

Volume I, Issue I

Introducing ONDCP Update

Welcome to ONDCP Update, the newsletter of the Office of National Drug Control Policy (ONDCP). Making its debut with this issue, the newsletter will be published monthly by ONDCP's Office of Public Affairs and Office of Intergovernmental and Public Liaison, a new component dedicated to building partnerships with state, local and tribal government leaders, law enforcement officials, substance abuse professionals, and state and national organizations. The newsletter is free and distributed via email, as well as posted online at www.ONDCP.gov.

Every month, ONDCP Update will bring you news about the implementation of the 2010 National Drug Control Strategy, along with information about other initiatives being coordinated with our agency partners, and promising developments in the field. Our goal is to keep you informed and engaged as we change the way we think, talk, and act in the effort to reduce substance abuse, help those recovering from addiction, and disrupt the illegal drug trade.

Inside This Issue

2010 Strategy: Going Local 1
Letter from the Director1
The Vital Role of Recovery2
2009 Monitoring the Future:
Good News, Troubling Trends
Getting Drug-Impaired Drivers
Off the Road4

President Obama's 2010 *Drug Control Strategy:* Seeking Solutions at the Community Level

January 2010

President Obama soon will release his Administration's 2010 *National Drug Control Strategy*, the Federal government's annual blueprint for addressing the Nation's drug problem. The document lays out a new framework for an innovative and evidence-based public health and safety approach to the challenges we face from the production, trafficking, and use of drugs.

The *Strategy*, now in the final stages of preparation, takes a balanced approach that is comprehensive, grounded in solid research, and complete with long-range goals and measurable objectives. Specifically, it will call for curbing drug abuse through community-based prevention, science-based treatment, addiction-recovery programs, law enforcement efforts, and other means to reduce drug availability.

National Drug Policy Director Gil Kerlikowske has made it clear that the Obama Administration's 2010 *Strategy*, informed by extensive consultation with state and local leaders around the country, will reflect a new focus on efforts to reduce drug consumption in the United States. Moreover, the ambitious *Strategy* will commit energy and resources where they are needed most: in the areas of prevention, intervention, treatment, recovery, criminal justice innovations, interdiction, and source-country drug control. The result will be a community-oriented approach that encourages citizens as it also empowers them to find solutions to local drug problems.

Central to this approach is an understanding that these efforts do not fit neatly within "demand" or "supply" reduction categories. Rather, they overlap and contain cross-cutting goals, all of which, working in tandem, constitute America's best hope for combating the threats to public health and safety posed by substance abuse.

From the Director

My colleagues at ONDCP and I are committed to building partnerships among stakeholders at the Federal, state, local, and tribal levels. These partnerships will help ensure new voices and perspectives are taken into account as ONDCP establishes policies, priorities, and objectives for the Nation's drug control program.

It is my hope that this newsletter, by providing information about ONDCP's activities, policies, and programs, will serve as a catalyst to spur creation of more partnerships and encourage others to get involved in the anti-drug effort.

If you or your organization is interested in collaborating with ONDCP, please contact the Office of Intergovernmental and Public Liaison through the Drug Policy Information Clearinghouse at 1-800-666-3332 or online at www.ONDCP.gov/utilities/contact_form.html. Together, we can create an enduring partnership and make America a safer, healthier Nation.

New Drug Policy Approach Focuses on the Vital Role of Recovery

Last fall, ONDCP Director Gil Kerlikowske and Deputy Director Thomas McLellan participated in a series of events to celebrate National Recovery Month. The activities, which included a Recovery Rally Walk across the Brooklyn Bridge in New York City, foreshadowed a new concentration in national drug policy.

Demand reduction policies in the past have focused primarily on prevention, intervention, and treatment. All remain key elements of the anti-drug effort. However, under the Obama Administration, ONDCP has redefined demand reduction to include a more intense concentration on recovery from addiction.

Guided by an evidence-based approach to public health, ONDCP is now shepherding policy with a goal that goes beyond getting users to stop abusing illicit drugs and other substances. The aim of the new recovery-oriented agenda is to help people live a substance-free life of good health, nurturing relationships, self-sufficiency, and hope for a productive future. This policy, in keeping with the 2005 National Summit on Recovery, recognizes recovery as a process of change through which an individual achieves abstinence from substance abuse, along with improved health, wellness, and quality of life.

This focus on recovery will provide the Nation with a new lens through which to view addiction

Results from several major programs administered by the Center for Substance Abuse Treatment (CSAT) at the Substance Abuse and Mental Health Services Administration (SAMHSA) have demonstrated the benefits of a recoveryoriented approach. These programs show significant improvement in abstinence from drug use and involvement in criminal activity, as well as improved stability in housing and employment, medical health, and positive support networks.

By transforming systems and fostering partnerships, these projects bring together a wide range of services that help people in recovery build and maintain a substance-free lifestyle. Typical recovery support services include housing, medical and dental care, mental health treatment, employment training and placement, family counseling, peer support/mutual aid support networks, child care, and transportation.

The Access to Recovery (ATR) program facilitates development of state vouchers to centralize assessments and referrals for recovery support services. The Recovery-Oriented Systems of Care (ROSC) program helps local communities develop and deliver integrated services that build on the personal responsibility, strengths, and resilience of individuals, families, and communities to achieve sustained health, wellness, and recovery. The Recovery Community Services Program (RCSP) funds grass-root community organizations to support recovery services that help people initiate and/or sustain recovery from alcohol and drug-use disorders. Some RCSP grant projects also offer support to family members of people needing or seeking treatment or those currently in recovery.

Director Kerlikowske and Deputy Director McLellan are advancing Federal policies and programs to integrate a focus on recovery throughout the full range of demand reduction efforts. The new concentration within ONDCP directs the agency to undertake a number of vital tasks:

- Engage the recovery community at all levels in shaping the National Drug Control Strategy and other national efforts to address addiction-related issues;
- Support development of a full continuum of policies and programs that promote recovery;
- Identify and work to remove real or perceived barriers to recovery;
- Support data collection and research on successful long-term recovery; and
- Create and implement an effective communication strategy that celebrates and supports recovery.

Going forward, prevention programs and messages will clearly articulate the consequences of drug use while also celebrating and supporting those who have reclaimed their lives from addiction.

ONDCP will continue to promote the idea that recovery is possible. This focus on recovery will provide the Nation with a new lens through which to view addiction, as well as new policies that will sustain renewed health and wellness for those striving to remain drug free.



Director Kerlikowske celebrates recovery at the Recovery Rally last fall in New York City.

2009 Monitoring the Future: A Mix of Good News, Troubling Trends

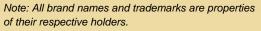
Results of the 2009 *Monitoring the Future* (MTF) study¹ show decreases among some grades in the use of cocaine, methamphetamine, and hallucinogens. The MTF data also document the disturbing prevalence of abuse among teens of prescription and over-the-counter drugs. They show, for example, that seven of the ten substances most abused by high school seniors are legal drugs used non-medically. There have also been erosions in young people's perceptions of the harms associated with smoking marijuana, drinking alcohol, and using smokeless tobacco. Past studies have found that such "softening" of teens' perceptions of the harms caused by drugs has signaled future rises in rates of drug use.

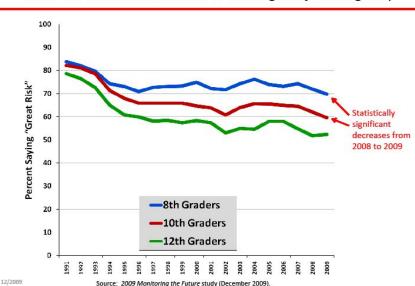
Some statistically significant trends and other use levels are troubling:

- About one in ten 12th graders reported abusing Vicodin in the past year, closely followed by abuse of six other pharmaceutical drugs. Approximately 1 in 20 12th graders reported past-year use of amphetamines, tranquilizers, over-the-counter cough or cold medicines, Adderall, sedatives, and OxyContin.
- Among 10th graders, lifetime use of heroin increased from 2008.
- Disapproval lessened among 10th graders toward those who smoked marijuana occasionally and those who smoked marijuana regularly.
- Among 8th graders, those who perceived "great risk" of harm associated with smoking marijuana occasionally or regularly declined (see chart, top right).

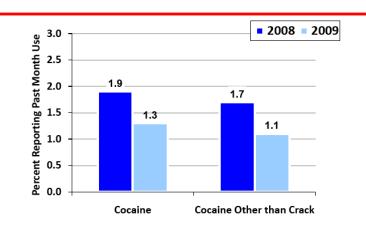
Statistically significant decreases in the use of various substances from 2008 to 2009 include:

- Hallucinogens overall Past-year and past-month use among 12th graders declined.
- LSD Among hallucinogens, past-month LSD use decreased among 12th graders.
- Hallucinogens other than LSD Past-year use of other hallucinogens (excluding PCP and Ecstasy) was down among 12th graders.
- **Cocaine** Lifetime, past-year, and pastmonth use among 12th graders decreased (see chart, bottom right).
- Heroin smoking/inhalation Among 8th graders, past-year use of heroin by smoking or inhalation fell.
- Methamphetamine Lifetime use among 8th graders declined.
- Ritalin Past-year use among 12th graders declined.
- Alcohol Lifetime and daily use of any alcohol among 8th graders declined.





Trends in Perceived Harmfulness of Smoking Marijuana Regularly



Significantly Lower Cocaine Use Among 12th Graders

Source: 2009 Monitoring the Future study (December 2009)

¹ The *Monitoring the Future* (MTF) study examines the behaviors, attitudes, and values of American secondary school students, college students, and young adults. Each year, a total of approximately 50,000 8th, 10th, and 12th grade students are surveyed (12th graders since 1975, and 8th and 10th graders since 1991). In addition, annual follow-up questionnaires are mailed to a sample of each graduating class for a number of years after their initial participation. *Monitoring the Future* is funded by the National Institute on Drug Abuse, a part of the National Institutes of Health. The study is conducted at the Survey Research Center in the Institute for Social Research at the University of Michigan.

12/2009

Working to Get Drug-Impaired Drivers Off the Road

Americans are all-too familiar with the terrible consequences of drunk driving. We also are becoming increasingly aware of the dangers of driving with distractions such as text messaging or talking on a cell phone.

Drug-impaired driving poses similar threats to public safety, as made clear by a tragic accident last July on New York's Taconic Parkway that resulted in the deaths of eight people, including four small children.

Although it is well known that drugs can impair perception, judgment, motor skills, and memory, a survey by the National Highway Traffic Safety Administration (NHTSA) found that in 2007, more than 12 percent of weekend nighttime drivers tested positive for illicit drugs, and 5 percent had prescription or other pharmaceutical drugs in their systems (see chart, below). These troubling results from the *National Roadside Survey of Alcohol and Drug Use by Drivers* highlight the scope of drugged driving in America and reinforce the importance of reducing all drug abuse.

The Federal government is taking steps to make our roadways safer by decreasing the number of drug-impaired drivers. Throughout the 2009 holiday season, ONDCP cautioned Americans about the dangers of impaired driving and the particular challenges during the holiday season for those in recovery from addiction. As part of this effort, Director Kerlikowske reminded the Nation in public-service announcements to take steps to enjoy the holidays safely. Many Members of Congress joined him in taping similar announcements for their own communities.

ONDCP has made reducing drug-impaired driving a priority for 2010 and, as part of the Obama Administration's soon-to-be-released *National Drug Control Strategy*, is working with the Department of Transportation (DOT), the Department of Justice, and others on new initiatives aimed at getting drug-impaired drivers off the road.

Successful substance-abuse prevention programs also will continue to receive support in the effort to reduce the public safety threat of drug-impaired driving. These include DOT's *Over the Limit. Under Arrest* – a national effort to crack down on impaired driving – and the Drug Evaluation and Classification (DEC) program, which aids state and local jurisdictions in detecting and arresting drugged drivers. The DEC program

Percentage of Weekend Nighttime Drivers Testing Positive For Drugs, by Drug Category

Drug Category	Percentage
Illegal	11.3%
Medications	3.9%
Illegal & Medications	1.1%
Negative	83.7%
Number of Drivers	5,910

Source: 2007 National Roadside Survey of Alcohol and Drug Use by Drivers: Drug Results, U.S. Department of Transportation, National Highway Traffic Safety Administration, December 2009. Note: In this table, "Medications" includes prescription and over-the-counter drugs. Percentages are weighted, and the number is unweighted.

also provides training to prosecutors and judges in the prosecution of drugged drivers.

Other Federal programs focus on drug abuse prevention, such as the National Youth Anti-Drug Media Campaign, which offers free resources to help prevent drugged, drunk, and distracted driving among teenagers, and the Drug Free Communities Support program, which helps communities identify and respond to local substance abuse problems.

Much more can be done at the state and local levels. For example, states can explore legal responses, such as *per se* laws that make it illegal for drivers to have illicit drugs in their system, whether or not they exhibit visible signs of impairment.

More than 12 percent of weekend nighttime drivers in 2007 tested positive for illicit drugs, and 5 percent had pharmaceutical drugs in their systems.

Doctors can help, too, by learning to recognize patients with substance-use problems and by talking to patients about such issues. Parents can help by talking to their children about the consequences of alcohol and illicit drug use. Communities can reinforce the message that alcohol and drug abuse can cause serious harm. Individuals who abuse drugs can seek help and make the choice to live a drug-free life.

Drug-impaired driving affects not only the impaired drivers but everyone on the road. Like drunk and distracted driving, drugimpaired driving puts us all at risk and must be prevented.

The 2007 National Roadside Survey of Alcohol and Drug Use by Drivers is available online at <u>www.nhtsa.dot.gov.</u>

For more information about ONDCP, visit www.WhiteHouseDrugPolicy.gov