

U.S. Department of Justice National Drug Intelligence Center



Philadelphia/Camden High Intensity Drug Trafficking Area



Drug Market Analysis 2011

Source Summary Statement

The National Drug Intelligence Center (NDIC) has high confidence in this drug market analysis as it is based on multiple sources of information that have proved highly reliable in prior NDIC, law enforcement, and intelligence community reporting. Quantitative data, including seizure, eradication, and arrest statistics, were drawn from data sets maintained by federal, state, or local government agencies. Discussions of the prevalence and consequences of drug abuse are based on published reports from U.S. Government agencies and interviews with public health officials deemed reliable because of their expertise in the diagnosis and treatment of drug abuse. Trends and patterns related to drug production, trafficking, and abuse were identified through detailed analysis of coordinated counterdrug agency reporting and information. NDIC intelligence analysts and field intelligence officers obtained this information through numerous interviews with law enforcement and public health officials (federal, state, and local) in whom NDIC has a high level of confidence based on previous contact and reporting, their recognized expertise, and their professional standing and reputation within the U.S. counterdrug community. This report was reviewed and corroborated by law enforcement officials who have jurisdiction in the Philadelphia/Camden High Intensity Drug Trafficking Area and possess an expert knowledge of its drug situation.



U.S. Department of Justice National Drug Intelligence Center



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This assessment is an outgrowth of a partnership between the NDIC and HIDTA Program for preparation of annual assessments depicting drug trafficking trends and developments in HIDTA Program areas. The report has been coordinated with the HIDTA, is limited in scope to HIDTA jurisdictional boundaries, and draws upon a wide variety of sources within those boundaries.

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Philadelphia/Camden High Intensity Drug Trafficking Area



Executive Summary

The overall drug threat to the Philadelphia/Camden High Intensity Drug Trafficking Area (PC HIDTA) has intensified somewhat over the past year, resulting in several areas of growing concern for law enforcement and public health officials. Mexican drug trafficking organizations (DTOs) have increased their dominance over wholesale drug distribution in the region. Increased flow of cocaine, heroin, marijuana, and methamphetamine directly from the Southwest Border to the PC HIDTA region by Mexican traffickers has resulted in more stable and consistent availability of these drugs. For example, through the strength of direct Mexican DTO cocaine supply, Philadelphia has become one of the most prominent cocaine markets in the eastern United States. Additionally, the abuse of heroin and controlled prescription drugs (CPDs), primarily opioids, is increasing in the region, resulting in rising treatment admissions and overdoses.

Key issues identified in the PC HIDTA include the following:

- Mexican DTOs have become the dominant suppliers of most illicit drugs in the PC HIDTA region, supplanting Colombian DTOs in most areas.
- African American and Hispanic street gangs, the dominant retail-level distributors of illicit drugs in the PC HIDTA region, are expanding from inner-city locations to surrounding suburban and rural areas to increase their drug distribution operations.
- Heroin availability is high in the PC HIDTA region and is increasing in surrounding suburban and rural areas. The drug's high availability and low cost are enticing some prescription opioid abusers to switch to heroin.
- The diversion and abuse of CPDs, particularly opioid pain killers, pose significant and growing threats to the PC HIDTA region, including a rise in the number of violent and property crimes associated with the drugs.

Key Issues^a

Mexican DTOs have become the dominant suppliers of most illicit drugs in the PC HIDTA region, supplanting Colombian DTOs in most areas.

Mexican DTOs and criminal groups now control the wholesale illicit drug trade in the HIDTA region, having largely supplanted New York City-based Colombian DTOs.¹ This transition, which took place over the past few years, can be partially attributed to the Colombian DTOs "handing off" cocaine and heroin to Mexican DTOs outside the United States to insulate themselves from the risks associated with transporting the drugs into the country.² In establishing their dominance over wholesale drug distribution in the region, Mexican DTOs have increased the flow of cocaine, heroin, marijuana, and methamphetamine to the HIDTA region from Southwest Border states and distribution centers in Georgia (Atlanta) and North Carolina (Charlotte and Raleigh), ensuring more stable and consistent availability.³ For example, through the strength of direct Mexican DTO cocaine supply, Philadelphia has become one of the most prominent cocaine markets in the eastern United States.⁴ Philadelphia was the first cocaine market to report significant cocaine shortages in early 2007, a trend that spread nationally through 2007 and 2008 and persisted in several drug markets through 2010.⁵ Unlike many other U.S. drug markets, however, cocaine availability in Philadelphia has largely recovered and is sufficient to meet demand.⁶ In fact, Philadelphia was the first large cocaine market to recover after the 2007 cocaine shortages.⁷ However, prices for cocaine in Philadelphia remain higher than prices prior to the 2007 shortage.⁸ Over the past few years, Mexican DTOs have increased their drug trafficking activities in the region. By 2011, they were supplying hundreds of kilograms of cocaine and wholesale quantities of heroin, marijuana, and methamphetamine directly from the Southwest Border (or through Georgia or North Carolina) to African American, Asian, Caucasian, Dominican, Jamaican, and Puerto Rican DTOs, street gangs, and outlaw motorcycle gangs (OMGs) in the PC HIDTA region.⁹

Two Multimillion-Dollar Ice Methamphetamine Rings Dismantled in Philadelphia— One Investigation Leads to Another

Operation Mexican Ice—In June 2009, three men were arrested for their part in a \$2.5 million methamphetamine smuggling operation stretching from Mexico to Philadelphia. The investigation, Operation Mexican Ice, began in September 2008 and focused on the distribution of large quantities of ice methamphetamine in the Philadelphia area and southern New Jersey by members of a Mexican DTO. The methamphetamine originated in Mexico, was taken to Atlanta, and was then transported to Philadelphia, where members of the organization sold the drug to individuals throughout Philadelphia, Bucks County, Chester County, and New Jersey.

Operation Ice Breaker—In August 2009, authorities dismantled a major methamphetamine ring in Philadelphia, resulting in charges against 40 individuals. The 11-month investigation, Operation Ice Breaker, grew out of Operation Mexican Ice referenced above. Operation Ice Breaker also dismantled the hierarchy of a local motorcycle gang, the Outlaws (of the 40 individuals who were arrested, 15 were members of the Outlaws motorcycle gang).

Since the completion of the investigations, many of the individuals charged have pleaded guilty. In March 2011, two members of the Philadelphia Chapter of the Outlaws motorcycle gang went on trial in West Chester for their alleged role in the methamphetamine trafficking ring.

Source: Pennsylvania Attorney General, Press Releases.

a. For a general overview of the drug threat in the PC HIDTA region, see Appendix A.

African American and Hispanic^b street gangs, the dominant retail-level distributors of illicit drugs in the PC HIDTA region, are expanding from inner-city locations to surrounding suburban and rural areas to increase their drug distribution operations.

Some of the most significant gangs operating in the region are African American (primarily Bloods and Crips) and Hispanic (primarily Latin Kings, Mara Salvatrucha (MS 13), Netas, and Sureños).¹⁰ Many street gangs are supplied with wholesale quantities of illicit drugs by local Mexican DTOs and by some Hispanic gangs that have established direct sources of supply in Mexico or along the Southwest Border.¹¹ Aided by these reliable sources of supply, street gangs in the PC HIDTA region are expanding their drug operations and gaining control over distribution in smaller cities in eastern Pennsylvania, such as Allentown, Bethlehem, Easton, and Reading, and in suburban and rural areas such as Hazelton, Sunbury, and the Pocono Mountains area¹² (see Figure 1 on page 5). Law enforcement reporting indicates that these areas were previously supplied by local independent dealers or small local criminal groups, who are often intimidated by these gangs and cannot effectively compete with them.¹³ In Philadelphia, Latin Kings is reemerging and expanding to smaller cities in eastern Pennsylvania.¹⁴ For example, in July 2010, 12 members of Latin Kings were charged with murder in aid of racketeering and other crimes in Bethlehem.¹⁵ The gang used violence and intimidation to maintain its territory, influence, and profits.¹⁶ Indictments were also filed against 23 Latin Kings gang members and associates, charging them with drug and firearms offenses.¹⁷ In Camden, where Bloods is traditionally dominant, Bloods sets are continuing to expand as new members move into the area from northern New Jersey.¹⁸ Bloods sets also are moving from Camden and Trenton into the city of Philadelphia.¹⁹ Additionally, Crips sets are growing in number in the HIDTA region, although not as significantly as Bloods.²⁰ Crips are present in Camden City and throughout Camden County, specifically in the Parkside and Whitman Park sections.²¹ Crips graffiti has also been identified in the suburban communities of Gloucester Township and Lindenwold.²²

OMGs Increasingly Active in the PC HIDTA Region

OMGs—most notably Pagan's, Warlocks, and Outlaws—have been present in the PC HIDTA region for decades and distribute illicit drugs at the retail level to a limited extent; however, recent law enforcement reporting indicates that they are expanding their presence.²³ For example, Pagan's, the most dominant OMG in southeastern Pennsylvania, New Jersey, and Delaware, has established chapters in every county in New Jersey.²⁴ The region has also experienced an influx of predominantly West Coast OMGs, including Mongols and Vagos.²⁵ Mongols and Vagos are displaying unity with Pagan's against Hells Angels Motorcycle Club (HAMC), and Outlaws has reportedly signed a truce with Pagan's.²⁶ Pagan's is reportedly concerned that HAMC, which closed its Philadelphia Chapter in 2005 following conflicts with other Philadelphia-based OMG chapters, may reestablish a presence in its territory.²⁷ Additionally, Wheels of Soul, an African American OMG, is expanding both nationally and regionally; its headquarters is in Philadelphia, and it reportedly has connections to local street gangs.²⁸ Some OMGs have established relationships with Mexican DTOs in order to gain greater access to illicit drugs and facilitate distribution operations.²⁹

Street gangs are prone to violence and are responsible for much of the violent crime in the areas where they have a presence.³⁰ Street gangs often commit crimes such as robbery, assault, and homicide to defend or expand territories, gain financially, or establish and maintain their reputation.³¹

b. Primarily Dominican and Puerto Rican gangs.

Crime rates in the PC HIDTA region are relatively high when compared with those in similarly sized areas.³² For example, the city of Philadelphia has the seventh-highest crime rate in the nation among cities of more than 500,000 people; Camden ranks first among cities with less than 100,000 people.³³ Philadelphia reported a total of 306 homicides in 2010 and 305 homicides in 2009,³⁴ while Camden reported 36 and 35 homicides respectively during the same time period.³⁵ Law enforcement officials in Camden indicate that homicides are often the result of drug disputes and infighting among street gangs, particularly Bloods, Camden's most powerful street gang.³⁶ (See text box.)

Potential Increase in Intragang Violence

According to law enforcement reporting, Bloods, the largest street gang in the PC HIDTA region, is expanding its territory as gang members from northern New Jersey move into Camden and Philadelphia and surrounding suburban and rural areas.³⁷ The extent to which Bloods sets cooperate with each other or respect territory, members, or financial resources varies widely. As such, open competition and conflict between Bloods sets (or even local factions of the same set) commonly occur.³⁸ Moreover, according to law enforcement reporting in the region, the Bloods sets in New Jersey were directed by the national leadership to consolidate and form a unified New Jersey Bloods set.³⁹ Law enforcement is reporting resistance to this call for consolidation within the gang and is anticipating that it will cause increased violence among Bloods in Camden, Philadelphia, and surrounding communities.⁴⁰

Heroin availability is high in the PC HIDTA region and is increasing in surrounding suburban and rural areas. The drug's high availability and low cost are enticing some prescription opioid abusers to switch to heroin.

Heroin is widely available and frequently abused in the HIDTA region. National Drug Intelligence Center (NDIC) National Drug Threat Survey^c (NDTS) 2011 data show that 12 of the 19 law enforcement agency respondents in the PC HIDTA region report either high or moderate availability in their areas.⁴¹ Increased heroin trafficking and availability, largely attributed to Mexican suppliers, have resulted in rising instances of heroin abuse, addiction, and treatment in the region. According to one treatment facility official in Philadelphia, the facility's adult methadone treatment program for opiate addiction is now its largest program.⁴² Similarly, an adolescent treatment facility official reported that treatment for opiate addiction is the most common type of drug treatment in that facility.⁴³ In suburban and rural areas surrounding the region, abuse is increasing among teens and young adults. For example, in Ridley Park (a middle-class Philadelphia suburb), heroin distribution is widespread and availability and abuse have increased significantly.⁴⁴ Many distributors are targeting customers in smaller towns and rural areas, such as Hazelton, Sunbury, and the Pocono Mountains area, in order to gain market share.⁴⁵

The purity of South American (SA) heroin, the predominant type available in the area, remains relatively high for the region but has been gradually decreasing over the past several years.⁴⁶ For

c. The NDTS is conducted annually by NDIC to solicit information from a representative sample of state and local law enforcement agencies. NDIC uses this information to produce national, regional, and state estimates of various aspects of drug trafficking activities. NDTS data reflect agencies' perceptions based on their analysis of criminal activities that occurred within their juris-dictions during the past year. NDTS 2011 data cited in this report are raw, unweighted responses from federal, state, and local law enforcement agencies solicited through either NDIC or the Office of National Drug Control Policy (ONDCP) HIDTA program as of April 4, 2011.



Figure 1. Locations of Gangs Involved in Drug Distribution in the Philadelphia/Camden HIDTA Region and Surrounding Areas, 2010–2011

instance, the street-level purity of heroin in the area decreased from 73 percent in 2000 to 52 percent in 2004 to 50 percent in 2009.⁴⁷

Some prescription opioid abusers in the region are switching to heroin because it is cheaper and easier to obtain than the CPDs they abuse.⁴⁸ For example, oxycodone abusers with a high tolerance might typically ingest 400 milligrams of the drug daily (five 80-mg tablets) at a cost of \$400. These abusers could maintain their addictions with 2 grams of heroin daily, at a cost of one-third to one-half that of prescription opioids, depending on the price and purity of the heroin.⁴⁹

The diversion and abuse of CPDs, particularly opioid pain killers, pose significant and growing threats to the PC HIDTA region, including a rise in the number of violent and property crimes associated with the drugs.

The diversion and abuse of CPDs continue to increase throughout the region, as evidenced by reporting from medical professionals and data from treatment providers. For example, Philadelphia Department of Health officials report that primary treatment admissions for oxycodone products increased in Philadelphia from 10 in 2007, to 80 in 2008, to 387 in 2009, to 410 in the first half of 2010.⁵⁰ Additionally, among drug-positive decedents whose cause of death was drug intoxication in 2010, oxycodone was the fourth most frequently detected drug.

Law enforcement officials note that pharmacy robberies and burglaries are increasing in the PC HIDTA region. In 2009, there were more than 75 pharmacy robberies and burglaries in the region that resulted in the theft of large quantities of CPDs;⁵¹ in 2010, that number increased to more than 100.⁵² Law enforcement reporting indicates that loosely organized street gangs are resorting to pharmacy thefts in order to obtain supplies of illicit CPDs, particularly OxyContin and Percocet, for street-level distribution.⁵³ Moreover, a number of pharmacies and pharmacy delivery vehicles have been robbed of CPDs at gunpoint—in some instances employees were violently assaulted and confined while the stores were being robbed.⁵⁴ Mail carriers and parcel delivery personnel in the region have also been aggressively pursued, assaulted, and robbed while delivering packages the assailants suspected contained CPDs.⁵⁵ According to Federal Bureau of Investigation (FBI) Philadelphia Division reporting, robberies and burglaries of Philadelphia area pharmacies in 2010 resulted in the theft of prescription opioids valued at several million dollars.⁵⁶ The FBI further reports that the number of such incidents has been increasing because of high demand for the drugs and the tremendous profits that can be realized by those who sell the stolen pills.⁵⁷

Outlook

NDIC assesses with high confidence^d that Mexican DTOs will persist as the dominant wholesale distributors of cocaine, heroin, marijuana, and methamphetamine in the PC HIDTA region. Mexican DTOs with connections to the southwestern United States and major distribution centers on the East Coast, such as Georgia (Atlanta) and North Carolina (Charlotte and Raleigh), will increase their wholesale distribution of these drugs in the region in the coming year. These DTOs have expanded and strengthened their networks throughout the region, and no other trafficking group appears to have the sources of supply or organizational structure to challenge them.

NDIC assesses with high confidence that African American and Hispanic street gangs will maintain control over retail-level illicit drug distribution and continue the expansion of their criminal activities from Camden and Trenton into Philadelphia and the surrounding suburban communities. Changing gang dynamics and increasing competition for market share will result in increased intergang and intragang violence in these areas.

NDIC assesses with high confidence that CPD abuse will remain high in the region and will lead to increased heroin abuse as more opioid prescription abusers transition to heroin. Declining levels of heroin purity have had little discernible effect on levels of availability or abuse in the region, a situation that will continue.

d. High Confidence generally indicates that the judgments are based on high-quality information or that the nature of the issue makes it possible to render a solid judgment. Medium Confidence generally means that the information is credibly sourced and plausible but can be interpreted in various ways, or is not of sufficient quality or corroborated sufficiently to warrant a higher level of confidence. Low Confidence generally means that the information is too fragmented or poorly corroborated to make a solid analytic inference, or that there are significant concerns or problems with the sources.

Appendix A. Philadelphia/Camden HIDTA Overview



Map A1. Philadelphia/Camden High Intensity Drug Trafficking Area

The PC HIDTA region comprises Chester, Delaware, and Philadelphia Counties in Pennsylvania and Camden County in New Jersey.⁵⁸ The HIDTA region and surrounding counties (Bucks and Montgomery Counties in Pennsylvania and Burlington and Gloucester Counties in New Jersey) comprise the Philadelphia metropolitan area, which has an estimated population of more than 5.1 million and is the fifth-largest metropolitan area in the United States and the second-largest on the East Coast.⁵⁹ Approximately 100 million people—just under a third of the U.S. population—live within a day's drive of Philadelphia, providing many distributors and abusers ready access to illicit drugs distributed from the HIDTA region.

The PC HIDTA region is ethnically diverse, allowing many foreign-born drug traffickers to assimilate in communities and mask their illicit activities.⁶⁰ Significant numbers of people from drug source and transit countries reside in various parts of the region, and their numbers are growing. For instance, according to 2010 census data, Philadelphia experienced a sizable increase among Asian and Hispanic populations: the Asian population in Philadelphia grew 42.3 percent to 95,521, and the Hispanic population grew 45.5 percent to 187,611. In New Jersey, the Asian

population increased 51 percent, to more than 700,000, while the number of Hispanics increased 39 percent, to more than 1.5 million. The Asian population grew in most areas of New Jersey, but the greatest increases were along Interstate 95. In Camden, Hispanics overtook African Americans as the largest ethnic group.⁶¹

Drug traffickers in the HIDTA region use various means of conveyance to transport illicit drugs into and through the region. DTOs most commonly use private and commercial vehicles to transport illicit drugs into and through the region along primary roadways, sometimes transporting drug proceeds back to source areas using the same conveyances and routes.⁶² Interstate 95, which runs from Florida to Maine, passes directly through New York City and Philadelphia and is recognized as the East Coast's major drug transportation corridor.⁶³ Significant quantities of drugs available in the HIDTA region are transported from New York City and Miami along Interstate 95.⁶⁴

Traffickers and abusers also transport drugs into and throughout the region using rail, air, and maritime conveyances; U.S. mail; and package delivery services.⁶⁵ Philadelphia has an extensive intercity and regional passenger rail system usable by drug traffickers to transport illicit drugs and drug proceeds to, from, and around the city. The system provides numerous scheduled daily departures from Philadelphia's 30th Street Station to Baltimore (MD), New York City, Pittsburgh (PA), and Washington (DC). The large volume of air passengers and cargo transiting Philadelphia International Airport provides traffickers with additional opportunities for smuggling. Many traffickers utilize commercial air transport to smuggle cocaine and heroin into the region from the Caribbean and South America.⁶⁶ The consolidated Port of Philadelphia, which consists of the waterfront areas of Philadelphia, Camden, and Wilmington (DE) is one of the busiest sea ports on the Atlantic Coast and enables traffickers to capitalize on the volume of goods passing through the port to smuggle illicit drugs into the region.⁶⁷

The PC HIDTA's location and proximity to New York make it not only a major consumer market, but also a drug supply area for distributors in surrounding areas. The region is a major source for illicit drugs, primarily cocaine and heroin, for surrounding areas in the Mid-Atlantic area such as the Lower Delaware Valley, central Pennsylvania, southern New Jersey, Delaware, and northern Maryland.⁶⁸

Cocaine, particularly crack, poses a serious drug threat in the PC HIDTA region because of the high levels of abuse and the violence attendant to street gang distribution of the drug.⁶⁹ Despite declining purity and increasing price,⁷⁰ cocaine remains readily available in most of the region. According to NDTS 2011 data, 15 of the 19 law enforcement agency respondents in the PC HIDTA region report that powder cocaine is available at moderate or high levels in their jurisdictions, and 12 of these respondents report that crack cocaine is available at moderate or high levels. Reporting from PC HIDTA Initiatives indicates that more than 280 kilograms of powder cocaine and more than 4 kilograms of crack cocaine were seized in 2010. (See Table B2 in Appendix B.)

Heroin, principally from South America, continues to afflict the inner cities, and is an increasing threat in suburban communities surrounding the region, where overdose deaths are on the rise.⁷¹ The purity of SA heroin in the region remains among the highest on the East Coast, despite gradual decreases over the past several years.⁷² Declining heroin purity has contributed to local abusers injecting larger doses or injecting heroin more frequently.⁷³

Marijuana availability and abuse pose considerable threats to the PC HIDTA region. According to NDTS 2011 data, each of the 19 law enforcement agency respondents in the PC HIDTA region report that marijuana is available at moderate or high levels in their jurisdictions.⁷⁴ While commercial-grade Mexican marijuana is the most widely available and abused illicit drug in the region, high-potency Canadian and locally produced marijuana are increasing in availability.⁷⁵ Asian DTOs and street gangs are major suppliers of Canadian high-potency marijuana and MDMA (3,4-methylenedioxy-methamphetamine, also referred to as ecstasy) in the region.⁷⁶ In many cases these groups smuggle the drugs from Canada to New York City prior to transporting them to the HIDTA region for distribution. The availability of marijuana in the region will likely be affected in future years by the New Jersey Compassionate Use Medical Marijuana Act (see text box), although it is too early to accurately predict the ramifications of the law.

New Jersey Compassionate Use Medical Marijuana Act

The New Jersey Compassionate Use Medical Marijuana Act, which permits the use of medical marijuana for qualifying patients, was signed into law by then Governor Corzine in January 2010. As initially passed, the law was scheduled to take effect in July 2010; however, in June 2010 lawmakers amended the legislation to delay enactment of the law. In February 2011, the New Jersey Department of Health and Senior Services proposed new regulations for the administration of the Medicinal Marijuana Program to implement the provisions of the act.

The proposed new regulations would establish the process by which qualifying patients, their physicians, and their primary caregivers would register with the department to avail themselves of the act's protections against civil and criminal sanctions. The proposed new regulations would also establish procedures for the permitting, establishment, and operation of state-licensed Alternative Treatment Centers (ATCs) to cultivate and dispense medical marijuana and related supplies. Qualifying patients will be authorized to possess up to 2 ounces of medical marijuana a month, but are not permitted to cultivate or designate a caregiver to cultivate plants. In March 2011, the state of New Jersey issued licenses for the first six ATCs which were expected to begin sales to the public during the second half of 2011; however, implementation of the program has been delayed because of ongoing legislative debate on the regulations proposed in February 2011.

The diversion and abuse of CPDs pose significant and growing threats to the HIDTA region, including high abuse levels and a rising number of violent and property crimes associated with these drugs.⁷⁷ In 2009, there were over 75 pharmacy robberies and burglaries in the region that resulted in the theft of large quantities of CPDs;⁷⁸ in 2010, that number increased to more than 100.⁷⁹ The abuse of CPDs also fuels the heroin problem in the region as CPD abusers switch to the cheaper, more easily obtained heroin.⁸⁰

The threat from methamphetamine production and abuse historically has been low in the region; however, the manufacture of methamphetamine is an emerging concern.⁸¹ Law enforcement officers in the region reported an increase in the number of methamphetamine laboratory responses in the first 4 months of 2011.⁸² Most clandestine methamphetamine laboratories in and near the HIDTA region are operated by OMGs that typically produce retail quantities of the drug; local independent Caucasian individuals also produce limited amounts of methamphetamine, mostly for personal use.⁸³

Other dangerous drugs such as LSD (lysergic acid diethylamide), MDMA, and PCP (phencyclidine) are available and abused to varying degrees within the HIDTA region, mainly by teens and young adults.⁸⁴ In Camden, PCP is growing in popularity among young males and females, particularly in

the Landsdale area. According to law enforcement officials, PCP available in the region is less expensive than crack cocaine and the effects last longer.⁸⁵

Drug traffickers in the PC HIDTA region use various money laundering methods to conceal and move illicit funds. Traditional methods include smuggling bulk cash; using money services businesses (MSBs); conducting electronic wire transfers; structuring bank deposits and money order purchases; commingling drug proceeds with funds generated through legitimate businesses; purchasing real estate and vehicles; operating front businesses; and using smart cards, automated teller machines (ATMs), and prepaid stored value cards.⁸⁶ Some exploit casinos in the region to launder illicit funds.⁸⁷ Bulk cash smuggling is the method most often used by traffickers to move illicit proceeds from the PC HIDTA region.⁸⁸ Mexican DTOs operating in the region typically transport bulk cash drug directly to the Southwest Border or transport the proceeds to other consolidation locations such as Atlanta, Houston, New York City, and Phoenix in commercial or private vehicles.⁸⁹

Table B1. Greatest Drug Threat and Drug Most Associated with Violent and Property Crime in the Philadelphia/Camden HIDTA Region, by Number of NDTS 2011 Respondents

Drug	Greatest Drug Threat	Most Contributes to Violent Crime	Most Contributes to Property Crime
Crack Cocaine	6	8	6
Powder Cocaine	2	3	1
Heroin	6	5	10
Controlled Prescription Drugs	3	1	2
Marijuana	2	1	0
Not Applicable	0	1	0

Table B2. Drug Seizures in the Philadelphia/Camden HIDTA, in Kilograms, 2010

Drug	Amount Seized	Wholesale Value	Percent of Total Value*
Powder Cocaine	280.7	\$9,915,225	50.2
Crack Cocaine	4.4	\$95,096	0.48
Heroin	32.2	\$3,475,455	17.6
Marijuana	1,144.6	\$2,887,641	14.6
Cannabis Plants (Outdoors)	129.25	\$129,252	0.65
Methamphetamine	0.168	\$1,680	0.00008
Ice Methamphetamine	0.507	\$5,070	0.0003
Prescription Drugs (dosage units)	6,989	\$55,938	0.28
All Other Seizures	Various drugs/quantities	\$3,181,823	16.1
Totals	NA	\$19,747,180	100

Source: Philadelphia/Camden High Intensity Drug Trafficking Area.

*Percentages have been rounded and thus do not sum to 100.

NA-Not applicable

Endnotes

- National Drug Intelligence Center (NDIC), National Drug Threat Assessment 2010, February 2010, p. 9; Philadelphia/Camden High Intensity Drug Trafficking Area (PC HIDTA), Philadelphia/Camden HIDTA 2011 Threat Assessment, June 2010, p. 5; NDIC, National Drug Threat Survey (NDTS), 2006-2011; PC HIDTA, interview by NDIC intelligence analysts (IA), February 3, 2011, Philadelphia Police Department (PD), Criminal Intelligence Unit, interview by NDIC IA, February 3, 2011; Drug Enforcement Administration (DEA), Philadelphia Field Division, Trends in the Traffic, June 2010, pp. 6, 22, 31, 38.
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- 13. PC HIDTA, Philadelphia/Camden HIDTA 2011 Threat Assessment, June 2010, p. 16.
- 14. PC HIDTA, interview by NDIC IA, February 3, 2011.
- 15. FBI, Philadelphia, press release, "Twelve Members of Violent Latin Kings Drug Organization Charged with Murder in Aid of Racketeering, Separate Indictments Charge 23 More with Drug and Gun Offenses," July 21, 2010.
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- 18. PC HIDTA, interview by NDIC IA, February 3, 2011.
- 19. PC HIDTA, response to NDIC RFI, May 13, 2011.
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New Jersey

Camden Police Department Chesilhurst Borough Police Department Haddon Township Police Department Magnolia Police Department New Jersey National Guard New Jersey State Police Oaklyn Police Department Pennsauken Police Department Pine Hill Police Department State Attorney General's Office Camden County Prosecutor's Office Voorhees Township Police Department

Pennsylvania

Chester City Police Department City of Philadelphia Drug and Alcohol Abuse Program Downingtown Police Department Eddystone Police Department Kennett Square Police Department Marple Township Police Department Pennsylvania Attorney General's Office Pennsylvania Bureau of Narcotics Investigation and Drug Control Pennsylvania Department of Health Pennsylvania National Guard Pennsylvania State Police Philadelphia Medical Examiner's Office Philadelphia Police Department Narcotics Bureau Radnor Township Police Department **Ridley Township Police Department** Trainer Police Department Upper Darby Township Police Department University of Pennsylvania Police Department Westtown-East Goshen Regional Police Department

Regional

Middle Atlantic-Great Lakes Organized Crime Law Enforcement Network (MAGLOCLEN)

Federal

Executive Office of the President Office of National Drug Control Policy High Intensity Drug Trafficking Area Philadelphia/Camden U.S. Department of Commerce U.S. Census Bureau U.S. Department of Health and Human Services Centers for Disease Control and Prevention National Institutes of Health National Institute on Drug Abuse Community Epidemiology Work Group Substance Abuse and Mental Health Services Administration Drug Abuse Warning Network Treatment Episode Data Set U.S. Department of Homeland Security U.S. Coast Guard U.S. Immigration and Customs Enforcement U.S. Department of Justice Bureau of Alcohol, Tobacco, Firearms and Explosives Drug Enforcement Administration Domestic Monitor Program El Paso Intelligence Center National Seizure System New Jersey Division Philadelphia Division Federal Bureau of Investigation Philadelphia Office Office of Justice Programs National Institute of Justice Arrestee Drug Abuse Monitoring Program U.S. Attorneys Office District of New Jersey Eastern District of Pennsylvania U.S. Marshals Service U.S. Department of Transportation Federal Aviation Administration Federal Highway Administration U.S. Department of the Treasury Internal Revenue Service U.S. Postal Inspection Service

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