

EXECUTIVE SUMMARY

Florida's Drug Control Strategy has but one purpose — to protect our citizens from the dangers posed by illegal drugs. It presents a balanced plan that aims to bring down both the demand for and supply of illegal drugs in Florida by advancing policies and programs that support prevention and education, treatment, and law enforcement. Over the long term, its intent is to cut drug abuse in Florida by half.

This Strategy reflects the realities of illegal drug use in Florida. It is a principled approach, based on science, which sets the following major goals.

GOAL 1 Protect Florida's youth from substance abuse

GOAL 2 Reduce the demand for drugs in Florida

GOAL 3 Reduce the supply of drugs in Florida

GOAL 4 Reduce the human suffering, moral degradation, and social, health, and economic costs of illegal drug use in Florida

The Strategy supports the accomplishments of these goals with a number of related objectives (see Chapter 3). These objectives will be attained by implementing the policies and programs discussed in the following pages. The Strategy will assess its progress over time and adjust specific efforts accordingly. As such, the Strategy is a dynamic plan that will take account of changes in the environment in which it is applied, measure the degree of success or failure against specific targets, and redirect its effort as appropriate in order to achieve an end state of a 50 percent reduction in drug abuse in Florida. The specific targets are:

1. Reduce drug abuse in Florida by 2005 to 4% or less.
2. Reduce drug abuse by Florida's 6th through 12th grades as follows:
 - a. Cocaine, crack cocaine, and heroin to 1% or less
 - b. Ecstasy, GHB, Ketamine, and other "club drugs" to 3% or less
 - c. All drugs to 8% or less
 - d. Tobacco use to 14% or less; illegal sales to 8% or less
 - e. Alcohol use to 20% or less; illegal sales to 8% or less
3. Increase the average age of first-time drug use to 17 years or older by 2005.
4. Decrease drug abuse in the work place by 50% by 2005.
5. Reduce the number of chronic users of illicit drugs by 50% by 2005.
6. Reduce heroin, cocaine, and prescription overdose deaths by 50%.
7. Reduce the health costs associated with drug abuse by 25% by 2005.
8. Reduce the supply of illegal drugs in Florida by 33% by 2005.

The Strategy takes a holistic view. It reflects an understanding of the extent of the problem, endorses a cooperative effort between families, communities, and government, and integrates the resources of federal, state, and local agencies — both public and private. Finally, it reflects the will of the people of Florida and codifies into a single comprehensive plan their resolve that the damages inflicted upon Florida by the scourge of illegal drugs shall be undone.



FOREWORD

In the beginning of 1999, Florida undertook to decrease its illegal drug use by fifty percent, setting 2005 as its target year for the accomplishment of this goal. In September of 1999, after an intense study of the degree of demand for illegal drugs and the extent of the drug trade in Florida, the Governor published a strategy to accomplish that end, a strategy that used the three-pronged approach of reducing demand through prevention and treatment, and reducing supply through effective law enforcement. The Strategy was to serve as an active guide to the statewide effort by setting fixed objectives, outlining programs and policies that would allow us to achieve the objectives, and providing for accountable resourcing that would ensure steady and disciplined progress toward their accomplishment. The Strategy, in short, was conceived as a living document that would enable a measured approach to the lofty goal of cutting illegal drug use in Florida in half.

It was understood at the outset that a strategy, no matter how prescient, begins to age the moment it is produced. First of all, conditions change immediately as the strategy impacts on them, just as they may change irrespective of the strategy. Second, strategies are, by nature, steeped in supposition, a belief that if certain actions are taken, desired results will be achieved. The resulting combination of altered conditions and erroneous supposition necessitate an introspective approach to measuring effectiveness, a condition the Florida Drug Control Strategy set for itself at the outset.

As a part of this introspection and measurement, Florida has held a statewide drug summit for each of the past four years, where leaders in the field, as well as in government, came together to assess progress made and to determine next steps. This year, at the midpoint of the six-year timeline of the 1999 Florida Drug Control Strategy, the summit took an intense look at the degree to which the original strategy was working and to what extent it had to be revamped. This document is the result of that review.

The overall finding was that the Florida Drug Control Strategy was working and should remain in effect, but that in specific areas new trends and developments (i.e., changed conditions) necessitated modification of some parts of the strategy. In regard to the primary goal of reducing illegal drug use in Florida by 50 percent, both state and federal

data indicated that we not only are making steady progress, but are ahead of schedule for closing in on our target of no more than 4 percent “current use” (defined as at least one use in the past thirty days for the population 12 years of age and older). We had assessed our current use rate of 8.0 percent by the end of 1998. More recent surveys have measured that level as having decreased to 5.5 percent, or over 31 percent reduced since the inception of the strategy. To put it another way, with only half of the time expired, we are almost two-thirds of the way toward our goal. Similarly, we have seen strong reductions in youth use of hard drugs (e.g., cocaine, crack cocaine, heroin, and LSD), reversing trends that had shown alarming rise during the 1990’s.

But where our strategy has been effective overall, new developments necessitate refocusing in specific areas. For example, recent years have seen the further spread of a new genre of illegal drugs, the so called “club drugs” such as Ecstasy, GHB, GBL, and Ketamine. While the latter three still remain at less than one percent current use among youths aged 12 to 18, Ecstasy, currently held at 2.7 percent current use for 6th through 12th graders, threatens to break out unless contained. Seizure rates of Ecstasy have increased dramatically each year since 1999.

Most alarming has been the spread of illicit use of otherwise legal drugs. Deaths from prescription drugs have more than doubled in three of the last four six-month periods. It appears that many long term opiate addicts are turning to the synthetic narcotics found in legal drugs, finding ways to divert otherwise legal drugs for illicit use by defeating the timing release mechanism built into these drugs. At the other end of the spectrum, young people are experimenting with these potent drugs, quickly becoming addicted and, far too often, overdosing. New trends of drug abuse will require new methods of dealing with them.

And in the most recent election year cycles – 2000 and 2002 – self-proclaimed “drug policy reform groups” have attempted to introduce ballot initiatives in Florida that would move the state toward decriminalization of drug abuse and undermine major components of the drug control strategy. This year, for example, a major effort was mounted to foist a constitutional amendment that, under the guise of “treatment on demand,” would have detracted from major bona fide treatment programs Florida has advanced, while

at the same time confounding law enforcement activities to decrease drug abuse. Although both attempts failed, the backers have vowed to return to Florida in future election years to try again.

In other areas of the strategy, targets and objectives set in 1999 have not made significant progress and our efforts therein must be reassessed. Drug free workplaces, for example, have seen some expansion (and great results where they are in effect), but have not reached the levels originally foreseen. Front Porch communities, on the other hand, have expanded greatly and we should capitalize on their growth by integrating them further with community coalitions seeking to reduce drug abuse in their neighborhoods.

Accordingly, contained herein is the update of the Florida Drug Control Strategy. The bulk of this document is contained in Part II, the strategy as it was written in 1999. The principles, tenets, and guidelines found in those pages remain valid. The same is true for the vast majority of the goals and objectives and the programs and policies to achieve them. Therefore, the basic strategy as originally conceived remains in effect and is represented in its entirety.

Part I of this document, however, updates the latest trends in drug abuse in Florida, restates the major goals and objectives, adding to and refining them as appropriate and elaborates on specific initiatives that will enable us to achieve what we set out to do in the beginning, protect our citizens from the dangers posed by the abuse of drugs. We reaffirm the effectiveness of a balanced plan that seeks to bring down both the demand for and supply of illegal drugs through a combination of policies and programs that support prevention and education, treatment, and law enforcement. We aim to reduce drug abuse in Florida by the end of 2005 to 4% or less.

Florida Drug Control Strategy 1999-2005

Part I

Office of Drug Control
Executive Office of the Governor
State of Florida

