

United States Senate

WASHINGTON, DC 20510

July 10, 2019

The Honorable James Carroll
Director
Office of National Drug Control Policy
1600 Pennsylvania Avenue, NW
Washington, D.C. 20500

Dear Director Carroll:

We are writing to address an ongoing and pressing issue affecting many Americans and Iowans: the rise and continued use of methamphetamine in the United States. Methamphetamine is a powerful stimulant and classified as a Schedule II drug under the Controlled Substances Act. Abuse of methamphetamine is unfortunately not a new issue. In fact, methamphetamine abuse escalated to dangerous levels in the early 2000s, inciting Congress to pass the *Combat Methamphetamine Epidemic Act*¹ [CMEA], which restricted the sale of products necessary to cook methamphetamine. A major success of CMEA's passage was the substantial decline in domestic production of meth in the U.S. In fact, CMEA nearly eliminated domestic meth labs altogether.

However, the decrease in domestic production has unfortunately not absolved the supply of methamphetamine in the United States. The Drug Enforcement Administration (DEA) noted in its 2018 Drug Threat Assessment that "[m]ost of the methamphetamine available in the United States is produced clandestinely in Mexico and smuggled across the [Southwest Border]."² No longer made in homes in America, methamphetamine is the domain of Mexican drug cartels, who smuggle in the potent drug and distribute it throughout the United States at low prices.³

Methamphetamine abuse is particularly widespread and dangerous in Iowa. The Iowa Department of Public Health noted that methamphetamine-related deaths in Iowa have increased eight-fold since 2011.⁴ In fact, compared to other drugs, methamphetamine is the most commonly abused drug in Iowa.⁵ In 2016, the presence of illegal drugs in a child's body and

¹ Title VII of the USA PATRIOT Act, P.L. 109-177

² U.S. Department of Justice, Drug Enforcement Administration 2018 National Drug Threat Assessment, p. 59. Available at: <https://www.dea.gov/sites/default/files/2018-11/DIR-032-18%202018%20NDTA%20final%20low%20resolution.pdf>

³ *Id.*

⁴ Iowa Department of Public Health, Substance Abuse Brief, Issue 6, June 2018. Available at: https://idph.iowa.gov/Portals/1/userfiles/133/IASubAbuseBriefNewsletterJune2018_Methamphetamine.pdf

⁵ Outside of alcohol and marijuana use, the reported use of methamphetamine as the primary substance of abuse among adults and juveniles admitted to substance use disorder treatment in 2018 accounts for roughly 22% of Iowans, or almost 9,400 individuals. See Governor's Office of Drug Control Policy, Iowa Drug Control Strategy 2019, p. 36. Available at: <https://odcp.iowa.gov/sites/default/files/documents/2018/11/2019strategyfinal.pdf>

manufacturing methamphetamine in the presence of a minor accounted for over 1,500 founded child abuse reports.⁶ During a hearing by the Senate Judiciary Committee in October of 2015, a witness from the Iowa Division of Narcotics Enforcement testified that “[m]ajor drug trafficking organizations (DTOs) are undoubtedly the largest contributing factor to the supply of methamphetamine in the state of Iowa. Mexican DTOs are the primary organizational threat to the state of Iowa. They are responsible for the management of sophisticated smuggling, transportation, and distribution networks for methamphetamine in not only Iowa, but throughout the U.S.”⁷

While methamphetamine use has ravaged communities in Iowa, it has seemingly fallen by the wayside in light of the unprecedented effects of the opioid epidemic. With nearly 47,000 opioid overdose deaths in 2017, we are truly facing an epidemic. However, our nation is grappling with a poly-drug problem, and as such, we cannot allow one devastating issue to preclude us from addressing another. Therefore, we must be proactive in ensuring that methamphetamine abuse does not continue to rise to endemic levels.

With that in mind, please respond to the following questions and provide answers by July 31, 2019.

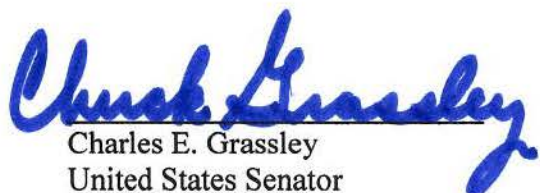
1. Has there been an increase in overall volume of methamphetamine that has come across the Southwest Border since the passage of the *Combat Methamphetamine Epidemic Act* in 2006?
2. Over the past 10 years, has there been an increase in the purity of seized methamphetamine?
 - a. If so, does the increased sophistication of Cartel/DTO laboratories account for this increase in purity?
3. How much methamphetamine is produced in Mexico as opposed to domestically or from other countries?
4. Does ONDCP have data on the flow of methamphetamine once it enters the country?
 - a. How much is destined for Iowa and how much actually gets there?
 - b. Is there information on major distribution centers for methamphetamine around Iowa? If so, how much is destined for those major cities?
5. Does ONDCP anticipate that the supply and demand of methamphetamine will continue to rise? How can ONDCP calculate this trend?

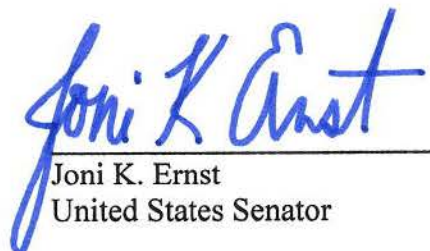
⁶ Governor's Office of Drug Control Policy, Iowa Drug Control Strategy, 2018, p. 16. Available at: <https://odcp.iowa.gov/sites/default/files/documents/2017/11/2018strategyfinal.pdf>

⁷ <https://www.judiciary.senate.gov/imo/media/doc/10-13-15%20Feddersen%20Testimony.pdf>

We look forward to your timely response. Should you have any questions about this request, please contact Rachel Wright for Senator Grassley at (202) 228-0927, or Corey Becker for Senator Ernst at (202) 224-3254.

Sincerely,


Charles E. Grassley
United States Senator


Joni K. Ernst
United States Senator