



2022 Midwest HIDTA Threat Assessment

Midwest HIDTA Investigative Support Center

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I. Scope

The 2022 Midwest High Intensity Drug Trafficking Area (HIDTA) Threat Assessment identifies current and emerging illicit drug trends within the region's seven-state area. It strives to deliver accurate and timely strategic intelligence to assist law enforcement executives and other officials in the development of drug enforcement strategies to ensure the safety of our communities. This document provides an illicit drug threat overview with respect to the abuse, transportation, and organizations involved in drug trafficking. This document fulfills the statutory and grant requirements issued by the Office of National Drug Control Policy (ONDCP), and has been approved by the Midwest HIDTA Executive Board.

II. Executive Summary

Overview

Considering its nexus to violence and other criminal activity, methamphetamine remains the greatest drug threat to the Midwest HIDTA region. This is evident in both of the Midwest HIDTA's Law Enforcement (LES) and Public Health Surveys (PHS), along with Performance Management Process (PMP) data reported by Midwest HIDTA law enforcement initiatives. Heroin/synthetic opioids and marijuana are the region's second and third-greatest drug threats, respectively. A higher percentage of drug trafficking organizations (DTOs) were found to be gang-related, violent, and poly-drug trafficking in 2021 compared to the previous year. The Midwest HIDTA's central location within the continental United States (U.S.) and extensive network of roadways make the region ideal for DTOs and criminal enterprises intent on moving drugs into or through to other destinations.

Key findings derived from the data sources listed in Appendix I are presented and discussed in detail throughout this document. A description of the drug and DTO threats facing the Midwest HIDTA region include, but are not limited to, the following:

- ❖ Marijuana, methamphetamine, and heroin/synthetic opioids are the most widely available and widely used drugs in the Midwest region.
- ❖ Law enforcement and public health agencies report unprecedented levels of fentanyl and other synthetic opioids in the region's illicit drug supply.
- ❖ Privately owned vehicles, the United States Postal Service (USPS), and commercial parcel services (e.g. FedEx, UPS) are the most common methods used by DTOs to traffic drugs into and throughout the Midwest region. The number of seizures in which mailing services were used to traffic drugs into the Midwest HIDTA nearly tripled from 2019 to 2021.¹
- ❖ Midwest HIDTA law enforcement initiatives documented 815 DTOs operating within the region in 2021, with 8,032 members and 1,259 leaders identified.² This is a six percent increase from the 770 DTOs identified in 2020.
- ❖ Mexican DTOs continue to dominate virtually every aspect of the drug trade across the Midwest HIDTA region.
- ❖ DTOs in the Midwest HIDTA utilize novel technologies to facilitate communication, obtain payment, and monitor drug courier location. These platforms include encrypted messaging applications, social media, portable GPS devices, and the dark web.
- ❖ The Midwest HIDTA experienced a 13 percent increase in drug-related overdose fatalities from 2020 to 2021.³ Two-thirds of these overdose deaths involved heroin or synthetic opioids, while 42 percent involved psychostimulants such as methamphetamine.^a

^a A drug overdose death may involve more than one drug type.

III. The Midwest HIDTA Region

The Midwest HIDTA region is a vast and varied area with equally varied drug threats. The region spans more than 428,000 square miles, making it the largest geographic area of the 33 HIDTAs. The Midwest HIDTA region consists of 73 designated counties that fall within the following seven states: Iowa (IA), Kansas (KS), Missouri (MO), Nebraska (NE), North Dakota (ND), South Dakota (SD), and Illinois (IL). The Midwest HIDTA has a total of 58 initiatives (see Appendix III for complete list, by state), including 41 drug enforcement task forces, six domestic highway interdiction initiatives, five intelligence initiatives, and six support initiatives. The 58 initiatives include 183 participating agencies from federal, state and local law enforcement. A map of the Midwest HIDTA region is shown in Figure 1 depicting HIDTA designated counties, interstate highway systems and ports of entry with Canada. Additional state maps may be found in Appendix V: State Maps.

The U.S. Census Bureau estimates the population of the Midwest HIDTA to be 15.92 million in 2021. The region is comprised of metropolitan districts, medium and small cities, and many rural areas. The most populous urban centers are St. Louis, MO, and Kansas City, KS-MO, which rank 20th and 31st, respectively, amongst the largest metropolitan statistical areas in the United States. Omaha-Council Bluffs, NE-IA, Des Moines, IA, and Wichita, KS, are other cities ranking in the top 100 most populated metropolitan statistical areas, according to 2019 U.S. Census Bureau information. However, less than half of the overall population of the Midwest HIDTA resides in these large urban areas. Table 1 presents information on the most populous metropolitan areas in the Midwest HIDTA region.

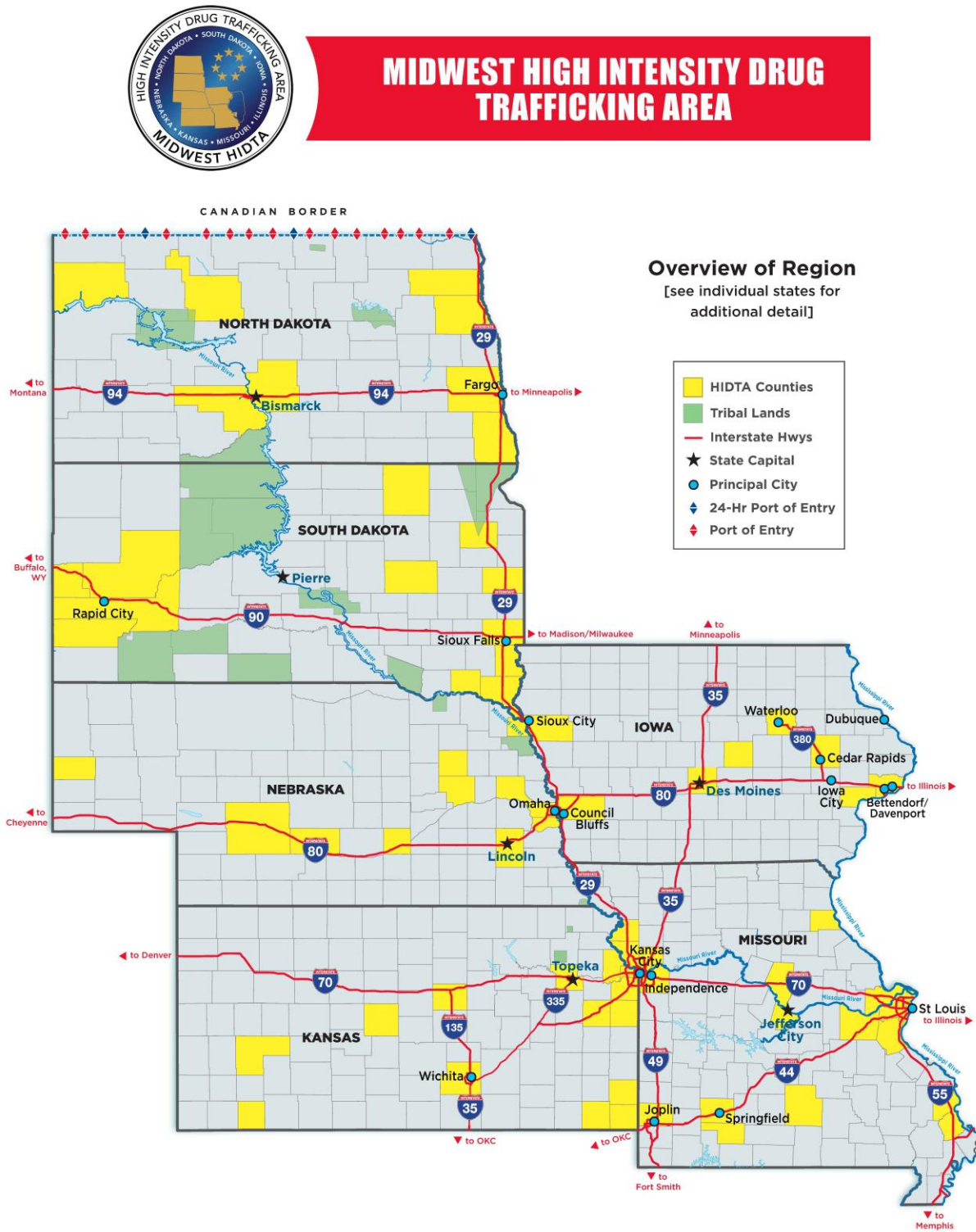
Table 1. 2019 U.S. Population Ranking of the Most Populated Metropolitan Statistical Areas in the Midwest HIDTA Region.^{4 b}

2019 Ranking of the Most Populated Metropolitan Areas		
U.S. Population Ranking	City, State	2019 Estimated Population
20	St. Louis, MO-IL	2,803,228
31	Kansas City, KS-MO	2,157,990
57	Omaha-Council Bluffs , NE-IA	949,442
83	Des Moines, IA	699,292
94	Wichita, KS	640,218

Considered the heartland of the country, the population of the Midwest HIDTA is diverse, with all races, classes, genders, religions, and socioeconomic statuses represented. Criminal organizations can easily assimilate within any of the communities and conceal their operations to avoid detection.

^b 2021 metropolitan statistical area data from the U.S. Census Bureau is not yet available.

Figure 1. Overall Map of the Midwest HIDTA Region Depicting HIDTA Designated Counties, Interstate Highway System and Ports of Entry with Canada.^{c,d}



^c Individual state maps may be found in Appendix V

^d Although not depicted on the map, the Illinois counties of Madison, St. Claire, and Rock Island are also within the MW HIDTA region.

Drug Transportation Methods

The Midwest HIDTA assesses that private passenger vehicles, the USPS, and commercial mailing services are the primary drug transportation methods used by DTOs to transport illicit drugs into and throughout the Midwest HIDTA region. The Midwest HIDTA region contains more than 4,300 miles of interstate highways and an international border stretching over 300 miles. The key transportation routes are Interstate (I)-70, I-80, I-90, I-94, I-29, and I-35. With its central location, there are a number of transportation hubs in the Midwest HIDTA allowing easy access to other points in the United States. For instance, Kansas City, KS-MO, located near the geographic center of the United States and at the intersection of several of the nation's busiest interstate highways (I-29, I-49, I-35, I-70), is a major transit point for the transportation of drugs and drug proceeds to and from significant market areas across the country. Furthermore, the convergence of I-44, I-55, I-64, and I-70 in St. Louis, MO, provides easy access for the transportation of drugs and bulk cash via commercial and privately-owned vehicles. Other smaller transportation hubs include Fargo, ND, where I-29 and I-94 intersect, and Des Moines, IA, where I-80 and I-35 intersect. Given the 310-mile border, including the 18 ports of entry North Dakota shares with Canada, there is an expansive roadway infrastructure and a large international border for drug traffickers to exploit.

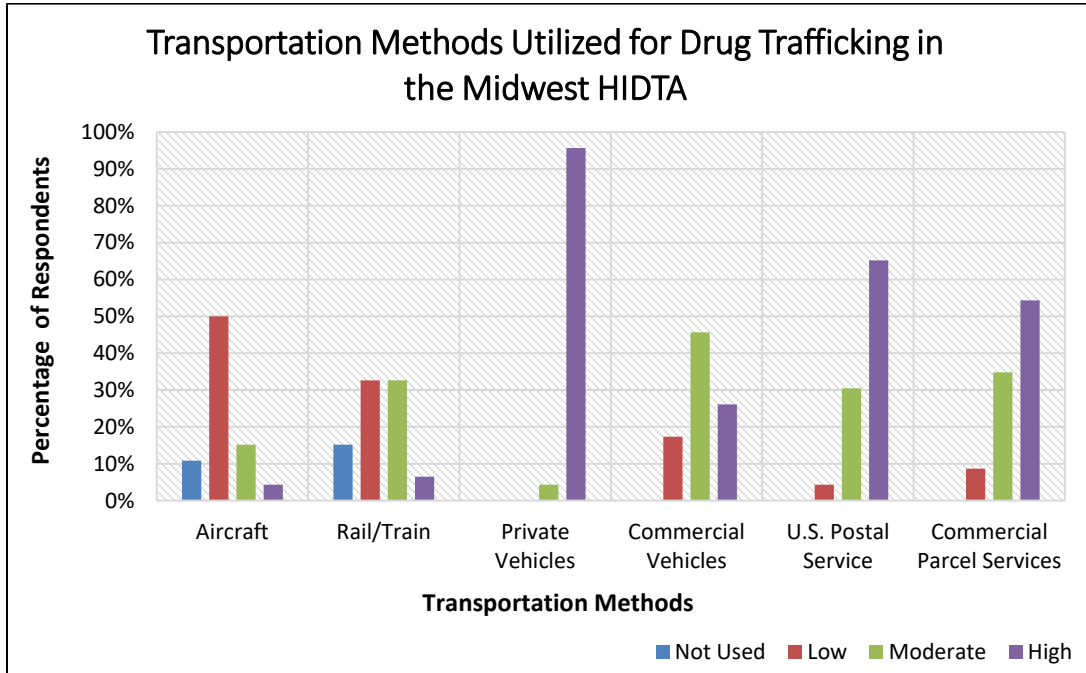
I-35 is particularly useful as a transportation route for Mexican DTOs.⁵ Converging with I-70 and I-29 in Kansas City, I-35 covers approximately 1,568 miles in the U.S., from Laredo, Texas, to Duluth, Minnesota, and runs directly through the Midwest HIDTA in Kansas, Missouri, and Iowa. Following I-35 into Mexico, it becomes Federal Highway 85, which runs southward from Nuevo Laredo, just across the Mexican border from the U.S., through Monterrey, Ciudad Victoria, Pachuca, and to the southern edge of Mexico City.⁶

When asked to indicate the levels at which various transportation methods are utilized in the Midwest HIDTA to traffic drugs, 96 percent of Midwest HIDTA initiatives indicated that privately owned vehicles are used at a high level, the highest percentage for any transportation method. Law enforcement initiatives claimed that traffickers often attempt to conceal contraband within natural or man-made compartments throughout the vehicle. Traffickers also reportedly concealed contraband within the tires, gas tanks, cardboard boxes, storage totes, and various pieces of luggage within the vehicle.

The second and third-most utilized transportation methods were the USPS (65 percent) and commercial parcel services (54 percent). Commercial vehicles, such as tractor-trailers, were also frequently used to transport drugs in the Midwest HIDTA, with 26 percent of Midwest HIDTA initiatives reporting use as high and 46 percent reporting use as moderate. Drugs transported via tractor-trailer are often hidden within legitimate cargo items to avoid law enforcement detection. The use of aircraft and rail/trains were also utilized, although less than the aforementioned methods. Based on responses from the LES, we assess that DTOs also use trains that originate in

Mexico to transport drugs closer to their destination. Figure 2 depicts the most commonly used drug transportation methods in the Midwest region, according to Midwest HIDTA initiatives.

Figure 2. LES: Transportation Methods Utilized for Drug Trafficking in the Midwest HIDTA Region.⁷



The roadways that traverse the Midwest HIDTA are vital to drug trafficking organizations. The 4,300 miles of interstate connecting the Midwest region to the remainder of the U.S. are an enormous challenge to law enforcement interdiction efforts. Approximately 98 percent of Midwest HIDTA initiatives reported a high level of interstate highway use by DTOs. U.S. highways (87 percent) and state highways/rural roads (46 percent) were also reported by Midwest HIDTA initiatives to be highly used by DTOs to traffic drugs.

IV. Drug Threats

1. Overview

The Midwest HIDTA assesses that methamphetamine, heroin/synthetic opioids, and marijuana are the primary drug threats to the region. Drug trafficking activities in the Midwest HIDTA region pose significant threats to public health and safety. These activities are a driving force of both violent and property crimes. The Midwest HIDTA evaluated the threat posed by each drug type in order to determine a ranking of drug threats. The evaluation consisted of Midwest HIDTA initiative responses to the LES and public health partner responses to the PHS, as well as drug trend and other related information collected over the past 12 months. Midwest HIDTA initiatives were asked to consider the nexus of the drug type to violent and property crimes when determining their rankings. Secondary factors included drug availability, abuse, overdose rate, and related fatalities. PHS respondents were asked to consider the greatest drug threat to their areas based upon the level of drug use and the number of inpatient/outpatient admissions over the past 12 months. Upon the evaluation of these criteria, the Midwest HIDTA rankings of drug threats by drug type are represented in Table 2.

Table 2. Midwest HIDTA Threat Assessment Surveys: Drug Threat Ranking.⁷

	<u>Drug Type</u>	<u>Availability</u>	<u>Use</u>	<u>Characteristics</u>
#1	Methamphetamine	High level of availability	High level of use	Primary contributor to both violent and property crime
#2	Heroin/Synthetic Opioids	High level of availability	High level of use	Major contributor to property crime
#3	Marijuana	High level of availability	High level of use	Major contributor to violent crime
#4	Controlled Prescription Drugs	High-Moderate level of availability	Moderate level of use	Opioids constitute majority of abuse
#5	Cocaine	Moderate level of availability	Moderate level of use	Consistent drug of abuse
#6	(TIE) New Psychoactive Substances	Low level of availability	Low level of use	Materials soaked in NPSs often mailed into prisons/jails
#6	(TIE) Other Dangerous Drugs	Low level of availability	Low level of use	PCP, MDMA, and steroids constitute majority of abuse

2. Methamphetamine

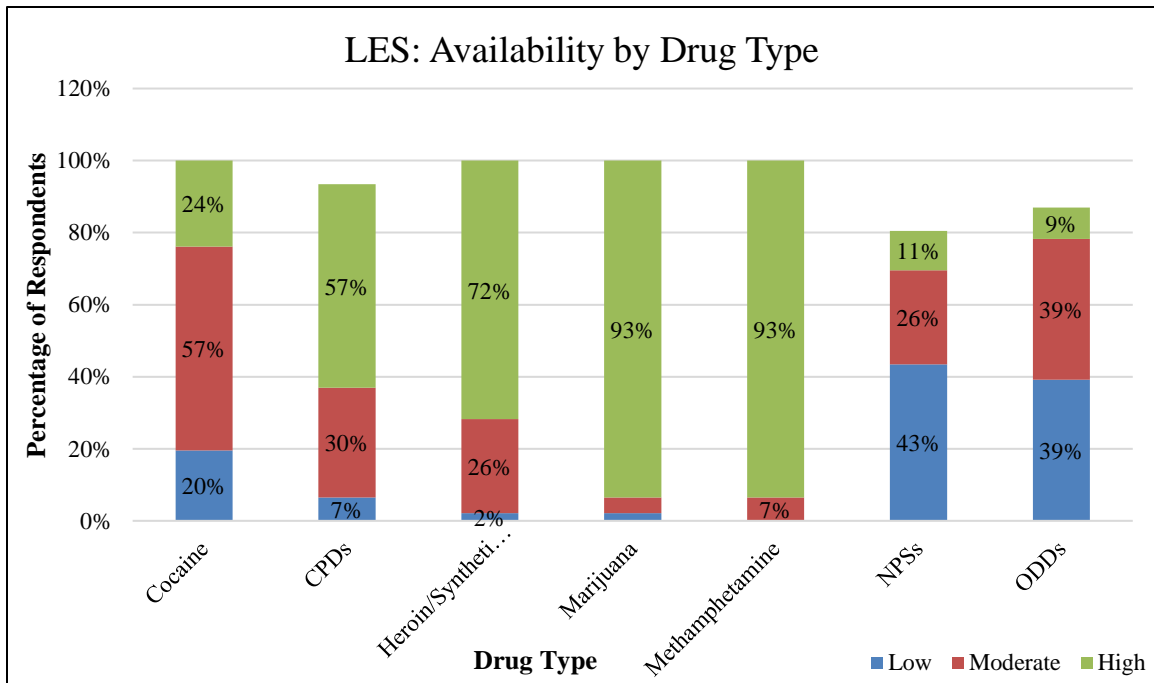
A. Overview

Consistent with previous threat assessments, methamphetamine is the greatest drug threat to the Midwest region, particularly when considering its nexus to violent and property crime. Approximately 72 percent of Midwest HIDTA initiatives indicated that methamphetamine was the greatest drug threat in their areas of responsibility (AORs), more than any other drug type. Only one initiative (two percent) ranked methamphetamine below the top three threats in their AORs. From a public health perspective, methamphetamine is also considered the greatest drug threat, according to 50 percent of PHS respondents. Forty-two percent of the region’s drug overdose deaths in 2020 involved psychostimulants, which include drugs such as methamphetamine, Adderall, and Ritalin.

B. Availability

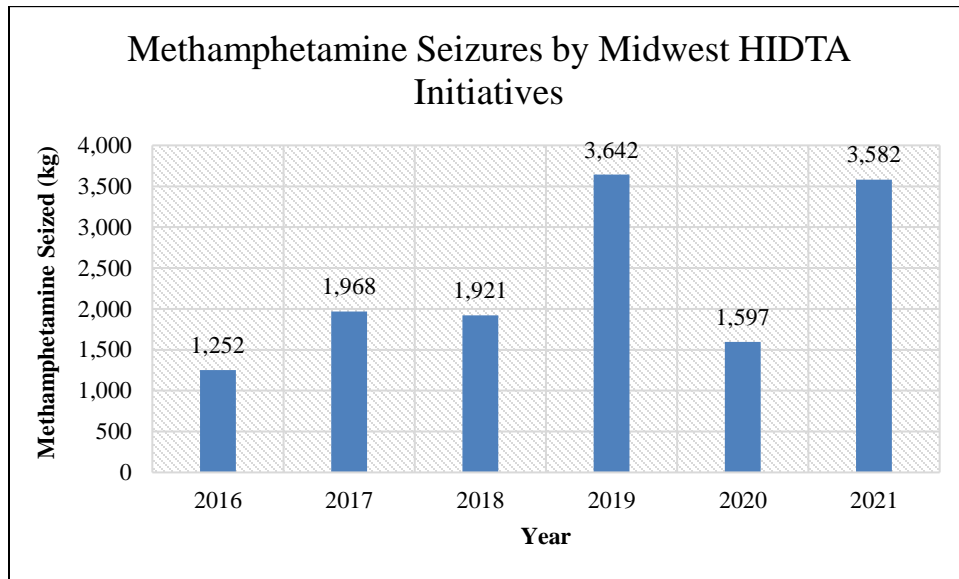
The Midwest HIDTA assesses the supply of methamphetamine in the Midwest region as high, with its popularity unlikely to fade. With the exception of marijuana, LES respondents ranked methamphetamine as more available than any other drug type. In fact, 93 percent of survey respondents indicated that methamphetamine is highly available in their respective AORs. By comparison, approximately 72 percent of respondents designated heroin/synthetic opioids as highly available. Figure 3 shows the total number of LES responses indicating “low,” “moderate,” and “high” availability for each drug type.

Figure 3. LES: Availability by Drug Type.⁷



Midwest HIDTA initiatives seized 3,592 kilograms (7,919 pounds) of methamphetamine in 2021, an increase of 125 percent from 2020. With the exception of marijuana, more methamphetamine was seized than any other drug type. This past year increase in all drug types indicates that Midwest HIDTA initiatives have moved closer to pre-pandemic enforcement levels. The COVID-19 pandemic and civil unrest in 2020 resulted in fewer drug interdiction operations by law enforcement.^{7,8} Figure 4 depicts methamphetamine seizure totals by Midwest HIDTA initiatives from 2016 to 2021, as reported through the ONDCP Performance Measurement Process (PMP) data.

Figure 4. Methamphetamine Seizures by Midwest HIDTA Initiatives, 2016-2021.⁹



C. Use

Eighty-seven percent of Midwest HIDTA law enforcement initiatives assessed the level of methamphetamine use in their areas as high. Methamphetamine use and trafficking has long been associated with crime and violence in the Midwest HIDTA region. This is supported by 63 percent of Midwest HIDTA initiatives that identified methamphetamine as the drug responsible for the greatest level of violence.

Seventy-six percent of PHS respondents stated that methamphetamine use is high in their areas. Of the PHS respondents that operated an inpatient/outpatient admissions program, 46 percent noted an increase in inpatient admissions for methamphetamine in their areas, while 36 stated that admissions remained the same as the previous year. Approximately 88 percent PHS respondents claimed that adults (aged 26 and older) most commonly use methamphetamine and 62 percent claimed that young adults (aged 18-25) abused methamphetamine. Methamphetamine is often combined with a variety of other drugs in order to achieve a wide range of effects. The most popular drugs taken in combination with methamphetamine are marijuana and fentanyl.

The 2019-2020 National Survey on Drug Use and Health's^e state estimate data show an increase in past year estimated methamphetamine use by those 18 and older in half of the states within Midwest HIDTA region. Past year estimated methamphetamine usage increased by 41 percent in Missouri, 50 percent in Nebraska and 107 percent in South Dakota. Past year estimated methamphetamine usage decreased by 26 percent in Iowa, 12 percent in Kansas, and eight percent in North Dakota. By comparison, past year methamphetamine use increased by 17 percent nationwide for the same age group.^{10,11}

The Treatment Episode Data Set (TEDS) is a Substance Abuse and Mental Health Services Administration (SAMHSA) program that includes drug treatment admission data.¹² This data is routinely collected by states in an effort to monitor drug abuse among their populations. Based on the TEDS data in Table 3, the number of admissions to drug treatment facilities for a substance use disorder involving amphetamines in Iowa, Kansas, Missouri, Nebraska, and South Dakota increased between 2015 and 2019.^{f,g}

Table 3. Treatment Episode Data Sets – Amphetamines

Treatment Episode Data Sets (TEDS)						
Amphetamines						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	6,359	1,670	7,223	2,296	592	1,368
2016	6,943	4,484	8,308	3,133	1,698	1,832
2017	7,721	4,750	8,699	3,594	1,789	2,437
2018	8,404	4,234	9,757	3,612	1,339	2,994
2019	8,564	4,414	9,423	3,757	452	3,358

*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

The Midwest HIDTA is not the only region with high levels of methamphetamine use. A recent report from the Bureau of Justice Assistance details a resurgence in methamphetamine abuse in communities across the U.S.¹³ The findings of the report confirmed a “recent, significant rise in mortality, morbidity, and violence directly attributed to methamphetamine abuse” and also voiced concerns that “the detrimental impact may be even greater than that of the original methamphetamine epidemic in the early 2000s” (Bureau of Justice Assistance, 2019, p. 1). Furthermore, a national study of healthcare-submitted drug tests found a 487 percent increase in methamphetamine use between 2013 (1.43 percent of all tests submitted that year) and 2019 (8.39 percent).¹⁴ More recently, a study published in the Journal of the American Medical Association

^e The 2019-2020 NSDUH is anomalous to other years due to the COVID-19 pandemic. Please see the full press release from SAMHSA at: <https://www.samhsa.gov/data/release/2020-national-survey-drug-use-and-health-nsduh-releases>.

^f Amphetamines are the general categorization of amphetamine-type stimulants that SAMHSA records in their TEDS data. Methamphetamine is included within this dataset and is not reported separately.

^g 2019 is the most recent year for which TEDS data is available.

found there has been a 23 percent increase in urinalysis samples testing positive for methamphetamine nationwide since the beginning of the COVID-19 pandemic in March 2020.¹⁵

D. Price

The price of methamphetamine across the Midwest region increased significantly during the first half of 2020, but has largely returned to “pre-pandemic” prices. In an effort to stop the spread of COVID-19, the U.S. restricted non-essential border travel with Mexico on March 18, 2020. This resulted in a decrease in the supply of methamphetamine to U.S. markets, increasing its price.¹⁶ The price of methamphetamine for every quantity significantly decreased between 2020 and 2021. The drug pricing data in Table 4 was collected from Midwest HIDTA initiatives through debriefs of confidential informants (CIs), proffer interviews of defendants, and undercover CI purchases.

Table 4. 2021 Drug Pricing Data– Crystal Methamphetamine¹⁷

Crystal Methamphetamine		
Unit of Measurement	Range	Average
Kilogram	\$3,363-\$11,000	\$6,558
Pound	\$1,400-\$10,000	\$4,341
1/2 Pound	\$1,585-\$5,000	\$3,073
1/4 Pound	\$1,000-\$3,600	\$1,721
Ounce	\$100-\$1,200	\$545
1/2 Ounce	\$180-\$550	\$345
1/8 Ounce (8-Ball)	\$43-\$350	\$130
Gram	\$10-\$140	\$56

E. Production

The Midwest HIDTA assesses that the majority of methamphetamine in the region was produced in Mexico. Although 33 percent of Midwest HIDTA law enforcement initiatives stated that methamphetamine production occurred within their AORs, almost all of this production involved the one-pot method—which typically yields one-ounce quantities for user amounts—or the red phosphorus/iodine method. Large-scale foreign labs have replaced the majority of the Midwest HIDTA region’s local clandestine methamphetamine labs since the late 2000s. The regional supply of methamphetamine is mostly smuggled in from Mexico. Mexico-based “super labs” are capable of producing massive quantities of highly potent methamphetamine. With the shift to Mexican sources of supply, the purity levels for methamphetamine have increased and are typically over 90 percent, with some areas reporting an average purity level of 97 percent.¹⁸ Domestic producers of methamphetamine in the Midwest HIDTA region have been unable to compete with Mexican producers, in part due to laws restricting sales of precursor chemicals utilized during production.

F. Transportation

Methamphetamine is most commonly transported into the region in either crystal form (i.e. “ice”) or suspended in solution by private passenger vehicles, commercial vehicles, and mailing services. While crystal methamphetamine is the most common form encountered by Midwest HIDTA initiatives, reporting suggests drug traffickers consider methamphetamine in solution as a low-risk concealment method. Methamphetamine in solution can be concealed within other liquids—such as gasoline or other automotive fluids—rendering it more difficult to detect. Methamphetamine in solution is transported into the region in large quantities by commercial vehicle or in smaller quantities while being concealed in windshield washer fluid reservoirs or other containers in privately owned vehicles. Once transported into the region, methamphetamine in solution is converted into crystal methamphetamine by conversion laboratories using a variety of highly flammable materials. An increasing number of makeshift conversion laboratories—capable of converting several hundred pounds of methamphetamine—have been uncovered in parts of the Midwest HIDTA region and reported by Midwest HIDTA initiatives. In fact, 28 percent of Midwest HIDTA initiatives reported the presence of at least one methamphetamine conversion laboratory in their area. According to data from the El Paso Intelligence Center (EPIC), the quantity of methamphetamine in solution nationwide has sharply risen since 2015, while the number of seizures has decreased. This suggests that methamphetamine in solution is an effective concealment method as law enforcement struggles to detect it. According to EPIC, there were 15 incidents involving methamphetamine in solution within the Midwest HIDTA region in 2021, totaling approximately nine kilograms and 88 liters.^h

G. Intelligence Gaps

- What is the full extent of methamphetamine conversion laboratory utilization in the Midwest HIDTA region?
- Does law enforcement recognize methamphetamine conversion laboratories as clandestine laboratories for reporting purposes?
- What other drugs are mixed with methamphetamine in the Midwest HIDA region?

Novel Concealment Method

In 2021, a joint operation involving a Midwest HIDTA initiative in the Kansas City Metropolitan Area led to the discovery of a unique methamphetamine concealment method. The operation resulted in the seizure of a commercial semi-trailer where more than 700kg of methamphetamine-in-solution had been impregnated into spray foam insulation lining the ceiling of the trailer.



Source: <https://tinyurl.com/2nzf6bpa>

^h Depending on the agency reporting the meth-in-solution seizure, the unit of measurement for the seizure may be entered as kilograms or liters.

3. Heroin/Synthetic Opioids

A. Overview

Midwest HIDTA law enforcement initiatives report heroin and synthetic opioids as the second greatest drug threat to the region. Heroin/synthetic opioids pose a significant threat in the region due to their links to both violent and property crimes, their high availability, and the likelihood of overdose. Approximately 63 percent of law enforcement initiatives ranked heroin/synthetic opioids as either the first or the second greatest threat in their respective AORs. Approximately 30 percent of PHS respondents ranked heroin/synthetic opioids as their greatest drug threat. Heroin and synthetic opioids have the most impact in large, urban areas; however, these drugs have expanded into suburban and rural areas in the region.

Synthetic opioids, which include non-pharmaceutical fentanyl, fentanyl analogs, and other synthetic opioids such as isotonitazene, metonitazene, and buprenorphine, are usually produced in laboratories by transnational criminal organizations (TCOs) in China and Mexico before being transported into the Midwest HIDTA region. Some synthetic opioid abusers in the region purchase the drugs directly through the internet or dark web sources. Several Midwest HIDTA initiatives described a sharp increase in the prevalence of fentanyl within heroin samples, counterfeit pharmaceuticals, and other drugs like methamphetamine and cocaine. Drug users are often unaware that the drugs they purchase and abuse have been mixed with synthetic opioids, which increases the risk of overdose. However, law enforcement in parts of the region have also reported a specific demand for more potent forms of fentanyl and other synthetic opioids by heroin and other drug users.

B. Availability

The Midwest HIDTA assesses the availability of heroin/synthetic opioids in the region as high. This was corroborated by 72 percent of the Midwest HIDTA's law enforcement initiatives. Seizures of heroin by Midwest HIDTA initiatives in Missouri, Nebraska, and South Dakota increased in 2021. Seizures of heroin decreased in Iowa, Illinois, Kansas, and North Dakota in 2021. Fentanyl seizures increased 91 percent for Iowa initiatives, 65 percent for Kansas, 133 percent for Missouri initiatives, 245 percent for Nebraska initiatives, 81 percent for North Dakota initiatives, and 897 percent for South Dakota initiatives. These data points suggest DTOs have continued to shift their focus from heroin to fentanyl over the past 12 months.⁹ Other potential reasons for this shift are explored in the "Production" section on page 19. Figures 5 and 6 show a comparison of the amount of heroin and fentanyl seized by Midwest HIDTA initiatives between 2020 and 2021 for each state in the region, respectively.

The Growing Popularity of Fentanyl

Over the last several years, the demand for fentanyl and its analogues has upended and even replaced traditional heroin markets across the Midwest HIDTA region.

Figure 5. Heroin Seizures by Midwest HIDTA Initiatives, 2020-2021.^{9, i}

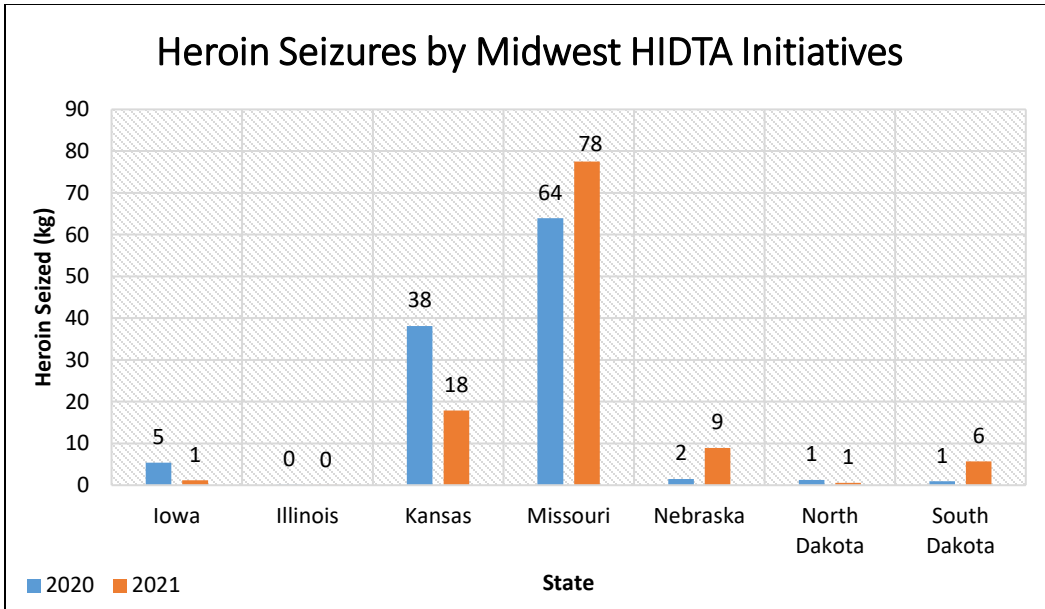
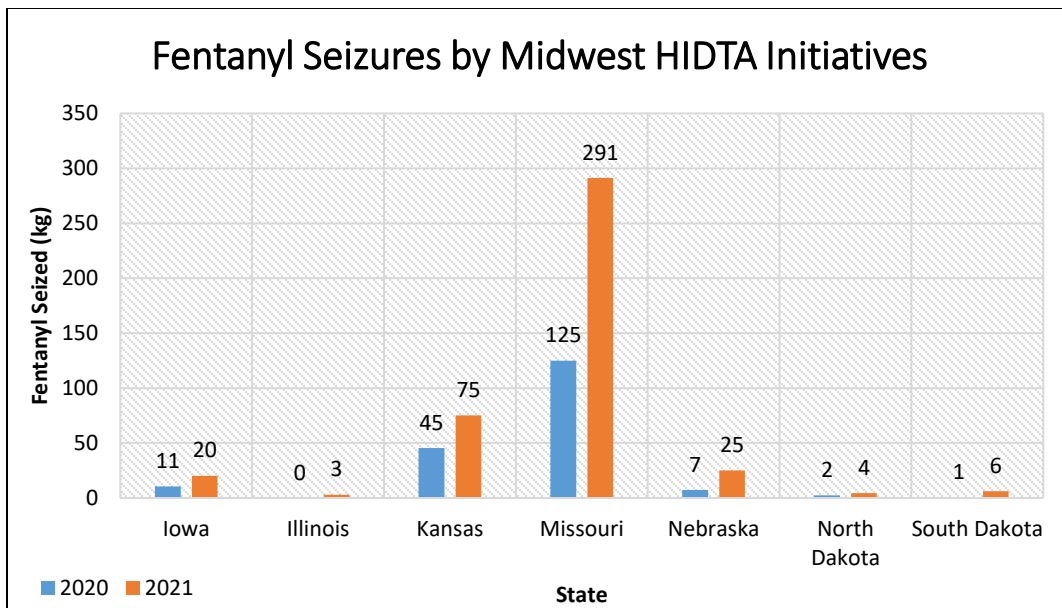


Figure 6. Fentanyl Seizures by Midwest HIDTA Initiatives, 2020-2021.^{9, i}



ⁱ For perspective, there are only three Midwest HIDTA-designated counties within Illinois.

C. Use

The Midwest HIDTA assesses the level of heroin/synthetic opioid use in the region as high, as indicated by 67 percent of law enforcement initiatives. Heroin/synthetic opioid abuse and trafficking is frequently associated with crime and violence in the Midwest HIDTA region, although less so than methamphetamine. Approximately nine percent of initiatives listed heroin/synthetic opioids as the drug responsible for the greatest level of violence and 22 percent claimed it was responsible for the greatest level of property crime.

Nearly 73 percent of PHS respondents listed heroin/synthetic opioid use as either high (42 percent) or moderate (31 percent) in their areas. Of those same respondents that listed heroin/synthetic opioid use as high or moderate, 65 percent noted an increase in inpatient admissions for heroin/synthetic opioids in their areas. The majority of PHS respondents claimed that young adults (76 percent) and adults (68 percent) most commonly used heroin/synthetic opioids.

Heroin/synthetic opioids are often combined with a variety of other drugs in order to achieve a wide range of effects. Methamphetamine was the drug most commonly taken in combination with heroin/synthetic opioids in 2021, according to the Midwest HIDTA's public health partners. Marijuana and cocaine were the second and third-most reported drugs, following methamphetamine. Counterfeit Controlled Prescription Drugs (CPDs) containing fentanyl were listed often by PHS respondents as being used by those that abuse drugs within the survey. Counterfeit CPDs have been identified as an increasing threat across both the Midwest HIDTA region and nationally. Counterfeit CPDs are popular among those that already abuse drugs and those experimenting such as teenagers. The most common counterfeit prescription containing fentanyl takes the form of round, blue oxycodone 30 mg pills. Many overdoses across both the Midwest HIDTA region and country as a whole have been linked to counterfeit CPDs.

The *2019-2020 NSDUH* shows a recent increase in past year estimated heroin use by those 18 and older in Kansas (12 percent), Missouri (35 percent), North Dakota (17 percent), South Dakota (44 percent) and seven percent for the U.S. as a whole. Past year estimated heroin usage decreased by 26 percent in Iowa and 24 percent in Nebraska.^{10,11}

Based on the TEDS data in Table 5, the number of admissions to drug treatment facilities for a substance use disorder involving heroin increased in every Midwest HIDTA state other than Missouri and North Dakota between 2015 and 2019.

Overdose Deaths in the Midwest HIDTA Region

Three out of every four overdose deaths in the Midwest HIDTA region in 2021 involved heroin or other synthetic opioids, such as fentanyl.

Table 5. Treatment Episode Data Sets – Heroin

Treatment Episode Data Sets (TEDS)						
Heroin						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	903	85	5,789	115	87	66
2016	943	242	5,674	121	281	94
2017	953	279	5,697	105	299	139
2018	1,083	287	7,381	123	183	218
2019	1,047	254	5,429	150	42	234

*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

According to the results of a national study of healthcare-submitted drug tests, the use of fentanyl, both by itself and combined with methamphetamine, has steeply risen.¹⁹ Among drug tests positive for illicit fentanyl, those that also tested positive for methamphetamine increased from 2.2 percent in 2013 to 30.37 percent in 2019, a 1,280 percent increase.¹⁹ Not only are more people using illicit fentanyl, they are also combining it with other illicit drugs such as methamphetamine and cocaine. These drug combinations significantly increase the chance of fatal overdose.²⁰

D. Price

The price of fentanyl and heroin in the Midwest HIDTA region varied significantly from region to region. The prices per unit of measurement for heroin and fentanyl are listed in Table 6 below. There was enough pricing information for counterfeit prescription pills containing fentanyl that a separate price was recorded for the Midwest HIDTA region, represented in Table 7.

Table 6. 2021 Drug Pricing Data– Heroin & Fentanyl¹⁷

Unit of Measurement	Heroin		Fentanyl	
	Range	Average	Range	Average
Kilogram	\$30,000-\$60,000	\$38,200	\$45,000-\$68,000	\$48,800
Ounce	\$700-\$2,000	\$1,275	\$1,000-\$2,200	\$1,623
Gram	\$49-\$350	\$138	\$80-\$400	\$130
1/2 Gram	\$50-\$150	\$105	\$50-\$200	\$114
1/10 Gram	\$20-\$60	\$32	N/A	N/A
Capsule/Pill	\$3-\$20	\$5	\$2-\$13/\$3-\$80	\$4/\$19

Table 7. 2021 Drug Pricing Data– Counterfeit CPDs¹⁷

Unit of Measurement	Alprazolam (Xanax)		Oxycodone (OxyContin)	
	Range	Average	Range	Average
Per Pill	\$3-\$5	\$4	\$2-\$100	\$27

E. Production

The Midwest HIDTA assesses that the overwhelming majority of the region’s heroin supply is cultivated outside of the region, primarily within Mexico and South America. Midwest HIDTA law enforcement initiatives have reported a decrease in heroin seizures and an increase in fentanyl seizures, suggesting that Mexican DTOs have shifted their focus from heroin cultivation to fentanyl production. Data from the U.S. Drug Enforcement Administration’s (DEA) 2020 National Drug Threat Assessment corroborate this claim, stating that Mexican opium poppy cultivation fell to 30,400 hectares in 2019, a 27 percent decrease from 2018.²¹ These estimates, coupled with a decrease in heroin seizures, may indicate that Mexican DTOs have recognized the advantages of fentanyl over heroin, explaining both the decrease in poppy cultivation and increased presence of fentanyl in traditional American heroin markets.

The Midwest HIDTA assesses that the majority of the region’s fentanyl supply originates from Mexico and China. No clandestine fentanyl manufacturing sites within the region were reported to EPIC in 2021. The majority of fentanyl found in the United States is synthesized using one of the three following methods: the Janssen method, Gupta method, and the Siegfried method. DEA’s Fentanyl Signature Profiling Program identified that 66 percent of nationwide fentanyl submissions seized in 2020 were synthesized using the Gupta method.²²

F. Transportation

Intelligence from Midwest HIDTA law enforcement initiatives suggests that the source and type of heroin varies by area within the Midwest HIDTA region. Heroin in the eastern half of Iowa and Missouri is typically in white powder form and tends to be sourced by gangs and other DTOs from the Chicago area. In the northernmost part of the region (North and South Dakota), brown powder, white powder heroin adulterated with fentanyl, and black tar heroin are all transported into the area from the Minneapolis, Detroit, and California areas, respectively. Heroin in the westernmost parts of the region is sourced from Denver and is typically in either black tar or crude brown powder form. Heroin is primarily transported into the area via private messenger vehicles. Fentanyl is primarily transported into the area via private passenger vehicles and mailing services. Fentanyl seizures recorded in the Midwest HIDTA’s Domestic Highway Enforcement (DHE) database for 2021 predominately resulted from traffic and parcel interdiction.

G. Intelligence Gaps

- How much heroin, with no other opioid, is still being sold and used within the Midwest HIDTA region?
- At what stage is fentanyl added into drug mixtures in the drug distribution process?
- Are international DTOs mixing fentanyl into the drug supply or is it occurring at a more localized level?
- Why is fentanyl being found mixed with non-opioid drugs, specifically stimulants such as cocaine and methamphetamine?
- As there are very few buys of pure fentanyl in the Midwest HIDTA region, what is the actual price of fentanyl when not mixed with other drugs?

4. Marijuana

A. Overview

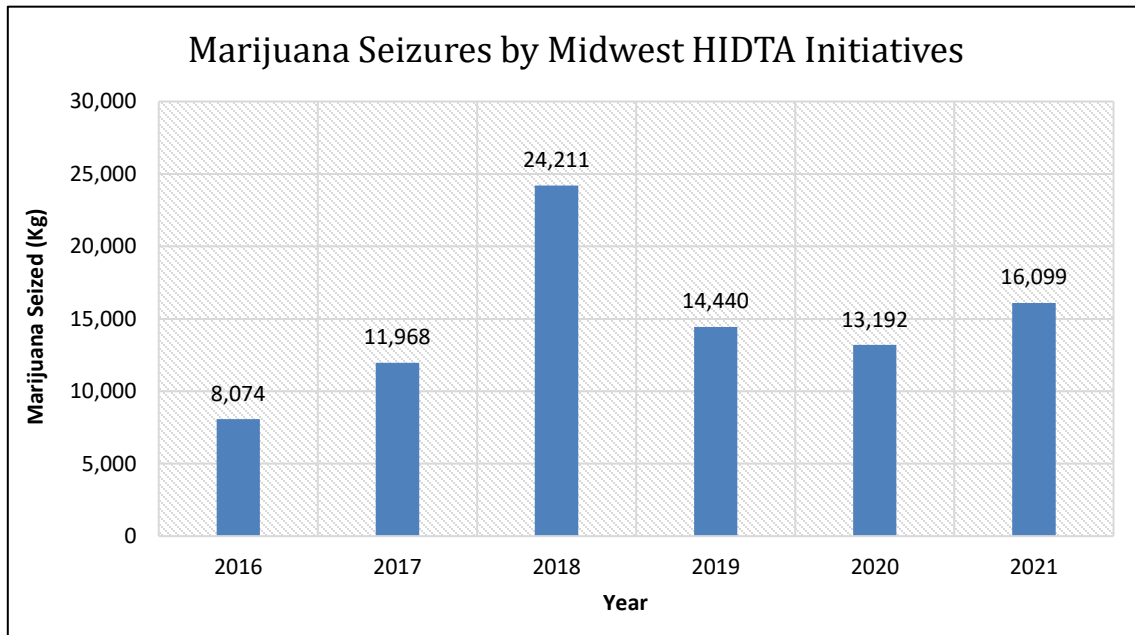
Marijuana is the most widely available and abused illicit drug within the Midwest HIDTA region. Because of this, marijuana is the third most significant drug threat to the region. Fifty-one percent of Midwest HIDTA initiatives ranked marijuana within their top three drug threats. Respondents to the PHS listed marijuana as the third greatest drug threat. Marijuana may become an even greater threat once the medical and/or recreational marijuana programs mature in Missouri, North Dakota, and South Dakota. North Dakota legalized medical marijuana through regulations that became effective in April 2016. Missouri legalized medical marijuana in November 2018. South Dakota legalized medical marijuana in November 2020. South Dakota citizens also voted to legalize recreational marijuana in November 2020, but the South Dakota Supreme Court overturned the bill due to the statute violating the South Dakota constitution.²³ Illinois has also legalized recreational marijuana, while Iowa only allows for specialized cannabidiol (CBD) products as part of its medical CBD program.

Similar to methamphetamine, the region has experienced a change in sources of marijuana over the past decade. Whereas previously much of the marijuana in the Midwest HIDTA region was grown in Mexico and transported into the region after being smuggled through the Southwest Border, a majority of the marijuana in the region today comes from sources within the U.S. Domestically-produced marijuana, a majority of which is grown hydroponically in states where marijuana has been decriminalized and/or legalized in some form, typically has a much higher tetrahydrocannabinol (THC) content than Mexican-sourced marijuana. In the past several years, Midwest HIDTA initiatives have reported an influx of THC cartridges designed to be vaporized in electronic cigarettes/vape pens. According to law enforcement sources, these THC cartridges are increasing in availability and are increasingly seized via highway interdiction. Reporting suggests that large quantities of these cartridges are purchased in the “legal” Western states and are trafficked to other parts of the U.S.

Marijuana decriminalization has created a readily available supply of highly potent domestically cultivated marijuana for transport into the region. This now includes states within the Midwest HIDTA that have legalized various forms of marijuana. Reporting from regional law enforcement agencies suggests that criminal organizations often clash with one another for the right to distribute marijuana from “legal” states in Midwestern territory.

B. Availability

Marijuana is the most widely available drug in the region. All but three Midwest HIDTA law enforcement initiatives reported marijuana as highly available within their AORs. Midwest HIDTA initiatives seized 16,113 kilograms (35,523 pounds) of marijuana in 2021, along with 1,265 kilograms (2,789 pounds) worth of marijuana plants. Figure 7 depicts marijuana seizure totals by Midwest HIDTA initiatives from 2016 to 2021, as reported through PMP data.

Figure 7. Marijuana Seizures by Midwest HIDTA Initiatives, 2016-2021.⁹

C. Use

Marijuana is the most widely used illicit drug in the Midwest HIDTA region, according to 91 percent of law enforcement initiatives. Twenty-four percent believed marijuana contributed the most to violence in their areas. PHS respondents also listed marijuana as the drug with the highest level of use. Of the PHS respondents that operate an inpatient or outpatient admissions program, approximately 29 percent cited an increase in marijuana-related admissions over the past 12 months. A further 43 percent of respondents cited marijuana-related admissions as remaining the same over the past 12 months. The overwhelming majority of PHS respondents claimed that teens (88 percent) and young adults (64 percent) most commonly abused marijuana. Data from the PHS states that marijuana is a drug frequently combined with other substances. The most popular drugs taken in combination with marijuana are methamphetamine and fentanyl.

The *2019-2020 NSDUH* shows an increase in past year estimated marijuana use by those 18 and older in every state within the Midwest HIDTA region except Nebraska. According to the data, Iowa and South Dakota experienced the greatest increase, both increasing 20 percent.^{10,11}

Based on the TEDS data in Table 8, the number of admissions to drug treatment facilities for a substance use disorder involving marijuana declined for every state in the Midwest HIDTA region. The reason for the decrease in marijuana admissions, despite the apparent increase in overall marijuana use, is unknown at this time. The push for marijuana decriminalization in certain parts of the Midwest HIDTA region may have played a role in the decreased number of marijuana admissions, especially if court-mandated marijuana substance abuse programs are less prevalent, although this information is currently unsubstantiated.

Table 8. Treatment Episode Data Sets – Marijuana

Treatment Episode Data Sets (TEDS)						
Marijuana						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	7,541	1,805	7,501	1,273	718	1,690
2016	7,062	3,112	7,256	1,372	1,314	1,547
2017	6,798	2,969	6,730	1,488	896	1,537
2018	6,569	2,610	6,491	1,344	462	1,637
2019	6,192	1,744	5,397	1,261	267	1,572

*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

D. Price

The price of marijuana in the Midwest HIDTA region is dependent upon the origin of the marijuana and the form that it takes. For example, an ounce of marijuana flower is generally less expensive than an ounce of butane hash oil. Additionally, marijuana originating from a Colorado dispensary is generally more expensive than marijuana originating from Mexico because of its higher THC content. Table 9 depicts marijuana pricing information obtained from Midwest HIDTA law enforcement initiatives.

Table 9. 2021 Drug Pricing Data– Marijuana¹⁷

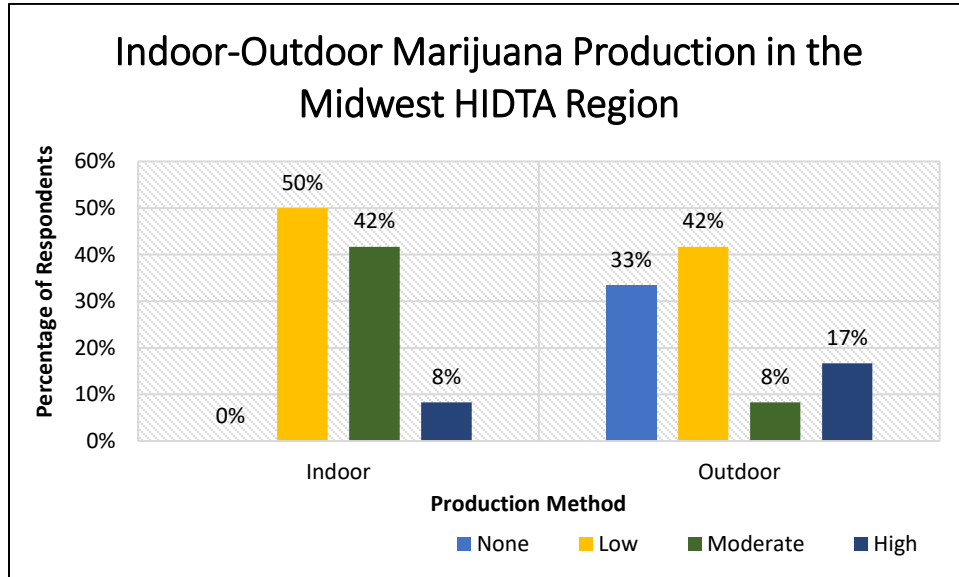
Marijuana		
Unit of Measurement	Range	Average
Pound	\$700-\$3,200	\$1,911
Ounce	\$50-\$400	\$203
Gram	\$4-\$40	\$13
THC Cartridge	\$20-\$80	\$42
Gram of Wax	\$25-\$50	\$32
Ounce of Wax	\$450-\$1,400	\$785

E. Production

The Midwest HIDTA assesses that the majority of marijuana in the region is transported in from areas where marijuana has been decriminalized. Twenty-six percent of initiatives stated that marijuana production occurred within their area, with indoor marijuana production more prevalent than outdoor production. Half of the initiatives that reported marijuana production within their areas indicated that indoor marijuana production occurred at a moderate or high level in their AORs and only 25 percent of respondents indicated that outdoor marijuana production occurred at a moderate or high level. Indoor production methods, which protect plants from harsh weather

conditions in the region, also allow cultivators greater control over THC content in marijuana. Indoor growing also affords a higher degree of concealment from law enforcement as the production sites are hidden from public view. Figure 8 shows levels of indoor and outdoor marijuana production in the Midwest HIDTA region, as indicated by law enforcement initiatives.

Figure 8. LES: Indoor-Outdoor Marijuana Production in the Midwest HIDTA Region.²⁴

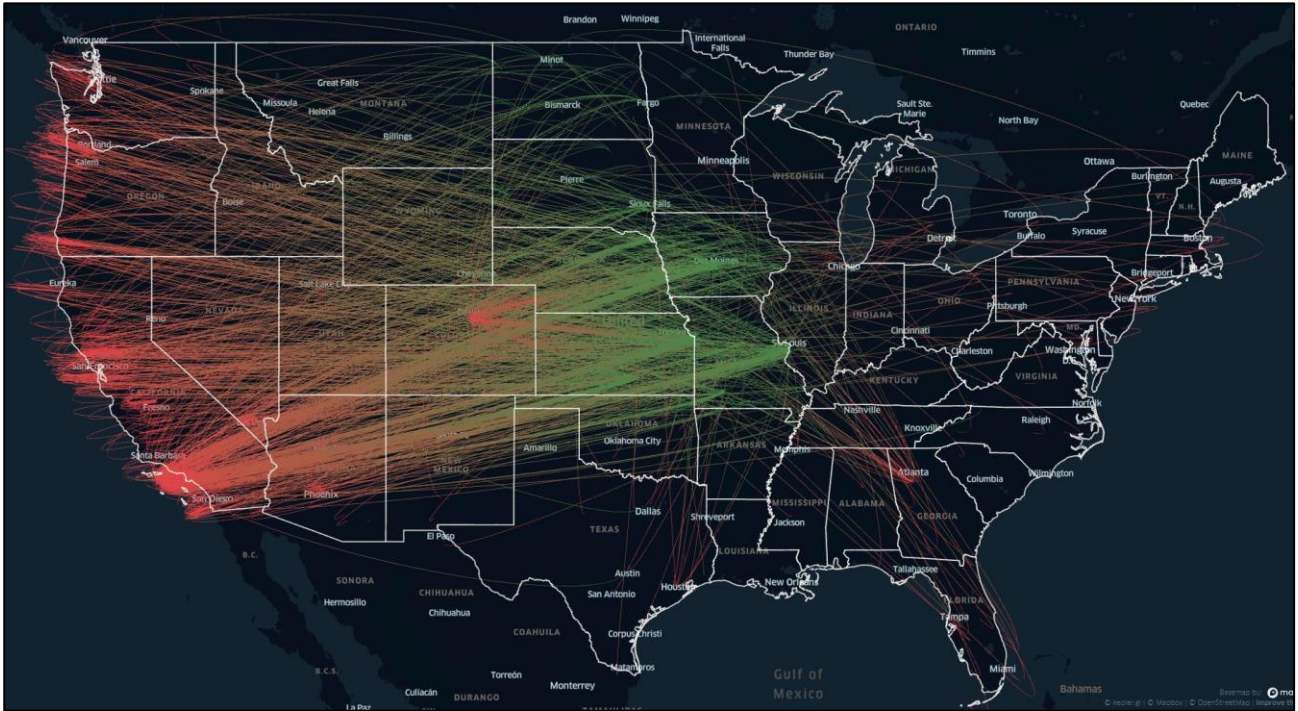


In December 2018, Congress passed the Agriculture Improvement Act of 2018 (also known as the 2018 Farm Bill), which legalized the production, cultivation, and retail sale of industrial hemp. Every state within the Midwest HIDTA region now participates in industrial hemp cultivation. There have been at least two instances of drug traffickers in the Midwest HIDTA region smuggling illicit marijuana under the guise of industrial hemp in the time since the bill's passing, either comingling marijuana with industrial hemp shipments or by falsifying documents in an effort to disguise marijuana as legal hemp.²⁵

F. Transportation

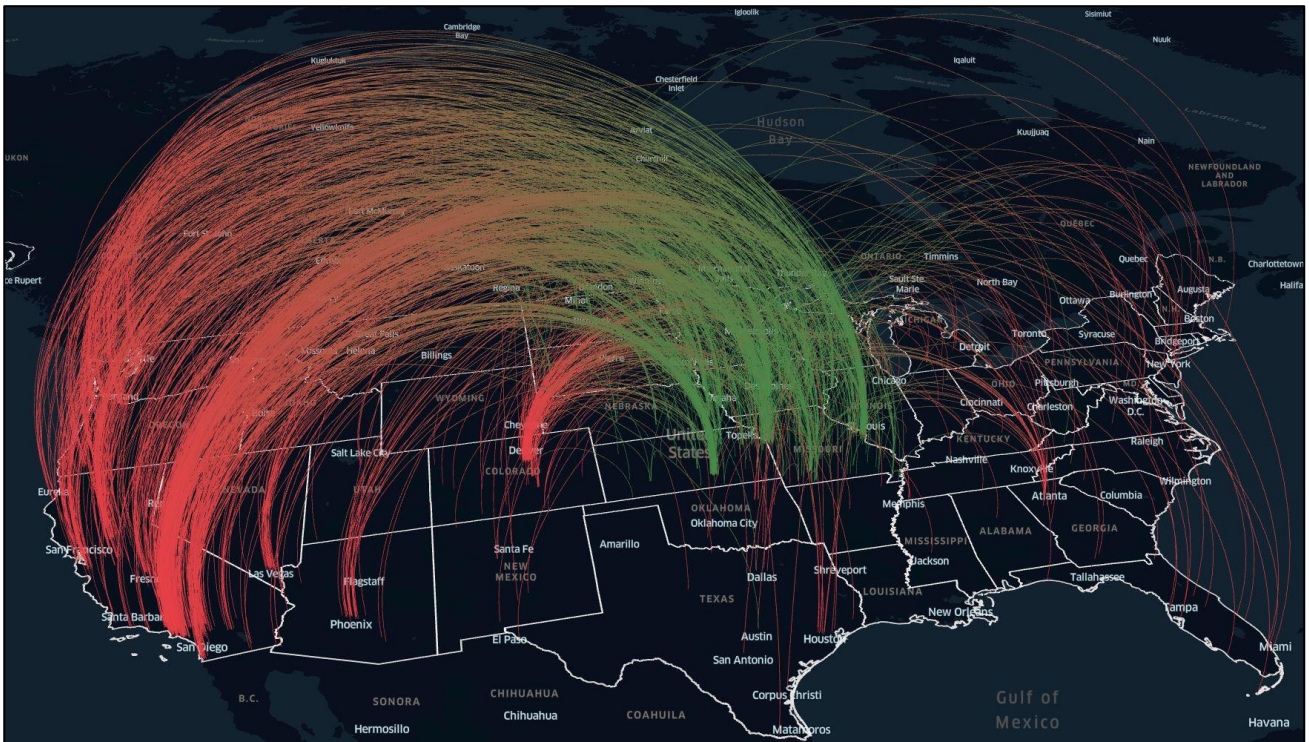
The majority of marijuana and marijuana products are transported into the Midwest HIDTA region from California, Colorado, Oregon, Nevada, and Washington.²⁶ Private passenger vehicles are the most common methods of transporting marijuana into the region, although the use of mailing services for quantities up to 100 pounds have increased over the past 12 months. Figures 9 and 10 depict the instances of marijuana shipped via mailing services into the Midwest HIDTA region during 2021.

Figure 9: Marijuana Mailed into the Midwest HIDTA Region, 2021.²⁷



Source: MW HIDTA Law Enforcement Partners

Figure 10: Marijuana Mailed into the Midwest HIDTA Region, 2021 3D.²⁷



Source: MW HIDTA Law Enforcement Partners

5. Controlled Prescription Drugs

A. Overview

The Midwest HIDTA assesses that CPD abuse within the region is widespread and represents a constant drug threat. A significant percentage of the CPDs seized by Midwest HIDTA initiatives involve counterfeit pharmaceuticals. Laboratory analysis often reveals the presence of fentanyl, methamphetamine, other opioids, or benzodiazepine analogues. Although none of the Midwest HIDTA initiative ranked CPDs as the greatest drug threat to their area, 31 percent ranked CPDs within the top three drug threats in their AORs. Four percent of PHS respondents reported CPDs as their primary drug threat. The legal yet controlled status of CPDs has resulted in their moderate to high levels of availability and use.

On June 7th, 2021, the Missouri Governor signed a bill that would enact a statewide Prescription Drug Monitoring Program (PDMP), ending Missouri's long designation as the last state without a PDMP.²⁸ With this, all states within the Midwest HIDTA region now have a PDMP. The prohibition of law enforcement in several Midwest HIDTA states from obtaining PDMP information to identify over-prescribing doctors also limits the overall effectiveness of these programs in addressing the opioid epidemic.

B. Availability

Eighty-seven percent of Midwest HIDTA initiatives reported CPD availability as either moderate (30 percent) or high (57 percent) within their AORs. Pharmaceutical diversion is responsible for the majority of illicit use. Seventy-two percent of LES respondents indicated that CPD diversion occurs in their AORs. According to responses from the PHS, opioids have the highest level of diversion of any CPD category. Sedatives (e.g. Xanax) are the second most diverted CPD type, followed by stimulants (e.g. Adderall). Both muscle relaxant (e.g. Soma) and anabolic steroid diversion are considered low. Figures 11 and 12 illustrate the most common CPD diversion methods, as reported by respondents to the LES and PHS.

Counterfeit CPDs

Mexico-based DTOs appear to be trafficking considerable quantities of counterfeit CPDs into both the U.S. and Midwest HIDTA region. These CPDs contain fentanyl and other synthetic opioids and closely resemble popular brands such as the 30mg oxycodone pills, also known as “M30s.”



Left: Authentic oxycodone M30 tablets

Right: Counterfeit oxycodone M30 tablets

Figure 11. CPD Diversion Methods: LES Respondents^{7,j}

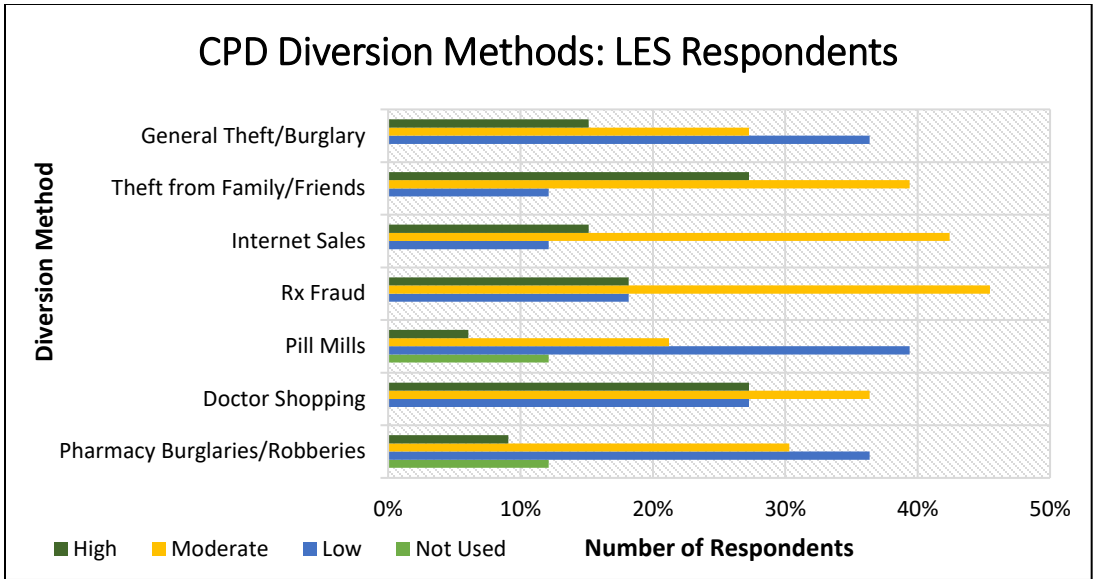
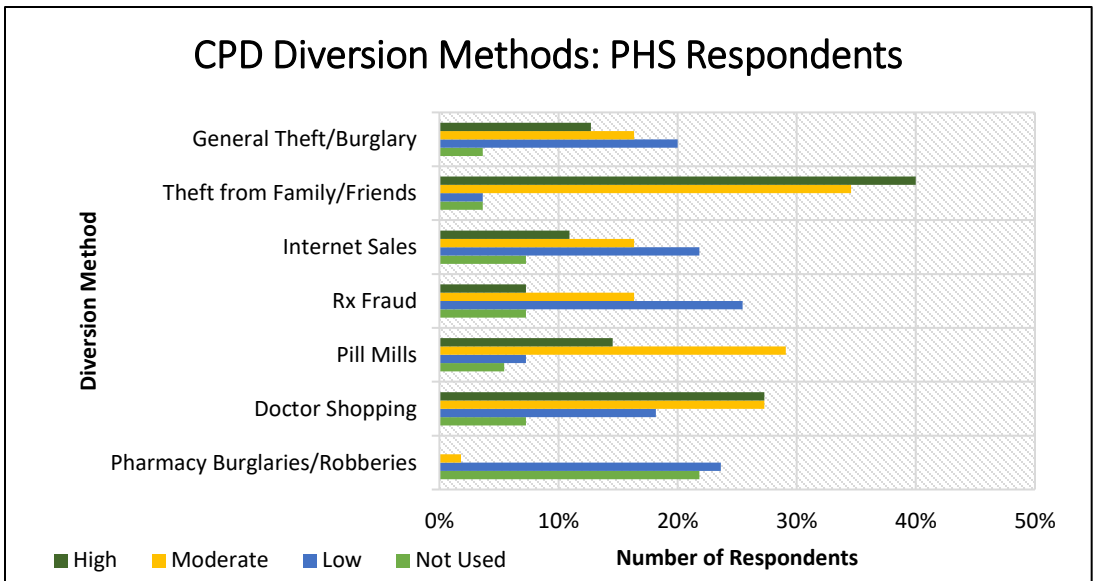


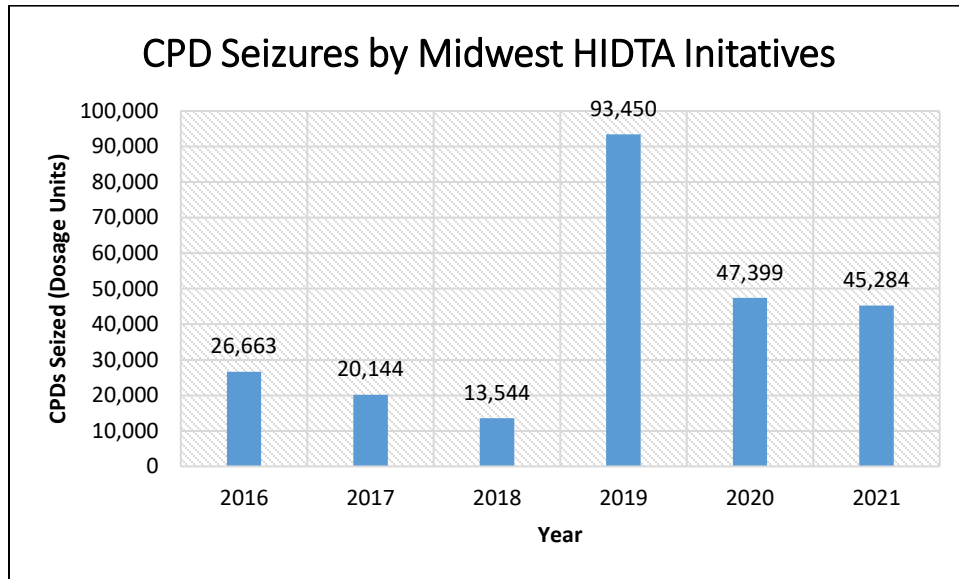
Figure 12. CPD Diversion Methods: PHS Respondents^{7,j}



^j General theft/burglary is the theft of CPDs from individuals in possession of CPDs that do not involve friends/family or a pharmacy. Rx fraud is the illegal acquisition of prescription drugs for profit. Pill mills are clandestine operations where a medical worker offers CPDs to patients in exchange for bribes rather than needs. Doctor shopping is the illegal practice of seeking care from multiple health care providers for an illicit purpose.

Midwest HIDTA initiatives seized 45,284 dosage units and 24 kilograms of CPDs in 2021.^k Figure 13 depicts CPD seizure totals by Midwest HIDTA initiatives from 2016 to 2021, as reported in the PMP.

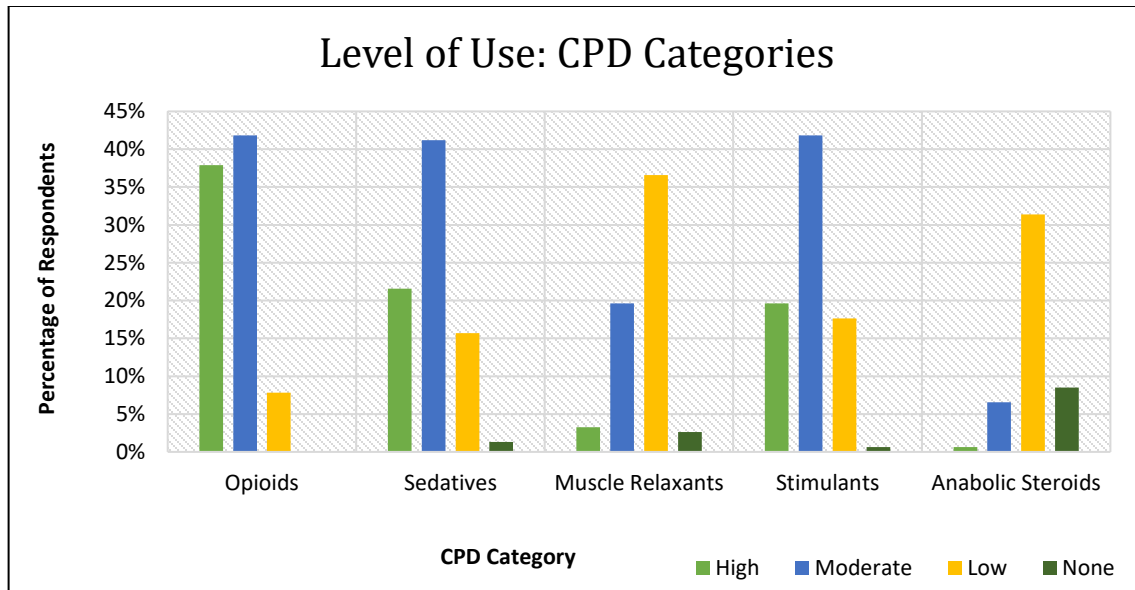
Figure 13. CPD Seizures by Midwest HIDTA Initiatives, 2016-2021.⁹



C. Use

Over one-third (39 percent) of Midwest HIDTA initiatives reported high levels of CPD use within their AORs. Initiatives also reported that CPDs have the fourth highest levels of use in the Midwest HIDTA region, ranking behind marijuana (91 percent), methamphetamine (87 percent), and heroin and synthetic opioids (67 percent). Public health respondents shared this belief, as 28 percent reported CPD use as high and 50 percent reported it as moderate. PHS respondents claimed that opioids (38 percent) had the highest levels of use, followed by sedatives (22 percent) and stimulants (20 percent). Muscle relaxants and anabolic steroids reportedly had low levels of use. Further PHS data concerning the level of CPD use illustrated in Figure 14. A significant number of CPD users—opioid-based CPD users in particular, develop an addiction to CPDs, even when taken according to doctor and pharmacist instructions. If an individual with a substance use disorder loses legitimate access to their CPD supply, they may seek out illicit CPDs or transition to cheaper, more potent alternatives, such as heroin or synthetic opioids.

^k This number is the total for all PMP prescription drug statistics, which include alprazolam, hydrocodone, oxycodone, and several other CPD types.

Figure 14. CPD Use as Reported by PHS Respondents.²⁹

Responses to the PHS indicate that CPDs are abused by adults, young adults, and teens alike. Of the PHS respondents that operate either an inpatient or outpatient admissions program, 30 percent cited an increase in admissions for CPDs over the past 12 months. Forty-three percent stated that CPD admissions had remained the same and only 14 percent claimed that admissions had decreased. According to the PHS, CPDs are most often combined with fentanyl.

According to data from the *2019-2020 NSDUH*, every state within the Midwest HIDTA region experienced a decrease in pain reliever use over the previous year.¹ Iowa saw the greatest decrease in pain reliever use this past year with nearly a 22 percent decrease. The reason for the decrease in CPD admissions is unknown at this time.^{10,11}

The TEDS data in Table 10 demonstrates a decrease in the number of admissions to drug treatment facilities for a substance use disorder involving prescription opiates in Iowa, Kansas, Nebraska, North Dakota, and South Dakota between 2015 and 2019. The cause for the decrease in pain reliever inpatient admissions for the TEDS data is unknown at this time. Missouri was the only state in the region reporting an increase in treatment admissions for opiates, which rose 38 percent for the same period.

¹ The NSDUH defined prescription pain relievers as the following subtypes of opioid products: hydrocodone, oxycodone, morphine, pharmaceutical fentanyl, buprenorphine, oxymorphone, tramadol, codeine, Demerol, hydromorphone, and methadone.

Table 10. Treatment Episode Data Sets – Other Opiates

Treatment Episode Data Sets (TEDS)						
Other Opiates**						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	1,494	413	2,507	523	193	376
2016	1,448	759	2,323	428	350	327
2017	1,257	694	2,227	421	262	371
2018	1,242	570	3,526	364	183	345
2019	1,128	363	3,461	294	139	264

*Other Opiates includes: Demerol, Dilaudid, codeine, methadone, morphine, oxycodone, and any other drug with morphine-like effects.
SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

D. Price

Pricing for diverted CPDs within the Midwest HIDTA region are dependent upon the type of CPD, the dosage, and the regional marketplace. Table 11 illustrates various CPD pricing information for 2021. Benzodiazepine pricing information is available for alprazolam. Opioid pricing information is available for hydrocodone, oxycodone, and Percocet. Stimulant pricing information is available for Adderall.

Table 11. 2021 Drug Pricing Data– CPDs¹⁷

Unit of Measurement	Per Pill	
	Range	Average
CPD Type		
Alprazolam (Xanax)	\$3-\$7	\$4
Hydrocodone	\$5-\$45	\$14
Oxycodone	\$8-\$80	\$21
Percocet	\$5-\$30	\$15
Adderall	\$5-\$20	\$12

E. Production

The Midwest HIDTA is not aware of CPD diversion from regional pharmaceutical manufacturers at this time. Law enforcement investigations have identified numerous counterfeit CPD operations within the U.S. A significant portion of the counterfeit opioid and benzodiazepine pills encountered by Midwest HIDTA initiatives are found to contain a mixture of fentanyl and other substances when sent to a laboratory for further analysis. Similarly, many counterfeit stimulant drugs contain methamphetamine rather than the various stimulants they are marketed as.

F. Transportation

The Midwest HIDTA found that the region's most popular methods of CPD diversion in 2021 were doctor shopping, theft from family/friends, prescription fraud, and internet sales. Genuine CPDs encountered by regional law enforcement are produced by pharmaceutical companies and distributed to pharmacies nationwide. Counterfeit CPD manufacturing operations in China, Mexico, and the United States also contribute to the supply of diverted pharmaceuticals. Counterfeit CPDs clandestinely produced outside of the Midwest HIDTA region are often shipped via mailing services from overseas or smuggled across international borders where they ultimately enter into the region transported by private vehicles.

6. Intelligence Gap

- Is the decrease in treatment admissions for CPDs due to stricter prescribing requirements?
- Is the surge in the prevalence of counterfeit CPDs responsible for the decrease in treatment admissions?
- What percentage of the Midwest HIDTA region's illicit CPD market is made up of counterfeit CPDs?

7. Cocaine

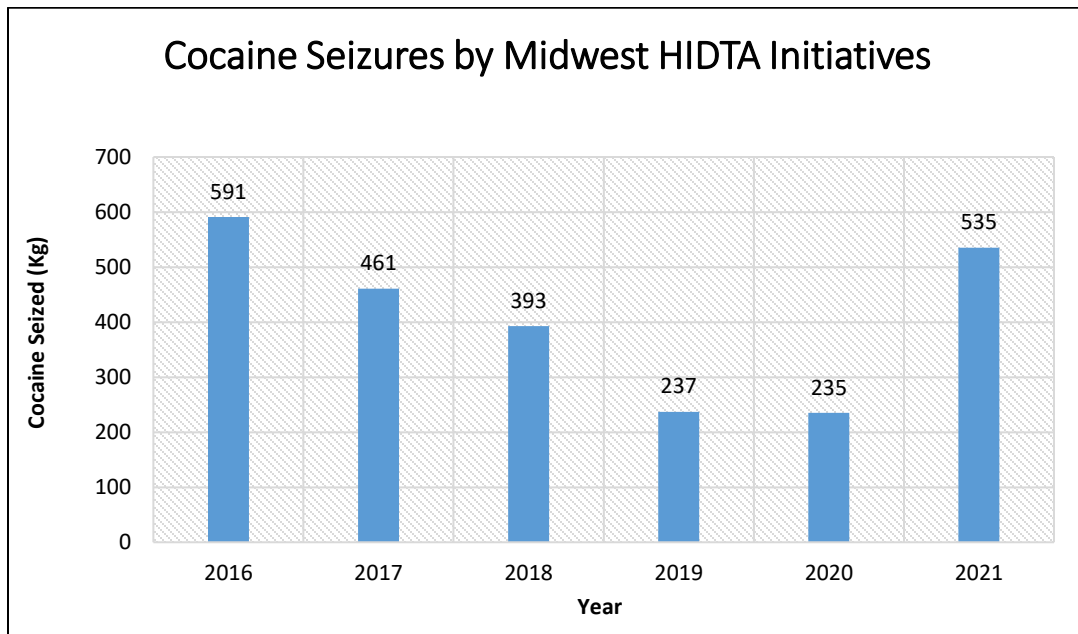
A. Overview

About one-third of Midwest HIDTA law enforcement initiatives reported cocaine within their top three greatest drug threats. PHS respondents did not consider cocaine to be a primary drug threat. High levels of violence associated with methamphetamine, marijuana, and heroin/synthetic opioids have rendered cocaine a lesser threat than in the past.

B. Availability

The Midwest HIDTA assesses cocaine availability as moderate throughout the region. This is corroborated by the majority (57 percent) of Midwest HIDTA initiatives that reported cocaine as moderately available in their areas. Seizures of cocaine by Midwest HIDTA initiatives in 2021 increased 128 percent from 2020 with initiatives seizing 535 kilograms (1,179 pounds).⁹ Cocaine seizures by Midwest HIDTA initiatives from 2016 to 2021 can be found in Figure 15.

Figure 15. Cocaine Seizures by Midwest HIDTA Initiatives, 2016-2021.⁹



C. Use

The Midwest HIDTA assesses cocaine use throughout the region as moderate. Fifty-two percent of Midwest HIDTA law enforcement initiatives reported moderate levels of cocaine use within their AORs. The majority of PHS respondents described the level of cocaine use as either low (54 percent) or moderate (22 percent). Of the PHS respondents that operate an inpatient or outpatient admissions program, 48 percent reported that admissions for cocaine had remained the

same over the past 12 months, although seven percent cited an increase. The majority of PHS respondents claimed that young adults (33 percent) and adults (79 percent) most commonly abused cocaine. Cocaine may be combined with other substances, the most popular being methamphetamine, fentanyl, and marijuana.

According to the *2018 NSDUH Annual Report*, the number of first time cocaine users nationwide has been steadily decreasing since 2016. This trend has reversed course, according to the *2019-2020 NSDUH*, which reports that estimated cocaine use by those age 18 and older increased in every Midwest HIDTA state. Cocaine use by those 18 and older in North Dakota rose by 34 percent, the highest percent change for the Midwest HIDTA region. For perspective, cocaine use by those age 18 and older dropped four percent nationwide.^{10,11}

The TEDS data in Table 12 demonstrates an increase in the number of admissions to drug treatment facilities for a substance use disorder involving cocaine in Kansas, Nebraska, and South Dakota between 2015 and 2019. Iowa, Missouri, and North Dakota reported a decrease in the number of cocaine admissions during the same period.

Table 12. Treatment Episode Data Sets – Cocaine

Treatment Episode Data Sets (TEDS)						
Cocaine						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	488	203	1,429	156	11	48
2016	425	453	1,345	155	15	49
2017	499	469	1,176	187	37	62
2018	495	356	1,100	185	14	76
2019	415	369	1,061	164	4	57

*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

D. Price

Cocaine prices in the Midwest HIDTA region vary heavily depending on the location. Pricing information from law enforcement initiatives is available in Table 13.

Table 13. 2021 Drug Pricing Data– Cocaine¹⁷

Cocaine		
Unit of Measurement	Range	Average
Kilogram	\$22,600-\$50,000	\$36,921
Ounce	\$698-\$2,000	\$1,288
1/8 Ounce (8-Ball)	\$130-\$450	\$247
Gram	\$45-\$150	\$90

E. Production

Cocaine is neither cultivated nor produced within the Midwest HIDTA region. The coca plant is native to western South America, which produces the vast majority of the world's supply of cocaine. According to the United Nations Office on Drugs and Crime's 2021 World Drug Report, global production of cocaine rose by four percent in 2019 to its highest level ever at 1,784 tons (at a purity of 100 percent).³⁰ Although 2019 is the most recent year for which comparable estimates are available, fiscal year-to-date seizures of cocaine by U.S. Customs and Border Protection (CBP) are currently 61 percent (35,446 pounds) of 2020's total (58,006 pounds), suggesting that there may be increased production of cocaine in coca-producing countries.³⁰

F. Transportation

The Midwest HIDTA assesses that the majority of U.S.-bound cocaine is transported from South America into Mexico, where it is then smuggled into the Midwest region. As with other illicit drug types, cocaine is primarily transported into the region via private passenger vehicles, commercial vehicles, and mailing services. Cocaine trafficking organizations also utilize "go-fast boats" and undersea submersible vehicles to smuggle cocaine into the U.S., though these methods are believed to be used for transporting cocaine to destinations along the eastern and western seaboard.²¹

G. Intelligence Gaps

- How much cocaine is being diverted to more lucrative markets (e.g. Europe, Australia) instead of being sent to the U.S., specifically the Midwest HIDTA region?
- What other drugs are mixed with cocaine in the Midwest HIDTA region?

8. New Psychoactive Substances

A. Overview

The most commonly abused new psychoactive substances (NPSs) in the Midwest HIDTA region are synthetic cannabinoids, synthetic cathinones, and synthetic phenethylamines. NPSs are a class of synthetic substances that mimic the effects of established illicit drugs. Often referred to as “designer drugs”, NPSs have no legitimate industrial or medical uses. Synthetic cannabinoids are typically sprayed onto plant matter or suspended into a liquid and smoked, which are intended to simulate the effects of marijuana. Synthetic cathinones normally reside in powder or crystal form, are either swallowed or insufflated, and are intended to mimic the effects of stimulants. The synthetic phenethylamine drug class possess entactogenic, hallucinogenic, and/or stimulant properties and represent the largest category of designer drugs.

B. Availability

The Midwest HIDTA assesses NPS availability as moderate to low. Debuting in the late 2000s, NPSs were designed to mimic the effects of marijuana, stimulants, and hallucinogens and were most popular among young adults. Although not as prevalent as they once were, NPSs are still available and are a consistent threat to the Midwest HIDTA region. NPSs are often marketed as bath salts, herbal incense, or research chemicals and are available in head shops or convenience stores. Popular brands of NPSs include K2, Spice, Joker, Black Mamba, Bliss, and Cloud Nine. The majority of Midwest HIDTA initiatives reported NPS availability as moderate (26 percent) to low (43 percent). Midwest HIDTA initiatives seized less than a kilogram of synthetic cannabinoids in 2021. Synthetic cannabinoid availability has continuously declined across the region due to the loosening of marijuana laws in states both within and surrounding the Midwest HIDTA region. The availability of high-THC marijuana, concentrates, and edibles has increased as a result.

C. Use

Forty-eight percent of Midwest HIDTA initiatives reported low levels of NPS use. While NPSs were not a primary contributor to violence and property crimes in the Midwest HIDTA region, some of these drugs have been known to induce violent and/or aggressive behavior.^{31,32,33} Twenty-six percent of law enforcement initiatives reported a moderate level of NPS use in their areas, while the majority (48 percent) described NPS use as low. Similarly, 24 percent of PHS respondents indicated moderate levels of NPS use and 36 percent reported low levels of use. Of the public health respondents that operate a drug treatment program, 32 percent reported that NPS admissions had remained the same over the past 12 months while 13 percent reported an increase. Public health respondents indicated that young adults (59 percent) and teens (41 percent) primarily use NPSs.

NPS abuse comes with many dangers. Product inconsistency poses a serious concern for those who abuse NPSs. For synthetic cannabinoids in particular, batches of “synthetic marijuana” may vary in potency on a per-bag basis due to the methods that manufacturers use to coat the plant

material in the psychoactive chemicals. Manufacturers and retailers of NPSs care little about the chemical makeup of their products, which endangers the physical and mental health of NPS consumers.

D. Price

Midwest HIDTA law enforcement initiatives reported drug pricing data for NPSs as \$130 to \$700 for an ounce of synthetic cannabinoids in 2021. According to information from previous years, most establishments (e.g. gas stations, head shops) sell synthetic cannabinoids and cathinones for approximately \$15 to \$20 per gram. Some online vendors offer synthetic cannabinoids suspended in e-juice that can be purchased for a similar price. Sales of synthetic phenethylamines are most prevalent online and vary in price, depending on the formulation and batch purity.

E. Production

There were no reports of NPS production within the Midwest HIDTA in 2021. Synthetic cannabinoids are typically produced in foreign laboratories and are purchased by individuals in the U.S. These individuals then spray leafy plant matter with the synthetic cannabinoid solution and package the product. Synthetic cathinones and phenethylamines are often produced in Chinese laboratories where suppliers misrepresent the drug's intended purpose, often describing the drugs as "research chemicals", in order to pass inspection by CBP.

The chemical blueprints and recipes for many NPSs are catalogued in scientific and patent literature. Many of these substances were originally created to be used in medicine, but were abandoned after they failed to meet medical standards. With the exception of phenethylamines, the relative ease of NPS production is possible by the availability of chemical blueprints on the internet. Once a NPS is scheduled as a controlled substance in the U.S. or any other major market, manufacturers will modify the molecular structure of that chemical to avoid legal penalty. This prevents law enforcement agencies from restricting the distribution of the manufacturer's products.

F. Transportation

The USPS and other mailing services are the most common methods used to ship NPSs into the Midwest HIDTA region. Semi-trailer trucks and other commercial vehicles are also used to transport NPSs to retailers that offer NPS products.

G. Intelligence Gaps

- What is the true extent of NPS trafficking in the Midwest HIDTA region?

9. Other Dangerous Drugs

A. Overview

A wide variety of other dangerous drugs (ODDs) are abused within Midwest HIDTA region. The threat posed by these drugs in the region is ever-changing due to the development of new synthetic drugs in source countries such as China, as well as resurgences in other drug types, such as “magic” mushrooms. Several types of ODDs are available in the region, including methylenedioxymethamphetamine (MDMA), phencyclidine (PCP), lysergic acid diethylamide (LSD), ketamine, 4-hydroxybutanoic acid (GHB), and psilocybin mushrooms. The breadth of the threat and the variance between areas in the region make it difficult to assess the overall drug threat created by ODDs compared to other drug types. However, only two percent of LES respondents ranked ODDs within the top three drug threats in their AORs. None of the PHS respondent listed ODDs as their greatest drug threat.

B. Availability

The Midwest HIDTA assesses the availability of ODDs across the region as moderate to low. This is supported by the 39 percent of law enforcement initiatives that reported ODD availability as low and the 39 percent that reported availability as moderate. Although ODDs have existed within the Midwest HIDTA region for decades, their availability has historically remained moderate to low. ODDs are typically purchased at bars, nightclubs, music festivals, or online and are generally more difficult to obtain compared to drugs such as cocaine or marijuana.

Midwest HIDTA initiatives seized two dosage units of ketamine, 3,191 dosage units of LSD, and 5 kilograms of PCP in 2021. Initiatives also seized 21,660 dosage units and three kilograms (seven pounds) of MDMA in 2021. Thirty-nine kilograms (86 pounds) of psilocybin mushrooms (hereafter referred to as “mushrooms”) were seized in 2021.

C. Use

While not as popular as other drugs of abuse, ODD use in the Midwest HIDTA region is low but consistent. According to 54 percent of LES respondents and 49 percent of PHS respondents claimed that ODDs have low levels of use within their AORs. Public health respondents claim that young adults (88 percent) primarily abuse ODDs. The plurality of public health respondents (32 percent) stated that inpatient/outpatient admissions for ODDs remained the same over the past 12 months.

The TEDS data in Table 14 depicts the low levels of PCP abuse across the Midwest HIDTA region between 2015 and 2019. Inpatient admissions increased in Iowa, Kansas, Nebraska, and South Dakota between 2015 and 2019, while admissions decreased in Missouri. The most recent data is not available for North Dakota.

Table 14. Treatment Episode Data Sets – PCP

Treatment Episode Data Sets (TEDS)						
PCP						
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2015	8	17	202	12	0	1
2016	7	54	191	12	0	1
2017	10	45	161	9	0	0
2018	9	35	155	6	0	1
2019	11	25	135	13	N/A	2

SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through February 15, 2022.

D. Price

The price of ODDs varies depending on the purity, location, and ingredients. The price of MDMA in the Midwest HIDTA region varied between \$2 and \$20 per pill. The price per dosage unit of LSD varied between \$5 and \$40. The price per pound of psilocybin mushrooms varied between \$1,500 to \$6,400 and the price per ounce varied between \$189 to \$400. The price per gram of psilocybin mushrooms varied between \$7 to \$20.

E. Production

Most MDMA seized in the U.S. is primarily synthesized in Canada and the Netherlands.³⁴ LSD may be produced in clandestine laboratories across the country, although a crucial precursor chemical, known as ergotamine tartrate, is not readily available in the U.S. Ketamine is commercially produced in a number of countries, including the U.S., and is typically either diverted or stolen from legitimate sources. PCP destined for the Midwest HIDTA region is typically manufactured in clandestine laboratories in Southern California. Psilocybin mushrooms may be grown across the U.S. and have been increasingly discovered alongside illegal marijuana grows.

F. Transportation

The Midwest HIDTA assesses that the majority of the region's MDMA is sourced from foreign countries, such as Canada and the Netherlands. PCP is transported into the region from clandestine laboratories in Southern California. Ketamine is typically diverted from veterinary clinics and other medical sources within the U.S. and transported into the region. Most ODDs are transported into the Midwest HIDTA region in private vehicles.

G. Intelligence Gaps

- What effect has the increasing decriminalization/legalization of psilocybin mushrooms had on the production of these mushrooms in both the Midwest HIDTA region and nationwide?
- How often is methamphetamine marketed as MDMA and/or ecstasy pills in the Midwest HIDTA region?

10. Source Considerations

Several sources were considered in the preparation of the drug threat section of the 2022 Midwest HIDTA Threat Assessment. Statistics from the Midwest HIDTA PMP aided the section by quantifying the volume, type, and prices of drugs seized. Survey responses from our law enforcement initiatives and public health partners via the 2022 LES and PHS identified the drugs most used and abused in the region. Data derived from the SAMHSA and NSDUH provided insight on regional drug use rates. Data collected from SAMHSA's TEDS illustrated the number of individuals seeking treatment for various substance use disorders. Drug and asset seizure data collected by the Midwest HIDTA's DHE program allowed for the identification of source states and transportation methods for different drug categories and cash seizures. The UNODC World Drug Report provided the most recent estimations for both global coca bush cultivation and cocaine manufacture. Open source data provided by CBP illustrated the amount of drugs seized, by category, at different ports of entry along the U.S border. Anecdotal information such as HIDTA task force phone interviews, news media reports, law enforcement agency websites, and official press releases proved useful in highlighting specific drug threat issues.

V. Drug Trafficking Organizations

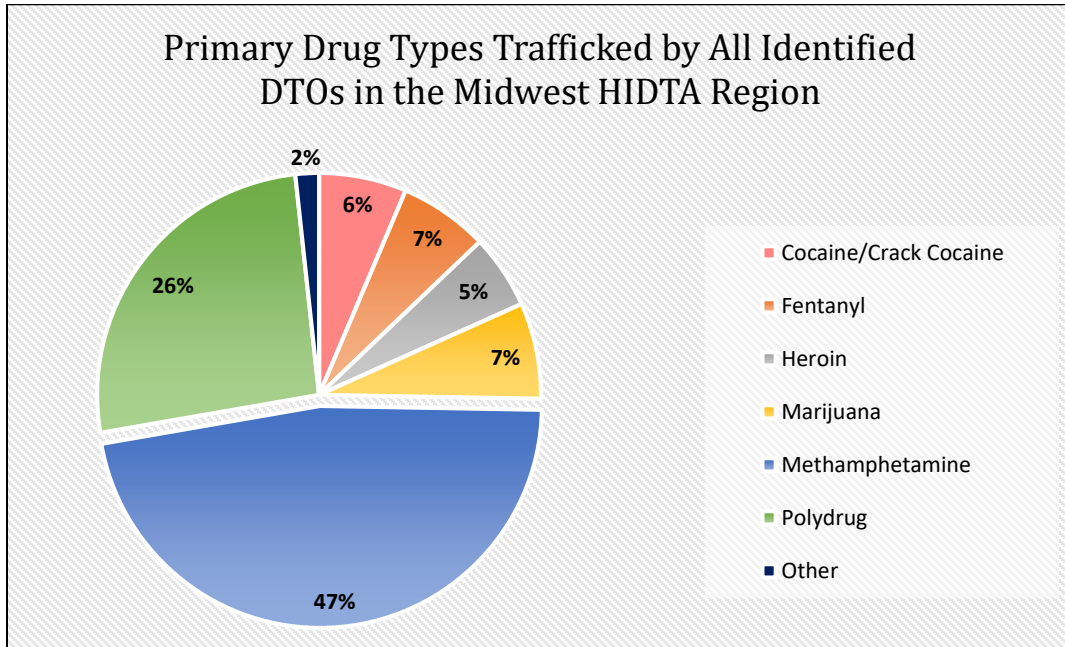
1. Overview

The Midwest HIDTA assesses that Mexican DTOs pose the greatest drug trafficking threat to the Midwest region. In the recent past, the vast majority of drug investigations involved a trafficker that was, to use a pop culture analogy, “six degrees of separation” from a Mexican drug cartel. This was based on the various levels of compartmentation between street dealers, distribution networks, and Mexico-based drug sources. This degree of separation is now often assessed at two, as Mexican cartels control the production, transportation, and wholesale—even retail level—distribution of illicit drugs in the United States.³⁵ As early as 2011, Mexican cartels had established a network of drug trafficking cells operating in more than 1,200 cities and towns across the U.S. utilizing a dynamic command and control structure.^{36,37} Because of this evolution of Mexican cartel dominance and pervasiveness throughout the nation, drug investigations of all sizes now directly link to major Mexican TCOs.

Midwest HIDTA enforcement initiatives documented 815 DTOs operating within the region in 2021, with 8,032 members and 1,259 leaders identified.⁹ Mexico-sourced DTOs continue to have the most significant impact in the region. The average identified membership of a DTO was approximately 12 individuals; of which, ten were members and two were leaders. Midwest HIDTA-based DTOs operate in both urban and rural areas and vary in terms of size, structure, and trafficking activities. Approximately 24 percent of LES respondents noted the movement of large metropolitan gangs (e.g. Gangster Disciples, MS-13) from major cities into smaller more rural areas. However, neighborhood-based street gangs dominate violence related to drug trafficking in most areas of the Midwest HIDTA region. These groups, which are comprised of individuals that reside on a shared street or locality, are difficult to identify because they lack the traditional hierarchy associated with nationally-affiliated gangs and frequently disband and regroup. While methamphetamine constitutes the majority of single-drug DTOs, it is evident that an increasing number of DTOs are expanding into poly-drug distribution.

Missouri contains both the largest population and most initiatives of any state in the Midwest HIDTA region. As such, Missouri reported more methamphetamine trafficking organizations than any other state, accounting for 35 percent of all methamphetamine trafficking organizations. Missouri also identified the highest percentage of fentanyl (65 percent), heroin (43 percent), marijuana (50 percent), and cocaine (47 percent) trafficking organizations operating in the region. North Dakota initiatives identified the highest percentage of oxycodone trafficking organizations in the region, accounting for 80 percent of the region’s total. Many of the oxycodone DTOs are believed to be counterfeit oxycodone containing fentanyl DTOs. Figure 16 depicts the primary drug types trafficked by all DTOs within the Midwest HIDTA region in 2021.

Figure 16. Primary Drug Types Trafficked by All DTOs Identified as Operating in the Midwest HIDTA Region.³⁸



Of the 815 DTOs operating within the Midwest HIDTA region, 11 percent were international in scope, 55 percent were multi-state, and 34 percent were local.⁹ Appendix VII summarizes key characteristics of all identified DTOs in 2021, while Appendix VIII includes a summary table for DTOs identified as operating in each state of the Midwest HIDTA region. According to 2021 data from the PMP, about 42 percent of all DTOs identified by Midwest HIDTA initiatives were identified as being violent, posing a significant threat throughout the region. Forty-one percent of international DTOs operating in the Midwest HIDTA region were identified as being violent, compared to 38 percent of multi-state and 48 percent of local DTOs. A state-by-state review of violent DTOs identified by Midwest HIDTA initiatives may be found in Table 15.

Table 15. Violent DTOs Identified by Midwest HIDTA Initiatives.⁹

Violent DTOs identified by Midwest HIDTA Initiatives			
	Total DTOs	Violent DTOs	Violent DTOs (%)
Illinois	42	12	29%
Iowa	114	18	16%
Kansas	65	27	42%
Missouri	348	221	64%
Nebraska	114	38	33%
North Dakota	61	13	21%
South Dakota	71	10	14%
All Initiatives	815	339	42%

Sixty percent of all DTOs classified as violent were also classified as gang-related, indicating a direct correlation between gangs and violence in the region. Forty-five percent of the DTOs identified by Midwest HIDTA initiatives in Missouri were gang-related, the highest percentage for any state in the region.

DTOs in the Midwest HIDTA region utilize novel technologies to facilitate communication, obtain payment, and monitor the locations of their drug couriers in real-time. These platforms include the dark web, social media, portable GPS systems, and encrypted messaging apps available through mobile devices. Many of the apps utilized by DTOs in the region have now implemented end-to-end encryption. Apps with end-to-end encryption, such as WhatsApp, provide an investigative hurdle to law enforcement due to the encryption aspect inherent in their infrastructure. Apps identified by Midwest HIDTA initiatives as being most utilized in the region include Facebook messenger, WhatsApp, Snapchat, Signal, and Telegram. Cryptocurrency, usually concurrent with dark web use, is used by some DTOs to transfer drug proceeds into and outside of the Midwest HIDTA region. The use of complex technology by DTOs in the region is expected to increase in the future.

2. International Drug Trafficking Organizations

A. Overview

The Midwest HIDTA assesses that Mexican DTOs and other DTOs of Hispanic origin pose the greatest international drug trafficking threat to the Midwest HIDTA. A total of 87 international DTOs were identified as operating in the Midwest HIDTA region in 2021, with 163 leaders and 897 members.⁹ Table 16 lists the characteristics of international DTOs identified by Midwest HIDTA initiatives in 2021. Mexico was the primary country affiliated with the identified international DTOs. On average, there were 12 members per international DTO. Approximately 54 percent of the international DTOs targeted in 2021 consisted of two or more ethnic groups, with Hispanic cited most frequently. Twenty-four percent of the international DTOs trafficked more than one drug type. The percentage of international DTOs reported as violent by Midwest HIDTA initiatives was slightly less in 2021 than in 2020, as was the percentage of DTOs with documented ties to gangs.

Table 16. International DTOs Identified as Operating in the Midwest HIDTA.⁹

International DTOs Identified by Midwest HIDTA Initiatives	
Characteristics	
Total International DTOs	87
- Hispanic	59
Total Members (Leaders)	897 (163)
Average DTO Size	12.18
Multi-ethnic	47
Gang Related	29
Violent	36
Poly-drug	21
Money Laundering Activities	21
Federal Case Designations	
OCDETF	22
CPOT	5
RPOT	2
PTO	26

B. Affiliations and Membership

The Sinaloa Cartel, New Generation Jalisco Cartel (CJNG), and the Juarez Cartel exert the most influence over Mexican DTOs operating within the Midwest HIDTA. PMP data indicates that 77 percent of international DTOs that operated within the Midwest HIDTA region in 2021 were of Mexican origin. Similarly, 80 percent of Midwest HIDTA law enforcement initiatives indicated that international DTOs operated within their AORs. Of those same respondents, 97 percent listed Mexico as the primary country affiliated with those DTOs.⁹

With their larger scope of operations, international DTOs generally have higher numbers of identified membership than multi-state or local DTOs. The targeted disruption and dismantlement of international DTOs requires a high level of cooperation and coordination amongst HIDTA initiatives, law enforcement task forces, and law enforcement agencies. Thus, investigations targeting the illicit activities of international DTOs often result in a larger number of identified DTO members and leaders. International DTOs operating within the Midwest HIDTA region have an average of 12 identified members, which is typically larger than that of multi-state and local DTOs.

Forty-one percent of international DTOs operating in the Midwest HIDTA region were described as violent. According to law enforcement initiatives, violence associated to international DTOs operating in the region is directly related to their associations with violent Mexico-based drug cartels and gangs. Mexican cartels have significant influence over the region's drug trafficking activities. The Sinaloa cartel is the most prevalent cartel in the region and is involved in international, multi-state, and local DTOs. Likewise, the DEA's *2020 National Drug Threat Assessment*^m indicated the Sinaloa cartel is among the most influential and pervasive Mexican cartels operating within the Midwest HIDTA region.³⁹ The Sinaloa cartel serves as a source of supply for multiple drug types in the Midwest HIDTA region, including cocaine, fentanyl, heroin, marijuana, and methamphetamine. The CJNG, Gulf Cartel, Juarez Cartel, and various factions of the Los Zetas Cartel are responsible for the majority of remaining drug trafficking activity in the Midwest HIDTA region. The CJNG is based in the Mexican state of Jalisco and distributes large quantities of methamphetamine, fentanyl, heroin, and cocaine.³⁹ The Los Zetas and Cartel del Noreste—the most prominent faction of the Los Zetas Cartel—are based in northeastern Mexico and traffic a variety of illicit drugs through the southwest border of the U.S.³⁹ The Juarez drug cartel is based in the Mexican state of Chihuahua and is primarily involved in the trafficking of heroin, methamphetamine, marijuana, and cocaine.³⁹ Table 17 lists the major Mexican cartel threats to the Midwest HIDTA region in 2021.

Table 17. Mexican Cartel Threats to the Midwest HIDTA Region.⁷

Cartel Threats to the Midwest HIDTA, According to Law Enforcement Initiatives	
Primary Cartel Threats	Secondary Cartel Threats
Sinaloa Cartel	Los Zetas (various factions)
Cartel Jalisco Nueva Generación	Gulf Cartel
Juarez Cartel	Beltrán Leyva Organization

^m At the time of this report, the 2021 National Drug Threat Assessment was not yet released.

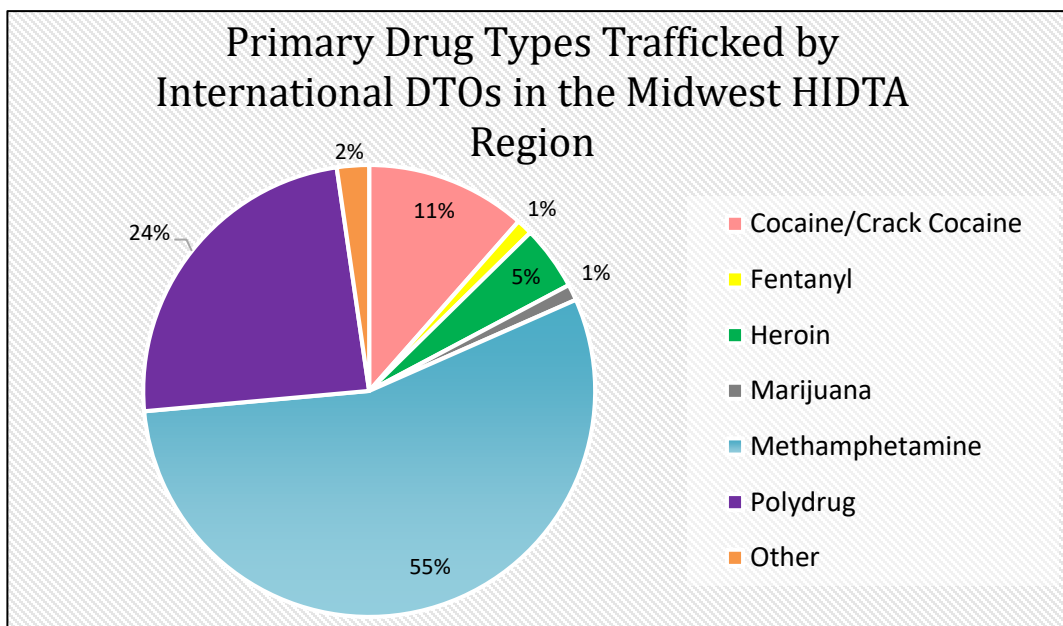
In addition to Mexican cartels, 33 percent of international DTOs within the Midwest HIDTA region have documented affiliations with gangs. The Bloods, Crips, Gangster Disciples, Latin Kings, Aryan Brotherhood, MS-13, and Sureños street gangs have all been identified by law enforcement initiatives as participating in drug trafficking activities with international DTOs in the Midwest region. The Hells Angels, Bandidos, Galloping Goose, Mongols, Outlaws, Pagans and Sons of Silence outlaw motorcycle groups were also identified by initiatives as coordinating drug trafficking activities with international DTOs in the region.

C. Activities and Methods

Seventy-three percent of the Midwest HIDTA region’s international DTOs engaged in money laundering activities, according to law enforcement initiatives. The top two money laundering methods utilized by international DTOs in the region are bulk cash smuggling and money remittances. Fifty-six percent of initiatives indicated that bulk cash smuggling was used at a high level by international DTOs, while 48 percent indicated that money remittances were highly utilized.

Twenty-four percent of all international DTOs within the Midwest HIDTA region were poly-drug trafficking organizations. Most poly-drug DTOs trafficked methamphetamine and/or cocaine. Seventy-six percent of international DTOs trafficked methamphetamine, including both single and poly-drug DTOs. Other primary drug types trafficked by international DTOs include cocaine (25 percent), heroin (20 percent), fentanyl (nine percent) and marijuana (eight percent), as well as various synthetics (including MDMA and anabolic steroids). Figure 17 shows the primary drug types trafficked by international DTOs identified as operating in the Midwest HIDTA region.

Figure 17. Primary Drug Types Trafficked by International DTOs Identified as Operating in the Midwest HIDTA Region.⁹



3. Multi-State Drug Trafficking Organizations

A. Overview

Multi-state DTOs are the most common DTO type encountered by Midwest HIDTA law enforcement initiatives. A total of 451 multi-state DTOs were identified as operating in the Midwest HIDTA region in 2021.⁹ Error! Bookmark not defined. According to 20 percent of law enforcement initiatives, California was the state most affiliated with multi-state DTOs. Arizona, Colorado, and Texas were the other states most closely tied to multi-state DTOs in the region. Midwest HIDTA initiatives identified 656 leaders and 4,472 other members. According to 56 percent of law enforcement initiatives, at least one multi-state DTO within their AOR had a connection to a Mexican cartel. This connection typically involves the use of a cartel member as a source of supply. Table 18 shows the characteristics of multi-state DTOs identified as operating in the Midwest HIDTA region in 2021.

*Table 18. Multi-State DTOs Identified as Operating in the Midwest HIDTA Region.*⁹

Multi-State DTOs Identified by Midwest HIDTA Initiatives	
Characteristics	
Total Multi-State DTOs	451
- California	126
- Illinois	76
- Iowa	52
- Arizona	45
- Colorado	39
- Missouri	39
- Texas	27
Total Members (Leaders)	4,472 (656)
Average DTO Size	11.37
Multi-ethnic	214
Gang Related	109
Violent	171
Poly-drug	130
Money Laundering Activities	56
Federal Case Designations	
OCDETF	62
CPOT	6
RPOT	1
PTO	68

B. Affiliations and Membership

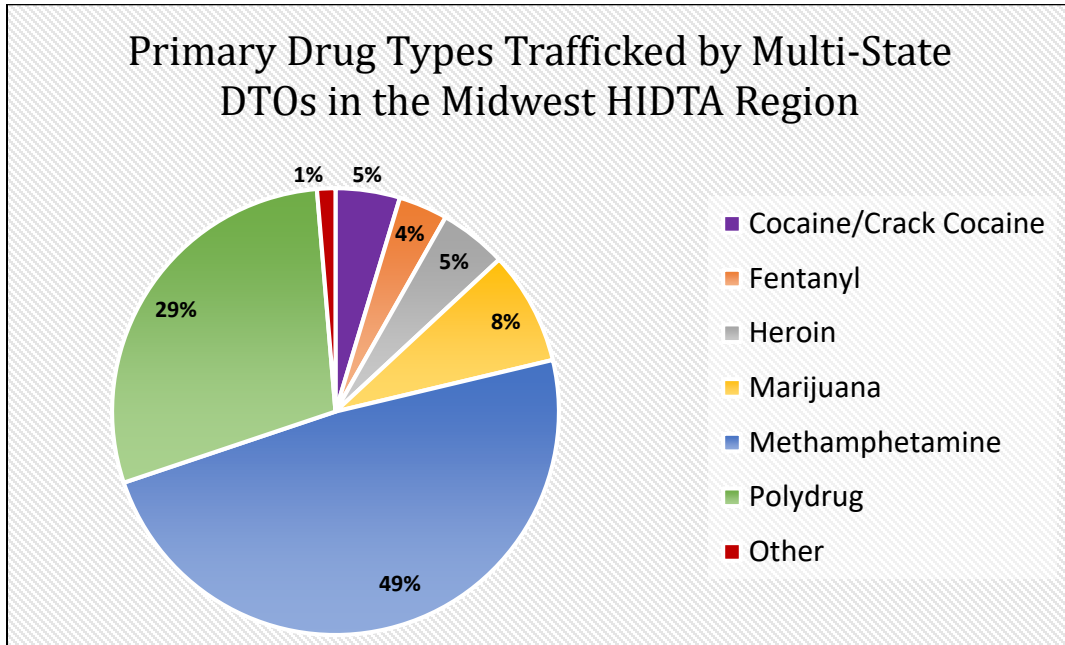
Multi-state DTOs in the Midwest HIDTA region have an average of 11 members per organization, including one leader and ten additional members, the same as local DTOs. This is slightly lower than the average identified membership of international DTOs that operate within the region. PMP data states that 38 percent of multi-state DTOs in the Midwest HIDTA region were identified as violent and that 24 percent have connections to gangs. A higher percentage of Missouri-based multi-state DTOs were identified as being either violent (62 percent) or associated with gangs (41 percent) than any other state in the region. According to law enforcement initiatives, multi-state DTOs operating within the region are linked to nationally-affiliated street gangs, including the Bloods, Crips, Gangster Disciples, Latin Kings, and MS-13. They are also linked to outlaw motorcycle gangs, including the Bandidos, Galloping Goose, Hells Angels, Mongols, and Sons of Silence.

C. Activities and Methods

Although only 10 percent of multi-state DTOs were identified through PMP data as conducting money laundering activities, 73 percent of law enforcement initiatives reported that multi-state DTOs within their AOR conducted money laundering activities. Similar to international DTOs, the top money laundering methods utilized by multi-state DTOs in the Midwest HIDTA region are bulk cash smuggling and money remittances. Three-quarters of initiatives indicated that multi-state DTOs used bulk cash smuggling at a high level and 43 percent indicated multi-state DTOs in their AORs use money remittances at a high level.

Twenty-nine percent of multi-state DTOs operating in the region were identified as poly-drug trafficking organizations. Methamphetamine trafficking organizations accounted for 49 percent of multi-state DTOs operating in the Midwest HIDTA region, the highest percentage of any drug type. Other primary drug types trafficked by multi-state DTOs operating in the region include marijuana (eight percent), heroin (five percent), cocaine (five percent), and fentanyl (four percent). Multi-state DTOs are responsible for more marijuana trafficking than any other DTO type. Most of the marijuana in the Midwest HIDTA region is transported in from Western states with recreational and medical marijuana programs (e.g. California, Colorado). Figure 18 shows the primary drug types trafficked by multi-state DTOs identified as operating in the Midwest HIDTA region.

Figure 18. Primary Drug Types Trafficked by Multi-State DTOs Identified as Operating in the Midwest HIDTA Region.⁹



4. Local Drug Trafficking Organizations

A. Overview

Local DTOs were the second most encountered DTO type encountered by Midwest HIDTA law enforcement initiatives, behind multi-state DTOs. A total of 277 local DTOs were identified as operating in the Midwest HIDTA region in 2021.⁹ Of the local DTOs, Midwest HIDTA initiatives identified 440 leaders and 2,663 members. Approximately 58 percent of initiatives indicated that local DTOs within their AORs are known to have connections to Mexican drug cartels.⁹ As with other DTO types, the Sinaloa cartel is most often connected to local DTOs. Other cartels associated with local DTOs as reported by initiatives were the CJNG, Juarez Cartel, Gulf Cartel, the Knights Templar, Los Zetas, and the BLO. Table 19 lists the traits of local DTOs within the Midwest HIDTA region in 2021.

Table 19. Local DTOs Identified as Operating in the Midwest HIDTA Region.⁹

Local DTOs Identified by Midwest HIDTA Initiatives	
Characteristics	
Total Local DTOs	277
Total Members (Leaders)	2,663 (440)
Average DTO Size	11.20
Multi-ethnic	86
Gang Related	89
Violent	132
Poly-drug	61
Money Laundering Activities	35
Federal Case Designations	
OCDETF	20
CPOT	1
RPOT	0
PTO	27

B. Affiliations and Membership

Local DTOs operate within each state of the Midwest HIDTA region. Eighty-seven percent of law enforcement initiatives indicated that local DTOs were operating within their AORs. Midwest HIDTA initiatives identified 2,663 members and 440 leaders belonging to local DTOs, with an average of 11.2 members per organization.

More than half (58 percent) of Midwest HIDTA initiatives reported that local DTOs within their AOR were affiliated with Mexican drug cartels. The Sinaloa Cartel and the CNJG were the most cited Mexican cartels affiliated with local DTOs. Other cartels affiliated with local DTOs include the Juarez Cartel, the Gulf Cartel, the Knights Templar, Los Zetas, and the BLO.

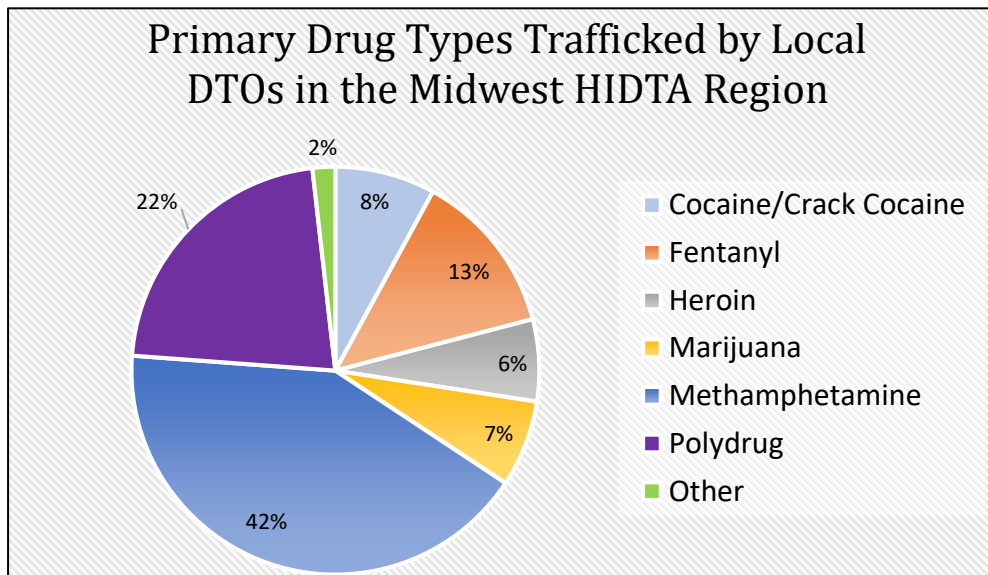
According to data from the PMP, 48 percent of local DTOs operating in the Midwest HIDTA region were identified as violent. Thirty-two percent of local DTOs had connections to street and outlaw motorcycle gangs. Local DTOs based in Missouri were affiliated with more violence and gang activity than any other state in the Midwest HIDTA region. According to data from the PMP, local DTOs coordinated criminal activities with nationally-affiliated street gangs such as the Bloods, Crips, Sureños, Tango Blast, Latin Kings, and Gangster Disciples. Furthermore, many local DTOs collaborate with localized street gangs that have no national affiliation. These neighborhood-based street gangs are believed to have greater nexus to drug trafficking and violence in the Midwest HIDTA region than nationally-affiliated street gangs. Hells Angels, Sons of Silence, Bandidos, Mongols, El Foresteros, Galloping Goose, and Saddle Tramps OMGs are believed to be affiliated with local DTOs within the Midwest HIDTA region.

C. Activities and Methods

Similar to the PMP results for other DTO types, only 13 percent of local DTOs within the Midwest HIDTA region were connected to money laundering activities. However, 68 percent of LES respondents stated that local DTOs within their AORs engaged in money laundering activities. Bulk cash smuggling, money remittances, and online payment systems (e.g., CashApp, PayPal, Venmo) were the top money laundering methods utilized by local DTOs.

Methamphetamine trafficking organizations accounted for 42 percent of local DTOs operating in the Midwest HIDTA region. Twenty-two percent of local DTOs were identified by Midwest HIDTA initiatives as poly-drug trafficking organizations. Other primary drug types trafficked by local DTOs include fentanyl (13 percent), cocaine/crack (eight percent), marijuana (seven percent), and heroin (six percent). Figure 19 shows the primary drug types trafficked by local DTOs identified as operating in the Midwest HIDTA region.

Figure 19. Primary Drug Types Trafficked by Local DTOs Identified as Operating in the Midwest HIDTA Region.⁹



5. Intelligence Gaps

- What methods and recruitment strategies do local DTOs use in order to recruit drivers to transport drugs?
- What is the true extent of cartel associations to Midwest HIDTA-based DTOs?
- Beyond acting as the source of supply, how involved are Mexico-based DTOs with street gangs and outlaw motorcycle gangs in the Midwest HIDTA region?

6. Source Considerations

There were several sources consulted in the development of the DTO section of the 2022 Midwest HIDTA Threat Assessment. These sources include Midwest HIDTA PMP data, law enforcement initiative responses to the 2022 LES, Midwest HIDTA Task Force Commander interviews, the DEA's 2020 National Drug Threat Assessment, and the National Drug Intelligence Center's 2011 National Drug Threat Assessment.

VI. Money Laundering Organizations

A. Overview

Three money laundering organizations (MLOs) were identified within the Midwest HIDTA region in 2021, according to PMP data. Most DTOs operating in the Midwest HIDTA region conduct their own money laundering activities without the use of separate and distinct MLOs. Only seven percent of LES respondents claimed that MLOs existed within their AOR which were not a part of a DTO. Of that percentage, the MLOs were described as both international in scope and multi-state. Only one respondent claimed the presence of local MLOs within their AORs.⁹

Bulk cash smuggling, money remittances, online payment systems (e.g. CashApp, PayPal, Venmo), and prepaid cards were the most-utilized money laundering techniques by Midwest HIDTA-based MLOs.

Table 20. Money Laundering Organizations Identified as Operating in the Midwest HIDTA Region, according to 2020 PMP Data.⁹

Money Laundering Organizations Identified by Midwest HIDTA Initiatives			
Total Identified	International	Multi-State	Local
<i>3</i>	<i>0</i>	<i>2</i>	<i>1</i>

B. Affiliations and Membership

Mexico was the primary country affiliated with international MLOs. China and Hong Kong were also affiliated with international DTOs, but to a lesser extent. Initiatives reported that the international MLOs were linked to Mexican drug cartels, primarily the Sinaloa and Gulf Cartels. Of the two multi-state MLOs reported in the PMP, one listed Massachusetts and New York as source states and the second listed its source state as unknown. Of the three initiative responses to the LES that reported the presence of multi-state MLOs in their areas, New York and California were the top affiliated states. These groups allegedly have ties to Sinaloa, Gulf, and Juarez Cartels.

C. Activities and Methods

MLOs operating within the Midwest HIDTA region often use the same methods and trafficking routes for money laundering as DTOs do for drug trafficking. The heavy utilization of bulk currency smuggling, money remittances, and stored value cards by the region's MLOs corroborate this. MLOs capitalize on the Midwest HIDTA region's extensive interstate system by smuggling large volumes of cash to criminal elements across or outside of the region using privately owned or commercial vehicles on interstates or U.S. highways. Money remittance services are also highly utilized, with individuals in the Midwest HIDTA region transferring proceeds from illicit activity to their associates in foreign countries. Both DTOs and MLOs also

use casinos to launder money, though typically in smaller amounts (i.e. structuring) to avoid transaction reports.

D. Intelligence Gaps

- How prevalent is cryptocurrency use by MLOs within the Midwest HIDTA region?
- What is the true number of organizations within the Midwest HIDTA whose sole purpose is to launder money?
- Are identified MLOs in reality engaged in drug trafficking or other criminal ventures?

E. Source Considerations

There were three sources consulted in the development of the MLO section of the 2022 Midwest HIDTA Threat Assessment. These sources are Midwest HIDTA PMP data, law enforcement initiative responses to the 2022 LES, and Midwest HIDTA Task Force Commander interviews.

VII. Drug-Related Overdose Fatalities in the Midwest HIDTA Region

1. Centers for Disease Control and Prevention's (CDC) WONDER Data

Data collected from the CDC WONDER database illustrates that the Midwest HIDTA region experienced a 13 percent increase in drug-related overdose fatalities from 2020 to 2021.⁴⁰ There was a nine percent increase in drug overdose deaths across the U.S. as a whole during the same period. States within the Midwest HIDTA region reported 3,392 drug overdose deaths in 2021, up from 2,990 in 2020. Kansas experienced the most significant rise in drug overdose deaths in the region during this time, an increase of approximately 35 percent. The Midwest HIDTA utilized CDC WONDER data in this section because overdose death data reporting is not standardized across the states, which makes it difficult to accurately compare one state to another. Table 21 shows the change in the number of drug overdose deaths across the Midwest HIDTA region from 2020 to 2021.

Table 21. Drug Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021.⁴⁰

Drug Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021			
	2020	2021 (Provisional)	Percent Change 2020 to 2021
Iowa	383	417	+ 9 percent
Kansas	433	584	+ 35 percent
Missouri	1,804	2,039	+ 13 percent
Nebraska	200	195	- 3 percent
North Dakota	102	88	- 14 percent
South Dakota	68	69	+ 1 percent
All Midwest HIDTA states**	2,990	3,392	+ 13 percent

*These numbers reflect ICD-10 Codes: T36-T42, T44-T50.
 **The sum of the overdose deaths for specific drug categories may exceed the total overdose deaths in this table as more than one drug may be present in an overdose death case.

Table 22. Cocaine Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021.⁴⁰

Cocaine Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021			
	2020	2021 (Provisional)	Percent Change 2020 to 2021
Iowa	33	39	+ 18 percent
Kansas	48	81	+ 51 percent
Missouri	243	310	+ 28 percent
Nebraska**	--	17	--
North Dakota**	--	--	--
South Dakota***	5	5	+/- 0 percent
All Midwest HIDTA states	324	447	+ 38 percent

*These numbers reflect ICD-10 code T40.5
 **Data suppressed by CDC WONDER.
 ***Data suppressed, but obtained via state request.

Cocaine overdose death data was not available for every state within the region. As a result, the percentage change for 2020 and 2021 represents only Iowa, Kansas, Missouri, and South Dakota. Iowa, Kansas, and Missouri all reported an increase in the number of cocaine-related overdose deaths, while South Dakota reported no change from the previous year.

Table 23. Psychostimulant Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021.⁴⁰

Psychostimulant Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021			
	2020	2021 (Provisional)	Percent Change 2020 to 2021
Iowa	213	238	+ 12 percent
Kansas	238	339	+ 42 percent
Missouri	719	869	+ 21 percent
Nebraska	77	76	- 1 percent
North Dakota	37	47	+ 27 percent
South Dakota	35	60	+ 71 percent
All Midwest HIDTA states	1,139	1,629	+ 24 percent
*These numbers reflect ICD-10 code T43.6 and include: Adderall (dextroamphetamine), Ritalin (methylphenidate), and other amphetamine-type stimulants (methamphetamine, etc.)			

Not only did past-year deaths involving psychostimulants increase 24 percent across the Midwest HIDTA region, they increased within every state as well. Although methamphetamine does not have its own ICD-10 code and is combined within the psychostimulant category, deaths from methamphetamine are expected to continue rising with both the increase in users and the increasing prevalence of fentanyl within the region's methamphetamine supply. Table 23 shows the change in psychostimulant overdose deaths across the Midwest HIDTA region from 2020 to 2021.

Table 24. Opioid Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021.⁴⁰

Opioid Overdose Deaths in the Midwest HIDTA Region, 2020 and 2021			
	2020	2021 (Provisional)	Percent Change 2020 to 2021
Iowa	235	262	+ 11 percent
Kansas	278	421	+ 51 percent
Missouri	1,428	1,615	+ 13 percent
Nebraska	107	118	+ 10 percent
North Dakota	72	59	- 18 percent
South Dakota	48	46	- 4 percent
All Midwest HIDTA states	2,168	2,521	+ 16 percent
*These numbers reflect ICD-10 codes T40.0-T40.4, T40.6.			

Opioid overdose deaths for the entire Midwest HIDTA region increased 16 percent from 2020 to 2021. The number of opioid overdose deaths increased in Iowa, Kansas, Missouri, and Nebraska, while North and South Dakota reported decreases in the number of opioid overdose

deaths. Kansas experienced the greatest rise in opioid overdose deaths with an increase of 51 percent. Table 24 shows information on opioid overdose deaths in the Midwest HIDTA region from 2020 to 2021.

The CDC estimates that 70 percent of all drug overdose deaths nationwide involve opioids.⁴¹ Using the most recent CDC WONDER data, the Midwest HIDTA assesses that the regional increase in drug overdose deaths is primarily attributable to opioid and psychostimulant abuse. The increasing availability and potency of both psychostimulants and synthetic opioids in the Midwest HIDTA has significantly contributed to both fatal and non-fatal overdose statistics. Synthetic opioids continue to be mixed with other drugs, often unbeknownst to users, which increase the chance of overdose. If synthetic opioids continue to be mixed with other illicit drugs, such as methamphetamine or cocaine, the number of drug overdose deaths will likely rise.

2. Intelligence Gaps

- Are psychostimulants alone responsible for the increasing numbers of overdose deaths involving psychostimulants, or is fentanyl more involved in these deaths than we realize?
- What impact has naloxone availability had on fatal and non-fatal overdoses in the Midwest HIDTA region?

3. Source Considerations

The drug-related overdose mortality section relied upon two data sources: the CDC WONDER dataset and the ONDCP's drug overdose dataset. The CDC WONDER dataset represents the most recent drug mortality data that the Midwest HIDTA is able to access for each of its six states. The Midwest HIDTA also utilized data from the South Dakota Department of Health that was requested for a previous project in order to fill in cocaine overdose death data for the state in 2020 and 2021.

VIII. Outlook

The Midwest HIDTA region serves as an attractive area for drug trafficking and money laundering organizations because of its extensive transportation network, varied demographics, substantial population, and centralized geography. For these reasons, the Midwest HIDTA region serves as the principal transit corridor for drug trafficking between the east and west coasts of the United States. The Midwest HIDTA, having herein presented the drug threat status in this region, provides its assessment of what is expected to occur within the next year.

The Midwest HIDTA assesses with a high degree of confidence that:

- ❖ Increased drug production in Mexico and South America will result in higher levels of drug availability in the Midwest. The inextricable link between drug availability and use will ultimately lead to increased levels of drug-related crime throughout the region.
- ❖ Methamphetamine will continue to pose the greatest threat to the region with its high levels of availability, demand, use, and transportation. Low-cost, high potency methamphetamine transported from the Southwest Border will continue to saturate both rural and metropolitan drug markets. The level of violence and crime surrounding methamphetamine production, trafficking, and use will remain a threat to both law enforcement and the public.
- ❖ Heroin and synthetic opioids will remain a major threat to the Midwest region as fentanyl and its analogs increasingly taint drug supplies. Opioid-related overdose deaths will likely increase if their availability and use remain high and counterfeit CPDs continue to flood illicit drug markets.
- ❖ The availability, demand, use, and transportation of marijuana will increase as the medical marijuana programs of Missouri, North Dakota, and South Dakota, and the recreational marijuana program of Illinois mature. The Midwest will continue to see high levels of marijuana trafficked in if more states within the U.S. approve recreational marijuana laws.
- ❖ Mexico-based DTOs will remain the primary suppliers of methamphetamine, heroin and synthetic opioids, cocaine, and counterfeit prescription drugs. Mexican cartels and their affiliated DTOs will continue to expand their influence in the region's illicit drug trade as they increasingly control each stage of the drug distribution process.
- ❖ The use of mailing services by DTOs to smuggle illicit drugs will increase as criminals realize the decreased risk of detection and anonymity that accompany this technique over traditional transportation methods.
- ❖ The use of encrypted mobile applications (e.g. WhatsApp, Signal) and social media platforms (e.g. Facebook Messenger, Snapchat) will be increasingly used by both DTOs and MLOs to avoid law enforcement interception of group communications.

IX. Appendices

Appendix I: Methodology

The 2022 Midwest HIDTA Threat Assessment addresses the current drug threat within the region. The Midwest HIDTA Strategic Intelligence Program prepared the Threat Assessment. Both quantitative and qualitative data were utilized to complete the Threat Assessment. The Threat Assessment process began with the development of a Law Enforcement Survey and Public Health Survey. The surveys were created to assess the drug threat in the Midwest HIDTA region and to fulfill ONDCP annual reporting requirements. The LES was sent to all HIDTA enforcement and intelligence initiatives, while the PHS was sent to its public health partners across the Midwest region. Survey respondents were able to choose between two response mechanisms: an online survey or an electronic fillable PDF survey. Respondents were asked to consider only their initiative's AORs when responding to survey questions. The results of the survey, combined with information from other data sources, were used to form the Midwest HIDTA Threat Assessment. Additional informational sources that were utilized to develop the Threat Assessment include: CDC WONDER data, DEA's *National Drug Threat Assessment*, EPIC, PMP data, SAMHSA's *NSDUH*, SAMHSA's TEDS dataset, the UNODC's 2021 World Drug Report, CBP Seizure Data, and information from the U.S. Census Bureau.

The assessment of the drug threat in the Midwest HIDTA region was made while considering limitations of data sources utilized. For example, the survey was only disseminated to Midwest HIDTA enforcement and intelligence initiatives and may not represent the illicit drug threat outside of those areas represented by Midwest HIDTA initiatives. This is also true for PHS respondents, as we are not in contact with every agency. However, HIDTA initiatives have been established in areas of the region that are believed to have the greatest drug threats. Likewise, PMP data is obtained only from HIDTA initiatives. Quantitative data reported in the Threat Assessment was obtained on the following dates: PMP (MLO-related information) – March 2, 2022; PMP (DTO-related information) – March 2, 2022; PMP (drug seizure-related information) – March 2, 2022. The information provided by these sources, though incomplete, provides an important perspective into Midwest HIDTA regional drug threats and any DTO/MLO presence in 2022. An explanation of primary sources utilized to develop the Threat Assessment is provided below.

Appendix II: Explanation of Sources

Office of National Drug Control Policy (ONDCP) Performance Management Process (PMP) Data-

A component of the Executive Office of the President, ONDCP was created by the Anti-Drug Abuse Act of 1988. ONDCP advises the President on drug-control issues, coordinates drug-control activities and related funding across the Federal government, and produces the annual National Drug Control Strategy, which outlines Administration efforts to reduce illicit drug use, manufacturing and trafficking, drug-related crime and violence, and drug-related health consequences. PMP data contains information related to drug seizures, drug trafficking organizations (DTOs), and money laundering organizations (MLOs) known to operate in the HIDTA region. At least quarterly, each HIDTA funded task force and HIDTA are required to update the PMP database with information regarding seizures of drugs and drug-related assets, as well as changes in the status of a DTO/MLO, including when a DTO/MLO has been disrupted or dismantled.

Centers for Disease Control and Prevention (CDC) Injury Center Drug Overdose Deaths – This dataset is updated annually by the CDC. The data captures drug-specific overdose death data using the International Classification of Diseases, Tenth Revision (ICD-10). Drug-poisoning deaths are identified using underlying cause-of-death codes T36-T42 and T44-T50.

El Paso Intelligence Center (EPIC) National Seizure System (NSS) – NSS is an EPIC-managed repository for seizure information from 2000 to the present containing drugs, weapons, and currency seized above federal threshold limits.

National Survey on Drug Use and Health (NSDUH) – Annual Survey used to obtain national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States. NSDUH is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency of the U.S. Public Health Service in the U.S. Department of Health and Human Services (DHHS).

Midwest HIDTA Law Enforcement Survey (LES) – Annual Survey administered by the Midwest HIDTA ISC and used to obtain information related to the various drug threats within the Midwest HIDTA region covering: specific threats, drug-related violence and crime, distribution, smuggling, money laundering, and drug trafficking organizations. Responses are collected from HIDTA funded task forces within the Midwest HIDTA region. There were 46 responses to this year's Midwest HIDTA Threat Assessment Survey. Appendix III lists the Midwest HIDTA initiatives who responded to the 2022 LES.

Midwest HIDTA Public Health Survey (PHS) – Midwest HIDTA administered this survey to public health agencies around the HIDTA to obtain information related to the various drug threats from a public health perspective in order to supplement LES data. There were 153 responses to this year's Midwest HIDTA PHS, listed in Appendix IV.

U.S. Customs and Border Protection (CBP) Drug Seizure Statistics – This data is publicly available via CBP’s public-facing website. This data represents the total weight of drug seizures interdicted at various ports of entry along the U.S. border. Drug seizure statistics are represented in pounds and may be refined using several filters.

United Nations Office on Drugs and Crime (UNODC) World Drug Report – This report provides an in-depth analysis of the global drug markets and paints a comprehensive picture of the amount of raw

Appendix III: Midwest HIDTA Initiatives

The following Midwest HIDTA initiatives are grouped according to the state in which they are located. Those marked with an * participated in the 2022 LES.

Illinois

Fairview Heights Drug and Crime Reduction Initiative
Quad Cities Metropolitan Enforcement Group*

Iowa

Cedar Rapids DEA Task Force*
Des Moines DEA Task Force*
Eastern Iowa Heroin Prevention
Iowa Interdiction Support*
Muscatine Drug Task Force*
Tri-State Sioux City DEA Task Force*

Kansas

Garden City-Finney County Drug Task Force*
Kansas City/Overland Park DEA Task Force*
Kansas Intelligence and Information Exchange*
Kansas Interdiction Support*
Northeast Kansas Drug Task Force*
Topeka DEA Task Force*
Wichita DEA Task Force*

Missouri

ATF Crime Gun Intelligence Center
Cape Girardeau DEA Drug Task Force*
Franklin County Narcotics Enforcement Unit*
Jackson County Drug Task Force*
Jasper County Drug Task Force*
Jefferson City DEA Task Force*
Jefferson County Municipal Enforcement Group*
Kansas City DEA Interdiction Task Force*
Kansas City DEA Northland Drug Task Force*
Kansas City FBI Combined Task Force*
Kansas City, Missouri Metro Task Force*
Midwest HIDTA ISC
Missouri Interdiction and Information Exchange*
Office of the Director
Regional Training
St. Charles County Drug Task Force*
St. Louis County Multi-Jurisdictional Drug Enforcement Task Force*
St. Louis County Multi-Jurisdictional Heroin Prevention Initiative
St. Louis DEA Intelligence Group* (Filled out one survey for all three St Louis DEA Initiatives)

St. Louis DEA Major Investigations/Conspiracy Group 37
St Louis DEA Regional Intercept Center
St. Louis DEA Violent Traffickers Task Force
St. Louis FBI Squad 5*
Southeast Missouri Drug Task Force*
Springfield DEA Task Force*
Technology Coordination

Nebraska

TRIDENT (Tri-City Drug Enforcement Team)*
C.O.D.E Task Force*
Greater Omaha Safe Streets Task Force*
Lincoln/Lancaster Drug Task Force*
Nebraska Interdiction Support*
Omaha ATF Illegal Firearms Task Force*
Omaha DEA Drug Task Force*
Omaha Metro Drug Task Force*
WING Drug Task Force*

North Dakota

Fargo DEA Task Force*
Grand Forks Narcotics Task Force*
Metro Area Narcotics Task Force*

South Dakota

Unified Narcotics Enforcement Team (UNET)*
Sioux Falls Drug Task Force*
South Dakota Interdiction Support*

Appendix IV: 2022 PHS Participating Agencies

The following agencies/organizations participated in the 2022 Midwest HIDTA PHS and are grouped according to the state in which they are located.

Iowa

Appanoose County Public Health	Manson Police Department
Area Substance Abuse Council (ASAC)	New Opportunities, Inc.
ASAC Jackson County Prevention Coalition	North Fayette Valley Community Coalition ODCP
ASAC King House	Pathways Behavioral Services
Burlington Police	Perry High School
CG Public Health	Prelude Behavioral Services
Children & Families of Iowa Domestic Violence Services	Rosecrance Jackson Recovery
Clinton Substance Abuse Council	Short Years Partnership
Community Youth Concepts	Sieda Community Action
Division of Criminal and Juvenile Justice	Stowe Heights Challenge Course
Drake University Head Start	Substance Abuse Services for Clayton County, Inc.
Employees and Family Resources	Van Buren County SAFE Coalition & Lee County The Best You Coalition
Helping Services for Youth & Families	Wayne County Home Care Aide Agency
Iowa Dept. of Public Health	ZION Integrated Behavioral Health Services
Iowa State University Extension & Outreach	Zion Recovery Services
Louisa-Muscatine Junior High	

Kansas

ABC Health Group	Marion County Sheriff's Office
Barber County Sheriff's Office	Marshall County Sheriff's Office
Barton County Health Dept.	Miracles, Inc.
Bert Nash CMHC	Mirror, Inc.
Butler County Sheriff's Office	Reno County Health Department
Center for Human Development	Reno County Sheriff's Office
Change Your Life Enterprises	Scott County Sheriff's Department
City of Cherryvale	Seventh Direction, Inc.
City On A Hill	Seward County Sheriff's Office
CKF Addiction Treatment	Therapy Services, LLC.
Community Health Center of SEK	Thrive Allen County
Corner House, Inc.	Wallace County Health Department
DCCCA Elm Acres Recovery Services	Wesley Medical Center
Dickinson County Sheriff's Office	Wichita Comprehensive Treatment Center
Heartland RADAC	Wyandot Center
Hunter Health	
Kansas Dept. of Health and Environment	

Missouri

Arthur Center	Jefferson City Missouri Police
Ascent Recovery Residences	JFCAC
Benilde Hall	Juvenile Office
Bootheel Counseling Services	KH-CAN
Burrell Behavioral Health	Life Continues, LLC.
City of Springfield	Mission Gate Christian Center
Clark Community Mental Health Center	Missouri Coalition of Recovery Support Providers
Compass Health Network	MO Bureau of Narcotics & Dangerous Drugs
Comprehensive Mental Health Services	MTHB
COMTREA	NBS
Cox Medical Center Branson	Ozarks Healthcare/BHC
CoxHealth Center for Addiction	Preferred Family Healthcare
Dallas County Health Department	Probation and Parole
Dismas House of Kansas City	Rediscover Mental Health
Excelsior Springs Fire Department	Rise and Shine Foundation, Inc.
Excelsior Springs SAFE	Southeast Missouri Behavioral Health
Family Guidance	Simmering Center, Inc.
FCC	Stone County Health Department
Gibson Recovery Center	Taney County ADAPT
Goliath House	Taney County Ambulance District
H.E.A.L.: Stop Heroin	Taney County Juvenile Office
Heartland Center for Behavioral Change	The Healing House & New Beginnings
HI-TECH Charities	Tri-County Mental Health Services
House of Hope/The Sanctuary of Hope	

Nebraska

ASAAP	Lincoln Public Schools
CNCAA	Nebraska Dept. of Health and Human Services
Community Connections	Region II Human Services
	Region V Systems

North Dakota

Grand Forks Public School District
Heart River Correctional Center
Trinity Addiction Services
University of North Dakota

Appendix V: State Maps

Individual state maps may be found in the following figures: Iowa may be found in Figure 20, Kansas in Figure 21, Missouri in Figure 22, Nebraska in Figure 23, North Dakota in Figure 24, and South Dakota in Figure 25. The Midwest HIDTA does not have a map for the three HIDTA-designated counties within Illinois. The maps include HIDTA designated counties, major highways and, in North Dakota’s case, the ports of entries shared with Canada.

Figure 20. Detailed Map of Iowa Depicting HIDTA Designated Counties and Major Highway Systems.

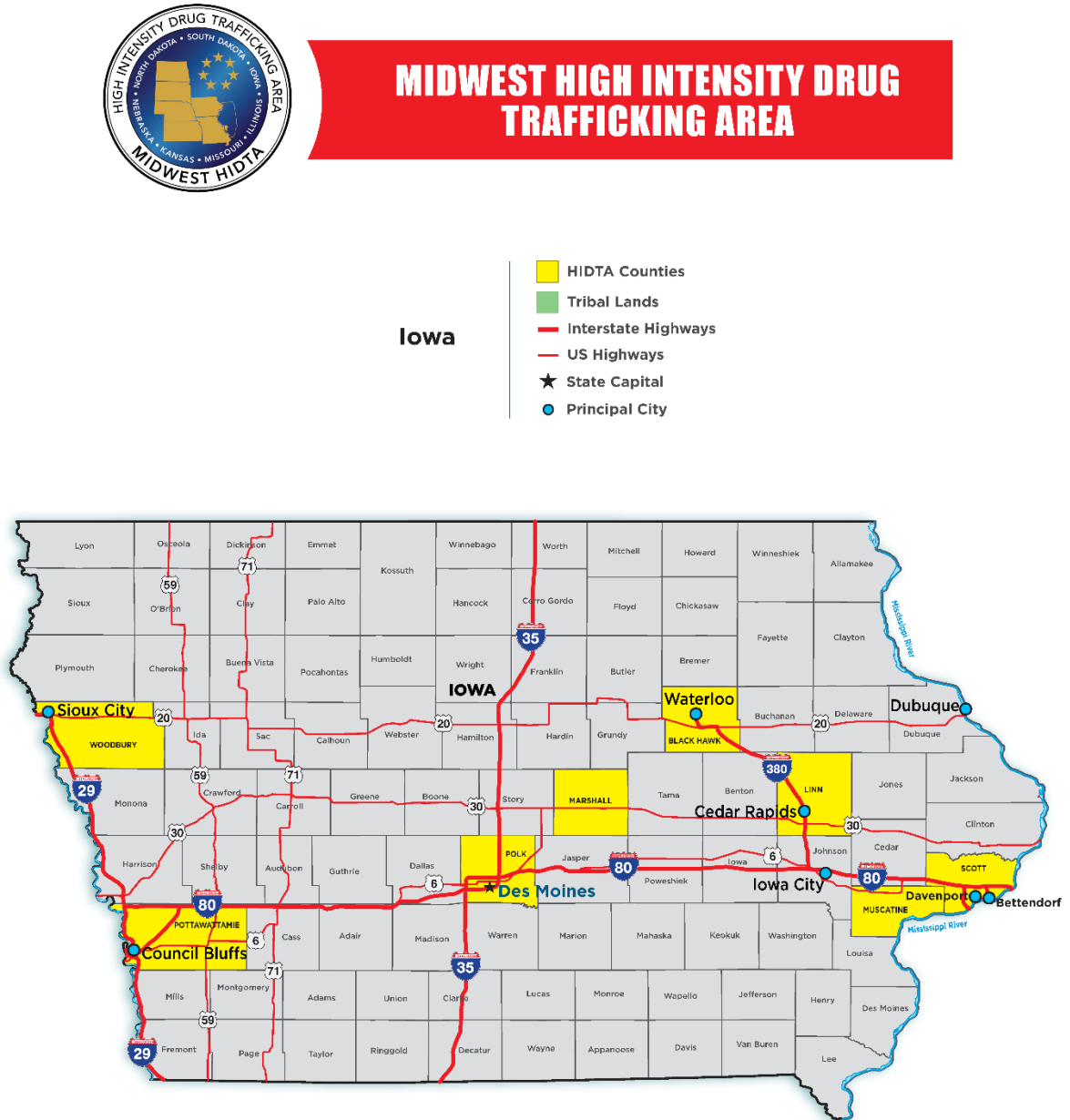


Figure 21. Detailed Map of Kansas Depicting HIDTA Designated Counties and Major Highway Systems.

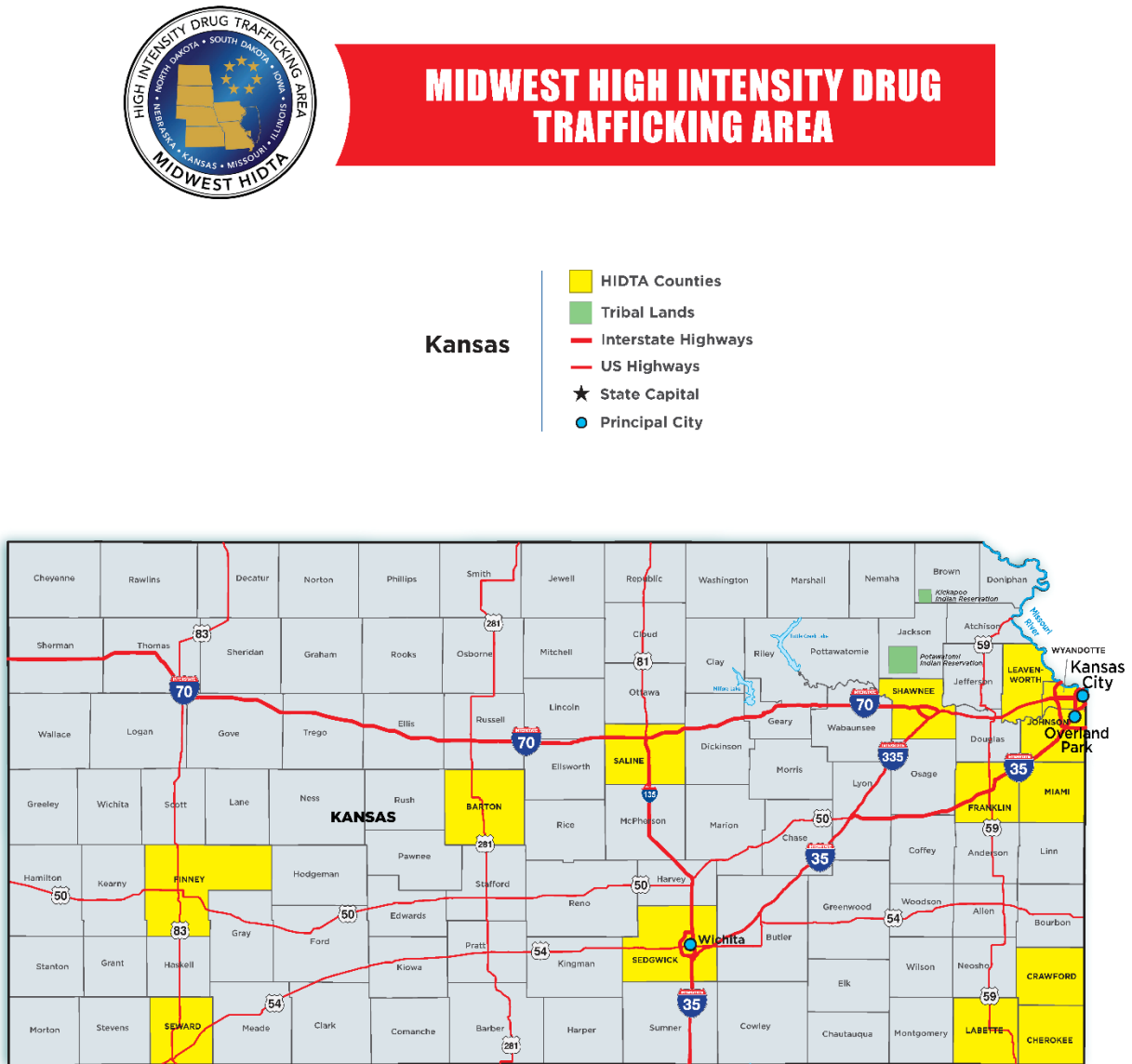


Figure 22. Detailed Map of Missouri Depicting HIDTA Designated Counties and Major Highway Systems.

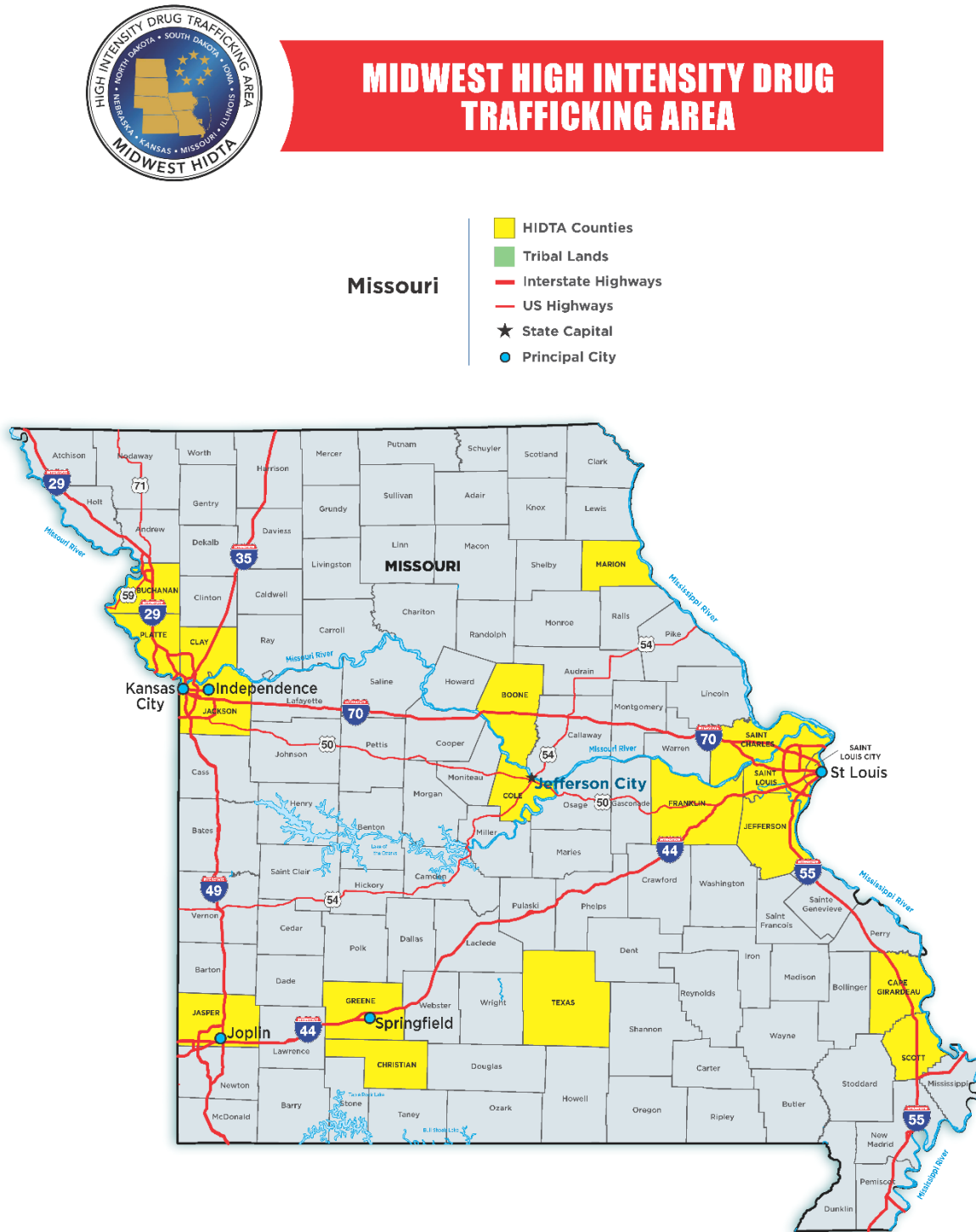
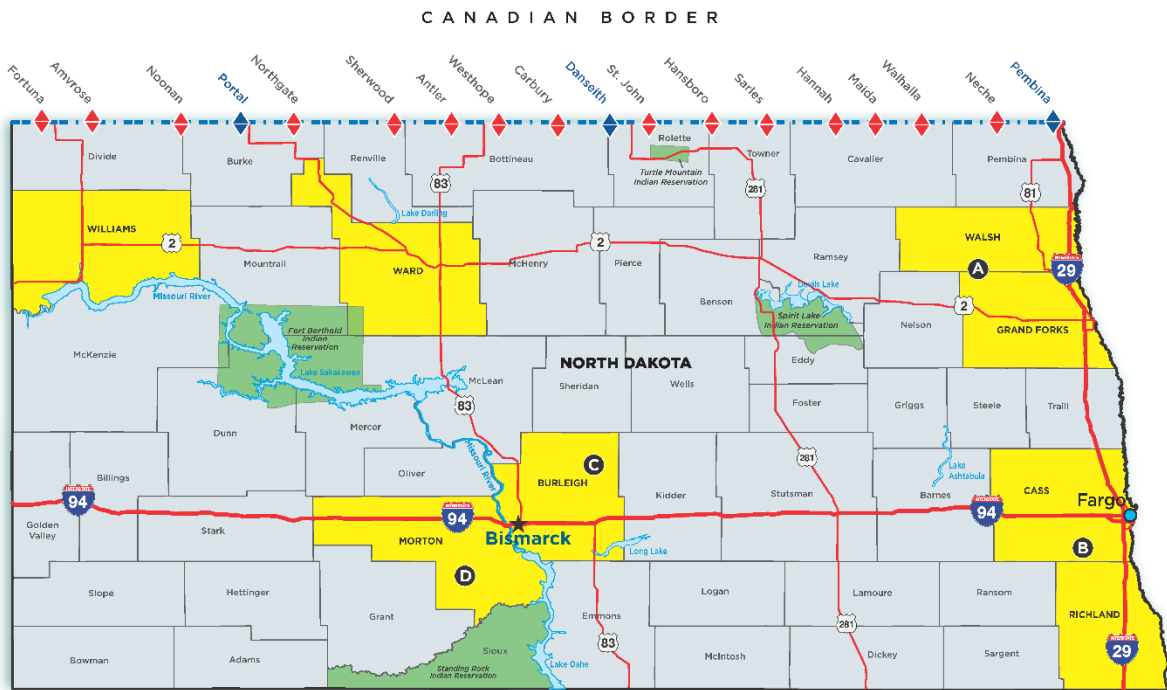


Figure 24. Detailed Map of North Dakota Depicting HIDTA Designated Counties, Ports of Entry with Canada, and Major Highway Systems.



MIDWEST HIGH INTENSITY DRUG TRAFFICKING AREA



North Dakota

- HIDTA Counties
- Tribal Lands
- Interstate Highways
- US Highways
- State Capital
- Principal City
- 24-Hr Port of Entry
- Port of Entry

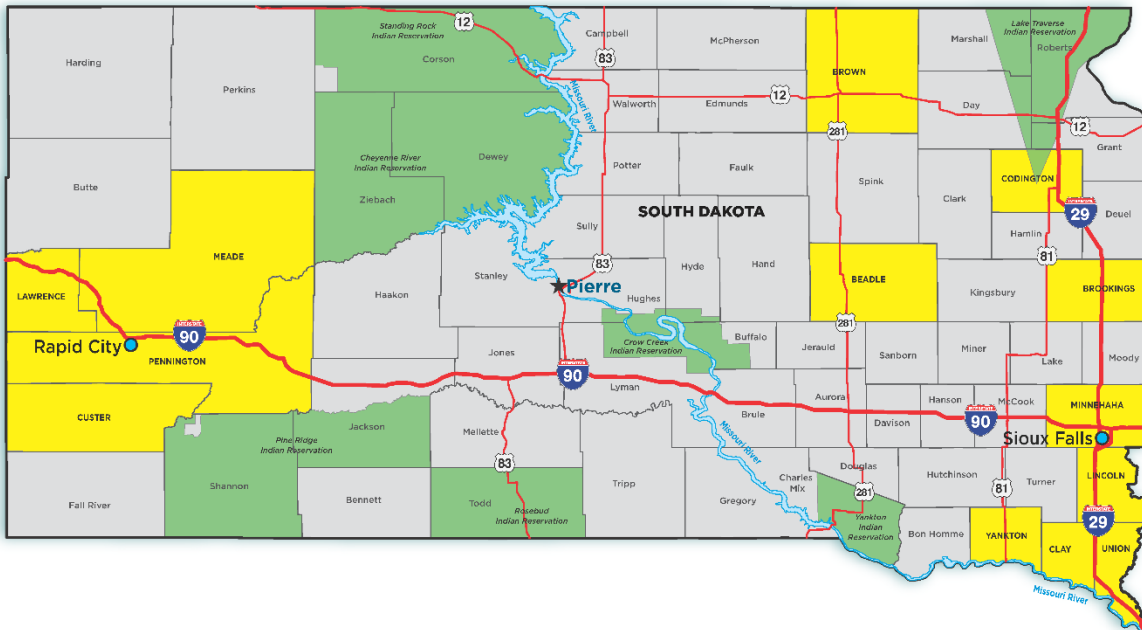
Figure 25. Detailed Map of South Dakota Depicting HIDTA Designated Counties and Major Highway Systems.



MIDWEST HIGH INTENSITY DRUG TRAFFICKING AREA

South Dakota

- HIDTA Counties
- Tribal Lands
- Interstate Highways
- US Highways
- ★ State Capital
- Principal City



Appendix VI: State-Level Data Tables

Table 25. LES and PHS: Greatest Drug Threats by State

Law Enforcement Survey: Top Drug Threats By State		
	Primary Threat	Secondary Threat
Illinois	Methamphetamine	Marijuana
Iowa	Methamphetamine	Heroin/Synthetic Opioids
Kansas	Methamphetamine	Heroin/Synthetic Opioids
Missouri	Methamphetamine	Heroin/Synthetic Opioids
Nebraska	Methamphetamine	TIED: Heroin/Synthetic Opioids Marijuana
North Dakota	Methamphetamine	TIED: Heroin/Synthetic Opioids Marijuana Methamphetamine
South Dakota	Methamphetamine	Marijuana
Public Health Survey: Top Drug Threats By State		
	Primary Threat	
Illinois	N/A	
Iowa	Methamphetamine	
Kansas	Methamphetamine	
Missouri	Heroin/Synthetic Opioids	
Nebraska	Marijuana	
North Dakota	TIED: Heroin/Synthetic Opioids, Methamphetamine	
South Dakota	N/A	

Table 26. LES: Drug Availability by State

Law Enforcement Survey: Level of Availability By State (LES)							
	Illinois	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
Cocaine	High	Moderate	Moderate	Moderate	Moderate	Moderate	Moderate
CPDs	High	Moderate-High	Moderate-High	High	High	High	Moderate
Heroin/Synthetic Opioids	High	High	High	High	High	High	High
Marijuana	High	High	High	High	High	High	High
Methamphetamine	High	High	High	High	High	High	High
NPSs	Moderate	Low	Unknown	Moderate	Low	Low	Low
ODDs	High	Moderate-Low	Unknown	Moderate	Moderate	Moderate	Low

Table 27. PHS: Level of Drug Use by State

PHS: Level of Use By State							
	Illinois	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
Cocaine	N/A	Low	Low	Low	Low	Low	N/A
CPDs	N/A	Moderate	Moderate	Moderate	Moderate	Moderate-Low	N/A
Heroin/Synthetic Opioids	N/A	Moderate	High	High	Low	High	N/A
Marijuana	N/A	High	High	High	High	High	N/A
Methamphetamine	N/A	High	High	High	High	High	N/A
NPSs	N/A	Unknown	Low	Low	Unknown	Low	N/A
Club Drugs	N/A	Unknown	Low	Low	Unknown	Low	N/A

Appendix VII: Drug Trafficking Organization Summary Table

Table 28. DTO Summary Table for All Identified DTOs Operating in the Midwest HIDTA.

Midwest HIDTA DTOs Identified in 2021	
Characteristics	
Identified	815
- International	87
- Multi-State	451
- Local	277
Total Members (Leaders)	8,032 (1,259)
Average DTO Size	11.4
Multi-ethnic	347
Gang Related	227
Violent	339
Poly-drug	212
Money Laundering Activities	112
Federal Case Designations	
OCDETF	104
CPOT	12
RPOT	3
PTO	121

Appendix VIII: Drug Trafficking Organization Summary Table by State

The individual DTO summary table for each state may be found in the following figures. Illinois may be found in Table 29, Iowa may be found in Table 30, Kansas in Table 31, Missouri in Table 32, Nebraska in Table 33, North Dakota in Table 34, and South Dakota in Table 35. The tables present information on the DTOs found in each state that were identified in 2021.

Table 29. DTO Summary Table for all DTOs Identified by Illinois.

Illinois DTOs Identified	
Characteristics	
Identified	42
- International	2
- Multi-State	33
- Local	7
Total Members (Leaders)	172 (42)
Average DTO Size	5.10
Multi-ethnic	4
Gang Related	5
Violent	12
Poly-drug	3
Federal Case Designations	
OCDEF	0
CPOT	0
RPOT	0
PTO	0

Table 30. DTO Summary Table for all Identified DTOs Operating in Iowa.

Iowa DTOs Identified	
Characteristics	
Identified	114
- International	6
- Multi-State	69
- Local	39
Total Members (Leaders)	773 (118)
Average DTO Size	7.82
Multi-ethnic	41
Gang Related	13
Violent	18
Poly-drug	16
Federal Case Designations	
OCDETF	13
CPOT	1
RPOT	0
PTO	21

Table 31. DTO Summary Table for all Identified DTOs Operating in Kansas.

Kansas DTOs Identified	
Characteristics	
Identified	65
- International	14
- Multi-State	28
- Local	23
Total Members (Leaders)	569 (133)
Average DTO Size	10.8
Multi-ethnic	27
Gang Related	13
Violent	27
Poly-drug	28
Federal Case Designations	
OCDETF	11
CPOT	1
RPOT	2
PTO	23

Table 32. DTO Summary Table for all Identified DTOs Operating in Missouri.

Missouri DTOs Identified	
Characteristics	
Identified	348
- International	30
- Multi-State	162
- Local	156
Total Members (Leaders)	4,167 (631)
Average DTO Size	13.79
Multi-ethnic	141
Gang Related	156
Violent	221
Poly-drug	114
Federal Case Designations	
OCDETF	58
CPOT	8
RPOT	0
PTO	12

Table 33. DTO Summary Table for all Identified DTOs Operating in Nebraska.

Nebraska DTOs Identified	
Characteristics	
Identified	114
- International	29
- Multi-State	51
- Local	34
Total Members (Leaders)	1,262 (179)
Average DTO Size	12.64
Multi-ethnic	55
Gang Related	28
Violent	38
Poly-drug	22
Federal Case Designations	
OCDETF	19
CPOT	1
RPOT	0
PTO	40

Table 34. DTO Summary Table for all Identified DTOs Operating in North Dakota.

North Dakota DTOs Identified	
Characteristics	
Identified	61
- International	2
- Multi-State	49
- Local	10
Total Members (Leaders)	634 (85)
Average DTO Size	11.78
Multi-ethnic	33
Gang Related	3
Violent	13
Poly-drug	14
Federal Case Designations	
OCDETF	1
CPOT	0
RPOT	0
PTO	25

Table 35. DTO Summary Table for all Identified DTOs Operating in South Dakota.

South Dakota DTOs Identified	
Characteristics	
Identified	71
- International	4
- Multi-State	59
- Local	8
Total Members (Leaders)	455 (71)
Average DTO Size	7.41
Multi-ethnic	46
Gang Related	9
Violent	10
Poly-drug	15
Federal Case Designations	
OCDETF	2
CPOT	1
RPOT	1
PTO	0

Appendix IX: Money Laundering Organization Summary Table

Table 36. MLO Summary Table for all Identified MLOs Operating in Illinois.

Illinois MLOs Identified	
Characteristics	
Identified	1
- International	0
- Multi-State	1
- Local	0
Total Members (Leaders)	4 (1)
Multi-ethnic	1
Gang Related	0
Violent	0
Federal Case Designations	
OCDETF	0
CPOT	0
RPOT	0
PTO	0

Table 37. MLO Summary Table for all Identified MLOs Operating in Missouri.

Missouri MLOs Identified	
Characteristics	
Identified	1
- International	0
- Multi-State	0
- Local	1
Total Members (Leaders)	21 (2)
Multi-ethnic	1
Gang Related	1
Violent	1
Federal Case Designations	
OCDETF	0
CPOT	0
RPOT	0
PTO	0

Table 38. MLO Summary Table for all Identified MLOs Operating in Kansas.

Illinois MLOs Identified	
Characteristics	
Identified	1
- International	0
- Multi-State	1
- Local	0
Total Members (Leaders)	6 (1)
Multi-ethnic	0
Gang Related	0
Violent	0
Federal Case Designations	
OCDETF	0
CPOT	0
RPOT	0
PTO	0

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