

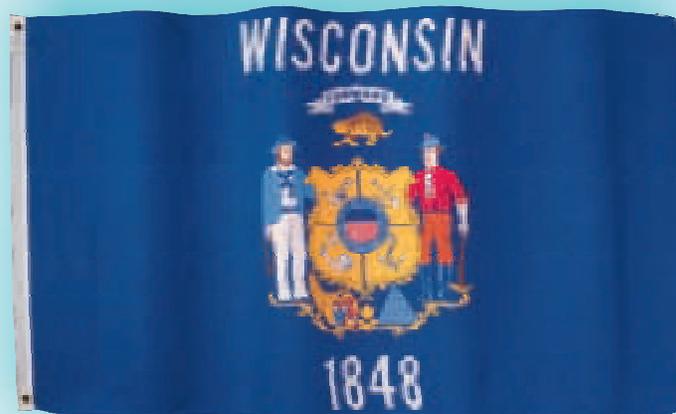
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# Wisconsin

Drug Threat Assessment

## UPDATE

June 2002



National Drug Intelligence Center  
U.S. Department of Justice

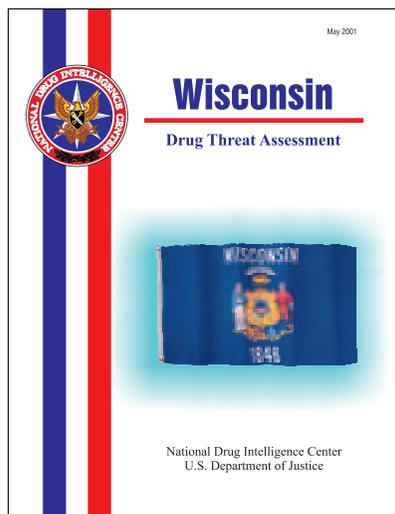
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## Preface

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This report is a brief update to the *Wisconsin Drug Threat Assessment*, which is a strategic assessment of the status and outlook of the drug threat to Wisconsin. Analytical judgment determined the threat posed by each drug type or category, taking into account the most current quantitative and qualitative information on availability, demand, production or cultivation, transportation, and distribution, as well as the effects of a particular drug on abusers and society as a whole. While NDIC sought to incorporate the latest available information, a time lag often exists between collection and publication of data. NDIC anticipates that this update will be useful to policymakers, law enforcement personnel, and treatment providers at the federal, state, and local levels.

The *Wisconsin Drug Threat Assessment* was produced in May 2001 and is available on NDIC's web site [www.usdoj.gov/ndic](http://www.usdoj.gov/ndic) or by contacting the NDIC dissemination line at 814-532-4541.





# Wisconsin Drug Threat Assessment Update

## Overview

Illicit drugs pose an increasingly serious threat to Wisconsin residents. Milwaukee and, to a lesser extent, Madison serve as distribution centers for most of the illicit drugs that are distributed within the state. Mexican drug trafficking organizations (DTOs) and criminal groups are the principal transporters and wholesale distributors of cocaine, methamphetamine, and marijuana in Wisconsin. Dominican DTOs and criminal groups dominate the transportation and wholesale distribution of South American heroin, and Nigerian DTOs transport and distribute Southeast Asian heroin at the wholesale level. Organized street gangs such as Gangster Disciples, Vice Lords, and Latin Kings dominate the retail distribution of most drugs in urban areas and throughout the state.

The widespread availability and abuse of powdered and crack cocaine pose the most serious illicit drug threat to Wisconsin. Marijuana, the second most significant drug threat, is the most widely available and commonly abused illicit drug in the state. Methamphetamine poses an increasingly serious threat; abuse of the drug had been concentrated in the northwestern part of the state but is now spreading throughout Wisconsin. The increasing availability and abuse of heroin also present an emerging drug threat. The abuse of other dangerous drugs such as MDMA, GHB, and LSD and the diversion and abuse of pharmaceuticals, particularly OxyContin, pose an increasingly serious concern to Wisconsin's law enforcement and healthcare professionals.

**Table 1. Drug-Related Treatment Admissions to Publicly Funded Facilities  
Wisconsin, 1994–2000**

Year	Cocaine	Marijuana	Methamphetamine	Heroin
1994	663	912	40	42
1995	637	1,003	50	46
1996	690	1,278	50	51
1997	868	1,605	67	128
1998	792	1,728	69	63
1999	871	1,484	64	107
2000	1,558	1,907	70	277

Source: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set.

## Cocaine

Cocaine, both powdered and crack, poses the most significant threat to the safety and welfare of Wisconsin residents. Cocaine-related treatment admissions to publicly funded facilities increased dramatically from 663 in 1994 to 1,558 in 2000, according to the Treatment Episode Data Set (TEDS). The Milwaukee County Medical Examiner’s Office reported that there were 46 cocaine-related deaths in Milwaukee County in 2001.

Cocaine is readily available, particularly in metropolitan areas such as Milwaukee and Madison. According to the U.S. Sentencing Commission (USSC), cocaine-related federal sentences in Wisconsin accounted for 61.2 percent of all federal drug-related sentences in FY2000. The Drug Enforcement Administration (DEA) reported that in the first quarter of fiscal year (FY) 2002, powdered cocaine sold throughout the state for \$50 to \$125 per gram, \$750 to \$1,500 per ounce, and \$20,000 to \$28,000 per kilogram. Crack cocaine sold for \$10 to \$100 per rock, with the highest prices reported in Green Bay. Prices for larger quantities of crack cocaine generally were the same as those for powdered cocaine. Powdered

cocaine purity levels generally exceeded 80 percent, according to DEA. The Milwaukee High Intensity Drug Trafficking Area (HIDTA) reported a dramatic increase in the amount of cocaine seized, from 17 kilograms in 2000 to 105 kilograms in 2001.

Violent crime associated with the distribution of crack cocaine is a particular problem in Milwaukee. Organized street gangs that distribute crack at the retail level often engage in acts of violence such as home invasion robberies, aggravated batteries, shootings, stabbings, and carjackings. Gang migration from Milwaukee to other parts of the state has resulted in the spread of crack cocaine availability and associated violence.

Mexican DTOs and criminal groups are the primary transporters of cocaine into the state. They typically transport multiounce to multikilogram quantities primarily from Chicago, Los Angeles, and cities in Texas. These DTOs and criminal groups generally use private and rental vehicles to transport cocaine into the state; however, buses, trains, and commercial aircraft are used occasionally.

In April 2002, authorities seized 18 kilograms of cocaine and arrested nine individuals in the Milwaukee area for their involvement in a drug trafficking ring. The yearlong investigation leading up to the arrests revealed that individuals from the group made frequent trips to California and the Southwest to purchase cocaine and transport it back to Milwaukee, hiding the drugs in secret compartments in vehicles. In one trip, they purchased 20 kilograms. The cocaine was kept in “stash houses” and apartments on the East Side, where it was cut and repackaged. Authorities believe the traffickers paid \$12,000 to \$15,000 per kilogram and distributed it in Milwaukee for \$20,000 per kilogram. As a result of the investigation, authorities also seized \$170,000 in cash, over 20 weapons (including machine pistols), hundreds of rounds of ammunition, large-screen televisions, a scale, and a bullet-proof vest. Authorities also discovered that the organization had houses in the Milwaukee area equipped for growing marijuana. An older couple lived in one home and tended to the plants in exchange for receiving small amounts for “personal use.”

Mexican DTOs and criminal groups are the primary wholesale distributors of powdered cocaine in the state. Street gangs dominate retail distribution of both powdered and crack cocaine. Crack cocaine, which usually is converted at stash houses, and powdered cocaine are sold on street corners and from private residences and vehicles.

## Marijuana

Marijuana is the most widely available and commonly abused drug in Wisconsin. According to the 1999 National Household Survey on Drug Abuse, 5.1 percent of Wisconsin residents reported having abused marijuana at least once in the month prior to the survey compared with 4.7 percent nationwide. Marijuana-related treatment admissions to publicly funded facilities increased steadily from 912 in 1994 to 1,728 in 1998, then decreased in 1999 before increasing again to 1,907 in 2000, according to TEDS. (See Table 1 on page 2.)

Marijuana is widely available throughout the state. According to USSC data, the number of marijuana-related federal sentences in Wisconsin in FY2000 (21) was higher than in FY1996 (13). Arrests for marijuana possession increased from 14,243 in 1998 to 15,578 in 2000, according to the Wisconsin Office of Justice Assistance. The Milwaukee HIDTA reported a dramatic increase in the amount of marijuana seized from 2000 to 2001. In 2001, the HIDTA reported seizing approximately 592 kilograms of marijuana, compared with 11 kilograms seized in 2000.

In April 2001, investigators from the Wisconsin Department of Justice uncovered a major marijuana trafficking ring that resulted in one of their biggest seizures in history. An individual, along with his associates, had been arranging large shipments of marijuana into Milwaukee from Houston and Chicago in tractor-trailers and by couriers (usually women) on commercial airline flights. The individual was responsible for the distribution of more than 13 tons of marijuana in Milwaukee each year from 1996 to 2000.

Marijuana produced in Mexico is the dominant type; locally produced marijuana is available to a lesser extent. Prices have remained stable for the past decade, and in the first quarter of FY2002, marijuana sold throughout the state for \$50 to \$210 per ounce and \$500 to \$1,650 per pound for both Mexican and locally produced marijuana, according to DEA.

Cannabis is cultivated outdoors and indoors throughout Wisconsin. Outdoor grow sites typically are located in remote areas on private land as well as public land. Indoor grows often are located in private residences. According to DEA, Wisconsin ranked fifth among all states for indoor marijuana growing activity in 2000, with 137 indoor grow sites seized. Violence associated with cannabis cultivation is an increasing concern to Wisconsin law enforcement officers. Cannabis cultivators often are heavily armed and use boobytraps and warning devices to protect cultivation sites from law enforcement authorities and the public.

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Mexican DTOs and criminal groups are the primary transporters of Mexico-produced marijuana into the state. These DTOs and criminal groups use private and rental vehicles, as well as tractor-trailers to transport bulk quantities of marijuana into Wisconsin from Mexico through southwestern states. Couriers on commercial aircraft also have been used to transport bulk quantities of marijuana into Wisconsin.

Mexican DTOs and criminal groups are the primary wholesale and midlevel distributors of marijuana in the state. Street gangs and local independent dealers are the primary retail distributors. Marijuana typically is sold in open-air markets, public housing projects, and private residences. Local producers distribute the marijuana they produce at the retail level; they generally do not produce quantities large enough to support wholesale distribution.

### Methamphetamine

The abuse of methamphetamine poses an increasingly serious threat to Wisconsin. Abuse largely is concentrated in the northwest, particularly in counties bordering Minnesota. However, law enforcement authorities and healthcare providers report that methamphetamine abuse is beginning to spread to southern and eastern Wisconsin. According to TEDS, methamphetamine-related treatment admissions to publicly funded facilities increased steadily from 40 in 1994 to 69 in 1998, then decreased in 1999 before increasing again to 70 in 2000. (See Table 1 on page 2.)

Methamphetamine availability is increasing in Wisconsin. Methamphetamine produced in Mexico, California, and southwestern states is available throughout the state. Locally produced methamphetamine also is available. Methamphetamine seizures by state drug task forces increased from 1.6 kilograms in 1999 to 2.5 kilograms in 2000 and increased dramatically to 20.9 kilograms in 2001. USSC reports that methamphetamine-related federal sentences in Wisconsin decreased from 15 in FY1996 to 9 in FY1999, then increased again to 15 in FY2000. According

to DEA, in the first quarter of FY2002, methamphetamine sold for \$80 to \$125 per gram and \$700 to \$1,500 per ounce.

Methamphetamine production appears to be increasing in Wisconsin. The number of methamphetamine laboratories seized in Wisconsin increased from 2 in 1999 to 52 in 2001. Local independent Caucasian males are the primary producers of methamphetamine within the state, and Mexican criminal groups dominate production outside the state.

High purity crystal methamphetamine known as ice is becoming more prevalent in the Superior area. Crystal methamphetamine is much more expensive than powdered methamphetamine and is distributed in small quantities at the retail level. A half-ounce of crystal methamphetamine sells for \$900 to \$950, and a half-gram sells for \$50, according to local law enforcement.

Mexican DTOs and criminal groups are the primary transporters and wholesale distributors of methamphetamine produced outside Wisconsin. These DTOs and criminal groups primarily supply outlaw motorcycle gangs, Hispanic street gangs, and Hispanic and Caucasian independent dealers with methamphetamine for retail distribution. Caucasian local independent producers typically distribute their product at the retail level.

### Heroin

The increasing availability and abuse of heroin pose a threat to Wisconsin. According to TEDS, methamphetamine-related treatment admissions to publicly funded facilities increased dramatically from 42 in 1994 to 277 in 2000. (See Table 1 on page 2.) In Milwaukee County heroin was a factor in 23 deaths in 2000—more than any other illicit drug except cocaine, according to DAWN mortality data.

Heroin availability is increasing, particularly in Milwaukee and Madison. The Milwaukee HIDTA reported an increase in the amount of

heroin seized, from 741 grams in 2000 to approximately 3 kilograms in 2001. South American and Southeast Asian heroin are most prevalent. Heroin purity averages 60 percent, according to the Milwaukee HIDTA. According to DEA, heroin sold for \$100 to \$300 per gram and \$2,000 to \$4,000 per ounce in the first quarter of FY2002. Kilogram prices were not available.

Dominican DTOs and criminal groups are the primary transporters and wholesale distributors of South American heroin, and Nigerian DTOs are the primary transporters and wholesale distributors of Southeast Asian heroin. South American heroin is transported primarily from New York, and Southeast Asian heroin is transported primarily from Chicago. Both South American and Southeast Asian heroin typically are transported into Wisconsin in private or rental vehicles.

Retail heroin distribution in Milwaukee is conducted by street gangs and independent dealers. African American street gangs and independent dealers distribute Southeast Asian heroin, particularly on the city's north side, while Hispanic gangs and independent dealers distribute South American heroin, primarily on the south side of Milwaukee.

## Other Dangerous Drugs

Other dangerous drugs such as MDMA, GHB, and LSD pose an increasing threat to the state. Caucasian local independent dealers distribute these drugs, primarily to teenagers and young adults at raves and dance clubs. The diversion and abuse of pharmaceuticals also pose a concern for law enforcement and healthcare professionals in the state.

### MDMA

The availability and abuse of MDMA (3,4-methylenedioxymethamphetamine) are increasing in Wisconsin. Local independent dealers transport MDMA into the state primarily from Chicago, but also from Minneapolis, Las Vegas, and Rockford,

Illinois. According to state and local law enforcement, MDMA typically is distributed to teenagers and young adults for \$25 per tablet.

MDMA, also called Adam, XTC, E, X, essence, M&M, and love drug, is a synthetic psychoactive drug with amphetamine-like and hallucinogenic properties. Abuse of the drug may cause psychological problems similar to those associated with methamphetamine and cocaine abuse including confusion, depression, sleep problems, anxiety, and paranoia. The physical effects include muscle tension, involuntary teeth clenching, blurred vision, and increased heart rate and blood pressure.

MDMA taken in high doses is extremely dangerous, causing a marked increase in body temperature leading to muscle breakdown and kidney and cardiovascular system failure. MDMA abuse may lead to heart attack, stroke, and seizure as reported in some fatalities at raves. Recent research links MDMA to long-term, possibly permanent, damage to parts of the brain that are used for thought and memory. Individuals who develop a rash after abusing MDMA may risk severe liver damage or other serious side effects.

### GHB

The availability and abuse of GHB (gamma-hydroxybutyrate) also are increasing in the state. GHB generally is produced outside Wisconsin and transported into the state by local independent dealers. However, production also may be occurring in the state, as evidenced by a GHB laboratory seizure in the Milwaukee area in February 2002. According to state and local law enforcement, GHB typically is distributed to young adults at raves and dance clubs for \$25 per dose.

GHB, also known as liquid ecstasy, Georgia homeboy, grievous bodily harm, liquid X, and goop, is a central nervous system depressant that was banned by the Food and Drug Administration in 1990. It is odorless, tasteless, and virtually undetectable if added to a drink. An individual can lose consciousness within 20 minutes of

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ingesting GHB and often has no memory of events following ingestion. It is difficult to trace, usually leaving the body within 12 hours. Because of these properties, GHB has been used to commit drug-facilitated sexual assault.

**LSD**

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The hallucinogen LSD (lysergic acid diethylamide), also known as acid, boomer, and yellow sunshine, is a hallucinogen that induces abnormalities in sensory perceptions. It is available in some areas of the state and is transported from California and distributed at the retail level by independent dealers. In the first quarter of FY2002, a dose typically sold for \$2 to \$4 per dose in Milwaukee, according to DEA.

LSD typically is taken orally and is applied to blotter paper and candy or disguised as breath freshener drops. The effects of LSD are unpredictable depending upon the amount taken, the environment in which it is abused, and the abuser's personality, mood, and expectations. Two long-term disorders associated with LSD are persistent psychosis and hallucinogen persisting perception disorder (flashbacks).

**Diverted Pharmaceuticals**

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Pharmaceuticals are diverted, distributed, and abused in Wisconsin; however, the threat posed by diverted pharmaceuticals is limited compared with illicit drugs. Commonly abused pharmaceuticals include OxyContin, Valium, Vicodin, and Xanax. Pharmaceuticals generally are acquired by abusers and distributors through forged or stolen prescriptions, doctor shopping—visiting numerous physicians to obtain multiple prescriptions, and theft from pharmacies and nursing homes.

OxyContin, a powerful opiate-based pain relief medication, is the most prevalent diverted pharmaceutical in the state. OxyContin, which has heroin-like effects that last up to 12 hours, is designed to be swallowed whole for controlled-release dosing;

however, abusers often chew the tablets or crush them into powder, which destroys the controlled-release properties. This results in a more rapid absorption into the body when consumed orally, snorted, or mixed with water and injected.

**Outlook**

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Cocaine will remain the primary drug of abuse in Wisconsin, particularly in metropolitan areas such as Milwaukee and Madison because of its ready availability. Mexican DTOs and criminal groups will likely remain the primary transporters and wholesale distributors of powdered cocaine because of transportation and distribution networks they have established in the state. Street gangs will continue to dominate the retail distribution of powdered and crack cocaine.

Marijuana will remain the most commonly available and widely abused drug in Wisconsin. Cannabis will continue to be cultivated indoors and outdoors throughout the state; however, marijuana from Mexico will remain most prevalent.

Methamphetamine abuse and availability will continue to increase, spreading to most areas of the state. Methamphetamine produced outside the state will remain the dominant type, but local methamphetamine production will continue to increase, particularly as demand for the drug increases.

Heroin will continue to pose a threat to Wisconsin. South American and Southeast Asian heroin will remain the predominant types available in the state.

MDMA and GHB abuse will continue, particularly among teenagers and young adults. Raves and dance clubs will remain the primary outlets for these drugs, but they will likely be sold at an increasing number of other venues. LSD and diverted pharmaceuticals will remain lower threats than other illicit drugs in Wisconsin.

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