

FEBRUARY 2022 | VOLUME 11 ISSUE 1

DRUG FREE  
NARCOTIC OFFICER  
MAGAZINE

# NARCOTIC OFFICERS

MAGAZINE



PROMOTING THE EXCHANGE OF IDEAS AND INFORMATION AMONG  
LAW ENFORCEMENT AGENCIES AND SUPPORT GROUPS

# Personal Statement from the Editor...



Welcome to our first issue of 2022, Narcotic Officers Magazine, Volume 11 Issue 1, February 2022. As always, I would like to thank each of you for advertising, your support, hard work and dedication. None of this is possible without you. I am here to educate the public and law enforcement community in the awareness of narcotics, drugs, and other addictive substances. I also make every effort to support programs that teach kids, parents, and the law enforcement community about drug use.

Last year was our 10th anniversary and we are excited for our future. We recently updated our website to be more user friendly. One of the things we added was “Meet The Team” section. Below is a little history about why I started Narcotic Officers Magazine.

I’ve been supporting the law enforcement community most of my life. I started Narcotic Officers Magazine in October of 2011. The driving factor behind it was my brother. He passed away in November 2005. I watched him take a shotgun to his chest. It’s a long story and I’ll save it for another time. Let’s just say he was involved in the wrong crowd. I still blame myself to this day for not being a better big brother, but I’m told I shouldn’t do that anymore. That night changed me forever. Shortly after his passing I found myself questioning my own life. I decided to enlist in the Army May 2006 and served for 4 years. Afterwards, while going to school in Florida, that’s when I started Narcotic Officers Magazine.

I’ve seen too many family members and friends ruin and lose their

lives because of Narcotics. I just wanted to produce an educational magazine that promotes the exchange of ideas and information among law enforcement agencies and support groups. While doing this I believed getting trauma kits to underfunded officers is lifesaving. Money, we receive from businesses placing ads in our magazine, that support the enforcement community, helps us provide these lifesaving kits. We also support drug education through D.A.R.E. America, and support K9 programs that supply Narcan overdose kits to K9s. And yes, I still take time to sit with my team and call on businesses for their support.

After 10 years of performing most of the duties here in the office I will be letting other well-deserved members of our team step up and take on more responsibility. Taking something, you’ve built and handing it over to someone else isn’t easy but to continue to grow we must grow together. I will still be actively involved in day-to-day operations, and I will start planning our next steps to reach out even further to our law enforcement community. Until next time stay safe and god bless!

**Matt Neelley**  
**President**

A handwritten signature in black ink, appearing to read 'Matt Neelley', with a long horizontal flourish underneath.

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## NARCOTIC OFFICERS MAGAZINE

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## MESSAGE TO OUR ADVERTISERS

This publication is financed solely by the monies received from advertisements. We would like to express our appreciation to those businesses that purchase advertisements in the Narcotic Officers Magazine. We strive to make this a high quality publication that will provide the best possible advertising exposure for our advertisers. We encourage our readers to patronize the businesses that make this publication possible.

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# A Message for Parents

## How to Protect Your Kids with ID Kits

A child disappears in a crowd at the fair. A toddler wanders out an open door. A teen doesn't return from the mall. Every year, hundreds of thousands of kids in the U.S. are reported "missing."

Recently, we talked about what the FBI does to find missing and abducted children. What can you as parents do to help us?

**Here's one important suggestion:** have information that helps identify your child ready to hand to law enforcement the instant you report your child missing.

We recommend a kit distributed through the National Child Identification Program started by the American Football Coaches Association in 1997. The FBI has been a partner in this program since 2002.

### Each package includes:

- All you need to take inkless fingerprints;
- Cards for detailing your child's physical descriptions—including a body map for pointing out scars, birthmarks, and other identifying features;
- A place to keep current photos; and
- More recently, an easy-to-use swab to take and store a small DNA sample.

**Recording your child's fingerprints is particularly important.** Why? Not only because everyone's fingerprints

are unique, but also because they don't change over time like physical appearances. We also recommend that you update the photos of your kids in the kits at least once a year.

**Are the fingerprints or other information in the kits kept by the FBI? No!** You keep the kits and fingerprints yourselves in a safe place...and provide the information to us only in case of emergency. Even then, we don't keep the information in our records permanently without your permission.

**Where can you get a kit?** You can order one—for a small fee—through the National Child Identification Program website. The kits are also distributed free at select college football games across the country in partnership with local FBI offices. Check with your local FBI office to see if they are sponsoring a game this fall.

This year, we are working with the National Night Out organization, which helps communities nationwide hold anti-crime activities once a year. Along with the coaches association, we hope



to set a new single-day record for distributing free identification kits during National Night Out events on August 1.

"It's a neat program," said Thomas E. Bush III, our assistant director for Criminal Justice Information Services, which coordinates the FBI's involvement in the program. "It's a great tool for parents have at their disposal to help protect their children."

**Links:** Crimes Against Children | The National Center for Missing and Exploited Children

FBI. (2006, July 24). How to Protect Your Kids with ID Kits. FBI. <https://archives.fbi.gov/archives/news/stories/2006/july/idkits072406>.



### WHAT TO DO

- If your child is missing from home, search through
- » closets
  - » piles of laundry
  - » in and under beds
  - » inside large appliances
  - » vehicles—including trunks
  - » and anywhere else that a child may crawl or hide



Immediately call your local law-enforcement agency and provide them with your up-to-date Child ID Kit.



After you have reported your child missing to law enforcement, call the National Center for Missing & Exploited Children® at 1-800-THE-LOST® (1-800-843-5678).

If your computer is equipped with a microphone and speakers, you may talk to one of our Hotline operators via [www.missingkids.com](http://www.missingkids.com) online.

Learn more about this child ID kit at [www.missingkids.com/childid](http://www.missingkids.com/childid)

### HOW TO USE THIS KIT



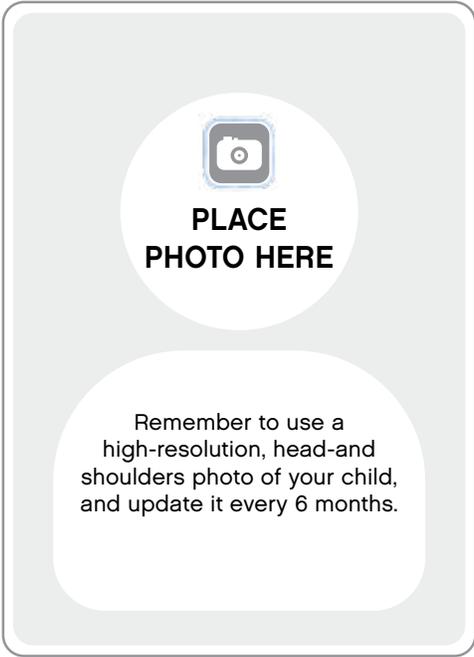
When recovering a missing child, the most important tools for law enforcement are an up-to-date, quality photograph and descriptive information. Complete this Child ID Kit by attaching a recent photograph of your child and listing all identifying and medical information. Update the photograph and information every 6 months, and keep the Kit in a secure, accessible location.



The National Center for Missing & Exploited Children  
Charles B. Wang International Children's Building  
699 Prince Street • Alexandria, VA 22314-3175  
[www.missingkids.com](http://www.missingkids.com) • 1-800-THE-LOST®

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## PERSONAL INFORMATION

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

State/Province/Region: \_\_\_\_\_ Country: \_\_\_\_\_



## PHYSICAL CHARACTERISTICS

Sex: Female  Male

Race/Ethnicity: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Height	Weight	Date



## DISTINGUISHING CHARACTERISTICS

My child wears or has:

Glasses  Contacts  Braces  Birthmarks  Piercings  Tattoos

Special Needs: \_\_\_\_\_

Other: \_\_\_\_\_

Last Name: \_\_\_\_\_

First/Middle Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_



## MEDICAL INFORMATION

Physician's Name: \_\_\_\_\_



Emergency Contact: \_\_\_\_\_



Emergency Contact: \_\_\_\_\_

Office #: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Allergies/Conditions: \_\_\_\_\_

Cell #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Medications: \_\_\_\_\_

Home #: \_\_\_\_\_

Home #: \_\_\_\_\_

Blood Type: \_\_\_\_\_

Work #: \_\_\_\_\_

Work #: \_\_\_\_\_



## FINGERPRINTS

Fingerprints are critical to a complete child identification record and should be taken by trained individuals, such as law-enforcement personnel.

Left Thumb	Left Index	Left Middle	Left Ring	Left Pinky
Right Thumb	Right Index	Right Middle	Right Ring	Right Pinky



## CONCERNS OF POLICE SURVIVORS

September 3, 2021

Narcotic Officers Magazine  
1660 S Alma School Rd Ste 212  
Mesa, AZ 85210-3072

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Concerns of Police Survivors (C.O.P.S.) truly appreciates your memorial donation. What a wonderful tribute to the memory of Police Officer Lewis Andrew "Andy" Traylor.

This donation will help C.O.P.S. provide resources to assist America's surviving family members and co-workers affected by line-of-duty deaths. Emotional healing begins when survivors are free to express their feelings and share their grief with others who truly understand. Your donation will help fund this important part of the healing process.

Contributions to Concerns of Police Survivors are tax deductible as a charitable contribution. Our EIN number is 52-1354370. Concerns of Police Survivors, Inc. did not provide you any goods or services in consideration of your gift.

Thank you again for this wonderful tribute to Police Officer Lewis Andrew "Andy" Traylor.

Sincerely yours,

Dianne Bernhard  
Executive Director

PO Box 3199 - 846 OLD SOUTH 5 - CAMDENTON, MO 65020  
OFFICE: 573-346-4911 - FAX: 573-346-1414 - WWW.CONCERNSOFPOLICESURVIVORS.ORG



TEACHING STUDENTS DECISION MAKING FOR SAFE & HEALTHY LIVING

P.O. Box 512090 Los Angeles, California 90051-0090 (800) 223-DARE

November 17, 2021

1660 S. Alma School Rd. Ste 212  
Mesa, AZ 85210

On behalf of the Board of Directors of D.A.R.E. America, thousands of dedicated D.A.R.E. instructors and the millions of students who benefit from the D.A.R.E. Program each year, I want to thank you for the donation you made to D.A.R.E. America.

It is through your support that we are able to provide our D.A.R.E. officers with the evidence-based curricula and state of the art training that makes the program so effective. Students are provided the decision-making skills that allow them to avoid drugs and many other destructive behaviors. Such contributions as this are helping us to move to a world where children everywhere can enjoy safe, healthy and productive lives.

Thank you again for your donation and helping D.A.R.E. fulfil its mission. The students we serve are the ultimate beneficiaries of your actions and your generosity.

Sincerely,

Francisco X. Pegueros  
President & CEO

# D.A.R.E. keepin' it REAL Elementary School Curriculum is Evidence-based, Successful and Effective

**Dec 9, 2021 | Resources & Studies**  
**An Evaluation of the “D.A.R.E.: keepin' it REAL” Elementary School Program**  
**Executive Summary**  
**January 2022**

## Introduction

In 2018 D.A.R.E. America entered into a contract with UNC Greensboro (UNCG) and Prevention Strategies to complete an independent evaluation of the “D.A.R.E.: keepin' it REAL” elementary school program. The goal of the project was to provide an independent assessment of the impact of D.A.R.E. on key psychosocial and behavioral outcomes among elementary school children. In addition, the evaluation assessed aspects important to understanding quality of delivery and fidelity.

The following is an Executive Summary of the results of the evaluation. The research team is preparing an academic manuscript for publication in the Journal of Primary Prevention. The academic publication will provide a detailed description of the evaluation purpose, protocol, and findings that support D.A.R.E. as an evidence-based, effective program.

## Program

The “D.A.R.E. keepin' it REAL” elementary school program consists of ten 45-minute lessons that also include take-home family talk activities. The curriculum, designed based on the Socio-Emotional Learning Theory (SEL), identifies fundamental, basic skills and developmental processes needed for healthy development including: (1) self-awareness and management, (2) responsible decision making, (3) understanding others, (4) relationship and communication skills, and (5) handling responsibilities and challenges.

## Key Findings

The “D.A.R.E.: keepin' it REAL” ele-

mentary school program is delivered by certified D.A.R.E. officers with high fidelity and their delivery is engaging to students. It is effective and successful in the long-term reduction of drinking alcohol, getting drunk, smoking cigarettes, and vaping.

Highlights of the evaluation include:

- Year 1 Elementary School- There were statistically significant reductions in the prevalence of drinking alcohol, getting drunk, smoking cigarettes, and vaping among students who received D.A.R.E. compared to the control cases.
- D.A.R.E. Officers performed very well in the classroom based on both teacher and student ratings. Teachers and students rated D.A.R.E. Officers extremely high on both program fidelity (9.4 out of 10 – delivering the program as intended) and engagement (9.32 out of 10 – actively engaging students during program delivery).
- The teachers' ratings of officer implementation were highly correlated with students' ratings of personal engagement ( $r = .813$ ;  $p < .0001$ ).
- D.A.R.E. Officer instruction was directly related to positive program outcomes. That is, there were statistically significant correlations between student engagement and student scores at posttest on all variables assessed – increased student engagement was related to positive outcomes on all variables.
- The responsiveness of the D.A.R.E. Officer to the students was also predictive of scores at post-test for vari-

ables like decision-making, intentions to avoid drug use, and beliefs about peer norm use.

## Drug Use Findings

Results reported here are based on analyses performed using Virtual Controls (see Retention section below). At pretest, there were no instances of marijuana use. As cohort ages, the likelihood of marijuana use increases. At posttest, there were no new cases of marijuana use identified. Therefore, it can be concluded that the program was entirely successful in preventing marijuana use.

D.A.R.E. results compare pretest to posttest and pretest to follow-up changes for elementary school analyses for past 30-day drinking alcohol, getting drunk, smoking cigarettes, using marijuana, and vaping. There is typically very little change in prevalence between pretest and immediate posttest, which is typically 10 to 12 weeks following the pretest. From pretest-to-posttest, there was a slight reduction in self-reported drunkenness, smoking cigarettes, and vaping.

A follow-up survey was administered approximately 4-months following program implementation. In this case there were statistically significant reductions in the prevalence of drinking alcohol, getting drunk, smoking cigarettes, and vaping among students who received D.A.R.E. compared to the virtual control cases.

## Fidelity Findings

Classroom teachers in 45 elementary school classrooms in 9 states in which D.A.R.E. Officers implemented D.A.R.E. rated fidelity. For each lesson,



teachers completed a structured survey instrument that asked them to note which lesson activities were completed, how well lesson objectives had been achieved, how energetic and prepared the officer was, how attentive students were, how many students were engaged in the lesson, how many asked and answered questions, and if there were student discipline problems. An analysis of teachers' data revealed that there were three underlying constructs: (1) teachers' ratings of student responsiveness, (2) teachers' ratings of officer implementation and (3) teachers' ratings of the number of activities delivered.

Students in classrooms also answered questions about their participation. They rated the officer's teaching, their enjoyment of the program, and how often they shared their personal opinions and paid attention. They rated how much they liked the officer, if the officer paid attention to them, and if the officer knew their name. They assessed how much the program helped them think about what was important. An analysis of students' data revealed two constructs: (1) students' ratings of engagement and (2) students' sharing their opinion and being known by the officer.

D.A.R.E. Officers performed very well in the classroom based on both teacher and student ratings. Teachers and students rated D.A.R.E. Officers very high on both program fidelity (9.4 out of 10 – delivering the program as intended) and engagement (9.32 out of 10 – actively engaging students during program delivery). The teachers' ratings of officer implementation were highly correlated with students' ratings of personal engagement ( $r = .813$ ;  $p < .0001$ ).

D.A.R.E. Officer instruction was directly related to positive program outcomes. That is, there were statistically significant correlations between student engagement and student scores at posttest on all variables assessed – increased student engagement was related to positive outcomes on all variables. The responsiveness of the D.A.R.E. Officer to the students was also predictive of scores at posttest for variables like decision-making, intentions to avoid drug use, and beliefs about peer norm use.

## Design

The design of the evaluation included recruiting two cohorts of 5th grade students (i.e., treatment and control). We recruited elementary treatment schools (47 schools in 9 states; 176 classrooms; and 3,266 students) in which D.A.R.E. Officers delivered the program. Control schools (12 schools; 27 classrooms; 368 students), in which no D.A.R.E. program was delivered, were also recruited. All participating students (treatment and control) were assessed at pretest, immediately after the program was delivered to the treatment students (posttest), and then with a 4-month follow-up survey. In addition to student surveys, teachers in whose rooms the program was delivered were asked to complete fidelity assessments for the D.A.R.E. Officers.

Student surveys assessed demographics (age, gender, and race/ethnicity), key psychosocial variables targeted by the program (beliefs about harmful consequences, bullying self-efficacy, decision making skills, intentions/commitment, lifestyle incongruence, normative beliefs, perceived parental attitudes/attentiveness, and peer pressure refusal skills) and drug use behaviors (past 30-day alcohol, drunkenness, smoking, vaping, and marijuana). At the immediate posttest, the student survey also included questions regarding their engagement in the D.A.R.E. program.

## Evaluation Protocol

We obtained classroom rosters for participating 5th grade classrooms and participating students were assigned a unique identification number that was used for the entirety of the evaluation. Individual schools and classrooms were also assigned identification numbers for tracking and analyses purposes. Schools were given the option of participating in the evaluation online (via a Qualtrics survey link) or with paper surveys. Prior to the first D.A.R.E. lesson, teachers were provided with paper surveys or classroom survey links for their students. At the 8th lesson, teachers were contacted again and provided with paper copies of the posttest, or the Qualtrics link. Teachers were encouraged to send back fidelity observation forms at the conclusion of the last D.A.R.E. lesson. Schools were able to implement D.A.R.E. lessons in

either the fall or spring semester of the 2019-2020 academic year. Schools that began lessons in the spring of 2020, were significantly affected by the COVID-19 pandemic requiring completion of online surveys. For a detailed recollection of COVID-19 protocol and how that impacted the 4-month follow-up survey for the spring 2020 students, see below.

## Retention

The coronavirus directly impacted the evaluation. Only 31% of elementary students provided posttest surveys. At the second follow-up 38% of elementary students provided survey data. However, in a separate project funded by the National Institutes of Health (NIH) (Grant ID: 5R44AA024657), our research team developed an alternative technology, Virtual Controls, that allowed us to use students' psychosocial scores at pretest to create an alternative way for estimating how a control group would have performed. Due to the low number of control students recruited and retained for this evaluation, we relied on the Virtual Controls tool to make treatment/control comparisons.

Academic references for Virtual Controls include:

Hansen, W.B., Derzon, J.H., & Reese, E.L. (2014). A Synthetic Comparator Approach to Local Evaluation of School-Based Substance Use Prevention Programming. *37*(2), 258-282. <https://doi.org/10.1177/0163278712464772>.

Hansen, W.B., Chen, S.H., Santiago, S., & Edward, H. (2018). An algorithm for creating virtual controls using integrated and harmonized longitudinal data. *Evaluation & The Health Professions*. *41*(2), 183-215.

\*\*\* A brief description of this method can be found at <https://vimeo.com/486993156>

D.A.R.E. Keepin' it real elementary school curriculum is evidence-based, successful and effective. D.A.R.E. America. (n.d.). Retrieved February 22, 2022, from <https://dare.org/d-a-r-e-keepin-it-real-evidence-based-successful-and-effective/>

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# DEA Participates in Joint Press Conference with U.S. Attorney's Office and Law Enforcement Partners to Address Violent Crime

**February 16, 2022**  
**Contact: SA Debbie Webber**  
**Phone Number: (571) 362-4803**  
**For Immediate Release**

**NEW ORLEANS** – Today, in a demonstration of unity, Drug Enforcement Administration Special Agent in Charge Brad L. Byerley joined U.S. Attorney Duane A. Evans and other federal, state, and local law enforcement agencies to announce their joint efforts to address the violent crime spike occurring in the City of New Orleans. The collaborative effort features a team comprised of the U.S. Attorney's Office, Eastern District of Louisiana, U.S. Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF), U.S. Drug Enforcement Administration (DEA), Federal Bureau of Investigation (FBI), U.S. Department of Homeland Security Investigations (HSI), U.S. Marshals Service (USMS), City of New Orleans Office of Criminal Justice Coordination, Orleans Parish District Attorney's Office, Louisiana State Police (LSP), and the New Orleans Police Department (NOPD).

The components of the collaborative deterrence plan include:

- Investigative resources focused on the most violent offenders/gangs and the use of federal prosecution for long-term criminal deterrence.
- Daily investigative coordination and

interagency de-confliction reviews to include the following:

- Interagency sharing of analytical and investigative resources targeting violent crime;
- USMS violent offender warrant list for violent criminals; and
- ATF NIBIN (National Integrated Ballistic Information Network) and eTrace leads.
- Proactive community engagement to guide law enforcement in the apprehension of violent criminals, identification of cooperators, and the development of leads for short-term and long-term racketeering, and VCAIT (Violent Crime Abatement Investigation Team) investigations.

“DEA is proud to be a partner in this joint effort to curb the rising violent crime in our city and beyond. The combined strength that federal, state and local law enforcement agencies bring to bear in the battle against these violent offenders will strike a significant blow to their criminal and drug trafficking organizations. By working together, we will leverage our respective resources and expertise to achieve results that we could not accomplish on our own. Our combined, concentrated efforts will make our communities a safer place to live by disrupting the flow of guns and dangerous drugs to

our neighborhoods,” said DEA Special Agent in Charge Byerley.

U.S. Attorney Evans stated, “As a law enforcement collective, we recognize the imminency of the violent crime surge sweeping across our community. We want the public to know that federal, state, and local law enforcement stands ready to collaborate, combine resources and continue to target those who prey on our citizens. Victims of crime also should know that law enforcement is committed to preventing, investigating, and solving the crimes that have plagued our community. Just as importantly, the perpetrators of these offenses are on notice that they will be apprehended and held accountable for their actions.”

Parents and children are encouraged to educate themselves about the dangers of drugs by visiting DEA's interactive websites at [www.JustThinkTwice.com](http://www.JustThinkTwice.com), [www.GetSmartAboutDrugs.com](http://www.GetSmartAboutDrugs.com) and [www.dea.gov](http://www.dea.gov).

Drug dealer sentenced to 25 years in prison for selling the fentanyl that resulted in death of user; longest sentence to date. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/press-releases/2022/02/14/drug-dealer-sentenced-25-years-prison-selling-fentanyl-resulted-death>

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# Drug Dealer Sentenced to 25 Years in Prison for Selling the Fentanyl that Resulted in Death of User; Longest Sentence to Date

**February 14, 2022**  
**Contact: Kameron Korte**  
**Phone Number: (571) 324-6204**  
**For Immediate Release**

SAN DIEGO – Jahvaris Lamoun Springfield was sentenced in federal court today to 300 months in prison for selling the fentanyl pills that resulted in the fatal overdose of U.S. Army veteran Brendan James Gallagher on February 5, 2019. This is the longest sentence to date in this district for this crime.

On August 27, 2021, following a three-day trial before U.S. District Judge Larry Alan Burns, a jury convicted Springfield of causing Gallagher's death by distributing fentanyl to Gallagher on February 5, 2019.

The evidence presented at trial showed that Gallagher was a U.S. Army veteran who served overseas in Afghanistan. Upon his return to the United States, Gallagher was honorably discharged. In 2018, Gallagher moved from Boston to San Diego in an attempt to break his addiction. However, Gallagher turned to opioid drugs in the form of counterfeit oxycontin pills later that year.

The evidence also showed that, on the afternoon of February 5, 2019, Gallagher sent text messages to Springfield seeking to purchase oxycontin pills. Later that day, Gallagher's roommates called 911 to report that Gallagher was nonresponsive in his bedroom. When agents arrived at the residence, they found two counterfeit oxycontin pills that tested

positive for fentanyl. Additionally, Gallagher's autopsy showed a fatal concentration of fentanyl in his blood. In the investigation that followed, agents obtained evidence showing that Springfield sold Gallagher pills on February 5, 2019. When agents arrested Springfield, they found counterfeit oxycontin pills that tested positive for fentanyl in the vehicle Springfield had been driving.

DEA Narcotics Task Force Team 10 led the investigation in this case. Team 10 is a specialty unit, with investigators from DEA, HSI, FBI, San Diego Police Department, CA Department of Health Care Services, and the San Diego District Attorney's Office, that investigates overdose deaths in San Diego. Team 10 responds to the discovery of overdose victims and aggressively pursues criminal cases, up the distribution chain, against both the dealers and their sources of supply.

"Today's sentencing of Jahvaris Springfield is a reflection of the hard work of the investigators assigned to DEA's Team 10," said Special Agent in Charge Shelly S. Howe. "These dedicated men and women work tirelessly around the clock to hold drug dealers accountable for the deaths they are causing and to bring justice to families who have lost their loved ones. This 25-year sentence is proof that their efforts have paid off."

"This is the longest federal sentence to date in a case of a drug dealer being held responsible for the death of a customer

in the Southern District of California, and it should put dealers and those who supply them on notice. Every time we have an overdose death, law enforcement will come looking for you, because lives are at stake," said U.S. Attorney Randy Grossman. "We will not stop with the street-level dealers but will follow the supply chain as far up as necessary and will use every available criminal and civil tool to combat this deadly epidemic and stop these tragic losses." Grossman thanked the prosecution team as well as DEA Team 10 investigators for their hard work on the case.

For those who suffer from addiction, please know there is help. Call the Crisis line at 888-724-7240; it's always open.

AGENCIES: United States Attorney's Office, Federal Bureau of Investigation, San Diego Police Department, Homeland Security Investigations, California Department of Health Care Services, San Diego County District Attorney's Office

Drug dealer sentenced to 25 years in prison for selling the fentanyl that resulted in death of user; longest sentence to date. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/press-releases/2022/02/14/drug-dealer-sentenced-25-years-prison-selling-fentanyl-resulted-death>

# Fentanyl Deaths Climbing, DEA Washington Continues the Fight

February 16, 2022

Written by: DEA Washington Division, Public Information Office

As the new year rolls in, Drug Enforcement Administration Divisions across the U.S. are seeing overdose deaths climb at an alarming rate, especially those caused by the synthetic opioid, fentanyl. Only weeks ago, the DEA reported overdose deaths in the U.S. had topped 100,000 for the first time over a 12-month period ending last spring. Jarod Forget, Special Agent in Charge (SAC) of the DEA's Washington Division is taking this personally.

"Too many people in our area are still unaware of the problem," said SAC Forget.

In 2020, fatal opioid overdoses in the D.C. area surged dramatically — in some cases, to the highest levels ever recorded. Throughout 2021, these numbers only increased. And in January of 2022, the District of Columbia saw rashes of overdose deaths occurring due to "bad batches" of fentanyl-laced drugs being distributed to hard-hit communities.

Based on the most recently available data, 2021 was an even deadlier year for much of the region — a trend that is exacerbated by the Mexican cartels' efforts to turn a quick profit. The DEA has been seeing Mexican cartels sourcing raw, dangerous chemicals from China, using these chemicals to cheaply produce the deadly synthetic opioid, fentanyl. This fentanyl is then trafficked into the area, mixed into almost every illicit drug, and sold to unsuspecting buyers, causing an extraordinary spike in deadly overdose deaths.

Last year, fatal overdoses rose by more than 40 percent across both D.C. and Virginia. As of Aug. 2021, D.C. had already surpassed the number of drug overdose deaths for the year prior. In the District, this overdose problem is disproportionately impacting black residents and communities, who make up



almost 85 percent of all fatal drug overdoses since 2015, according to the D.C. medical examiner's office.

In Virginia, drug overdose deaths in the first half of 2021 were already 22 percent higher than the prior year. Making 2021 likely the deadliest year for fatal drug overdoses in the Commonwealth. This year, officials predict Virginia will see more than 2,600 overdose deaths — a staggering number.

Maryland saw opioid overdose fatalities increase by roughly 18 percent from 2019 to 2020 and most recent data show the state is on track to outpace that number this year.

"We are working to combat the problem in a number of new and innovative ways," said SAC Jarod Forget. "We have been working with our partners across the region and have some incredible new programs and strategies we are rolling out this year. Those, combined with our already bolstered drug seizures and enforcement numbers, will help us stand up against this outrageous rise in the fentanyl we are seeing in our area."

The trends in the DMV (the District of Columbia, Maryland, and Virginia) are mirroring those of the nation — fatal drug overdoses are up over 30 percent

from the previous year. Many experts have attributed the spike in overdoses, at least in part, to the stress and isolation of the pandemic. However, SAC Forget explained this was only part of the issue.

"Mexican cartels and major drug trafficking organizations have been taking advantage of this time and flooding our country and our local communities with this horribly deadly drug." — SAC Forget

Another important issue, he notes, is the ability for these drug dealers to sell online, to our children.

## Social Media Makes Drug Sales Easy for Cartels

Drug sales on social media have been up. The DEA Washington Division has had a number of large investigations in the D.C. area involving drug dealers marketing to unsuspecting children, young adults, and members of the public who think they are getting legitimate prescription drugs. Drug dealers are able to sell practically anonymously to unsuspecting members of the public, and deliver potentially poisonous drug as easy as DoorDash delivers food.

"If you know where to look and you're on social media quite a bit, you'll eas-

ily be able to find drugs like this,” explained SAC Forget. “Unfortunately, our kids ARE much more savvy with social media than we are. And they are the ones we see finding this stuff and dying from it. We must spread the word and stop this from happening in our communities.”

### **Fentanyl’s Detrimental Effects on our Communities**

Due to its cheap production cost and high potency, fentanyl is being added or mixed into almost every purchasable drug, according to the DEA Washington Division. Through seizures and drug tracking data, they are seeing fentanyl in almost every street drug, as well as in the new surge of counterfeit prescription pills.

“We are fighting this new crisis of fentanyl related overdoses even among people who never intended to ingest an opioid,” SAC Forget explains. “The nature of this crisis has really shifted over recent years. All people in all communities are 100% at risk of coming in contact with this deadly drug.”

As social media platforms evolve into an internet street corner for drug dealers, the use of emojis has evolved over the past few years into a form of communication between dealers and buyers. Children and young adults are understanding what the terminology means and testing it.

### **Keeping our Kids Safe**



People looking for drugs online don’t even need to ask for a certain type of drug. They can send an emoji and drug dealers know exactly what they’re talking about, can pay and deliver, all almost seamlessly online.

The DEA has a quick reference guide to help understand meanings of certain emojis as they relate to potential online drug deals. SAC Forget suggests concerned parents not try to memorize each, as they constantly evolve, but use the guide to further understand the issue and how to stay informed, and speak with their kids.

SAC Forget, along with his Division’s new strategy and enforcement efforts, relays that it takes more than law enforcement to combat the issue. He passionately implores parents to talk with their kids. Have these conversations, re-

gardless of the likelihood of drug issues. Communication with our children about these issues ahead of time is what keeps them safe. If something doesn’t add up, keep that in mind – you might need to dig further.

“The number of deaths in our area, and across the country, are staggering,” added SAC Forget. “We’re all working hard to ensure we don’t lose one more child to this problem.”

The DEA also provides information about counterfeit pills, manufactured in Mexico by drug cartels and contain fentanyl, many times in lethal doses. SAC Forget explains these knock-offs are made with professional pill presses by the cartels, making it impossible to distinguish a counterfeit from an authentic painkiller, sold in a pharmacy by prescription.

### **Keep Learning More**

To learn more about the dangers of fentanyl, help, and much more affecting your community: follow DEA Washington division on Twitter, Instagram, or LinkedIn and check out more resources on DEA.gov.

Fentanyl deaths climbing, Dea Washington continues the fight. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/stories/2022/2022-02/2022-02-16/fentanyl-deaths-climbing-dea-washington-continues-fight>



# Mesa Nurse Practitioner Indicted Over Alleged Illegal Opioid Prescribing Practices

**PHOENIX** - Nurse Practitioner Deborah Ann Cooney, 59 years old, has been indicted on 14 criminal charges related to her alleged illegal opioid prescribing practices at a clinic she operates in Mesa, Arizona.

The investigation conducted by the Phoenix Office of the Drug Enforcement Administration (DEA) developed allegations of improper prescribing practices related to opioid prescriptions she provided, specifically Oxycodone.

Cooney was served with an immediate suspension order by the DEA, immediately suspending her DEA registration

and her ability to write prescriptions for controlled substances.

The Arizona Attorney General's Office assisted in the investigation.

All defendants are presumed innocent until proven guilty beyond a reasonable doubt.

Mesa nurse practitioner indicted over alleged illegal opioid prescribing practices. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/press-releases/2022/02/10/mesa-nurse-practitioner-indicted-over-alleged-illegal-opioid-prescribing>



*Nurse Practitioner Deborah Ann Cooney*

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# Pocatello Man Sentenced to Over 10 Years in Federal Prison for Trafficking Methamphetamine

**January 21, 2022**

**Contact: Alison Grande**

**Phone Number: (571) 387-3831**

**For Immediate Release**

**POCATELLO, Idaho** - A Pocatello man was sentenced to 130 months in federal prison for attempted possession with intent to distribute methamphetamine.

According to court records, on December 7, 2020, law enforcement intercepted a package in Pocatello. After a law enforcement K9 alerted to the presence of narcotics, officers searched the package and seized 3,751.6 grams of methamphetamine. Law enforcement repackaged the box, replacing the methamphetamine with rock salt to attempt a controlled delivery. On December 9, 2020, Donald Benningfield, 55, of Pocatello, picked up the package and returned to his residence where he was confronted by law enforcement.

After being read his Miranda rights, Benningfield admitted there would be

between five and ten pounds of methamphetamine in the package. He also admitted to previously receiving four other packages of methamphetamine from San Diego, California. Benningfield admitted in court that he attempted to possess the methamphetamine seized from the package and he intended to distribute it.

Chief U.S. District Judge David C. Nye also ordered Benningfield to serve five years of supervised release following his prison sentence. Benningfield pleaded guilty to the charge on September 24, 2021.

U.S. Attorney Rafael M. Gonzalez, Jr., of the District of Idaho made the announcement and commended the cooperative efforts of the Drug Enforcement Administration and the Idaho State Police, which led to charges.

This case was prosecuted by the Special Assistant United States Attorney hired by the Ada County Prosecuting Attorney's Office with funds provided by the

High Intensity Drug Trafficking Areas (HIDTA) program. HIDTA is part of the Office of National Drug Control Policy (ONDCP) created by Congress with the Anti-Drug Abuse Act of 1988. It provides assistance to federal, state, and local law enforcement agencies operating in areas determined to be critical drug-trafficking regions of the United States. Idaho is part of the Oregon-Idaho HIDTA. The Idaho HIDTA is a collaboration of local, multi-jurisdictional law enforcement drug task forces, and prosecuting agencies dedicated to addressing regional drug trafficking organizations that operate in Ada, Canyon, Bannock, Kootenai, and Malheur Counties.

Pocatello man sentenced to over 10 years in federal prison for trafficking methamphetamine. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/press-releases/2022/01/21/pocatello-man-sentenced-over-10-years-federal-prison-trafficking>



## CHAPTER 4

# How to Build Capacity to Prevent Drug Misuse on Your Campus

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We put a lot of our time and energy in getting the reluctant on board. Instead, find your allies and your partners and start with them and build momentum from there. Those people will help you get the other ones onboard, and the reluctant won't matter anymore, because you're building and growing your program. Shift the energy toward your allies and your partners. That's where the momentum is.

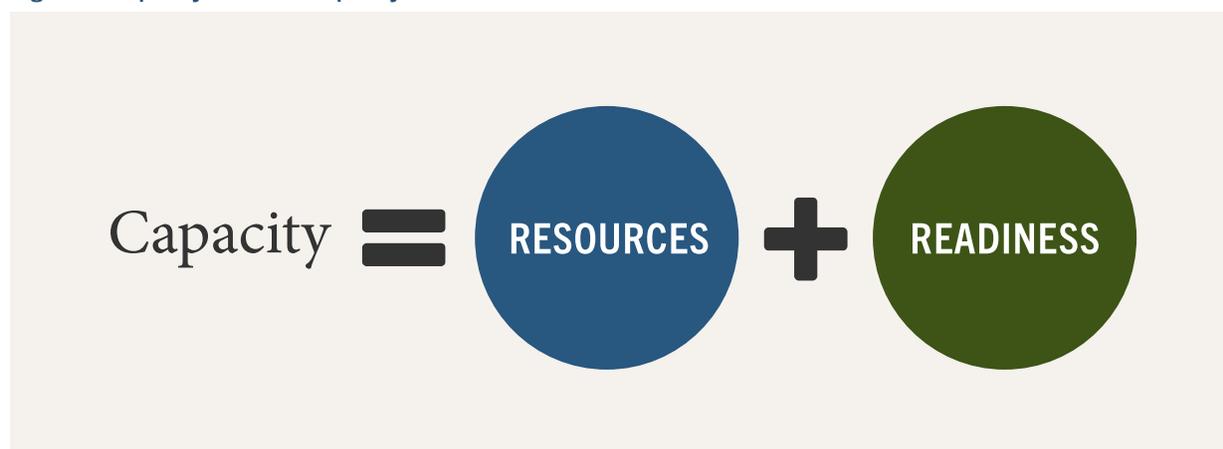
—Diane Fedorchak, Interim Director of the Center for Health Promotion at the University of Massachusetts Amherst

If you've ever been at a higher education conference focused on alcohol and other drug misuse prevention, you likely will have seen a presentation that makes campus and community collaboration to address alcohol and other drug issues look easy. The presenter runs the university alcohol and other drug office and may describe working with law enforcement, local landlords, alcohol retailers, and bar and restaurant owners to address alcohol and other drug misuse by college students. All of the parties seem to be on the same page and committed to building a healthy community for their college-age residents.

If you're struggling to get your prevention program efforts off the ground, a presentation like this can feel frustrating and demoralizing. How do they do it? How are all their community partners committed to one goal rather than blaming one another for the problems caused by college students' AOD consumption?

The answer is the difference in the **capacity** of a community or a campus to take action to address prevention priorities (see Figure 4).

**Figure 4. Capacity formula (Capacity = Resources + Readiness)**



A community needs *human* resources, which includes people and volunteers as well as knowledge and skills, and *structural* resources, such as policies, laws, and funding. Readiness is a measure of the community's *willingness* and motivation to address your identified prevention priority.

Recall in the last chapter how we focused on finding your campus's institutional assessment data to quantify these measures. After diving into these data, you may feel that you currently don't have the capacity to move your prevention goals forward—but don't worry! You can build capacity on your campus and in your local community to bolster support for prevention.

**Here are three tried and true methods to build capacity:**

1. **Engage diverse community stakeholders**
2. **Develop and strengthen a prevention team**
3. **Raise community awareness of the issue**

## STEP 1: Engage Diverse Community Stakeholders



Engaging a broad range of stakeholders is key to unlocking your campus's capacity for prevention. Prevention practitioners on campus need diverse partners—from students to administrators to local community leaders to law enforcement—to share information and resources, raise awareness of critical substance use problems, build support for prevention, and ensure that prevention activities reach multiple populations in multiple settings with multiple strategies.

**The following are some of the different campus and community sectors you may want to involve in your prevention initiative:**

- » Campus leaders
- » Higher education administrators
- » Student leaders
- » Student affairs staff
- » Fraternity and sorority life staff
- » Athletic coaches and staff
- » Campus health and wellness staff
- » Campus law enforcement
- » Local law enforcement
- » Local medical center staff
- » Local alcohol retailers
- » Bar and restaurant owners
- » Local prevention coalition members
- » Local residents



Are there other partners you can think of? [[Worksheet: Identifying New Partners](#)   
[Worksheet: Analyzing Existing Partnerships](#)] 

Once you've determined the stakeholders you currently have on board and those you'll need to bring to the table, you next need to assess how much effort they can realistically put toward your prevention efforts. Your stakeholders will have varying levels of interest or availability to address your prevention efforts—which in no way negates their support for your effort. For example, some stakeholders may be willing to help out with specific tasks, while others may be willing to take on leadership roles. Having a clear understanding of how your stakeholders will work with you is a key step in building capacity.

The following are some different participation options (i.e., levels of involvement) for prevention stakeholders on your campus:<sup>80</sup> [Tip Sheet: [Levels of Collaboration](#)] 

- » **NO INVOLVEMENT:** Stakeholders engage in separate activities, strategies, and policies. *“You do your thing; we’ll do ours.”*
- » **NETWORKING:** Stakeholders share what they are doing during interagency meetings; talk about campus and community issues in which they all have a stake; or communicate about existing programs, activities, or services. *“Let’s talk and share information.”*
- » **COOPERATION:** Stakeholders publicize one another’s programs in agency newsletters, write letters in support of one another’s grant applications, co-sponsor trainings or professional development activities, and/or exchange resources such as technology expertise or meeting space. *“I’ll support your program, and you’ll support mine.”*
- » **COORDINATION:** Stakeholders serve together on event planning committees and community boards or implement programs and services together. *“Let’s partner on an event.”*
- » **COLLABORATION:** Stakeholders create formal agreements, such as memoranda of understanding or contracts; develop common data collection systems; partner on joint fundraising efforts; pool fiscal or human resources; and create common workforce training systems. *“Let’s work together on a comprehensive plan to address the issue. After all, our missions overlap.”*

The next step is to find your new stakeholders by doing the following:

- » **Call your contacts, particularly those with overlapping interests:** Did you have a moment of connection with another campus staffer at an event about prevention issues? Have you reached out to other campus prevention professionals in your town or city? How about a local prevention coalition? Use all your connections, no matter how small, to grow your list of potential stakeholders to support your prevention efforts.
- » **Attend and speak up at campus meetings and events:** Armed with the data you collected from the assessment on how alcohol and other drug issues affect all aspects of student life, start attending and participating in campus meetings and events focused on academic success, student mental health and well-being, and community health.
- » **Ask your partners to contact their partners:** Don’t be shy about asking people you know to bring new and diverse partners to the table. If you have a specific student or campus leader you’d like to connect with, be explicit in your request.
- » **Keep potential partners well informed about prevention activities and progress:** Consider sending out regular (but short) updates on your prevention efforts to your growing roster of stakeholders. It’s a great way to keep partners that may not currently have the capacity to be active in your efforts apprised of what you’re doing and how they could potentially get involved later.

- » **Meet with key players, including campus and student leaders and local decision-makers:** Ask for a 15- or 30-minute meeting and come with a focused and targeted presentation on your alcohol and other drug data. Answer their questions openly and transparently, ask for their impressions, and get their advice on who would be a good fit to join your prevention efforts.
- » **Anticipate and overcome roadblocks:** On any campus, there will be naysayers and voices of doubt, which is why it is crucial to address the concerns of those who might oppose or hinder prevention efforts.

Once you have your list of stakeholders, it's time to move them toward action. This is often where capacity building stalls, as it's easier for most of us to network, or connect to one another, rather than ask for cooperation, coordination, or full collaboration. Here are some ways to move your interested stakeholders to action:

[**Tip Sheet: [You Gotta Hear This! Developing an Effective Elevator Pitch](#)** 

- » **Meet face-to-face to discuss overlapping goals and agendas:** Get your 15- or 30-minute presentation ready and pound the pavement!
- » **Extend an invitation to attend a prevention team or task force meeting:** Keep your agendas tight and focused, and make sure you are only inviting stakeholders to a meeting when you have something specific you want to share or would like their help with.
- » **Make more specific requests for involvement once prevention planning is underway:** People love to be asked to help in ways that highlight their strengths. Ask your stakeholders to complete tasks that match their interests.
- » **Extend invitations to attend future prevention events and activities:** Even if someone can't help now, make sure to keep inviting them as you never know when their schedule or interest in your work could change.
- » **If nothing else happens, maintain the relationship by keeping stakeholders informed of prevention activities and progress:** Even if you're not at the stage to start an active collaborative effort, be sure to send out those short, regular updates on what you are doing to advance prevention on your campus.

## **Check In: How Do I Make Sure My Stakeholder Meetings Are Engaging and Building Momentum Toward Change?**

Once you've got stakeholders interested in meeting as a group or task force, you have to plan an agenda for the meeting. Planning a meeting that is interesting and drives your agenda forward is invaluable to effective prevention.

**Here are some tips to get the most of your stakeholders' time:**

- » **Determine a purpose for the meeting, *then* set a date.** You might want to discuss student alcohol and drug use data or do a deep dive into your campus's alcohol and drug policies or get opinions from stakeholders on a key question. Whatever it is, make sure you know exactly *why* you want to bring people together before sending an invite.
- » **Consider whom to invite.** Not all of your stakeholders need to be at all meetings. After you determine your meeting's purpose, look at your stakeholders and decide who really needs to be there. Share your meeting's purpose with your invitees so your stakeholders can bring others who may be able to help meet the meeting's goals.
- » **Stick to a schedule.** Break your agenda down to specific blocks of time (e.g., 5, 10, 15 minutes) and ***keep the meeting to one hour or less***. Share your schedule before your meeting and provide copies to attendees at the meeting (or post it on a white board or screen). Do not go over the allotted time.
- » **Stop meeting hijackers.** Don't let one person dominate with their impressions or grievances. Practice saying, "Thanks so much for that perspective. Let's hear from someone else before we make a decision," before the meeting so you are prepared to redirect a voluble attendee firmly and positively.
- » **Follow up.** Send a thank you and a list of meeting accomplishments, tasks delegated, and next steps within 24 hours after the meeting ends.

Conducting great meetings takes planning and preparation—time that you may feel you could be using elsewhere. However, engaging meetings lead to passionate prevention task forces and are well worth the effort!

## STEP 2: Develop and Strengthen a Prevention Team



Full collaboration, the highest level of involvement, often takes the form of a prevention task force. While not all your stakeholders need to be involved at this level, your task force should include representatives from campus and community groups that are most vital to the success of your prevention initiative. Here are some ideas for building and/or strengthening your task force: [Tip Sheet: [Beginning Your Collaboration: Tips for a Safe and Satisfying Journey](#)]

- » **Identify and fill gaps:** Once you have a team in place, ask yourself: Are your key campus and community groups represented? If you identify any gaps, try to fill them—but first make sure that your existing partners support additional recruitment. If current partners have reservations (e.g., “More people mean more opinions and conflict!”), take some time to point out, as specifically as possible, why you want to bring each new partner on board.
- » **Build prevention knowledge:** A truly representative task force means that members will bring diverse insights and experiences to the table, as well as varied knowledge and perspectives on the priority problem being addressed. Use a variety of strategies, including guest speakers and group trainings, to increase task force members’ understanding of the problem and effective prevention strategies.
- » **Monitor and improve group structure and processes, as needed:** Even the most well-informed group won’t be productive unless it functions well. To help your team work together effectively, discuss how you will share leadership, make decisions, divide tasks, resolve conflicts, and communicate with one another, as well as with the broader community.

## STEP 3: Raise Community Awareness of the Issue



By raising public awareness of your campus's priority substance misuse problem, you can help garner valuable resources and increase campus readiness for prevention.

**The following are some strategies for raising awareness on your campus:**

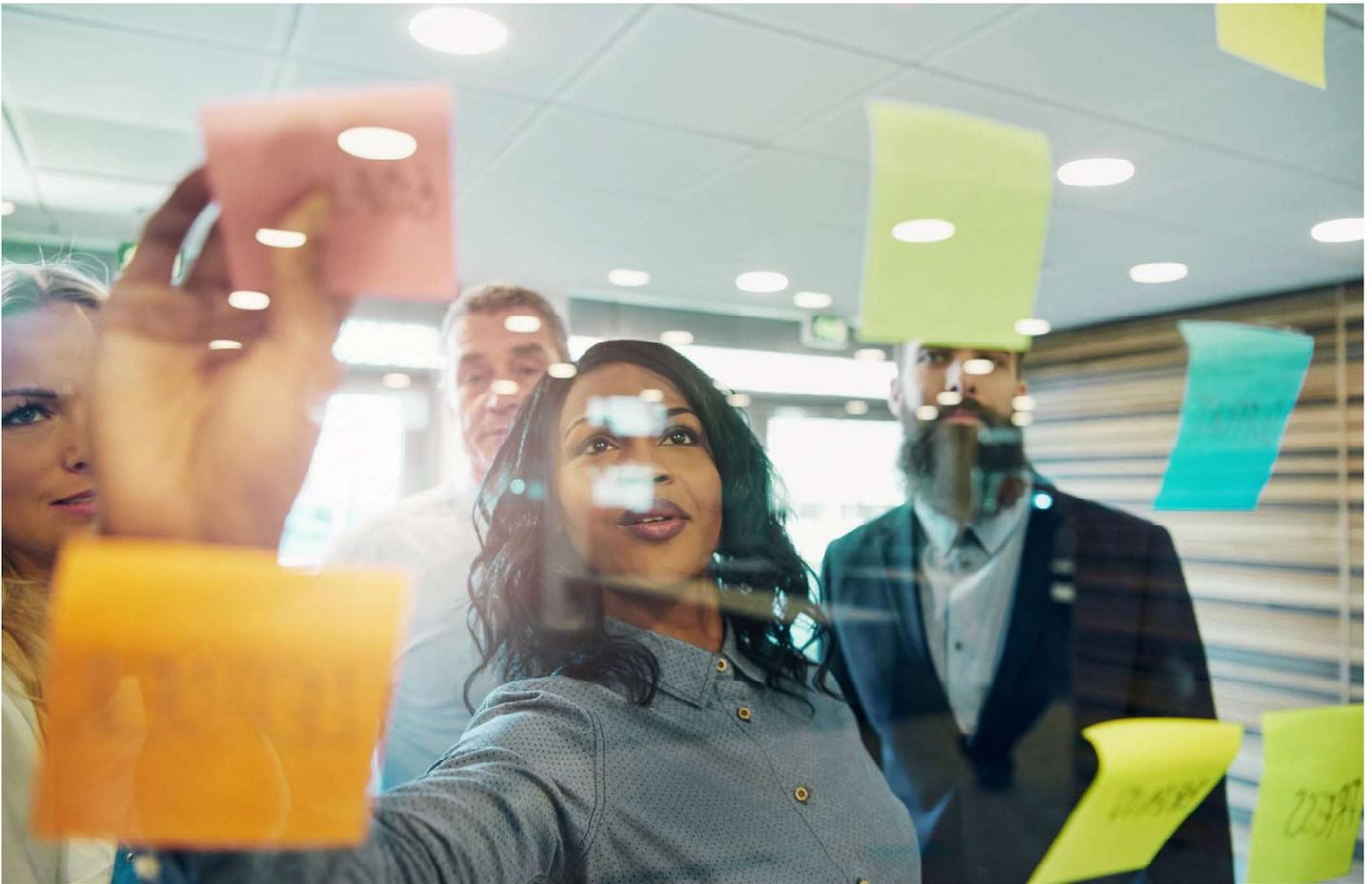
- » Meet one-on-one with public opinion leaders, such as student newspaper opinion columnists or student influencers on social media
- » Ask task force members to share information with their own groups
- » Submit articles to student and local newspapers
- » Share information on campus websites and social media outlets
- » Host campus-wide events to share information about and discuss the problem
- » Convene focus groups to get input on prevention plans

It's always helpful to think outside the box when looking for new ways to raise awareness on your campus. For example, your college may have a media studies department that can help you create a video about your campus's priority problem and/or prevention efforts. You may have student social media mavens who are gifted at producing short videos or using photography to convey complexities. Which individuals and groups on your campus could help you reach out, spread the word, and get others involved?

## Finish Strong!

Now that you've worked through how to build capacity for a prevention program, you should know the following:

- » Your campus's stakeholders and which groups of people you need to connect with to ensure your prevention program will be successful
- » Names of champions on your campus who can promote your drug misuse prevention program and help you find allies for collaboration
- » Exactly how much work you need to do to spotlight issues of drug misuse on your campus



## CHAPTER 5

# How to Plan a Successful Drug Misuse Prevention Program on Your Campus

“

If you are developing prevention programs, I highly recommend working to understand initiatives and projects that are already doing this work across the country. There's a really strong community, and people who work in the prevention field want to share resources and share best practices to help one another. It's really important to leverage that to your advantage.

—Dr. Erica Phillips, Associate Director in the Center for the Study of Student Life at the Ohio State University

For those of you who have spent time working to prevent alcohol and other drug misuse on college campuses, you know that there is a rotating cast of motivational speakers, online prevention programs, and in-person workshop facilitators that seem to make the rounds from one campus to another. One year, social norms experts are all the rage in your AOD professional group, and the next, everyone is wondering if the new online motivational interviewing-based drug misuse prevention program will work for their first-year student orientation programming.

In many ways, we are fortunate to work among such committed and passionate prevention professionals, but having an excess of interesting and engaging prevention programs and workshops at our disposal can make the job of strategic prevention more difficult than it needs to be. How many of us have reached out for feedback to a professional group for a prevention program idea and ended up more uncertain than when we started?

The SPF can help eliminate that confusion. It is grounded in the idea that every prevention plan is unique and should be designed to meet the specific needs of the community. For those of you who work on college campuses, this means doing a deep dive into the distinctive characteristics of your students and their alcohol and other drug usage patterns, and then crafting a prevention plan that is uniquely tailored to address their needs.

#### In short, you need to do four things:

1. **Prioritize risk and protective factors**
2. **Select appropriate interventions to address priority factors**
3. **Determine how many interventions you can realistically implement**
4. **Build a strategic plan (or logic model) and share with your stakeholders**

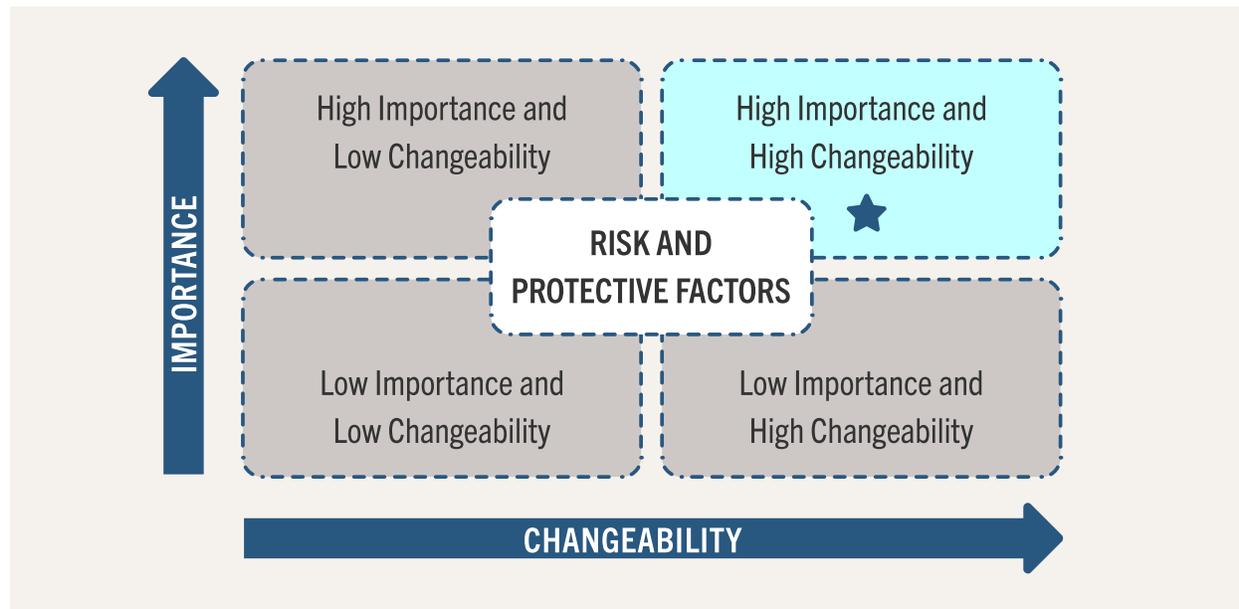


## Prioritize Risk and Protective Factors

Every substance use problem on every campus is associated with multiple risk and protective factors. Think about the wide combination of risk factors on your campus. Maybe you have large numbers of students living off campus or a high proportion of students affiliated with a fraternity, a sorority, or a student body who are likely to have used alcohol and drugs in high school.

No campus AOD misuse prevention program can address all of these factors—at least not at once. So the first step in developing a prevention plan is to figure out which risk and protective factors to address first. To prioritize factors, it's helpful to consider a factor's **importance** and **changeability** (Figure 5).

Figure 5. Importance versus changeability



- » **IMPORTANCE:** This describes how a specific risk or protective factor affects a problem. To determine a factor's importance, ask yourself the following questions:
- How much does this factor contribute to our priority problem?
  - Is this factor relevant, given the developmental stage of our focus population?
  - Is this factor associated with other behavioral health issues?
- » **CHANGEABILITY:** This describes a campus's capacity to influence a specific risk or protective factor. To determine a factor's changeability, ask yourself these questions:
- Do we have the resources and readiness to address this factor?
  - Does a suitable intervention exist to address this factor?
  - Can we produce outcomes within a reasonable time frame?

When developing a prevention plan, it is best to prioritize risk and protective factors that are **high for both importance and changeability**. A classic example for most college AOD misuse prevention professionals are intervention programs that are aimed at first-year students, either before they arrive on campus or when they first arrive. Numerous studies have shown that the first year of college is a crucial time for first-year students as they seek to understand and behave in ways that reflect the social norms of the campus (i.e., **high in importance**). Challenging norms around alcohol and other drug usage as soon as first-year students arrive on campus may prevent many of them from starting high-risk AOD use simply because they feel that it is expected of them (i.e., **high in changeability**).

If no factors are high for both, the next best option is to prioritize factors with **high importance and low changeability**. Since factors with high importance contribute significantly to priority substance misuse problems, addressing these factors is more likely to make a difference. And it's easier to increase the changeability of a factor (e.g., by building capacity) than it is to increase its importance.

However, in some cases your community may choose to address a factor with **low importance and high changeability**. Doing this can give your community a quick “win,” help raise awareness of and support for prevention, and increase the community’s capacity to address more important factors in the future. For

example, a campus with a heavy partying and rambunctious off-campus student population that is embedded within a residential community might start by organizing a neighborhood cleanup on Sunday mornings for students and residents. Though the underlying partying issue is not being addressed, the cleanup builds capacity and fosters trust between students and residents, setting the stage for further interventions.



## Select Appropriate Interventions to Address Priority Factors

Sometimes, prevention professionals may want to select interventions that are popular, that worked well on a different campus, or that they are familiar with. However, these are not great reasons for selecting an intervention.

What's more important is that the prevention intervention can effectively address the campus's priority substance use problem and its associated risk and protective factors and that the intervention is a good fit for the campus community.

**Following are three important criteria for selecting appropriate prevention interventions:**

- » **Evidence based:** Whenever possible, you should select evidence-based interventions (i.e., programs or practices that have peer-reviewed, rigorously evaluated empirical evidence of effectiveness). The best places to find evidence-based interventions are federal registries of model programs, such as [NIAAA's CollegeAIM](#), a compilation of evidence-based alcohol and other drug prevention programs on campus rated by efficacy, and SAMHSA's [Evidence-Based Practice Resource Center](#). Another excellent source of new and emerging interventions are evaluations published in peer-reviewed journals, such as the *Journal of American College Health* and the *American Journal of Public Health*.

It's important to note, however, that these sources are not exhaustive, and they may not include interventions appropriate for all problems and/or all populations. For college students, in particular, it can be difficult to find population-level studies of effectiveness, and it may be more useful to look for pilot studies that have promising results among small samples of college students who match your target population.

[Tools: [Preventing Substance Misuse among 18- to 25-Year Olds: Programs and Strategies](#); 

Tool: [Preventing Youth Marijuana Use: Programs and Strategies](#) 

## **Check-In: How Can You Determine The Strength of an Evidence-Based Substance Misuse Prevention Intervention?**

<b>WHAT WORKS</b>	At least two experimental or quasi-experimental studies showing statistically significant results in the desired direction and the preponderance of all available evidence showing effectiveness.
<b>WHAT DOES NOT WORK</b>	At least two experimental or quasi-experimental studies showing statistically significant results showing ineffectiveness and the preponderance of all available evidence showing ineffectiveness.
<b>WHAT IS PROMISING</b>	At least one experimental or quasi-experimental study showing statistically significant results in the desired direction and the preponderance of the other studies showing effectiveness.
<b>WHAT IS UNKNOWN</b>	Any intervention that does not fall into one of the other categories.

Source: Farrington, D. P., Gottfredson, D. C., Sherman, L. W., & Welsh, B. C. (2002). The Maryland scientific methods scale. In: L. W. Sherman, D. P. Farrington, B. C. Welsh, & D. L. MacKenzie (Eds.), *Evidence-based crime prevention*. London, UK and New York, NY: Routledge.

- » **Conceptual fit:** An intervention has good **conceptual fit** if it directly addresses one or more of the priority factors driving a specific substance use problem and has been shown to produce positive outcomes for members of the focus population. To determine the conceptual fit of an intervention, ask yourself, “Will this intervention have an impact on at least one of our campus’s priority risk and protective factors?”

*For example, screening and brief interventions, such as BASICS, are effective at challenging students’ beliefs about the prevalence of high-risk alcohol use on campus. If one of your risk factors is widespread misperception about heavy drinking, then BASICS may be a good fit conceptually.*

- » **Practical fit:** An intervention has good **practical fit** if it is culturally relevant for the focus population; a campus has the capacity to support it; and it enhances or reinforces existing prevention activities. To determine the practical fit of an intervention, ask yourself, “Is this intervention appropriate for our campus?”

*Continuing with our BASICS example, to determine practical fit, you would need to assess whether BASICS works with your student population and, more importantly, if you have the capacity to support it. BASICS requires training for facilitators and dedicated time to do the intervention. You would also want to make sure that BASICS is targeting a unique need among your student population and not replicating other prevention efforts.*

Evidence-based interventions with **both** conceptual fit and practical fit will have the highest likelihood of producing positive prevention outcomes.

## ✓ Check-In: Can I Use Evidence-based Interventions as Jumping Off Points for Innovative Prevention Programming?—Examples from the Field

The field of college alcohol and drug misuse prevention research is robust and enthusiastic, but the fact remains that there are not a lot of population-level, evidence-based interventions to address substance misuse among college students. The strongest evidence supports brief interventions designed to promote individual behavior change.

One such program is BASICS, or Brief Alcohol Screening and Intervention for College Students, a harm reduction program for college students who drink heavily. BASICS is aimed at students who drink heavily and also are at risk for alcohol-related consequences, both academic (e.g., failing classes) and personal (e.g., violence). The program uses a counselor trained in motivational interviewing who provides data on campus-wide drinking rates, challenges a student's alcohol expectancies, and helps set new goals for alcohol use that are in line with the student's stated life aims.

Two researchers have taken the “basic” premise of BASICS and used it to develop innovative new programming:

1. **University of Tennessee Knoxville:** Researcher Michael Mason's team has been developing a mobile phone-based platform that uses text messaging, referred to as Peer-Network Counseling (PNC-text), to adapt the BASICS model for students who are heavy cannabis users.<sup>81</sup> Mason's four-week pilot programs have been promising, showing that students are highly receptive to the text messaging format. Students completing the program report fewer heavy-cannabis-use days and relationship problems due to cannabis use after three months post-intervention. A larger multi-site study is now being conducted at Colorado State University and University of Tennessee Knoxville.
2. **University of Albany:** Researcher Dolores Cimini's team adapted the BASICS approach for student athletes, using aggregate athlete drinking data as the reference point. Her team tailored the intervention to challenge athletes to think about how their alcohol use affects their goals as athletes.<sup>82</sup> After three months, athletes drank less, used more protective strategies, and experienced fewer negative consequences from their alcohol use.

Bottom line? Don't be afraid to look at evidence-based programming and see how you can adapt it for your student population. Reach out to the researchers who conducted the original studies and ask for help. Go forward and innovate!

## Determine How Many Interventions You Can Realistically Implement

In a comprehensive approach to prevention, interventions combine to have widespread reach, target multiple domains, and ensure cultural relevance. However, many campuses may not have the capacity to build such an approach. If a comprehensive approach is not a realistic possibility for your campus, you should instead focus on finding one intervention that will have the maximum impact.

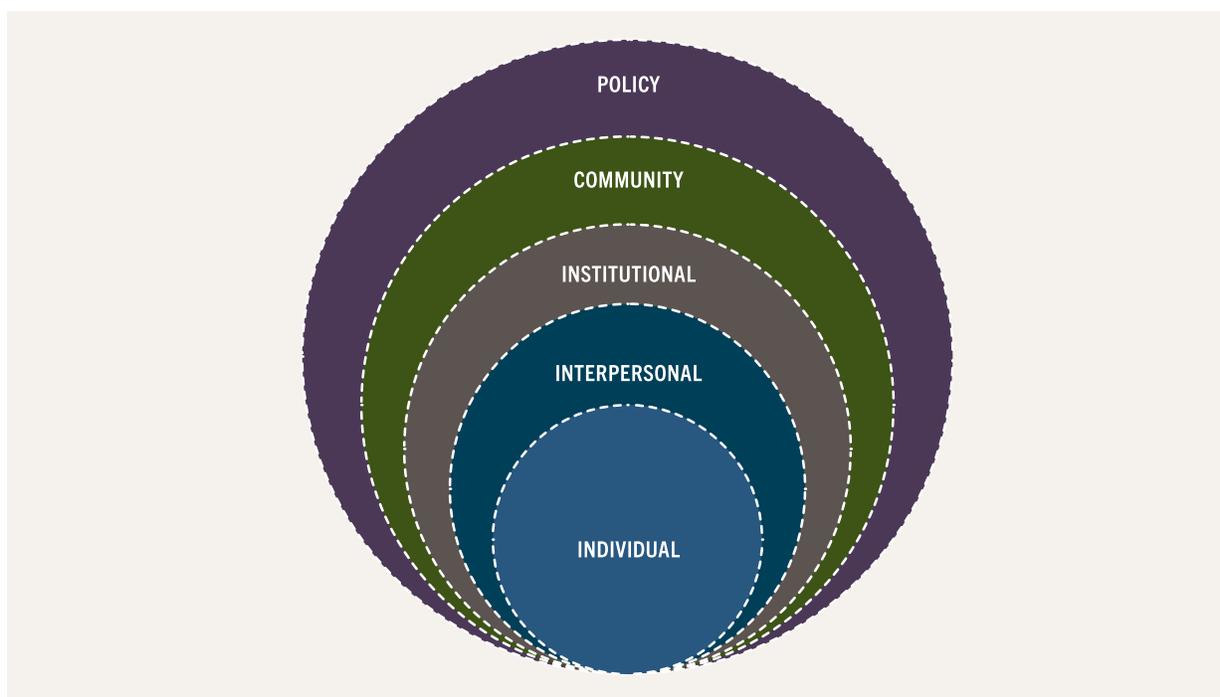
**In short, consider the following with your list of possible interventions:**

1. **Widespread reach:** To produce population-level change, campuses should implement strategies with the greatest possible reach. To determine reach, ask yourself:

- How many students will the intervention affect?
- Which groups on campus will be affected by your efforts?

While they can represent an important component of a comprehensive prevention plan, environmental change strategies—such as social marketing, campus policy development, and enforcement—have greater reach. No prevention plan is truly comprehensive without attention to environmental or contextual change.

2. **Multiple domains:** According to the socioecological model, risk and protective factors operate at four levels, or domains: individual, family, school/campus, and community/town. A comprehensive prevention plan includes multiple interventions operating in multiple settings and across multiple domains.

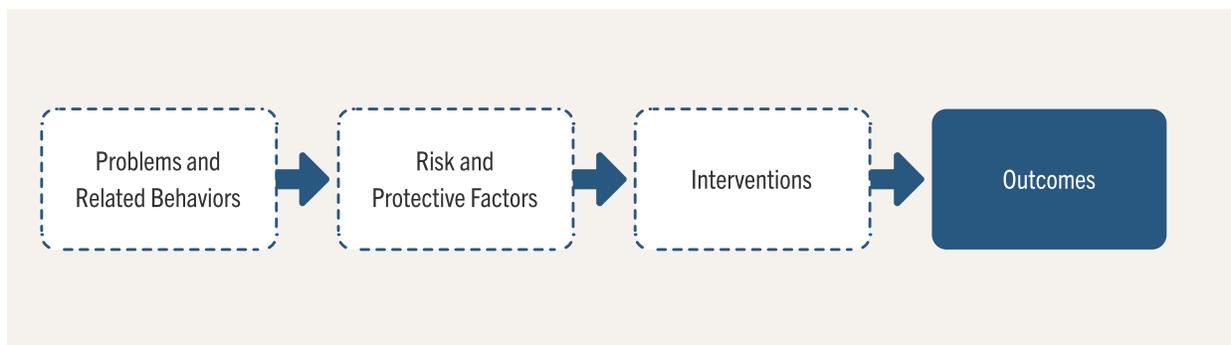


3. **Cultural relevance:** Interventions must be responsive to, and appropriate for, the different cultural groups on your campus. This includes not only high-risk groups, but **all** students who will be part of the intervention. Throughout the SPF process, you must take steps to ensure the cultural relevance of your prevention efforts. Here are a few ways to ensure cultural relevance:
- While conducting your **assessment**, map the cultural landscape to identify different student groups on campus. Make sure you know key student leaders in each group, and analyze assessment data by group.
  - While **building capacity**, share and discuss assessment findings throughout campus, invite student leaders and members of different student groups to participate in prevention planning, and make sure the planning team includes students with strong ties to groups at high risk.
  - While **planning**, recruit students from your target population to help identify appropriate interventions and convene focus groups with diverse students to obtain valuable feedback on potential interventions.

## Build a Strategic Plan (or Logic Model) and Share with Your Stakeholders

A strategic plan or logic model is a graphic planning tool, much like a road map, that can help your team communicate where you want to go and how you intend to get there. A logic model includes the following components: a problem statement, risk and protective factors related to the problem, interventions to address these factors, and anticipated intervention outcomes (see Figure 6).

Figure 6. A simple logic model template



**Outcomes** are the changes that communities want their interventions to produce.

**Prevention outcomes fall into two categories:**

1. **Short-term outcomes** are the most immediate effects of an intervention. They have the following traits:
  - Are closely related to how well the intervention is implemented
  - Usually include changes in knowledge, attitudes, beliefs, and skills
  - Tend to be connected to changes in priority risk and protective factors

2. **Long-term outcomes** are the ultimate effects of interventions after they have been in place for a while. They exhibit these traits:
- Usually result from positive short-term outcomes that can, over time, lead to long-term behavioral changes
  - May take a long time to produce and measure—sometimes many years

When developing a logic model, it's important to work with an evaluator to identify a set of anticipated outcomes that are clear and measurable. Reach out to professors who teach research and evaluation methods for help. If they themselves are unable to help, they will likely know other evaluators who can help you determine your anticipated outcomes. [**Worksheet:** [Developing Your Logic Model: Worksheet](#)] 

**After completing your logic model for AOD misuse prevention on your campus, share it with these two important groups:**

- » **PREVENTION PARTNERS:** This group includes the following:
  - The individual staff and students, student groups, and staff departments that participated in your assessment
  - People you brought on board during the capacity-building processes
  - People who will play a key role in your chosen prevention interventions.

**Note:** Be sure that your logic model clearly communicates what your prevention partners hope to accomplish and how you will all work together to make it happen.

- » **OTHER PREVENTION STAKEHOLDERS:** This group includes funders as well as campus and community members and groups who may not be actively involved in prevention efforts (yet!).

A logic model can help you build support for prevention overall, and mobilize the specific capacity needed to implement selected interventions. The more people who understand the problem and are on board with the prevention plan, the more likely it is that interventions will be sustained over time.

## Finish Strong!

Now that you've planned your prevention program, you should have done the following:

- » Prioritized your campus's risk and protective factors
- » Determined your long- and short-term outcomes for your prevention program using a logic model
- » Selected an evidence-based substance misuse prevention program that meets your campus's needs and, if needed, adapted the program for your student population
- » Created a plan of action to implement your prevention program

Here are  
one of the  
officers who  
received a  
trauma kit.



— CITY of COLUMBIA —  
**POLICE**

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# Texan Sentenced for Transporting Fentanyl and other Narcotics

**February 02, 2022**

**Contact: Sally M. Sparks**

**Phone Number: (713) 693-3329**

**For Immediate Release**

**CORPUS CHRISTI, Texas** - A 41-year-old Houston man has been ordered to prison after conspiring to transport cocaine, heroin and fentanyl into the country, announced Drug Enforcement Administration (DEA) Special Agent in Charge Daniel C. Comeaux, Houston Division and U.S. Attorney Jennifer B. Lowery.

Juan Antonio Sanchez Jr. pleaded guilty June 3, 2021, to conspiracy to possess with intent to distribute controlled substances.

Today, U.S. District Judge David S. Morales sentenced him to serve 120 months

in federal prison to be immediately followed by five years of supervised release.

The investigation revealed Sanchez hired drivers and passengers to smuggle narcotics to Houston. Sanchez would walk across the Port of Entry to avoid being in the vehicles as they passed through with the narcotics.

On Oct. 23, 2019, authorities intercepted approximately 2.5 kilograms of cocaine in the battery of a vehicle. The investigation determined Sanchez hired that driver to attempt to pass through the U.S. Border Patrol checkpoint near Sarita, Texas.

Sanchez was also found responsible for two kilograms of heroin and one kilogram of fentanyl found in a vehicle

during a traffic stop Dec. 22, 2019.

Sanchez has been and will remain in custody pending transfer to a U.S. Bureau of Prisons facility to be determined in the near future.

The Drug Enforcement Administration conducted the investigation with the assistance of the U.S. Border Patrol. Assistant U.S. Attorney Barbara J. De Peña prosecuted the case.

Texan sentenced for transporting fentanyl and other narcotics. DEA. (n.d.). Retrieved February 22, 2022, from <https://www.dea.gov/press-releases/2022/02/02/texan-sentenced-transporting-fentanyl-and-other-narcotics>

# A POLICEMAN'S PRAYER

Saint Michael, heaven's glorious commissioner of police, who once so neatly and successfully cleared God's premises of all its undesirables, look with kindly and professional eyes on your earthly force.

Give us cool heads, stout hearts, and uncanny flair for investigation and wise judgment.

Make us the terror of burglars, the friend of children and law-abiding citizens, kind to strangers, polite to bores, strict with law-breakers and impervious to temptations.

You know, Saint Michael, from your own experiences with the devil, that the police officer's lot on earth is not always a happy one; but your sense of duty that so pleased God, your hard knocks that so surprised the devil, and your angelic self-control give us inspiration.

And when we lay down our night sticks, enroll us in your heavenly force, where we will be as proud to guard the throne of God as we have been to guard the city of all the people.

Amen.



# MEMORIAL SECTION



**Deputy Sheriff David Cook**  
Kent County Sheriff's Office, MI  
EOW: Monday, November 1, 2021  
Cause: COVID19



**Sergeant Dominic Guida**  
Bunnell Police Department, FL  
EOW: Tuesday, November 9, 2021  
Cause: Heart attack



**Police Officer Henry Laxson**  
Clayton County Police Department, GA  
EOW: Tuesday, November 30, 2021  
Cause: Gunfire



**Sergeant Timothy Werner**  
Pittsburgh Bureau of Police, PA  
EOW: Tuesday, November 2, 2021  
Cause: COVID19



**Lieutenant Chad Owen Brackman**  
Maricopa County Sheriff's Office, AZ  
EOW: Wednesday, November 10, 2021  
Cause: Struck by vehicle



**Border Patrol Agent Salvador Martinez, Jr.**  
United States Department of Homeland Security - Customs and Border Protection - United States Border Patrol, US  
EOW: Tuesday, November 30, 2021  
Cause: COVID19



**Police Officer Scott Harn**  
Dallas Police Department, TX  
EOW: Tuesday, November 2, 2021  
Cause: COVID19



**Detective Michael J. Dion**  
Chicopee Police Department, MA  
EOW: Wednesday, November 10, 2021  
Cause: Heart attack



**Constable Madison "Skip" Nicholson**  
Wilcox County Constable's Office, AL  
EOW: Wednesday, December 1, 2021  
Cause: Gunfire



**Correctional Officer Richard W. Newkirk**  
Iowa Department of Corrections, IA  
EOW: Wednesday, November 3, 2021  
Cause: COVID19



**Corrections Officer V Kevin Dupree**  
Texas Department of Criminal Justice - Correctional Institutions Division, TX  
EOW: Thursday, November 11, 2021  
Cause: COVID19



**Detective Antonio Antoine Valentine**  
St. Louis County Police Department, MO  
EOW: Wednesday, December 1, 2021  
Cause: Vehicle pursuit



**Detective Sergeant Gary R. Taccone**  
Erie Police Department, PA  
EOW: Wednesday, November 3, 2021  
Cause: COVID19



**Police Officer Michael D. Chandler**  
Big Stone Gap Police Department, VA  
EOW: Saturday, November 13, 2021  
Cause: Gunfire



**Deputy Sheriff Clay Livingston**  
Elbert County Sheriff's Office, CO  
EOW: Friday, December 3, 2021  
Cause: COVID19



**Deputy Sheriff John Edward Moon**  
Waller County Sheriff's Office, TX  
EOW: Wednesday, November 3, 2021  
Cause: COVID19



**Parole Officer I Ty'isha Harper**  
Texas Department of Criminal Justice - Parole Division, TX  
EOW: Monday, November 15, 2021  
Cause: COVID19



**Police Officer Richard Houston, II**  
Mesquite Police Department, TX  
EOW: Friday, December 3, 2021  
Cause: Gunfire



**Senior Patrolman Sherman Otto Benys, Jr.**  
Kingsville Police Department, TX  
EOW: Thursday, November 4, 2021  
Cause: Gunfire



**Master Trooper Daniel A. Stainbrook**  
Wisconsin State Patrol, WI  
EOW: Monday, November 15, 2021  
Cause: COVID19



**Police Officer Daniel J. Daly**  
Beloit Police Department, WI  
EOW: Monday, November 15, 2021  
Cause: COVID19



**Border Patrol Agent Anibal A. Perez**  
United States Department of Homeland Security - Customs and Border Protection - United States Border Patrol, US  
EOW: Friday, November 5, 2021  
Cause: COVID19



**Police Officer Daniel J. Daly**  
Beloit Police Department, WI  
EOW: Monday, November 15, 2021  
Cause: COVID19



**School Resource Officer John Davis Starks**  
Clark County Sheriff's Office, IN  
EOW: Wednesday, December 8, 2021  
Cause: COVID19



**Correctional Officer Juan Cruz, Jr.**  
Fresno County Sheriff's Office, CA  
EOW: Friday, November 5, 2021  
Cause: COVID19



**Corrections Officer Rhonda Jean Russ**  
Blair County Prison, PA  
EOW: Wednesday, November 17, 2021  
Cause: Gunfire (Inadvertent)



**Police Officer Theodore James Ohlmeier**  
Colwich Police Department, KS  
EOW: Wednesday, December 8, 2021  
Cause: COVID19



**Sergeant Scott M. Patton**  
Robinson Township Police Department, PA  
EOW: Saturday, November 6, 2021  
Cause: COVID19



**Deputy Sheriff Frank Ramirez, Jr.**  
Independence County Sheriff's Office, AR  
EOW: Thursday, November 18, 2021  
Cause: Automobile crash



**Detective Wayne H. Fortier**  
Grafton County Sheriff's Department, NH  
EOW: Wednesday, December 8, 2021  
Cause: COVID19



**Corporal Ignacio J. Romero**  
Lander County Sheriff's Office, NV  
EOW: Sunday, November 7, 2021  
Cause: COVID19



**Town Marshal Anthony Wayne Hinshaw**  
Losantville Marshal's Office, IN  
EOW: Thursday, November 25, 2021  
Cause: COVID19



**Detective Hector M. Nunez**  
Nassau County Police Department, NY  
EOW: Wednesday, December 8, 2021  
Cause: COVID19



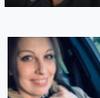
**Deputy Sheriff Bernard Roberts**  
Columbia County Sheriff's Office, NY  
EOW: Sunday, November 7, 2021  
Cause: COVID19



**Code Enforcement Officer Adam Ray Arbogast**  
Parsons Police Department, WV  
EOW: Thursday, November 25, 2021  
Cause: COVID19



**Detective Joseph Pollack**  
Douglas County Sheriff's Office, CO  
EOW: Thursday, December 9, 2021  
Cause: COVID19



**Deputy Sheriff Lena Nicole Marshall**  
Jackson County Sheriff's Office, GA  
EOW: Monday, November 8, 2021  
Cause: Gunfire



**Supervisory Border Patrol Agent Martin Barrios**  
United States Department of Homeland Security - Customs and Border Protection - United States Border Patrol, US  
EOW: Monday, November 29, 2021  
Cause: COVID19



**Corporal Jack Lee Guthrie, Jr.**  
Dallas College Police Department, TX  
EOW: Thursday, December 9, 2021  
Cause: COVID19



**Police Officer Paramhans Dineshchandra Desai**  
Henry County Police Department, GA  
EOW: Monday, November 8, 2021  
Cause: Gunfire



**Police Officer Kerry Dick**  
Rossville Police Department, KS  
EOW: Monday, November 29, 2021  
Cause: COVID19



**Sergeant Wayne Stephen Weyler**  
Mesa County Sheriff's Office, CO  
EOW: Friday, December 10, 2021  
Cause: COVID19





**Deputy Jailer Robert Daniel**  
Graves County Jail, KY  
EOW: Friday, December 10, 2021  
Cause: Weather/Natural disaster



**Lieutenant Matthew A. Vogel**  
Hudson County Sheriff's Office, NJ  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Police Officer Jesus "Chuy" Lara**  
Casa Grande Police Department, AZ  
EOW: Tuesday, January 4, 2022  
Cause: COVID19



**Police Officer Ronald William Smith**  
New York Mills Police Department, MN  
EOW: Wednesday, December 15, 2021  
Cause: COVID19



**Sergeant Christopher Mortensen**  
Wilkes-Barre Police Department, PA  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Police Officer David Leroy Ingle**  
Iola Police Department, KS  
EOW: Tuesday, January 4, 2022  
Cause: COVID19



**Transfer Officer Terry Lorenzo Primus, Sr.**  
Georgia Department of Corrections, GA  
EOW: Thursday, December 16, 2021  
Cause: COVID19



**Corporal Miguel Eladio "Mike" Sanchez**  
Amarillo Police Department, TX  
EOW: December 27, 2021  
Cause: COVID19



**Police Officer Franklin Joe**  
Lone Star College System Police Department, TX  
EOW: Tuesday, January 4, 2022  
Cause: COVID19



**Police Officer Jeremy Martin Wilkins**  
Chandler Police Department, AZ  
EOW: Friday, December 17, 2021  
Cause: COVID19



**Sergeant James Dement**  
Friendswood Police Department, TX  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Police Officer Richard Lynn Tostenson**  
Newnan Police Department, GA  
EOW: Thursday, January 6, 2022  
Cause: COVID19



**Police Officer Zachary Dale Cottongim**  
Louisville Metro Police Department, KY  
EOW: Saturday, December 18, 2021  
Cause: Struck by vehicle



**Police Officer Gregory M. Santangelo**  
Frederick Police Department, MD  
EOW: Tuesday, December 28, 2021  
Cause: COVID19



**Captain Reginald Kamal Smith**  
Wilson Police Department, NC  
EOW: Friday, January 7, 2022  
Cause: COVID19



**Officer Chad P. Christiansen**  
Wisconsin Department of Military Affairs - Volk Field Security Forces, WI  
EOW: Saturday, December 18, 2021  
Cause: COVID19



**Corrections Officer Sterling David Heinbaugh, Jr.**  
Franklin County Jail, PA  
EOW: Tuesday, December 28, 2021  
Cause: COVID19



**Deputy Sheriff Michael Queeeny**  
Will County Sheriff's Office, IL  
EOW: Saturday, January 8, 2022  
Cause: COVID19



**Sergeant Kevin D. Redding**  
Haverford Township Police Department, PA  
EOW: December 20, 2021  
Cause: COVID19



**Deputy Sheriff Sean Riley**  
Wayne County Sheriff's Office, IL  
EOW: Wednesday, December 29, 2021  
Cause: Gunfire



**Detention Sergeant Janel L. Visser**  
Miller County Sheriff's Office, MO  
EOW: Sunday, January 9, 2022  
Cause: COVID19



**Corporal John Joseph Wojciechowski**  
Wayne County Sheriff's Office, MI  
EOW: Tuesday, December 21, 2021  
Cause: COVID19



**Police Officer Wayne "Butch" Nowell, Jr.**  
Meridian Police Department, TX  
EOW: Wednesday, December 29, 2021  
Cause: COVID19



**Police Officer Il Fernando Arroyos**  
Los Angeles Police Department, CA  
EOW: Monday, January 10, 2022  
Cause: Gunfire



**Police Officer Mia Danielle Figueroa-Goodwin**  
Charlotte-Mecklenburg Police Department, NC  
EOW: Wednesday, December 22, 2021  
Cause: Automobile crash



**Detention Officer Gary Lynn Bean**  
Conway County Sheriff's Office, AR  
EOW: Thursday, December 30, 2021  
Cause: COVID19



**Police Officer Diane Gonzalez**  
New Haven Police Department, CT  
EOW: Monday, January 10, 2022  
Cause: Automobile crash



**Police Officer Keona Holley**  
Baltimore City Police Department, MD  
EOW: Thursday, December 23, 2021  
Cause: Gunfire



**Sergeant Marlene Roberta Rittmanic**  
Bradley Police Department, IL  
EOW: Thursday, December 30, 2021  
Cause: Gunfire



**Corrections Officer V Mark A. Loecken**  
Texas Department of Criminal Justice - Correctional Institutions Division, TX  
EOW: Monday, January 10, 2022  
Cause: COVID19



**Deputy Sheriff Steven H. Armbruster**  
Lehigh County Sheriff's Office, PA  
EOW: Thursday, December 23, 2021  
Cause: COVID19



**Police Officer Shane Bartek**  
Cleveland Division of Police, OH  
EOW: Friday, December 31, 2021  
Cause: Gunfire



**Chief of Police Michael E. German**  
Prairie City Police Department, IA  
EOW: Thursday, January 13, 2022  
Cause: COVID19



**Agent José Ferrer-Pabón**  
Puerto Rico Police Department, PR  
EOW: Friday, December 24, 2021  
Cause: Automobile crash



**Police Officer Christopher Gibson**  
Dallas Police Department, TX  
EOW: Sunday, January 2, 2022  
Cause: COVID19



**Investigator Steven Ray Finley**  
Madison County Sheriff's Office, AL  
EOW: Friday, January 14, 2022  
Cause: COVID19



**Patrolman Sean E. VanDenberg**  
Lawrence Township Police Department, OH  
EOW: Saturday, December 25, 2021  
Cause: COVID19



**Deportation Officer William Hayes**  
United States Department of Homeland Security - Immigration and Customs Enforcement - Office of Enforcement and Removal Operations, US  
EOW: Monday, January 3, 2022  
Cause: COVID19



**Corrections Officer Melissa M. France**  
Oswego County Sheriff's Office, NY  
EOW: Monday, January 17, 2022  
Cause: COVID19



**Sergeant Stacy Annette Murrow**  
Linn County Sheriff's Office, KS  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Trooper John Sumter Horton**  
North Carolina Highway Patrol, NC  
EOW: Monday, January 3, 2022  
Cause: Struck by vehicle



**Corporal Ernest M. Robinson**  
Wayne County Sheriff's Office, MI  
EOW: Tuesday, January 18, 2022  
Cause: COVID19



**Deputy Sheriff Jayme Williams**  
Itasca County Sheriff's Office, MN  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Deputy Sheriff Bryan Vannatta**  
Curry County Sheriff's Office, NM  
EOW: Monday, January 3, 2022  
Cause: COVID19



**Chief of Police Don Riffe**  
Jefferson College Police Department, MO  
EOW: Thursday, January 20, 2022  
Cause: COVID19



**Sergeant Jeffrey Turner**  
Pontotoc Police Department, MS  
EOW: Monday, December 27, 2021  
Cause: COVID19



**Police Officer Bart Lane Arnold**  
Enid Police Department, OK  
EOW: Monday, January 3, 2022  
Cause: COVID19



**Police Officer Corille Cortez Jones**  
Memphis Police Department, TN  
EOW: Thursday, January 20, 2022  
Cause: Automobile crash





**Police Officer Tyler Lenehan**  
Elk Grove Police Department, CA  
EOW: Friday, January 21, 2022  
Cause: Vehicular assault



**Corporal Charles Galloway**  
Harris County Constable's Office - Precinct 5, TX  
EOW: Sunday, January 23, 2022  
Cause: Gunfire



**Deputy Sheriff Noah Rainey**  
Carroll County Sheriff's Office, IN  
EOW: Saturday, January 29, 2022  
Cause: Automobile crash



**School Resource Officer Johnny Patterson**  
Lee County School District Police Department, MS  
EOW: Friday, January 21, 2022  
Cause: Struck by vehicle



**Sergeant Ramon Gutierrez**  
Harris County Sheriff's Office, TX  
EOW: Monday, January 24, 2022  
Cause: Vehicular assault



**Deputy Sheriff Lorin Marie Readmond**  
Loving County Sheriff's Office, TX  
EOW: Saturday, January 29, 2022  
Cause: Automobile crash



**Detective Jason Rivera**  
New York City Police Department, NY  
EOW: Friday, January 21, 2022  
Cause: Gunfire



**Detective Wilbert Mora**  
New York City Police Department, NY  
EOW: Tuesday, January 25, 2022  
Cause: Gunfire



**Police Officer Donald Sahota**  
Vancouver Police Department, WA  
EOW: Saturday, January 29, 2022  
Cause: Gunfire (Inadvertent)



**Special Agent Anthony Salas**  
Texas Department of Public Safety - Criminal  
Investigations Division, TX  
EOW: Saturday, January 22, 2022  
Cause: Accidental



**Police Officer Christopher Wayne Berry**  
Vidor Police Department, TX  
EOW: Tuesday, January 25, 2022  
Cause: COVID19



**Sergeant William Shibley**  
Sebastian County Sheriff's Office, AR  
EOW: Monday, January 31, 2022  
Cause: COVID19



**School Resource Officer Travis Hurley**  
London Police Department, KY  
EOW: Thursday, January 27, 2022  
Cause: COVID19



# K9 MEMORIAL



**K9 Figo**  
Cullman County Sheriff's Office, AL  
EOW: Tuesday, January 5, 2021  
Cause: Automobile crash



**K9 Kitt**  
Braintree Police Department, MA  
EOW: Friday, June 4, 2021  
Cause: Gunfire



**K9 Axel**  
Kent County Sheriff's Office, MI  
EOW: Saturday, August 28, 2021  
Cause: Duty related illness



**K9 Riley**  
Sacramento County Sheriff's Department, CA  
EOW: Monday, January 18, 2021  
Cause: Gunfire



**K9 Zena**  
Cocoa Police Department, FL  
EOW: Wednesday, June 23, 2021  
Cause: Heatstroke



**K9 Duke**  
Virginia State Police, VA  
EOW: Monday, August 30, 2021  
Cause: Heatstroke



**K9 Luna**  
Duluth Police Department, MN  
EOW: Thursday, February 25, 2021  
Cause: Gunfire



**K9 Max**  
St. Joseph Police Department, MO  
EOW: Wednesday, June 30, 2021  
Cause: Gunfire



**K9 Kyra**  
Ford County Sheriff's Office, KS  
EOW: Monday, September 6, 2021  
Cause: Duty related illness



**K9 Joker**  
Indian River County Sheriff's Office, FL  
EOW: Wednesday, April 21, 2021  
Cause: Training accident



**K9 Jas**  
Savannah Police Department, GA  
EOW: Sunday, July 25, 2021  
Cause: Automobile crash



**K9 Tito**  
Eufaula Police Department, OK  
EOW: Wednesday, September 15, 2021  
Cause: Heatstroke



**K9 Kozmo**  
Mesquite Police Department, TX  
EOW: Monday, April 26, 2021  
Cause: Assault



**K9 Rex**  
Michigan State Police, MI  
EOW: Sunday, July 25, 2021  
Cause: Vehicular assault



**K9 Rogue**  
Cedar Park Police Department, TX  
EOW: Monday, November 8, 2021  
Cause: Heart attack



**K9 Jango**  
Bakersfield Police Department, CA  
EOW: Tuesday, April 27, 2021  
Cause: Gunfire



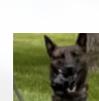
**K9 Byrd**  
Texas Department of Public Safety - Texas  
Highway Patrol, TX  
EOW: Tuesday, August 3, 2021  
Cause: Heatstroke



**K9 Beni**  
Heflin Police Department, AL  
EOW: Wednesday, January 5, 2022  
Cause: Struck by vehicle



**K9 Khan**  
Monroe County Sheriff's Office, GA  
EOW: Friday, May 14, 2021  
Cause: Heatstroke



**K9 Riggs**  
Oakland County Sheriff's Office, MI  
EOW: Friday, August 13, 2021  
Cause: Heart attack



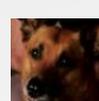
**K9 Jedi**  
Seattle Police Department, WA  
EOW: Wednesday, January 5, 2022  
Cause: Stabbed



**K9 Jaeger**  
Stephens County Sheriff's Office, OK  
EOW: Friday, May 14, 2021  
Cause: Fall



**K9 Ivar**  
Livingston Parish Sheriff's Office, LA  
EOW: Friday, August 20, 2021  
Cause: Heatstroke



**K9 Nitro**  
York County Sheriff's Department, NE  
EOW: Tuesday, February 8, 2022  
Cause: Vehicular assault



# Most Wanted Fugitives



**Rafael  
Caro-Quintero**

Wanted for the following alleged federal violations: Kidnapping and murder of a federal agent violent crimes in aid of racketeering, aiding and abetting, accessory after the fact. Also wanted for: possession with intent to distribute marijuana and cocaine, murder, operating a continuing criminal enterprise.



**Kenny Jing Ang  
Chen**

Wanted for the following alleged federal violations: Conspiracy to Distribute Heroin, 21 USC 846; Aid & Abet Distribution of Heroin, 841 (a)(1) and 18 USC 2; Aid & Abet Carrying of Firearm During Drug Trafficking, 18 USC 924(c)(1); Use of Minors in Drug Trafficking, 21 USC 861(a)(1).



**Jesus Alfredo  
Guzman-Salazar**

Wanted for the following alleged federal violations: Conspiracy to Possess with Intent to Distribute Controlled Substance; Attempt/ Conspiracy-Controlled Substance-Import/ Export with Intent to Distribute



**Yulan Andony  
Archaga Carias**

Wanted for the following alleged federal violations: Cocaine importation; racketeering conspiracy; possession and conspiracy to possess machine guns



**Ismael Zambada  
Garcia**

Wanted for the following alleged federal violations: The following alleged Federal Drug Violations: 1) 18 USC Sec 1962 (d) RICO Conspiracy; 2) 21 USC 846 and 841 (a)(1) Conspiracy to Possess Controlled Substance, over 5 kilograms of cocaine and over 1000 kilograms of marijuana; 3) 21 USC 963952(a) and 960(a)(b) (1)(B) and (G); Conspiracy to import a controlled substance, over 5 kilograms of cocaine and over 1,000 kilograms of marijuana; 4) 18 USC 1956 Conspiracy to launder money instruments; 5) 18 USC 2 & 924(o) Conspiracy to possess firearms in furtherance of drug trafficking crimes and aid and abet; 6 thru 10) 18 USC 2 & 1959(a)(1)&(5); Violent Crimes in aid of racketeering activity and aiding and abetting; 11) 21 USC 848 (e)(1)(A) Murder while engaging in or working in furtherance of a continuing criminal enterprise or drug trafficking; 12) 21 USC 848(b) (1) and (2)(A) Engaging in a continuing criminal enterprise in furtherance of drug trafficking; 13) 18 USC 956 Conspiracy to kill in a foreign country; and (14) 18 USC 2 & 1201 Kidnaping and aiding and abetting.



**Julio Alex Diaz**

Wanted for the following alleged federal violations: 21 USC 846 Conspiracy to Possess with Intent to Distribute heroin, fentanyl, and cocaine.



**Nemesio Osegue-  
ra-Cervantes**

Wanted for the following alleged federal violations: 21 USC 846 21 USC 963 21 USC 959 21 USC 841 21 USC 924



**Rommel Pascua  
Cipriano**

Wanted for the following alleged federal violations: Distribution



**Dario Antonio  
Usuga David**

Wanted for the following alleged federal violations: Title 21 USC 848, Cocaine

**WARRIORS**



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