multi-Jurisdictional Enforcement Team (COMET)
Grundy County - NITRO Drug Task Force
Jackson County Multi-Jurisdictional Task Force
Jasper County Drug Task Force
Jefferson County Municipal Enforcement Group
Kansas City Multi-Jurisdictional Task Force
Lafayette County Narcotics Unit
Monroe City - Northeast Missouri (NEMO) Narcotics Task Force
Morgan County - Mid-Missouri Multi-Jurisdictional Drug Task Force
Pemiscot County - Bootheel Drug Task Force
Platte County Multi-Jurisdictional Enforcement Group
Poplar Bluff City - Southeast Missouri (SEMO) Drug Task Force
St. Charles County Regional Drug Task Force
St. Louis City Multi-Jurisdictional Undercover Drug Program
* St. Louis County Multi-Jurisdictional Drug Task Force
West Plains City - South Central Drug Task Force

* Projects not covered under Recovery money.

JACKSON COUNTY - DRUG ABATEMENT RESPONSE TEAM (DART): This project continues support to DART, a multi-jurisdictional initiative to identify and shut down drug houses and street level narcotics operations in thirteen municipal jurisdictions in Jackson County. DART provides an interagency mechanism through which residents throughout the thirteen (13) municipal jurisdictions in Jackson County, Missouri can report illegal narcotics activity within their respective communities. The goal of this program is to eliminate illegal drug activity in the Jackson County community by coordinating and utilizing several sources. Through these efforts, the quality of life in the target area is restored and protected. Suspected drug activity can be anonymously reported to DART members who then communicate the information to law enforcement for investigation. DART also coordinates street level investigations, buy / bust and reverse sting operations, property fire and housing code inspections of suspected drug houses, and notification of drug activity and its consequences to property owners. Property owner seminars, community presentations, and citizen training given on recognition of drug activities are provided by DART members.

EVALUATION DESIGN: The grantee will be evaluated on the following criteria:

- Overall project management and support services employed to implement the project
- Number of citizen reports of drug activity received by DART
- Number of drug houses and drug distribution operations closed
- Number of property owners trained on drug activity recognition
- Number of buy / bust / reverse sting operations coordinated with Patrol officers, community police, and prosecutors
- Number of property fire hazard and building code inspections completed, and number of notifications of drug activity made to property owners
- Number of community organizations given drug awareness presentations or training
- Other major work efforts and activities performed under auspices of this project

The grantee is required to submit quarterly progress status reports on this project. Status reports should describe work completed and work in progress, as well as any impediments preventing the project from being successfully completed at the end of the contract period.

MISSOURI DEPARTMENT OF PUBLIC SAFETY

Multi-Jurisdictional Task Force

Quarterly Progress Report Instructions

This instruction sheet is to aid Multi-Jurisdictional Task Force (MJTF) grantees in completing the required quarterly progress report for the Missouri Department of Public Safety.

1. **Date Submitted:** Date submitted to Department of Public Safety

2. **Grant Name:** Grant name and contract number as designated within grant records

3. **Contact Person:** Person completing this report or person designated within grant as OIC

4. **Contact Person's Agency Name**

5. **E-Mail Address**

6. **Contact Information:**
   a. Phone Number
   b. Fax Number

7. **Reporting Period:**
   a. Quarterly Reporting Year
   b. Quarter Number and Quarterly Reporting Period: Select the quarter number and reporting period from the drop down box once the cell is selected.

8. **Number of law enforcement agencies involved in Multi-Jurisdictional Task Force (MJTF) work activities.**
   The total number of law enforcement agencies comprising the MJTF as well as any others participating in MJTF work activities during the reporting period. (DO NOT duplicate statistical data that has been reported by another participating agency.)

9. **Number of law enforcement officers participating in MJTF work activities:**
   A. Part-time
   B. Full-time

10. **Investigations/Cases**

    A. The number of MJTF investigations/cases active at the start of the quarter.

       For the second and subsequent quarters, the number of "carried in" active cases should match those reported in Question 10E on the previous quarter's report.

       Investigations/Cases should be counted as those incidents involving task force action resulting in post-response reports being written. Until this occurs, tips and information received should be considered gathered intelligence, not individual cases.

    B. The number of new investigations/cases initiated during the quarter.

    C. The total number of MJTF cases active during the quarter. This number should be the sum of item A and item B and will automatically calculate in the report spreadsheet.

    D. The number of cases disposed of by the MJTF during the quarter.

    E. The total number of cases remaining active at the end of the quarter. This number is automatically calculated within the report spreadsheet by subtracting Item D from Item C. This number will be entered on line 10A of the next Quarterly Progress Report.

    F. The number of MJTF cases with evidence submitted this quarter to a State Crime Lab.

11. Arrest Activity

A. The number of people arrested and charged with one or more drug offenses.

B. The number of people arrested and charged with other criminal offenses not involving drugs.

Total number of persons arrested. This number is automatically calculated within the report spreadsheet by adding Items A and B.

C. All law enforcement charges associated with offenders arrested through MJTF actions during the quarter.

All charges proffered against offenders are to be listed. Total charges must equal or exceed the total number of persons arrested. For example, a drug user is arrested for possession of crack. After arrest, he assaults an officer. The quarterly report should indicate a charge for crack possession listed under 1) Drug Paraphernalia/Possession and a charge for resisting arrest/assault against police listed in 3) Other Charges. Result: One arrested person is reported with two charges (illicit drug possession and assault) form this single incident.

1) The number and type of <u>charges</u> related to drug paraphernalia/possession during the reporting period.
2) The number and type of <u>charges</u> related to drug sales and/or manufacturing during the reporting period.

12. Informant Expenses, Drug Purchases and Free Samples

A. The number of drug buys made through MJTF activities during the reporting period.

B. Dollar value of drugs purchased through drug buys during the reporting period.

C. The number of reverse drug buys made through the MJTF activities during the reporting period.

D. Dollar value of reverse drug buys during the reporting period.

E. The number of free drug samples received during the reporting period.

F. The estimated dollar value of drugs received through free samples during the reporting period. Use the local street value of the drugs at the time they were received to make the estimate.

G. The quantities and type of drugs acquired through drug buys, reverse drug buys, and free samples received during the reporting period. Enter the suspected drug type; do not wait for scientific lab examination results. Drug weights may be reported using various units of measure (kg, lb, oz, grams, etc.). For example, two kilos of cocaine are purchased from one distributor, another kilo is purchased from a second distributor in another case, five ounces are acquired through free samples, and eight grams are obtained from street buys during the quarter. In Section 12E 2) Cocaine, enter 3 in the "Kilograms" column, 5 in the "Ounces" column, and 8 in the "Grams" column.

In the report spreadsheet, all quantities entered (kg, lb, oz, grams, and/or doses/pills) will automatically be converted to Ounces and will be summed in the "Total Ounces" column.

H. The total number of active informants paid during the reporting period.

I. The total dollar amount expended acquiring information from active informants during the reporting period.

13. Search Warrants

A. The number of search warrants <u>applied</u> *for* by the MJTF during the reporting period.

B. The number of search warrants <u>authorized</u> for service by the MJTF during the reporting period.

C. The number of search warrants <u>served</u> by the MJTF during the reporting period.
In the narrative (item #18), please indicate the number of warrants served in each county of your jurisdiction.

D. The number of search warrants served by the MJTF during the reporting period which resulted in drug and/or paraphernalia seizures.

E. The number of consent searches and "knock and talk" incidents involving the MJTF during the reporting period.

14. Marijuana Eradicated and Methamphetamine Drug Labs Destroyed

A. The quantities of marijuana *destroyed* through eradication operations during the reporting period. Enter the suspected marijuana type; do not wait for scientific lab examination results. Marijuana weight may be reported using various units of measure (kg, lb, oz, grams, etc.). For example, 50lbs of wild "ditchweed", 32 kilos of cultivated marijuana, and 10 sinsemilla plants are destroyed through eradication during the quarter. In Section 15A 1) Wild, enter 50 in the "Pounds" column. On line 2) Cultivated, enter 32 in the "Kilograms" column. On line 3) Sinsemilla, enter 10 in the "Plants" column.

In the report spreadsheet, all quantities entered (kg, lb, oz, grams, and/or doses/pills) will automatically be converted to Ounces and will be summed in the "Total Ounces" column.

NOTE: If a quantity of marijuana is seized for evidence and not destroyed, enter it in Section 16.

B. The number of methamphetamine drug labs *destroyed* during the reporting period. Please indicate the number of methamphetamine drug labs destroyed in each county in your narrative for Question 18.

NOTE: If there is some question as to whether or not the destroyed lab is a methamphetamine lab, please contact Mr. Eric Shepherd, Missouri Department of Public Safety, at (573) 751-5997.

15. Drug Seizures

A. The estimated dollar value of all drugs seized during the reporting period. Use the local street value of the drugs at the time they were seized.

NOTE: Do not include marijuana destroyed through eradication operations as reported in Section 15.

B. The quantities and type of drugs seized during the reporting period. Enter the suspected drug type; do not wait for scientific lab examination results. Drug weights may be reported using various units of measure (kg, lb, oz, grams, etc.). For example, five kilos of cocaine are seized in three investigations/cases and 10 grams are seized in another during the quarter. In Section 16B 2) Cocaine, enter 5 in the "Kilograms" column and 10 in the "Grams" column.

In the report spreadsheet, all quantities entered (kg, lb, oz, grams, and/or doses/pills) will automatically be converted to Ounces and will be summed in the "Total Ounces" column.

16. Signature of Officer in Charge: Reports submitted electronically should include the Officer's typewritten name. Reports mailed should include the Officer's original signature.

17. Date

Note: When completed, please submit your report electronically to the CJ/LE (formerly NCAP) Program.

If you experience problems with your spreadsheet or have any questions on how to complete your quarterly report form, contact Ms. Chelse Dowell with the Missouri State Highway Patrol at (573) 751-9000 ext. 2216.

Missouri Department of Public Safety
Multi-Jurisdictional Task Force
Quarterly Progress Report

1. Date Submitted _____ **2. Grant Name** _____
mo. day yr.

3. Contact Person _____ **4. Agency Name** _____

5. E-Mail Address _____ **6a. Phone Number** ( ) _____ **6b. Fax Number** ( ) _____

7a. Quarterly Reporting Year _____ **7b. Quarter Number and Quarterly Reporting Period** _____

8. No. of law enforcement agencies involved in multi-jurisdictional task force (MJTF) work activities _____

9. No. of law enforcement officers participating in MJTF work activities

A) Assigned Part Time _____ B) Assigned Full Time _____

10. Investigations/Cases

A) No. of active investigations/cases carried in from last quarter _____
B) No. of <u>new</u> investigations/cases initiated this quarter +_____
C) Total No. of cases active during this quarter (Add item A to item B) =_____
D) No. of cases disposed of this quarter - _____
E) No. of cases carried into next quarter (Subtract item D from item C) =_____
F) No. cases with evidence submitted this quarter to a State crime lab _____

11. Arrest Activity

A) No. of persons arrested for one or more drug offenses _____
B) Total No. of persons arrested (Add item A to item B)
C) Total No. of charges associated with arrests:

1) Drug Paraphernalia/Possession
   a) Marijuana _____
   b) Cocaine _____
   c) Crack _____
   d) Methamphetamine _____
   e) Heroin/Opiates _____
   f) Hallucinogens - LSD _____
   g) Hallucinogens – PCP _____
   h) Paraphernalia _____
   i) Ecstasy _____
   j) Psuedoephedrine/ Ephedrine _____
   k) Anhydrous Ammonia _____
   l) Other illicit drugs _____

2) Drug Sales/Manufacture
   a) Marijuana _____
   b) Cocaine _____
   c) Crack _____
   d) Methamphetamine _____
   e) Heroin/Opiates _____
   f) Hallucinogens - LSD _____
   g) Hallucinogens – PCP _____
   h) Ecstasy _____
   i) Psuedoephedrine/ Ephedrine _____
   j) Anhydrous Ammonia _____
   k) Other illicit drugs _____

12. Informant Expenses, Drug Purchases and Free Samples

A) No. of drug buys made: _____

B) Dollar value of drug buys during this period: $ _____

C) No. of reverse drug buys made: _____

D) Dollar value of reverse drug buys during this period: $ _____

E) No. of free samples received: _____

F) Estimated dollar value of drugs received from free samples during this period: $ _____

G) Drugs purchased and/or received from drug buys, reverse drug buys, and free samples _____

(Enter quantities at time of receipt):

	Kilograms	Pounds	Ounces	Grams	Doses/Pills
1) Marijuana	_____	_____	_____	_____	_____
2) Cocaine	_____	_____	_____	_____	_____
3) Crack	_____	_____	_____	_____	_____
4) Methamphetamine	_____	_____	_____	_____	_____
5) Heroin/Opiates	_____	_____	_____	_____	_____
6) Hallucinogens - LSD	_____	_____	_____	_____	_____
7) Hallucinogens -PCP	_____	_____	_____	_____	_____
8) Ecstasy	_____	_____	_____	_____	_____
9) Psuedoephedrine/Ephedrine	_____	_____	_____	_____	_____
10) Anhydrous Ammonia	_____	_____	_____	_____	_____
11) Other illicit drugs	_____	_____	_____	_____	_____

H) No. of active informants paid _____

I) Total dollars expended on active informants $ _____

13. Search Warrants

A) No. of search warrants applied for during this period: _____

B) No. of search warrants authorized during this period: _____

C) No. of search warrants served during this period:* _____

D) No. of search warrants served resulting in drug and/or paraphernalia seizures: _____

E) No. of consent searches conducted during this period: _____

*** Please indicate (in the narrative) the number of warrants served in each county of your jurisdiction.**

14. Marijuana Eradicated and Methamphetamine Drug Labs Destroyed - Indicate the types of marijuana destroyed through eradication operations. Indicate the number of methamphetamine drug labs destroyed as a result of search warrants, consent searches, arrests, and/or other multi-jurisdictional task force actions.

(**Enter quantities at time of incident)**:

A) Marijuana destroyed:	Kilograms	Pounds	Ounces	Grams	Plant
1) Wild	_____	_____	_____	_____	_____
2) Cultivated	_____	_____	_____	_____	_____
3) Sinsemilla	_____	_____	_____	_____	_____

B) No. of methamphetamine drug labs destroyed: _____

In the narrative, please indicate the county (or counties) the methamphetamine drug labs were destroyed and the number of labs destroyed in each county.

15. Drug Seizures - Describe the types of drugs seized as a result of search warrants, consent searches, and arrests.

(Exclude drug buys and free samples):

A) Estimated dollar value of all drugs seized, based on local street cost: $_____

B) Drugs seized **(Enter quantities at time of seizure)**:

	Kilograms	Pounds	Ounces	Grams	Doses/Pills
1) Marijuana	_____	_____	_____	_____	_____
2) Cocaine	_____	_____	_____	_____	_____
3) Crack	_____	_____	_____	_____	_____
4) Methamphetamine	_____	_____	_____	_____	_____
5) Heroin/Opiates	_____	_____	_____	_____	_____
6) Hallucinogens - LSD	_____	_____	_____	_____	_____
7) Hallucinogens - PCP	_____	_____	_____	_____	_____
8) Ecstasy	_____	_____	_____	_____	_____
9) Psuedoephedrine/Ephedrine	_____	_____	_____	_____	_____
10) Anhydrous Ammonia	_____	_____	_____	_____	_____
11) Other illicit drugs	_____	_____	_____	_____	_____

16. Describe all work activities or areas of interest/concern not reported in the sections above. Also, please indicate the number search warrants served and the number of methamphetamine drug labs destroyed in each county of your jurisdiction.

_____

_____

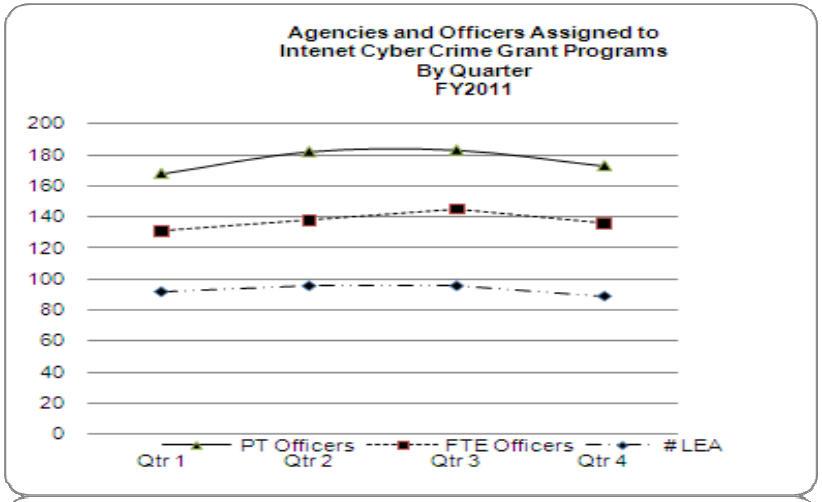
Multi-Jurisdictional Cyber Crime Program

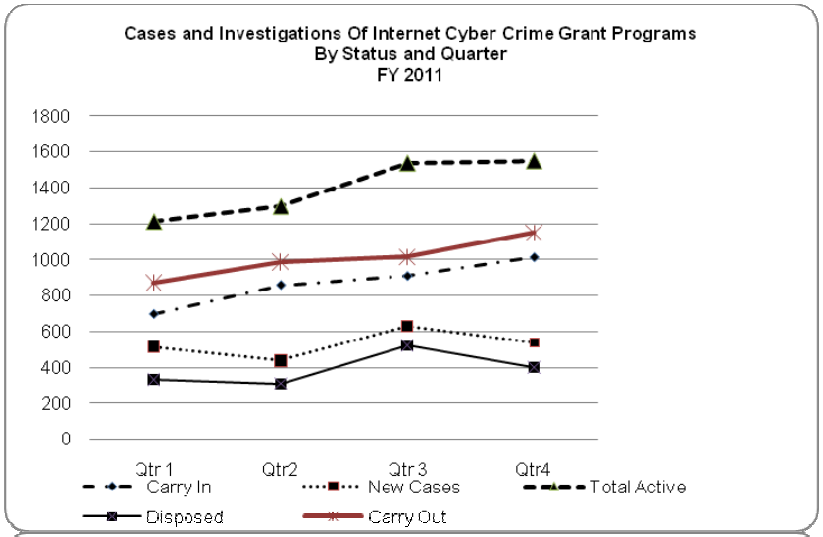
The Multi-Jurisdictional Cyber Crime Grant (MJCCG) Program was developed during the 2010/2011 funding cycle. Prior to that year there existed a state-funded Internet Cyber Crimes Grant (ICCG) Program. The state legislators did not re-appropriate funding for that program, however, so the Missouri Department of Public Safety developed the MJCCG Program in an effort to continue funding for multi-jurisdictional task forces that prevent and control Internet cyber crime as it relates to children. The monies for this Program were made available from the 2010 American Recovery and Reinvestment Act (ARRA) under the JAG-Law Enforcement purpose area.

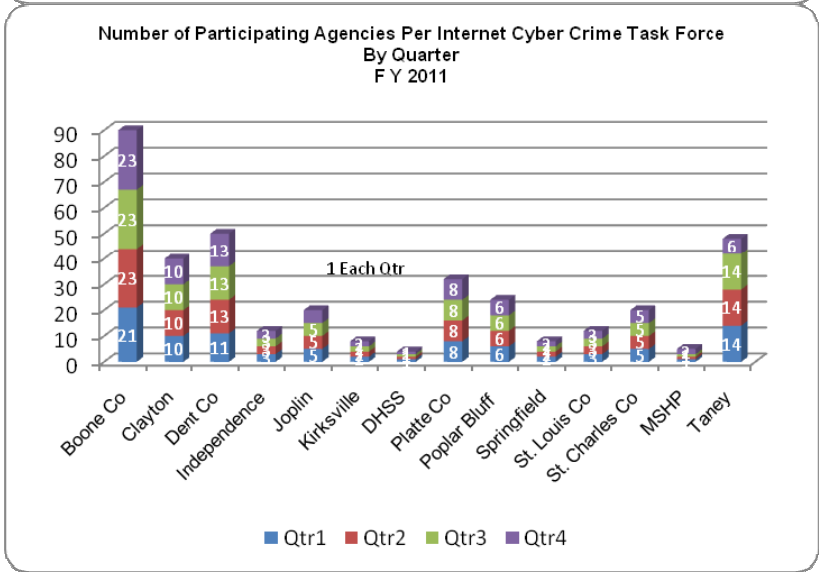
Quarterly Progress Report Automated Information System designed for:

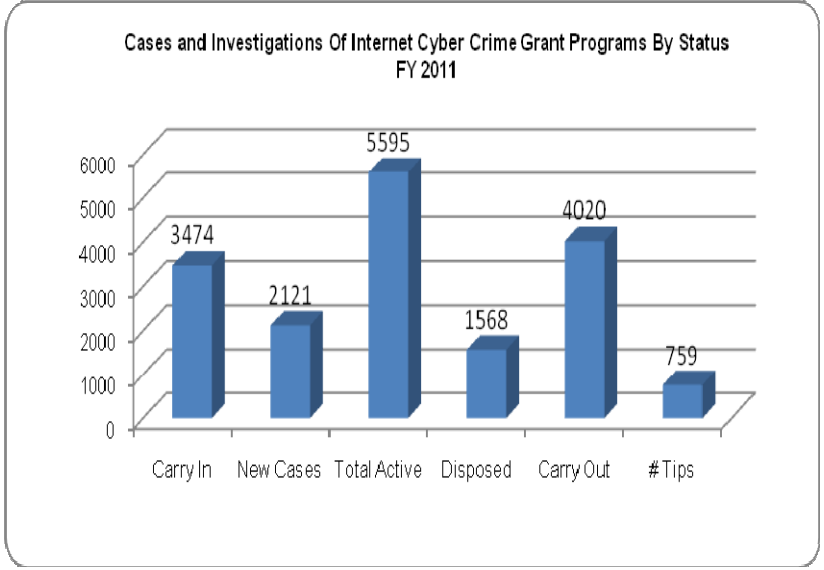
Boone County - Mid-Missouri Internet Crimes Task Force
Clayton City - Regional Computer Crimes Education and Enforcement Group (RCCEEG)
Dent County - South Central Missouri Computer Crime Task Force
Independence City - NE Jackson County Cyber Crimes Working Group Against Internet Crimes
Joplin City - Southwestern Missouri Cyber Crime Task Force
Kirksville City - Kirksville Regional Computer Crime Unit
Missouri Department of Social Services - Operation Cyber-Safe
Platte County - Western Missouri Cyber Crime Task Force
Poplar Bluff City - SEMO Cyber Crimes Task Force
Springfield City - 2011 Internet Cyber Crime Initiative
St. Charles County - Internet Crimes Against Children
St. Louis County - St. Louis County Special Investigation Unit
State of Missouri Highway Patrol - Computer Forensic Unit
Taney County - Tri-Lake Regional Internet Crimes Task Force

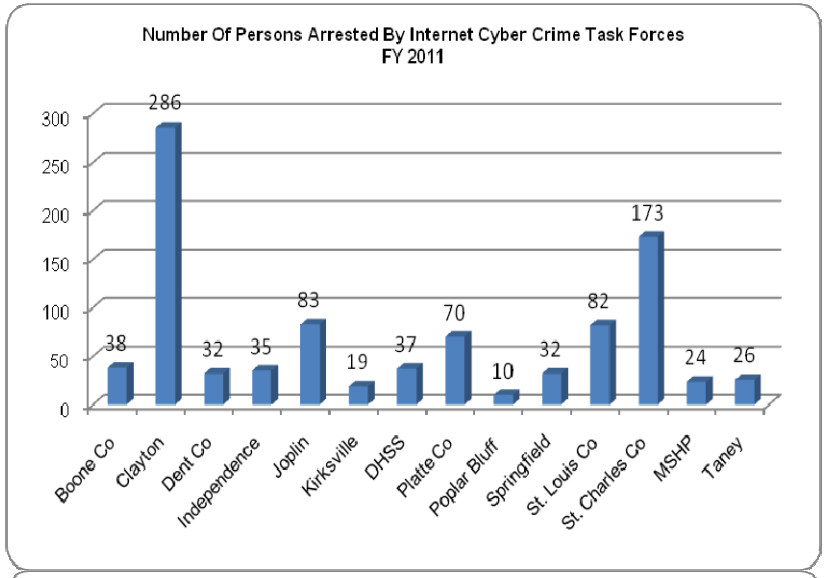
MJCCG FY11 Summary

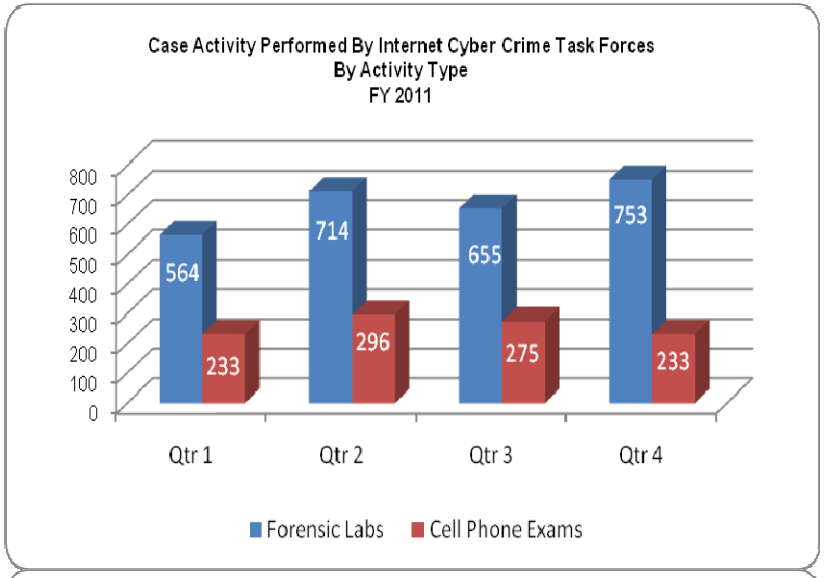


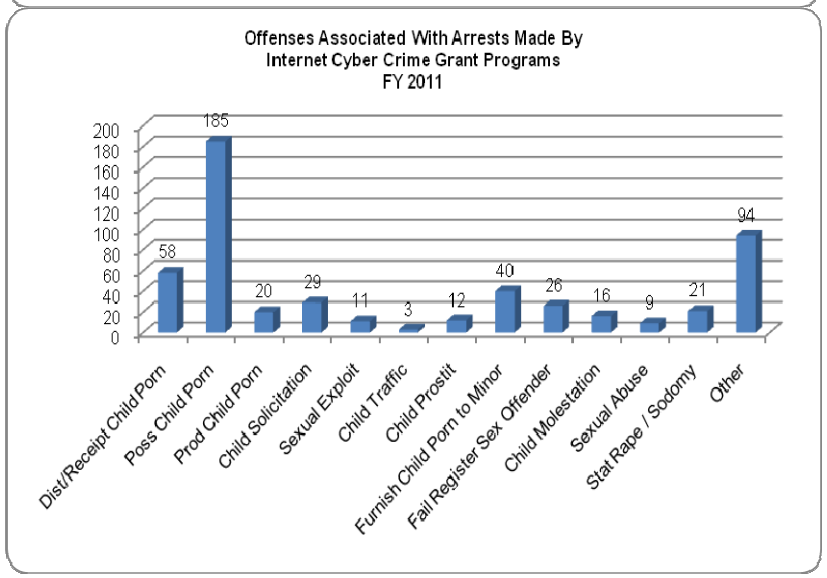


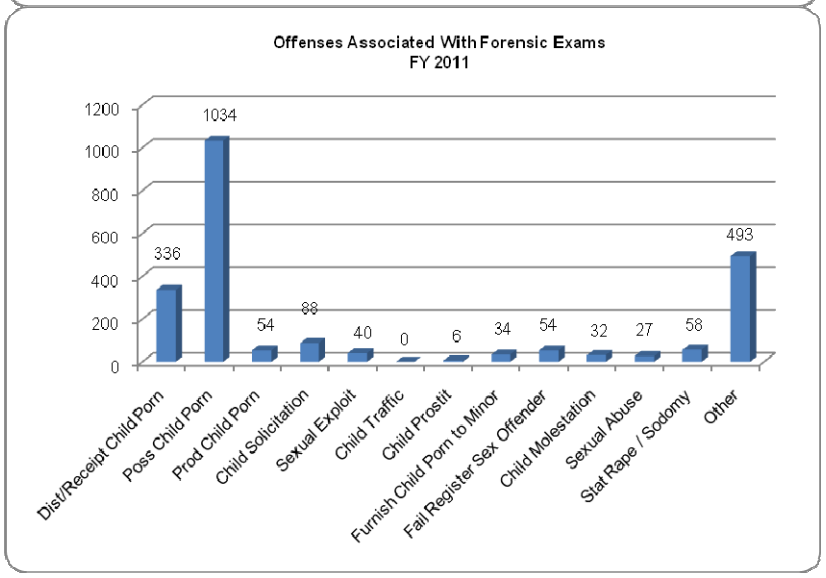


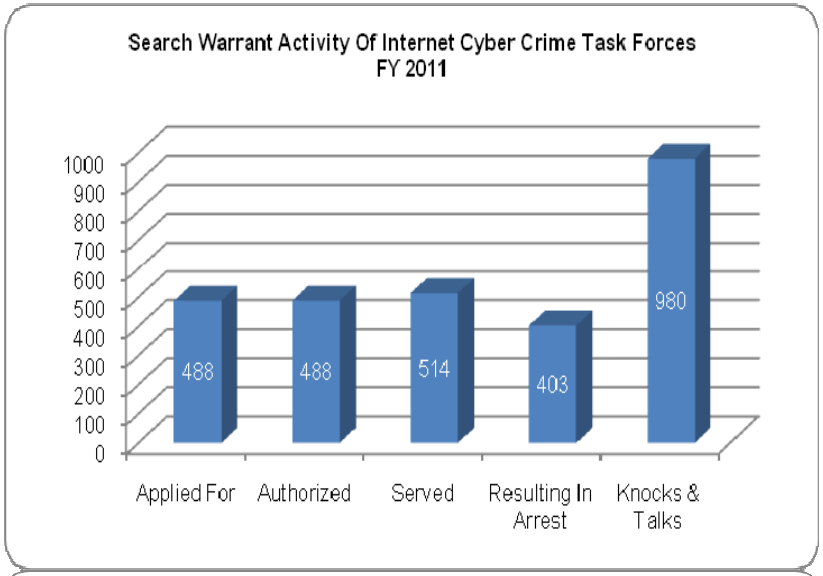


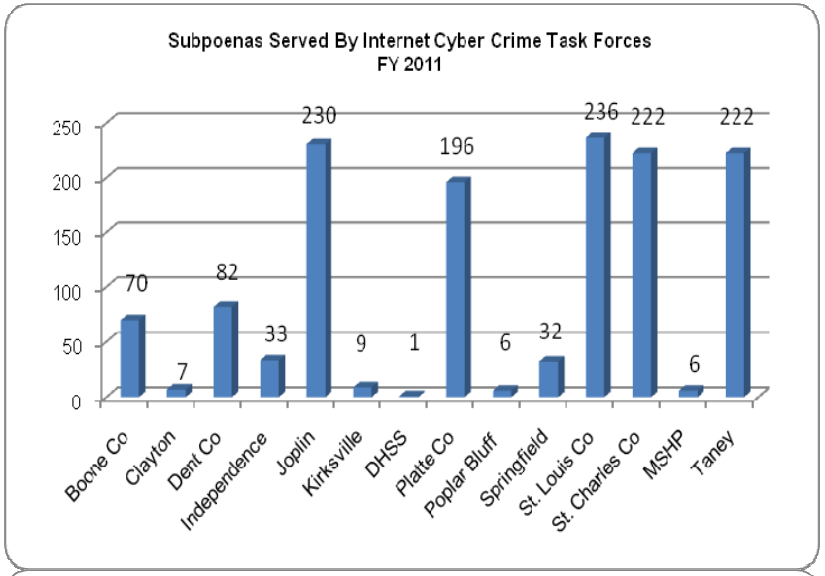

Number Of Persons Arrested By Internet Cyber Crime Task Forces
FY 2011
300
250
200
150
100
50
0
38
286
32
35
83
19
37
70
10
32
82
173
24
26
Boone Co
Clayton
Dent Co
Independence
Joplin
Kirksville
DHSS
Platte Co
Poplar Bluff
Springfield
St. Louis Co
St. Charles Co
MSHP
Taney

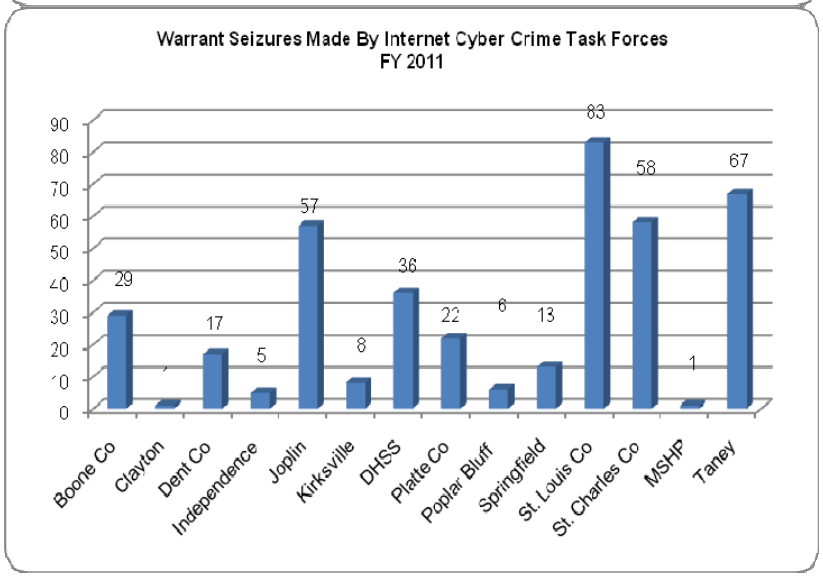

Case Activity Performed By Internet Cyber Crime Task Forces
By Activity Type
FY 2011
800
700
600
500
400
300
200
100
0
564
233
714
296
655
275
753
233
Qtr 1
Qtr 2
Qtr 3
Qtr 4
Forensic Labs
Cell Phone Exams

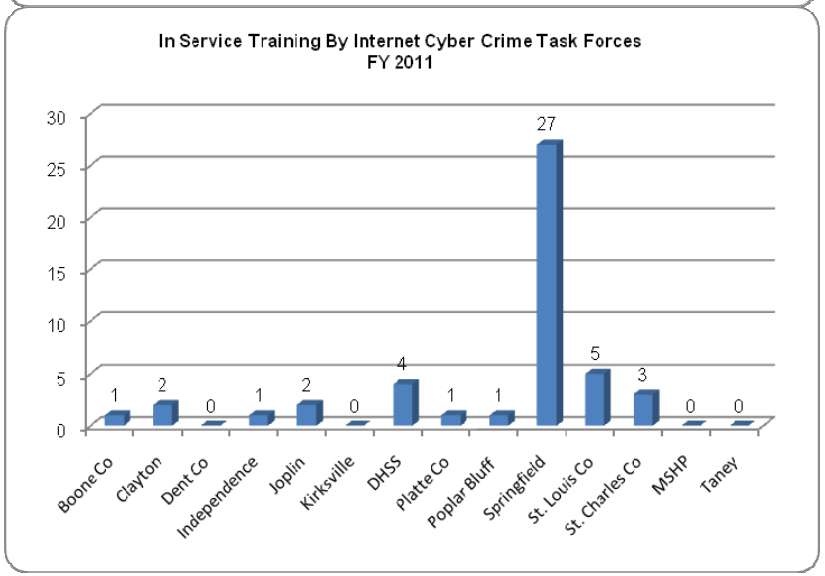

Offenses Associated With Arrests Made By
Internet Cyber Crime Grant Programs
FY 2011
200
180
160
140
120
100
80
60
40
20
0
58
185
20
29
11
3
12
40
26
16
9
21
94
Dist/Receipt Child Porn
Poss Child Porn
Prod Child Porn
Child Solicitation
Sexual Exploit
Child Traffic
Child Prostit
Furnish Child Porn to Minor
Fail Register Sex Offender
Child Molestation
Sexual Abuse
Stat Rape / Sodomy
Other

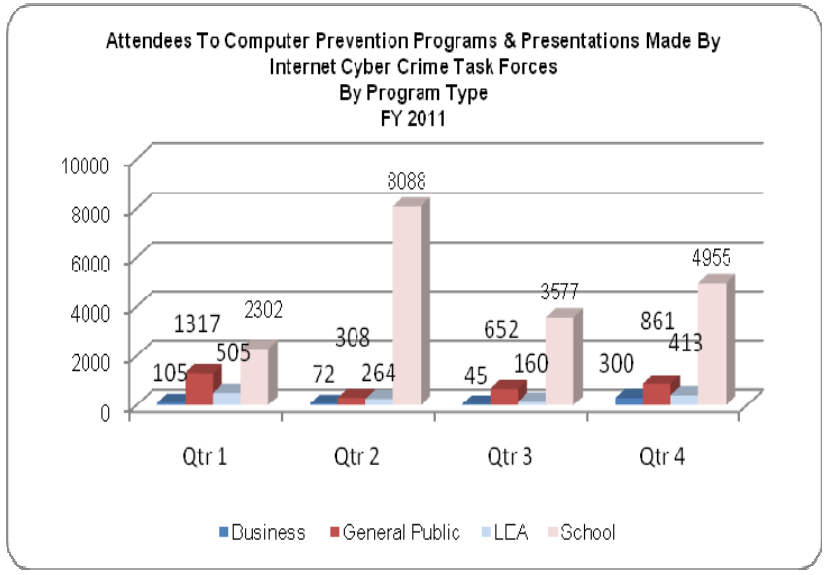

Offenses Associated With Forensic Exams
FY 2011
1200
1000
800
600
400
200
0
336
1034
54
88
40
0
6
34
54
32
27
58
493
Dist/Receipt Child Porn
Poss Child Porn
Prod Child Porn
Child Solicitation
Sexual Exploit
Child Traffic
Child Prostit
Furnish Child Porn to Minor
Fail Register Sex Offender
Child Molestation
Sexual Abuse
Stat Rape / Sodomy
Other

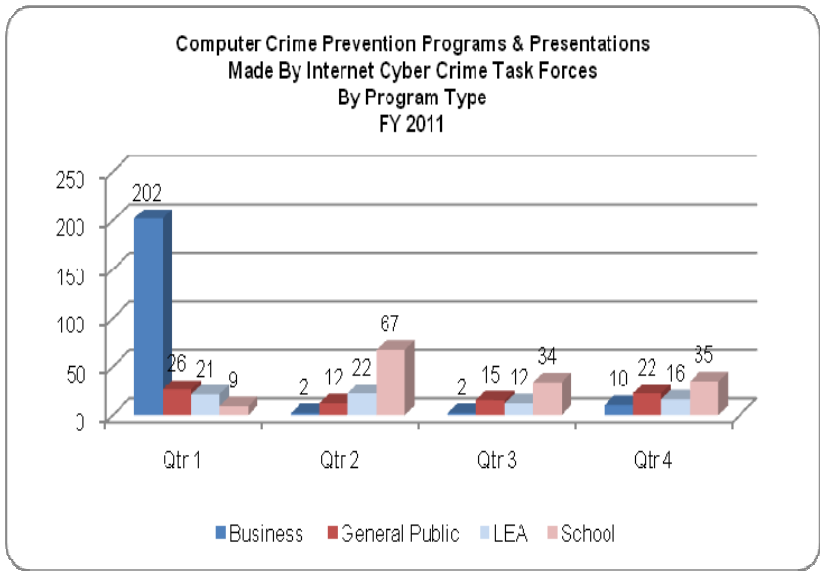

Search Warrant Activity Of Internet Cyber Crime Task Forces
FY 2011
1000
900
800
700
600
500
400
300
200
100
0
488
488
514
403
980
Applied For
Authorized
Served
Resulting In Arrest
Knocks & Talks


Subpoenas Served By Internet Cyber Crime Task Forces
FY 2011
250
200
150
100
50
0
70
7
82
33
230
9
1
196
6
32
236
222
222
6
Boone Co
Clayton
Dent Co
Independence
Joplin
Kirksville
DHSS
Platte Co
Poplar Bluff
Springfield
St. Louis Co
St. Charles Co
MSHP
Taney


Warrant Seizures Made By Internet Cyber Crime Task Forces
FY 2011
90
80
70
60
50
40
30
20
10
0
29
17
5
57
8
36
22
6
13
83
58
1
67
Boone Co
Clayton
Dent Co
Independence
Joplin
Kirksville
DHSS
Platte Co
Poplar Bluff
Springfield
St. Louis Co
St. Charles Co
MSHP
Taney


In Service Training By Internet Cyber Crime Task Forces
FY 2011
30
25
20
15
10
5
0
1
2
0
1
2
0
4
1
1
27
5
3
0
0
Boone Co
Clayton
Dent Co
Independence
Joplin
Kirksville
DHSS
Platte Co
Poplar Bluff
Springfield
St. Louis Co
St. Charles Co
MSHP
Taney


Attendees To Computer Prevention Programs & Presentations Made By Internet Cyber Crime Task Forces By Program Type FY 2011
10000
8000
6000
4000
2000
0
105
1317
505
2302
72
308
264
3088
45
652
160
3577
300
861
413
4955
Qtr 1
Qtr 2
Qtr 3
Qtr 4
Business
General Public
LEA
School


Computer Crime Prevention Programs & Presentations Made By Internet Cyber Crime Task Forces By Program Type FY 2011
250
200
150
100
50
0
202
26
21
9
2
12
22
67
2
15
12
34
10
22
16
35
Qtr 1
Qtr 2
Qtr 3
Qtr 4
Business
General Public
LEA
School

CRIME LABORATORY PROGRAMS

A key to successful prosecution of drug offenders is analysis of evidence. Although not a federally funded grant program, the Missouri Crime Lab Upgrade Program (MCLUP) administered by the Missouri Department of Public Safety provides state-of-the-art equipment and supplies to regional crime labs throughout the state to help defray expenses of the crime laboratories. Data collected from all crime laboratories will be of invaluable assistance in conducting Missouri's problem analysis supporting development of its illicit drug and violent crime strategy.

MCLUP Crime Laboratory Recipients:

Independence Police Department - Crime Lab Upgrade
Kansas City Police Department- Crime Lab Upgrade Program
St. Charles County Sheriff's Office - Crime Lab Upgrade Program
St. Louis City Metropolitan Police Department - Crime Lab Upgrade Program
St. Louis County Police Department - Crime Lab Upgrade Program / Personnel Enhancement
Missouri State Highway Patrol (MSHP) - FY 11 Crime Lab Upgrade Program
Truman State University - Crime Lab Upgrade Program

Quarterly Progress Report Automated Information System designed for Non- Recipients:

MSHP Troop B Satellite Laboratory
MSHP Troop C Satellite Laboratory
MSHP Troop D (Springfield) Satellite Laboratory
MSHP Troop E Satellite Laboratory
MSHP Troop G Satellite Laboratory
MSHP Troop H Satellite Laboratory

INDEPENDENCE - CRIME LAB UPGRADE: This project supports the purchase of equipment that will be used daily in the Independence Crime Laboratory for drug and other analyses. Purchased equipment includes a one Split/Splitless inlet, one Morpho printer, five Canon 7D digital cameras and accessories, and two rear view camera systems. Supply items include one capillary column.

The crime scene investigators will utilize the Cannon 7D digital cameras and accessories to record crime scenes at a higher quality level than currently experienced. The digital cameras in use at this time have been in service for approximately four years and are becoming technologically out dated and have been experiencing multiple errors because of the continual usage. The crime scene unit will also utilize the rear view camera system within the crime lab response vans in order to provide better visual awareness and safety at crime scenes. The DVD/VHS recorder is needed in order to provide capabilities to recover video from business within the community.

The latent print section frequently requests latent identification cards from the Missouri State Highway Patrol in order to compare unknown latent prints. This process is cumbersome and had decreased case processing time. The Morpho printer and accessories will allow for electric viewing and enhancement of known prints. The ease of access to known prints and the ability to print the identity cards at the current AFIS workstation is a necessary addition for the capabilities of the latent examiner.

The controlled substance laboratory section is in need of the addition of a Split/Splitless inlet injection port to the current gas chromatograph/mass spectrometer in order to provide quantitative results on large cocaine and methamphetamine drug cases. The capillary column is specific to the application of obtaining purity results.

The items mentioned above will improve the Independence Missouri Crime Laboratory's ability to provide quality services to the citizens of the community and will be used for many years.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

KANSAS CITY - CRIME LAB UPGRADE: This project will support a Forensic Firearms Technician/NIBIN position as well as the purchase of several equipment/supply items to enhance the operation of the crime laboratory. The position funding is required due to severe budget shortfalls of the Kansas City Crime Laboratory.

The crime laboratory has identified several areas in personnel and supplies without a funding source that will be removed from the upcoming budget. If these areas are not funded, the productivity, efficiency and the effectiveness of the entire crime laboratory would be affected in a negative manner. For this reason, the Kansas City Crime Laboratory is seeking funding sources to supplement this deficit to maintain the current level of quality service that is provided.

Other items include memberships in professional societies that promote an exchange of information.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

ST. CHARLES COUNTY - CRIMINALISTICS LABORATORY UPGRADE: This project is a crime laboratory upgrade program for the purchase of equipment and supplies to enhance the overall existing level of forensic services provided by the St. Charles County Sheriff's Department Criminalistics Laboratory.

Other items include DNA quantification Kits, DNA amplification Kits, and Packages DNA Concentrators.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

ST. LOUIS METROPOLITAN - CRIME LAB UPGRADE: This project supports the purchase and upgrade of laboratory equipment that will increase the analytical capacity of the St. Louis Metropolitan Crime Laboratory. The St. Louis Metropolitan Police moved to a new lab in 2005 and many computers were purchased at that time. These computers should be replaced as they have now become out dated and no longer have optimal efficiency. Due to this newer technology, compatible laser printers, barcode scanners and printers and flat bed scanner will be purchased as well.

The St. Louis Metropolitan Police will also be purchasing an upgraded high purity water system that will replace a maintenance expensive older system and metal detectors that will allow for the detection of brass. Currently, the crime scene unit does not have the capability to detect brass. Lastly, the lab will purchase a tube writing system for the DNA unit to improve efficiency in labeling when dealing with a large volume of tubes.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

ST. LOUIS COUNTY - CRIME LAB UPGRADE - PERSONNEL ENHANCEMENT: This project supports the St. Louis County Crime Laboratory that provides forensic services to the over one million citizens of St. Louis County. The laboratory provides support and forensic services to the unincorporated areas of St. Louis County and to the 91 municipalities and 60 law enforcement agencies within St. Louis County. Additionally, the laboratory provides forensic services to any federal law enforcement agency conducting criminal investigations within the Eastern District of Missouri.

The MCLUP Grant funding continues to afford the St. Louis County Police Department the opportunity to enhance personnel at our Police Crime Laboratory by providing funding for one Forensic Scientist position. In 2009, the Forensic Scientist receiving MCLUP funding, Mr. Ryan Campbell, completed Fire Debris Analysis Training resulting in the analysis and completion of 30 Fire Debris cases. Mr. Campbell also completed 615 Drug related cases, resulting in over 1,300 items tested.

Funding from this grant will also assist with the purchase of a new Agilent 6120 Single Quad Mass Spectrometer and five new brand laptops. The additional instrumentation will provide analysis capabilities currently unavailable to the Police Crime Laboratory and will greatly increase the efficiency at which drug cases are analyzed. The additional laptops will provide

more efficient results entry and case analysis in conjunction with the laboratory's new LIMS bar code system.

Overall, the funding form the MCLUP Grant will be used to reduce the Drug and Fire Debris case backlog and proved services currently unavailable to the Police Crime Laboratory.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

STATE OF MISSOURI HIGHWAY PATROL - CRIME LAB UPGRADE: This project supports the purchase of new equipment, maintenance and/or consumables utilized during the analysis of evidence. The Missouri State Highway Patrol provides analysis of evidence submitted by law enforcement agencies from all areas of our state. This evidence may be examined at any one of the eight (8) laboratories operated by the Patrol. The MCLUP funds are used to purchase new equipment, maintenance and/or consumables utilized during the analysis of evidence. Missouri State Highway Patrol Crime Laboratory Division provides analysis of evidence submitted by law enforcement agencies from all areas of our state.

Other items include Lab Furnishings, Remote AFIS Workstation and Operational Supplies.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

TRUMAN STATE UNIVERSITY - CRIME LAB UPGRADE: This project supports the Truman State University Crime Laboratory's analyses and evidence identification of controlled substances, metabolites of controlled substances, and other drugs as requested. Types of services provided include the identification of controlled substances, metabolites of controlled substances, and other drugs as requested. Other services provided include the following: the qualitative & quantitative measurement of ethyl alcohol in blood, beverage, and other biological samples: the development of fingerprints by chemical & physical development techniques; the comparison identification of people from these fingerprints; the examination of spent cartridges and projectiles in firearm related cases; and the chemical identification of unburned and partially burned gunpowder in shooting cases. Examination of documents where impressions and chemical examination may provide useful information. Laboratory examination of tool marks, footwear, and tire tack impressions are also done for comparison to suspect specimens. The laboratory also has the capability to examine fibers and hair samples by microscopic and infrared techniques, but only rarely receives this type of sample.

Other items include are routine supplies and office supplies.

EVALUATION DESIGN: This project is supported through the Crime Laboratory quarterly status report automated information system.

Missouri Department of Public Safety
Crime Laboratory
Quarterly Progress Report Instructions

This instruction sheet is to aid the Crime Laboratory grantees in completing the required quarterly progress report for the Department of Public Safety.

1. **Date Submitted** Self-explanatory
2. **Grant Name**
3. **Contact Person** As designated in Crime Lab contract with Dept. of Public Safety
4. **Phone No.** Self-explanatory
5. **Email Address** Self-explanatory
6. **Fax Number** Self-explanatory
7. **Quarterly Reporting Period**
8. **Quarter Number and Quarterly Reporting Period**

9. Indicate the appropriate number of completed cases for the reporting period
a), b), and c) The total number of these three subcategories should equal to the number placed in **10**. For example: If you have 35 completed cases for the period, you would put "35" in **10**. Of those cases, 12 did not involve any tests for suspected illicit drugs (i.e. blood splatter analysis, ballistics test, latent print analysis, etc.), 6 were tested for suspected illicit drugs and none were found, and 17 were tested for suspected illicit drugs and some were detected. You would put "12" in **10a**, "6" in **10b**, and "17" in **10c**. The sum of these is equal to 35, and should be entered in **10**.

10. Self-explanatory

11. Of those completed cases in which one or more illicit drugs and/or precursors were identified through examinations, indicate the number of cases directly involving a clandestine laboratory where they were being produced. If more than one type of illicit drug was being produced, enter the case in all appropriate lab type subcategories. For instance, if a lab produced PCP and LSD, enter the case in both **12d** and **12e**. If other illicit drugs are found at the scene, but not produced by the clandestine laboratory, enter that activity in **13** under the appropriate drug type subcategory.

12. Of those completed cases in which one or more illicit drugs were identified through examinations, and did not involve clandestine laboratory production, list the cases by specific drug type. If more than one type of illicit drug was identified, enter the case in all appropriate drug type subcategories. For instance, if in a possession case, marijuana and methamphetamine were detected, enter the case in both **13a** and **13d**.

13. Refer to the total number of completed cases involving the examination for one or more illicit drugs (sum of cases listed in **10b** and **10c**). Compute and enter the average amount of time it took to process these cases based on the date the case was received to the date it was considered completed.

14. Indicate any new illicit drugs identified through examinations. List the name of the new drug, the number of cases where it was detected, and a description of the new drug. The description should include the classification the drug falls into, such as hallucinogen, inhalant, etc.

15. Indicate any resurgence of older type drugs identified through examinations. List the name of the older drug, the number of cases where it was detected, and a description of the older drug. The description should include the classification the drug falls into, such as hallucinogen, inhalant, etc.

16. Indicate any grant fund equipment acquisition activity in the reporting period. Acquisition activity is defined as ordering, receiving, or making the equipment operational. List the date this activity took place. Also list the dates of the prior activity associated with the equipment acquisition, even though it may have been reported in a prior quarter. For instance, the equipment became operational in this quarter. List the date it became operational, as well as the dates ordered and received, even though they happened in a different quarter.

17. Indicate any other activity or information not reported elsewhere in this form which directly addresses any action and/or condition specified in your Crime Lab contract. In addition, include a description of any other activities which will assist the Department of Public Safety to properly review and evaluate your program.

18. Signature of Project Officer Self-explanatory

19. Date

<u>Note:</u> When completed, please submit your report electronically to the Criminal Justice/Law Enforcement Program.

If you experience problems with your spreadsheet or have any questions on how to complete your quarterly report form, contact Ms. Chelse Dowell with the Missouri State Highway Patrol at (573) 751-9000 ext. 2216.

Missouri Department of Public Safety
Crime Laboratory
Quarterly Progress Report

1. Date Submitted _____ **2. Grant Name** _____
mo day yr

3. Contact Person _____ **4. Phone No. ( ) _____**

5. Email Address _____ **6. Fax No. ( ) _____**

7. Quarterly Reporting Year _____ **8. Quarterly Reporting Period** _____ **to** _____
mo yr **mo yr**

9. No. of cases in which all requested examinations were completed during reporting period _____

a) No. of cases where no tests for illicit drugs were requested _____
b) No. of cases where illicit drug exams were requested/tested and none were identified _____

c) No. of cases where illicit drug exams were requested/tested and one or more drugs were identified _____

10. No. of active cases pending at the end of the reporting period

11. Identify the number of cases completed during the reporting period in which the following illicit drugs and/or precursors were detected while being produced in a Clandestine Laboratory operation

Lab Type	No. of Cases
a) Methamphetamine Final product only	_____
b) Methamphetamine Precursors only	_____
c) Methamphetamine Precursors and Final product	_____
d) LSD	_____
e) PCP	_____
f) Other Clandestine Labs	_____

12. Identify the number of cases completed during reporting period, that were not directly related to Clandestine Lab operation production, by types of illicit drugs

Drug Type	No. of Cases
a) Marijuana	_____
b) Cocaine Powder	_____
c) Crack	_____
d) Methamphetamine	_____
e) Heroin/Opiates	_____
f) LSD	_____
g) PCP	_____
h) Other Illicit Drugs	_____

13. Of all cases completed during the reporting period where illicit drugs were suspected, what was the average processing time (in days)?

NOTE: Processing time is from the date case was received to date it was considered completed _____

14. Were any new illicit drugs identified in the cases completed during the reporting period?

No
Yes

If yes, please list

Name	No. of Cases	Description
_____	_____	_____
_____	_____	_____

15. Did you notice any resurgence of older type drugs in the cases completed during the reporting period?

No
Yes

If yes, please list

Name	No. of Cases	Description
_____	_____	_____
_____	_____	_____

16. Equipment (Please list the types of laboratory equipment being acquired with grant funds during the reporting period)

Equipment Name	Quantity	Date Ordered mo day yr	Date Received mo day yr	Date Operational mo day yr

17. Describe all work activities or areas of interest/concern not reported in the sections above

_____

_____

_____

_____

_____

18. Signature of Project Officer_____ **19. Date** _____

SECTION VI: Coordination Efforts

It is recognized illicit drug use and distribution are linked to other types of criminal behavior contributing to social problems facing the State of Missouri. These only can be addressed through coordination of efforts and resources at all levels. For this reason, the Missouri Department of Public Safety (DPS) assists in coordinating programs between federal, state, and local law enforcement agencies. For enforcement purposes, departments are strongly encouraged to develop cooperative agreements with federal agencies such as the Drug Enforcement Agency (DEA), Federal Bureau of Investigation (FBI), Bureau of Alcohol, Tobacco, and Firearms, (ATF), U.S. Postal Inspection, U.S. Attorney's Offices, and the National Guard. In addition, every attempt is made by the Department of Public Safety to coordinate CJ/LE programs with other resources coming to the state of Missouri such as High Intensity Drug Trafficking Area (HIDTA), Missouri Sheriff Methamphetamine Relief Team (MOSMART), Residential Substance Abuse Treatment Program (RSAT), and Department of Defense Property Program (DOD). These programs are coordinated with the CJ/LE program to prevent duplication of efforts and to build a comprehensive enforcement strategy.

COORDINATING PROGRAMS/PROJECTS:

Department of Defense (DOD) 1033 Excess Property Program

During July 1, 2010 and June 30, 2011, there continued to be an increase in the number of agencies that have registered to participate in the DOD 1033 Excess Property Program (Program). The Missouri Department of Public Safety (DPS) continues to see an increase in the number of agencies that are processing requests compared to FY10. With the ever-increasing budget restraints and manpower shortages, the number of agencies utilizing the electronic screening process over the internet-based website for the Defense Logistics Agency's (DLA) Disposition Services Agency (DSA) is increasing as well. The cost of shipping equipment directly to their agency is by far cheaper than the agency traveling to the Disposition Services Location (DSL) to pick the item(s) up. This in turn increases the total dollar amount of property the agencies are receiving each fiscal year.

As an approved Transitional Distribution Center (Center), DPS staff continued to screen and tag mostly IT equipment, such as desktop and laptop computers. Staff can bring these items back to the Center and refurbish them prior to issuing them out to the requesting local agencies. This IT equipment is assisting law enforcement agencies in capturing crime statistics data and managing records as well as inter-agency networking via the Internet.

Types of property these local agencies are tagging include, but are not limited to: watercraft, for the agencies located along one of the many rivers or lakes in the State of Missouri; generators, to assist during power losses due to storms; off-road 4x4 vehicles, to assist with drug eradication; and specialty gear that tactical teams are using for high risk entry, such as night vision goggles, spotting scopes, red dot rifle scopes, and load-bearing tactical vests. DPS staff has seen a significant increase in the number of agencies requesting weapons for high-risk search warrant entry and active shooter incident response along with an increase in requests for the off road HMMWV (Hummer) during FY11.

Local Law Enforcement Block Grant Program

Prior to FY 2005, there existed two separate federal grant programs for the purpose of assisting law enforcement and improving public safety. These two programs were known as the Edward J. Byrne Formula (Byrne) Grant and the Local Law Enforcement Block Grant (LLEBG). The LLEBG Program originated as the HR728 Local Government Law Enforcement Block Grant Act of 1995 and was authorized under the Omnibus Fiscal Year 1996 Appropriations Act (Public Law 104-134).

In FY 2005, the Edward Byrne Memorial Justice Assistance Grant (JAG) Program replaced the Byrne Grant and the LLEBG Program with a simple funding mechanism to simplify the administration process for grantees. For simplicity purposes, however, the Missouri Department of Public Safety has continued to administer contracts under the purpose area of the Local Law Enforcement Block Grant for the purchase of equipment.

The Local Law Enforcement Block Grant Program (LLEBG/JAG) is a vital funding mechanism for law enforcement. Requiring as little as 10% match, this program is essential for small law enforcement agencies with limited resources, whose funding requests support the program objective of reducing crime and improving public safety.

During the 2010/2011 reporting period, DPS made 122 LLEBG/JAG grant awards to law enforcement agencies across the State. The total award amount for this period was $855,676.43. Short-term contracts are awarded in amounts up to $10,000 for purchase of basic law enforcement and officer safety equipment that will enable Missouri law enforcement to meet their local needs. Such items include, but are not limited to light bars, sirens, mobile and portable radios, flashlights, handcuffs, protective clothing, ballistic vests, car cages, in-car cameras, locks, and trauma kits. The LLEBG/JAG contracts, administered by the DPS - CJ/LE, are awarded only to law enforcement agencies through their respective state or local unit of government. Eligible applicants may not have received a direct FY2010 JAG award from the Bureau of Justice Assistance (BJA).