Wyoming’s Methamphetamine Initiative: The Power of Informed Process

By David Singh

The name Rodger McDaniel is well known in Wyoming. Although he currently serves as an ordained minister, he has served many roles over the years. He served as a legislator in the Wyoming House of Representatives and Senate for 10 years and worked as a lawyer for 20 years. McDaniel was the Democratic Party nominee for the U.S. Senate in 1982. He left Wyoming in 1991 for Nicaragua, where he and his wife served as national directors of Habitat for Humanity operations. His devotion to God, the people of Wyoming, and others around the world is the source of McDaniel’s local prominence. In many ways, he is the quintessential Wyomingite—confident, courageous, and family oriented.

McDaniel’s pride is his two children. His daughter Meghan was a gifted cellist at the age of 16 and had been president of her church group. No one would have suspected that she was also addicted to methamphetamine—at least of all McDaniel. Such problems exceeded the boundaries of his wildest imagination. In his words, “We were involved in the lives of our children. We thought that would immunize them against problems like drug abuse.” When McDaniel’s son Pete awakened him in the middle of a March night in 1998 to inform him that Meghan had been injecting drugs and was “sick,” his universe collapsed. “I thought I was an involved parent,” he remembers. “I thought I had done everything right. I knew that kids used drugs, but I thought it was other people’s kids.”

As his daughter lay on a hospital bed in the emergency room, he and his wife struggled to cope with the reality of their nightmare and had little idea of how to proceed. Overdoses from methamphetamine were not seen very often, and the emergency room staff could offer little in the way of advice. One doctor offered what little he knew about drug treatment: “I think there is a treatment center in Colorado Springs,” he said. Finding treatment for Meghan was no easy task—resources for victims of drug abuse in Wyoming were scant. When McDaniel and his wife finally discovered that help for meth addiction was offered in
Eventually, they found the Hazelden Center in Minneapolis, Minnesota, through the Internet. Meghan went there for 28 days of treatment and then to The Gables in Rochester, Minnesota, for extended residential care. “It took 4 months in an intensive controlled environment before she even considered going sober,” says McDaniel. “That should give you an idea about the power of meth addiction.” After 9 months in residential treatment, Meghan continued for 2 more months in outpatient aftercare. She felt unsafe returning to Wyoming and remained in Rochester, working and attending daily Alcoholics Anonymous meetings. Meghan came home this past spring. Two and a half years after entering treatment, she remains sober. She is enrolled in college, determined to rebuild her life. “In this journey, we learned two important lessons,” McDaniel says. “The first is that this problem can happen to anyone. The second is that treatment, when done well, works.”

In the early 1990s, a monster descended on the state of Wyoming. It crept in sneakily, steadily, and under a veil of silence. In many ways, the McDaniels’ experience with methamphetamine mirrored the Wyoming experience. Drugs were thought to be a big-city problem, and denial allowed meth to take root. Methamphetamine was addictive, available, and cheap. It created a population of addicts virtually overnight, and it was not long before it began to cause large-scale havoc—destruction that could not go unnoticed. “Looking back, the warning signs were there,” says McDaniel. “We just did not want to see them.”

There is a story to be told in Wyoming’s recognition of this destruction. Like many stories, it contains lessons—lessons about overcoming denial, learning to work together to achieve success, coming to grips with new ways of thinking, and trying to convince others to change. Wyoming’s response to the methamphetamine crisis is ultimately a story of hope, determination, and positive change can emerge from crisis.

Today, many Wyoming citizens see addiction through eyes of compassion, not disgust. An ambitious initiative to rid the state of meth and meth addiction is under way, and it marks a shift in priorities from enforcement to treatment. Notably, the shift also enjoys overwhelming public support. How did this plan come to be, and why does it remain so popular? Who are the leaders in the state working to put the plan into place? What does the plan look like, and what does it hope to accomplish? The answers to all of these questions are found as the story of Wyoming’s Methamphetamine Initiative unfolds.

Methamphetamine Comes to Wyoming

Wyoming is the ninth-largest and least populous state in the nation with more than 100,000 square miles of rugged land and fewer than 500,000 residents. Based on its population density, the entire state is considered a frontier area. Wyoming is a relatively poor state and, unlike the rest of the nation, has not benefited much from the upswing of the national economy. Its economy is driven primarily by mining, oil, gas, tourism, and government employment. The state has more than 900 miles of interstate highway, about 400 of which make up the main transportation route from California to the Midwest. Approximately 4 million people visit Wyoming each year. Its vast prairies, roaming wildlife, and mountain streams make it a traveler’s paradise.

The notion of substance abuse has never been a part of Wyoming’s rugged frontier image, but it has long been a part of Wyoming’s reality. An article that appeared in the Saratoga Sun in 1897 reads:

“There is entirely too much drunkenness in this town for the comfort of peaceable and law-abiding people. It is hardly possible for a lady to pass along the street without having...
drunken and profane language issuing from saloons there. Drunk men should be made to keep their places, and we pay taxes and maintain a government for the purpose of holding such things in check.

Indeed, some 100 years later, the state government still struggles with nuisances related to substance abuse. Today, however, lewd language has been replaced by more serious problems. While alcohol still threatens the peace, other devastating drugs plague the state. This is the case with methamphetamine, a drug that was largely unavailable in Wyoming before 1993. Those persons who were on the front lines of drug control were the first to discover that a crisis was in the works.

Enter Tom Pagel. Pagel is the Director of the Division of Criminal Investigation (DCI) for Wyoming and oversees enforcement operations for the state. “The enforcement community saw the emergence of methamphetamine first,” he explains. “Around 1992, our officers were making more and more arrests each year related to methamphetamine. In 1992, we made 20 arrests; in 1994, we made 69. Last year (1999), we made 142.” Local statistics confirmed this trend (figure 1). Casper, Wyoming—later discovered to be one of the meth hotspots for the state—was hard hit. In just one year (1992–93), drug arrests in Casper rose 321 percent. A substantial number of these arrests were related to methamphetamine use and abuse (figure 2).

“Prior to methamphetamine, cocaine was the drug of choice for most serious users in our state,” Pagel explains. “When meth hit, it offered more bang for less buck. The high from cocaine generally lasts anywhere from 1 to 2 hours. The high from meth lasts between 8 and 10 hours and is generally cheaper than cocaine. For serious users, meth is a more attractive drug.”

It was not long before criminal entrepreneurs realized that a great deal of money could be made in the methamphetamine business. Wyoming’s vast and remote frontier land made it an ideal location for methamphetamine labs. Dangerous “hot” manufacturing techniques were no longer needed with the introduction of less dangerous “cold” protocols. A complete stranger to meth manufacturing who has Internet access, a full-service retail store, and a small amount of money could have a meth lab up and running in a short time. Although enforcement officials suspected that the majority of meth in Wyoming originated in Mexico, they were also making more and more meth lab busts each year. In 1997, three labs were discovered. By 1999, that number had risen to 20 (figure 3).

In addition to being head of Wyoming’s Division of Criminal Investigation, Pagel is chairman of the Governor’s
Substance Abuse and Violent Crime Advisory Board. The board consists of diverse individuals from a variety of entities, including state agencies, local government, and various communities throughout the state. The board meets monthly to further its mission to develop and execute a drug and crime control strategy for Wyoming. It was at these meetings in the early 1990s that Pagel realized that his officers were not the only ones seeing the rampage of methamphetamine.

“I remember one meeting in particular,” he says. “We had a representative from the state department of health on our board at the time. She mentioned that she had pulled 10 recent files from state-sponsored drug treatment clinics. Seven of them described individuals addicted to methamphetamine. Jaws around the table dropped. We were just not used to seeing those sorts of numbers with meth.”

Alarmed by the numbers, Pagel and the board took a closer look at the few statistics that were available to them. Representatives went back to their respective agencies to look at their own statistics to get a better feel for the problem. The results were not encouraging. “Once we started to look, we saw meth or the effects of meth nearly everywhere,” Pagel explains. The Department of Family Services was seeing more and more foster children who were the victims of parents who abused meth. The prison population showed a higher incidence of meth use and abuse, and drug treatment providers were seeing more and more meth cases each day. These direct measures clearly pointed to a growing meth problem. Less difficult to prove but no less troubling were the indirect consequences of drug abuse. Violent crime in both juvenile and adult populations was on the rise. Increases in teen pregnancy, truancy, and domestic violence all were thought to be connected to the rise in methamphetamine use.

Pagel and the board were convinced that Wyoming had a meth problem in desperate need of attention. Yet, it was clear that they needed to learn more before any action could be taken.

The answer to Wyoming’s search for solid statistical evidence was Bernard Ellis, an epidemiologist and public health professional. Ellis had more than 25 years of experience studying patterns of drug abuse throughout the United States.

In the early 1990s, drug abuse was increasingly cast as a public health dilemma in addition to its more traditional image as a criminal justice problem. As a result, federal agencies, most notably the U.S. Department of Health and Human Services, encouraged the application of statistical research methods to assess the scope and direction of substance abuse at state levels. Wyoming was one of the first states to answer this call; others included Colorado, Illinois, Massachusetts, New Mexico, and New York. All of these states applied the same statistical logic to substance abuse that had been applied to diseases like tuberculosis and polio in decades before. Using a number of research techniques, epidemiologists and statisticians could paint a picture of drug abuse in populations in question. That information could, in turn, drive informed drug control policies.
Researchers ultimately seek to describe a problem by making inferences about the population through population sampling. By using different research methods and taking multiple samples, researchers can attain a more accurate description of the problem. Over the course of 3 years, Ellis and other researchers conducted 8 studies in Wyoming, each with a different population and research method. Some studies, such as surveys, required generating new data before any analysis could be done. Other studies focused on the social indicators of drug abuse, such as arrest rates and mortality, and relied on pre-existing records kept by state agencies such as the department of health.

**Studies Reveal the Magnitude of the Meth Problem**

The results were shocking (figure 4). According to Ellis, “If these numbers had been about measles or some other disease, we would have been setting up quarantines.” One study that surveyed more than 80 percent of Wyoming’s students in junior high and high school showed that

- More than 40 percent of Wyoming children in grades 10 through 12 met the DSM–IV criteria to be classified as drug abusers. One in 10 could be classified as drug dependent.
- Wyoming eighth graders had higher methamphetamine user rates than high school seniors nationwide.
- Fifty-one percent of the Wyoming Boys School population and 59 percent of the Girls School population (both reformatory schools) reported past meth use.

Another study of state-supported substance abuse treatment programs found that

- In 1994, only 2 percent of state-supported substance abuse treatment clients statewide mentioned using meth at admission. By 1996, that number was up to 8 percent. By 1998, it was 25 percent. Today, some Wyoming treatment centers report that more than 50 percent of all clients mention meth use on admission.
- Over the past 5 years, Wyoming substance abuse treatment clients have been two to four times more likely than clients nationwide to report meth use on admission.
- In 1998, almost 6,000 Wyoming methamphetamine users were estimated to need substance abuse treatment—more than 1 in every 100 Wyoming residents.

Studies documented other disturbing findings: more than 1 in 20 pregnant women used meth, 32 percent of foster care placements resulted from drug abuse, 42 percent of persons arrested for drug offenses in 1 year were repeat offenders, fewer than 1 in 10 Wyoming residents who needed drug treatment received it, and hospital admissions due to drug abuse had increased more than 25 percent over 10 years (figure 5). These studies confirmed two important facts about meth abuse in Wyoming—the problem was widespread, and the measures in place to combat the problem were not working.

The data generated by Ellis and other researchers marked a critical moment in Wyoming’s response to drugs and, specifically, to methamphetamine. The picture painted by these grim statistics did far more than describe the state of abuse. Ultimately, the numbers themselves became agents of change; they fundamentally altered the manner in which the board thought about the problem of methamphetamine and how to best combat its abuse throughout the state.
Tom Pagel’s career as a police officer began in Michigan in the 1970s. He was a tough cop who regarded addicts as the slime of the earth—people who refused to hold themselves accountable for their own actions. Pagel saw to it that they were held accountable. As a cop, and later as an administrator, Pagel worked hard to ensure that the criminal justice system treated drug abusers as criminals. His feelings toward treatment were consistent with this philosophy. “I hated huggy kissy stuff,” he says. “As far as I was concerned, treatment was an excuse for addicts to escape punishment.”

A statistic turned Pagel’s outlook upside down. “The stat that grabbed me was the 42-percent recidivism rate for drug offenders,” he admits. “I was an enforcement guy, and I believed that people needed to be punished for breaking the law. But when I saw that almost half of the people my officers were arresting for drug offenses had previously been arrested for similar crimes, I realized that our enforcement-oriented approach was not working.” Pagel came to an important realization that would later become a mantra for the state of Wyoming: “We could no longer arrest our way out of this problem,” he says. “The statistics that we found in Wyoming proved without a doubt that a new approach was needed.”

Determined to gain a better grasp of addiction and the promise of treatment, Pagel and others journeyed to San Rafael, California, to Center Point, a well-known residential drug treatment center. The center functions as a “therapeutic community” (TC) and offers long-term intensive treatment for addicts. The TC model uses a highly structured approach to drug treatment that focuses on long-term recovery. The TC approach looks beyond an individual’s addiction and identifies personal weaknesses that may contribute to the disorder. Another important aspect of TC is the community itself, which provides addicts with opportunities to develop social skills, economic self-reliance, a work ethic, personal accountability, concern for peers in the TC, and an appreciation of the impact their drug abuse has had on those around them.

Methamphetamine users frequently display various types of dysfunction in addition to their addiction. Sleep disturbances, impulsive and erratic behavior, malnourishment, short-term memory loss, hostility, behavioral disruption, and depression are all common. Moreover, drug use often directly or indirectly results in multiple contacts with the criminal justice system. The TC model of treatment, because of its longer duration and focus beyond abstinence to developing prosocial values and behaviors, has proven to be effective with users of methamphetamine—particularly with users involved with the criminal justice system.

It was a pivotal trip for Pagel. “My entire view about treatment was transformed,” he explains. The 3 days Pagel spent with addicts, counselors, and administrators in the therapeutic community made him realize that treatment—good treatment—was no easy road. “I was amazed,” he admits. “To see the struggle that addicts endured, to see how the therapeutic community model emphasized both compassion and personal accountability, to see the success of the program—it blew me away.”

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Another realization hit home. Such opportunities for addicts were non-existent in Wyoming. Clearly, treatment for harder drugs like methamphetamine required intensive attention; existing state-sponsored treatment
centers were ill-equipped to offer long-term residential care. Moreover, the scarcity of resources for existing treatment providers made fighting meth addiction akin to taking on 10 Goliaths.

“I remember one guy we had arrested had gone through thirteen 28-day treatment programs,” Pagel says. “We were even having trouble helping addicts who desperately wanted to break their cycle of addiction. On the enforcement end, we were bringing people into the system just fine, but were not taking the right approach with them once they were in the system.”

Pagel returned home with a renewed outlook and focus. One of Wyoming’s top cops became one of the state’s biggest advocates for drug treatment. He would play a critical role in transforming public perception about addiction and the legislative agenda for it. In the meantime, another transformation took place. The Governor’s Advisory Board changed the way it did business.

A Catalyst for Change

Central to Wyoming’s war on meth was the Governor’s Substance Abuse and Violent Crime Advisory Board. Established in 1987, the board works to carry out the executive order under which it was created. That order called for the development of a comprehensive crime and drug control strategy for the state. From the beginning, the board featured a diverse membership—a tradition that continues today. Educators, concerned citizens, treatment professionals, legislators, judges, public defenders, and law enforcement officials have all participated over the years. Even so, in its embryonic stage, the board was a reactive organization that did little more than appropriate funds for statewide and local initiatives.

Kevin Meenan is the elected district attorney for Casper, Wyoming, and a long-time member of the board. “We didn’t really see ourselves as a strategic body,” he explains. “We saw ourselves as a pass-through for funds, not much more.” Pagel puts it more bluntly: “We’d meet on a regular basis,” he says, “but we wouldn’t talk. We’d share a cup of coffee, groan about all the troubles we faced in our respective fiefdoms, and say goodbye.” No serious turf issues contributed to the board’s lack of cohesion and integration, however. “We got along fine,” explains Steve Lindly, a board member and assistant administrator for the Department of Corrections. “Nor were we doing the wrong things with respect to crime and drug control. Looking back, however, it’s clear that the results of our efforts were significantly limited because we were not working together.”

Ultimately, it was crisis that brought about cohesion. Because methamphetamine posed such a threat to the well-being of the state, the board realized that they had to work together more effectively. The methamphetamine crisis illustrated that crime and drugs were complex social phenomena that could not be treated in isolation. “Meth cut across all of our jurisdictions,” Pagel says. “Everyone on the board brought a perspective to the problem. It would have been senseless to try to combat it alone. It was time to take advantage of the enormous diversity in our group.”

The board was determined to transform itself from a reactive body to a proactive and strategically oriented entity. As a first step, the board members set out to learn more from the citizens of their state. They invited people from all sectors to the table and sought their input. The strategy worked. “No one wanted to be left out after awhile,” says board member Dianne Calloway. “Everyone wanted to be helpful and play a role in taking on the problem of meth in our state.”

In another critical move, the board began to hold its meetings in different locations around the state to augment outreach efforts. Everywhere board members went, their eyes were opened to something new.

One of the most eye-opening meetings took place at the Wyoming Girls School. There, the board heard from a panel of girls—all of whom had been involved with meth—from a variety of backgrounds. “I’ll never forget that experience,” says Pagel. “I asked each girl how long it would take her to obtain meth should she be returned to her old school on that day. The answers ranged from 20 minutes to one class period—just over an hour. We already knew there was a problem, we had seen the stats, but nothing hits you harder than hearing from children.”

The Public Campaign

Methamphetamine is an insidiously addictive drug, and denial only made matters worse. While Wyoming families suffered behind closed doors, reluctant to break a taboo of silence, the drug spread deeper into Wyoming’s social fabric. In an informational video about methamphetamine, Governor Jim Geringer declared that
The proliferation of meth labs in the state of Wyoming coincides with a number of factors that make it easier for the criminal to establish meth “cooking” operations and avoid detection. Steve Miller, a methamphetamine enforcement expert in Wyoming’s Division of Criminal Investigation, has personally witnessed the enormous increase in meth labs in his state. “Before the meth explosion in our area, the meth labs we encountered were usually ‘super labs’—large-scale operations that were controlled by individuals heavily involved in the sale and manufacturing of drugs,” Miller said. “Today the labs we find are often one-man operations, set up by people who want to make quick money. Smaller labs are often harder to track and harder to bust.”

Why have these one-man operations emerged? The most probable explanation is the greater availability of simple and affordable recipes for cooking meth. With new mediums like the Internet, would-be criminals gain access to a variety of cooking methods that call for materials readily available at local hardware and drug stores. Matchbooks, over-the-counter drugs, antifreeze, lye, and glassware are just a few examples of these materials.

The increased use of “cold” cooking techniques is also disturbing. While some recipes use heat to manufacture meth, others require no heat at all. “Hot” techniques are generally more dangerous (due to the possibility of explosion), more pungent (making them easier to detect), and more difficult to set up and break down (making them more difficult to relocate). Cold techniques virtually eliminate all three of these elements, making it easier for meth manufacturers to establish small operations and avoid detection.

Meth Labs: A Dangerous Trend

The state “needed to get away from denial and start talking about methamphetamine.” Working with Ellis, Pagel and the board set out on a campaign to raise public awareness about the problem. Three important facts stood behind their reasoning: (1) the public had a right to know, (2) public support was critical to leverage support for a methamphetamine initiative, and (3) the research conducted by Ellis provided the incontrovertible evidence needed to back up their claims. In short, the facts could not be ignored.

Pagel assumed a leadership role in the process. Because Wyoming’s population is so small, the board knew that, with enough driving, Pagel and others could reach a large percentage of the population. A 1-hour presentation was created describing the state of meth abuse and documenting the need for treatment, prevention, and intervention strategies. Energized as it was, the board recognized that its situation was bleak. “We were dealing with a culture that did not believe in treatment,” McDaniel says. “Many people in the state saw the failings of alcohol treatment in the 60s and 70s.” Wyoming’s feelings about treatment were not inconsistent with its overwhelmingly conservative population. Most people felt that the appropriate place for addicts was in the criminal justice system.

Determined to plead his case, Pagel (joined by Ellis on occasion) set out on a whirlwind tour of the state. He appeared whenever and wherever people would listen. He spoke to local officials, schoolchildren, and concerned citizens. He spoke early in the morning, late in the evening, and virtually all times in between. Word got around about his presentation, and Pagel found himself speaking before packed audiences everywhere. He put over 45,000 miles on his car and made more than 150 presentations in under a year.
More than a few heads turned when Pagel spoke out in favor of treatment. His reputation as a police officer known for tough enforcement policies became an asset. Hearing a reputable cop whom everyone trusted speak up for treatment sent a powerful message that Wyoming could not arrest its way out of the problem. “I was amazed by the reception we received,” Pagel says. “People everywhere seemed to grasp and support the concept that a new approach was needed.”

Clearly, the public education campaign was effective—an outcome that deserves some analysis. Looking back, several factors contributed to its success:

♦ The message hit close to home. “At nearly every presentation, someone would come up to me and thank me for talking about the problem and share their own experiences with meth,” says Pagel. “They would talk either about their own struggles or about the struggles of someone in their family. We were breaking through the code of silence.” It was clear from the campaign that meth was not a problem that could be relegated to the “not in my backyard syndrome.” Meth was in everyone’s backyard, and the campaign played an important role in bringing that fact to the forefront. At one public meeting, a father spoke tearfully of his daughter’s addiction. He talked about the pain of a parent coming to grips with the fact that the unthinkable had happened to his daughter. He also shared the devastating financial consequences of paying for treatment. He and his wife had to use money put aside for their children’s education and were forced to sell their family home to pay for treatment. “But,” he said, “my daughter is going to live.”

♦ It was clear that alternatives to treatment were not working. According to McDaniel, “More and more families were experiencing the failures of incarceration for drug addiction. We were spending more money on jails and prisons, but they failed to show any curbing of the problem.” McDaniel recalls defending one young addict who had extremely conservative parents—parents who had always believed the place for addicts was in jail. “It wasn’t until it happened to their daughter that they realized that addiction is a disease that needs to be treated.” In many ways, Wyoming woke up to this realization in much the same fashion; if it wasn’t your child, your parents, or your sibling, it was your neighbor or friend who was involved with meth.

People could see for themselves how much addicts needed help, not jail.

♦ The statistics gathered by Ellis and others described a problem that could not be ignored and illuminated the need for a radical new approach. “I could talk to a principal in any school in Wyoming until I was blue in the face trying to convince him or her that there was a meth problem in their area,” Ellis recalls. “But when I was able to present the principal with the results of a survey conducted in his or her school district, the facts could not be ignored.” As grim as the statistics were, Pagel, Ellis, and others found them to be empowering as well. Ellis describes one presentation made to a group of high school students. “They did not like the dubious distinction of being the worst in the nation with respect to drug abuse,” he explains. “They wanted to surmount the problem once they understood its severity.”

The public campaign was a critical element in the board’s strategy to take on the methamphetamine crisis. Armed with public support, it could turn to the next step—convincing the legislature that funds were needed for a comprehensive methamphetamine initiative.

**Putting Democracy To Work**

“I learned a valuable political lesson from our awareness campaign,” says Pagel. “If you have a message that you want to promote, you market it to the people.” Unbeknownst to Pagel
at the time, citizens who had been educated about meth were contacting their legislators. Legislators who had been protected by silence were now being pressured to respond.

Even so, getting money from the Wyoming Legislature was, according to Pagel, “like trying to squeeze blood out of a turnip.” Wyoming has a shallow tax base, making fiscal resources scarce. Not surprisingly, the politically conservative legislature is even more conservative when it comes to fiscal matters. Each year, the legislature would summon state agencies to testify before them. “We would always ask for more money,” Pagel says, “and they would nearly always tell us that none was available.” For that reason, Pagel and the board were less than optimistic about their chances of securing major funding to combat methamphetamine. “We were planning to redistribute some of our resources toward treatment, if necessary,” explains Pagel, “but that would only get us so far.” Pagel was accustomed to having just a few minutes to speak on behalf of the Division of Criminal Investigation each year before the appropriations committee. That year, he intended to use all of his time to bring attention to the meth problem.

At the time, the chair of the Wyoming Senate Appropriations Committee was fiscal conservative and Republican Tom Kinnison. Pagel quickly learned that his public campaign had already put meth on the committee’s radar. Before Pagel could utter more than a few sentences, Senator Kinnison stopped him and said, “Tom, tell me everything you know about this meth problem.” What was normally a 5-minute annual exchange turned into a 1-hour session—the very same type of session that Pagel had shared with the people of Wyoming, the very same statistics that had helped to transform its citizenry. If Pagel was surprised by the request for information about meth, what happened when he finished speaking was even more shocking. “After Tom had finished his presentation,” Senator Kinnison recalls, “I said to him, ‘What do you need to deal with this problem—I want you to think about it and come back to the committee with a plan.’ I think he nearly fell out of his chair when I said that!”

Truth be told, Pagel nearly did fall out of his chair. Never in his experience with the state legislature had he been presented with such a window of opportunity. “I left the meeting practically shaking,” he says, grinning. “I came back to my office and called everyone on the board for an emergency meeting.” It was clear that the attention the board drew to the issue of meth helped to set the stage for a new relationship with the state legislators. The board had just under 5 weeks to come up with a plan.

**Strategizing for Success**

For the first time, the Governor’s Substance Abuse and Violent Crime Advisory Board sat down to develop a comprehensive strategy to deal with the epidemic of methamphetamine. “We had one chance to pitch our plan to the legislators,” Pagel said. “We had to be smart about formulating a strategy.” Rather than compartmentalizing the problem along jurisdictional lines, the board created an integrated approach. Because resources were scarce, an integrated approach offered the best chance of obtaining more potent results for a given sum of money.

Instead of asking for a lot of money for indiscriminate use in treatment, prevention, and intervention, the board members focused on establishing research-based and proved practices. Their plan was to establish drug treatment, intervention, and
of treatment for methamphetamine and other drug addictions. Many mothers had expressed reluctance to enter into treatment because it might mean the loss of their children to the Department of Family Services. This program was proposed to circumvent that problem.

- Establishing a drug court in Unita County. The board recognized the need for sentencing options for judges to ensure that addicts within the criminal justice system were afforded the opportunity to recover.

- Implementing the 15,000-Hour Initiative, a prevention and education effort focusing on children from kindergarten through age 12. Prevention programs in Wyoming were scarce at the time and focused almost exclusively on high school students. Ellis’s research revealed high levels of drug abuse among children in middle school—a finding that demonstrated the need for prevention and early intervention throughout a child’s student life.

These represent just a snapshot of the initiatives called for by the board’s proposal. A recent report issued by the board describes the essence of their plan:

*This plan represents our best collective thoughts on what Wyoming needs to do NOW. It should also be clear that it represents a change in priorities. The board has concluded that public safety and health can best be protected if we balance strong law enforcement and appropriate punishment with the availability of effective and affordable treatment. We have concluded that while law enforcement is an important part of a comprehensive strategy, we cannot build enough new prisons or jails nor can we arrest enough offenders to solve the problem. Arresting addicts and putting them in prison without providing treatment opportunities is an approach doomed to fail.*

Clearly, the board was not shy about expressing its shift in focus. “We felt comfortable talking about treatment,” board member Steve Lindly says. “We had done our homework and knew that most people believed in our approach.” Armed with public support and the confidence that the proposal called for the essential first steps to combat meth, the board submitted the proposal to the appropriations committee.

**Legislative Victory**

Senator Kinnison did not have high expectations for what the board would propose. “I expected Tom to come back and ask for additional undercover officers for DCI,” he admits. “When I saw the proposal, it was my turn to fall off my chair. The comprehensive and integrated approach to the problem detailed by the proposal marked an unprecedented kind of approach.” From the committee’s standpoint, the proposal set the stage for a new way of doing business. In prior years, the committee would appropriate money to state agencies “alphabetically.” “That is to say,” explains Kinnison, “there was no method to our appropriations. Tom and the board gave us a method—everyone wanted to rid the state of meth. A comprehensive plan like the one presented to us was difficult to turn down.”
The committee’s ruling marked a historic event in Wyoming. The legislature appropriated $3.2 million to implement Wyoming’s Methamphetamine Initiative—a sum that would fund a substantial portion of the board’s original proposal. Of that $3.2 million, only $250,000 was dedicated to enforcement. The majority of the money was dedicated to the establishment and enhancement of drug treatment throughout the state. Overnight, Wyoming’s treatment budget had quadrupled.

Unique Factors Contributing to Success

The Governor’s Substance Abuse and Violent Crime Advisory Board had managed an impressive victory. No magic bullet contributed to its success. Rather, the board’s achievements can be attributed to a number of factors detailed below. Some the board worked deliberately to secure, others were quite accidental, and still others were beyond the board’s control but nonetheless played an important role.

Collaboration

The board’s newfound ability to work together played a decisive role in its victory. Working together meant:

- Maximizing resources. An integrated initiative ensured that the board members did not duplicate their efforts and waste funds—an important consideration in dealing with a relatively small and finite sum of money.

- A more effective strategy. Recognizing the complexities of the methamphetamine problem, the board members understood the need to work together to develop a balanced approach.

- Greater legislative success. Chris Boswell, a Democrat from Sweetwater County and a member of the Wyoming Legislature, believes the united front exhibited by the board made a big difference. “Rather than pursuing their own agendas,” he says, “the agencies came together and were able to look at the big picture—something that had not been done before. We were struggling to come up with a solution to a problem, and we were led to the answer by a widespread coalition.”

Of course, coming together in Wyoming was not as difficult a prospect as one might imagine. The state’s small population made it considerably easier to bring the parties to the table. Moreover, a small population base made developing a consensus far less difficult than it would have been in areas with bigger populations. A former governor was fond of saying that Wyoming was one small town with very long streets. Lindly agrees: “Even though we have a large state, you see the same people over and over again—we all know one another. That fact, combined with an inherent lack of turf issues, made working together relatively easy. Really, if you can’t pull this off in Wyoming, you can’t do it anywhere.”

Leadership

As with many successful initiatives, leadership played an enormous role in the success of Wyoming’s Methamphetamine Initiative, and few, if any, will contest that Pagel’s leadership was instrumental. Nearly everyone involved in the process recognized that Pagel’s trustworthy reputation played a major role in convincing others about the importance of treatment. Boswell was among those impressed by Pagel’s willingness to speak up on behalf of
treatment. “When you have a reputable cop like Tom Pagel speaking in favor of treatment, it has a big impact. Obviously, he was not doing it out of self-interest. It was clear that he was advocating treatment because he felt it was the best thing for our state. When he talked, people listened. Not only legislators but people from all over the state.”

Additionally, Pagel’s ability to bring people together made the board’s newfound collaboration possible. His willingness to remain open to new ideas and to share in the decision-making process and his strong personal ties with people across the state were important factors in building a united coalition.

Other leaders played important roles as well. The governor was active in helping to craft the plan. Other members of the board effectively promoted their message and contributed to the plan’s development. Legislators helped to refine the board’s proposal, and many unsung heroes helped to make the Wyoming Methamphetamine Initiative a reality.

Statistics

The statistics generated by Ellis and others played a critical role in the board’s success. Numbers helped to bring about Pagel’s and the board’s transformation; they helped convince the public and legislators of the nature of the problem. They demonstrated both the failure of past punitive approaches to drug abuse and the promise of treatment. Ellis’s continued presence in the state as a seasoned and reputable epidemiologist was also invaluable. Those who expressed skepticism about the numbers or called for elaboration on the studies were able to question Ellis about his findings. “The Governor himself asked me to attend a cabinet meeting to explain the findings,” says Ellis. “Those kinds of opportunities were important to demonstrate that the findings were credible and very real.”

Desperation

One factor that could not be controlled but worked to the advantage of the board was the fact that Wyomingites were hungry for answers to the meth crisis. “We were desperate,” says Boswell. “Meth had us all scared, and we had little choice but to listen to anyone with a reasonable solution.”

Would the board have been so successful had the public and the legislators not been so desperate for a solution? This question does not cast a shadow on the accomplishments of the board. While desperation may have made Wyoming more attentive to the board’s call to action, credit should be given for its success in drawing attention to the issue, generating public support for the project, and for the ingenuity of its approach. Moreover, legislators did not indiscriminately sign off on the Meth Initiative. Their large appropriation sent a strong signal that the plan held great promise.

Looking Ahead

The board’s securing $3.2 million to combat methamphetamine provided a foundation on which to build—a foundation that continues to be built on today. The following fiscal year, the appropriations committee approved a 2-year, $5.2 million appropriation, a sum that ensured the continued operation of pilot programs throughout the state. In addition, the state is planning a variety of new projects in the area of drug treatment, prevention, and intervention, including:

♦ The establishment of a Statistical Analysis Center, which will operate through an innovative partnership between the state and the University of Wyoming. Recognizing the continued importance of statistics as a roadmap to success, this center will create a centralized statistical database and information management system. The center will compile and analyze statistics generated by state and local agencies, a function that will continue the tradition of research-driven policy. Additionally, it will promote a knowledge base of research and evaluation on which future policies, programs, and strategies can be built.

♦ The expansion of existing corrections-based treatment programs to provide greater treatment opportunities for inmates. Wyoming’s prison population remains one of the state’s most addicted groups. An estimated 50 percent of Wyoming’s inmates are drug abusers, and methamphetamine is often their drug of choice.

♦ The establishment and evaluation of several drug courts in the state (including in Indian Country).

♦ The development of a summer school to train substance abuse counselors.
The implementation of a telemedicine project that will link various corrections facilities to the state hospital. These state initiatives to combat meth and other drug abuse are the products of new thinking in Wyoming—thinking that originated only a few years earlier when methamphetamine first raised the eyebrows of the board. Since then, Pagel and others have worked hard to reinforce the message that any strategy must be dynamic and flexible to be successful. “Our drug problem is not static,” says Pagel. “It’s complex and always changing. We have to continue to adapt to be effective.”

Still, new thinking and adaptation have yet to do away with critics of the Meth Initiative. Some people deny that the meth problem is as bad as the statistics show and are skeptical of the massive government expenditures to combat it. Mark Voss, a former public defender in Cheyenne, questions whether a meth crisis really exists in Wyoming. “More people may be using meth,” he concedes, “but is it a crisis? I’m not sure.”

While Voss admits that he has not seen Ellis’s study, he remains cautious about accepting the numbers at face value. “My experience with studies like these,” he explains, “is that they are often done by people who have an interest in seeing inflated numbers.” Ellis’s response to the argument is clear enough: “I’m not the one who stands to benefit from increased funding from the state legislature. My interest in this process is in applying scientific principles in order to clarify problems. In my view, we do not do the public any good by overdramatizing the problem.” Ellis also points out that the numbers are probably conservative. His widely quoted school survey, for example, was based on self-reporting by teens in school—a method that does not account for false survey responses and teens outside of the school system.

Some treatment providers have also voiced opposition to the initiative. Many providers are frustrated by new requirements that call for quantitative demonstrations of success. They claim that the human worth of their programs cannot be measured in statistical terms. Although Pagel and others on the board concede this point, they remain steadfast about their new requirement for evaluation of treatment services. “We are dealing with a small sum of money,” explains Pagel. “The reality is that we can only afford to fund programs that can demonstrate to us that their services work.”

Still others, including Voss, are cautious about the influx of mechanisms like drug courts, which present complex problems with respect to the rights of the accused. “My biggest concern,” Voss argues, “is that drug courts can be coercive with respect to defendants. If defendants are given the choice between jail time and treatment, you don’t have to be a genius to figure out which they are likely to choose. We have to be careful about a system that baits defendants into one course of action over another.” Even so, Voss believes that incentives to get people into treatment are necessary and that drug courts are, at least in theory, a good idea.

Despite these criticisms, few, if any, will contest that Pagel and the board have the best interests of the state in mind. Moreover, Pagel admits there is room for improvement: “More focus needs to be put into prevention and early intervention.” While the numbers from Ellis’s student survey pointed to an urgent need for prevention and education, only $100,000 of the initial $3.2 million was dedicated to these areas.

Other concerns stem from Wyoming’s focus on methamphetamine to the potential exclusion of other, more deep-rooted problems. Although most agree that methamphetamine presents a uniquely difficult problem, there are those who believe that it should be dealt with in the context of addictive behavior in general. While McDaniel fully supports the Meth Initiative, having helped craft it, he also believes that more needs to be done. “We frequently fail to see the forest for the trees,” he says. “We spent a lot of time and effort trying to treat addictions without taking the time to look at the conditions that might be contributing to addictive behaviors in the first place.” It follows from McDaniel’s logic that issues such as poverty, social isolation, lack of healthy opportunities for young people, and other social concerns also need to be factored into the methamphetamine equation.

Perhaps one of the biggest social concerns that remains largely unchecked is Wyoming’s alcohol problem. Today, Wyoming is plagued by the rampant use of alcohol, a drug that leaves behind devastation that easily rivals, if not outpaces, that of methamphetamine. Alcohol-related fatal automobile crashes in the state occur at double the national average, and Wyoming children have the fourth-highest alcohol usage rate in the
nation. Yet, unlike with meth, widespread support to combat alcohol and alcohol-related problems is not forthcoming—largely because Wyoming is a state in which alcohol use is deeply ingrained. “Wyoming was the last state in the nation to change its minimum drinking age to 21, drive-through liquor windows are still found throughout the state, and some members of the public and the state legislature still believe it is their Constitutional right to drive down the highway with a beer in their hand,” says Pagel. “The result is some of the most lax drunk driving laws in the nation.” It is reasonable to suppose that any state working to create safe, healthy, and crime-free communities must address all of the addictions that threaten its well-being.

It would be unfair, however, to suggest that the Meth Initiative has only influenced the issue of methamphetamine abuse. The board’s new way of doing business has set the stage for a new era in state governance. Agencies are learning to work together on a multitude of issues, the executive branch has benefited from unprecedented cooperation with the state legislature, and citizens have begun to appreciate the importance of balanced approaches toward crime and drugs.

The success of Wyoming’s Meth Initiative is an unfolding story, one that can only be fully told as the state evaluates the impact of its efforts. However, even if the initiative fails, much can be learned from the process itself. Working together was a lesson in the power of a united front. Taking the campaign to the public was a lesson in the power of grassroots activism. Success in the legislature was a lesson in the power of democracy. The use of research to drive policy was a lesson in the power of making informed decisions. In the end, Wyoming’s Methamphetamine Initiative is about much more than drug abuse. It is a story about personal and large-scale transformation. Its impact will be felt by the citizens of Wyoming for years to come.

For More Information

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