

BARBDIN

Barbados Drug Information Network Report

An Analysis of the 2018 Data



Prepared by

The National Council on Substance Abuse



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1. Key Findings

1.1 National Council on Substance Abuse: Drug Prevention Programming

- The National Council on Substance Abuse (NCSA) is the leading agency responsible for drug education efforts across the island.
- During 2018, the NCSA programmes targeted males and females between the ages of 4 and 65 years.
- The Primary School Programme had the largest reach, accounting for 49% of persons participating in the Council's programmes/activities. This was followed by the Community (29%) and Secondary School (22%) Programmes respectively.

1.2. NCSA Drug Counselling Programme

- In 2018, 19 persons were admitted to the NCSA's Drug Counselling Programme, 18 were male and 1 female.
- The majority of persons seeking treatment were 15 years old.
- Marijuana was the primary drug motivating the need for treatment.
- The majority of persons admitted to the NCSA Drug Counselling programme had a family history of legal and illegal drug use.
- In 2018 the most significant number of persons referred to the NCSA's Drug Counselling programme was from the Edna Nicholls Centre.

1.3. Edna Nicholls Centre

- Thirty six students tested positive for marijuana during 2018, 33 were male and 3 female.
- The majority of persons testing positive for marijuana use were between 12 and 16 years of age.

1.4 Treatment

Psychiatric Hospital

- In 2018, 1253 persons were admitted to the Psychiatric Hospital the majority of whom were males between the ages of 20 and 64.
- Just over one third (21%) of the Psychiatric Hospital's admissions in 2018 were for co-morbid diagnoses including substance abuse disorder

- Most patients diagnosed with co-morbid diagnoses including substance abuse disorder were males in the 25-44 age group.
- The majority of persons seeking treatment for substance abuse alone at the Psychiatric Hospital were males between the ages of 25 and 44 years

Substance Abuse Foundation (SAF)

- Eighty-one persons sought treatment at the SAF during 2018, the majority of whom were males between the ages of 26 and 30.
- Sixty-six persons who sought treatment at the SAF in 2018 were treated at the male facility at Verdun House and 15 were treated at the female facility at Marina House.
- The majority of SAF treatment seekers during 2018 were single, living at the family home and had no dependents
- Most persons completed secondary level education and were unemployed
- Crack cocaine, marijuana and alcohol were the main substances for which treatment was sought, either alone or in combination.
- Crack cocaine was the primary drug sought for treatment in the 26 -30 age group
- Marijuana was the primary drug sought for treatment for persons 16-20 years and 21 and 25 years.
- Alcohol, was the primary drug sought for treatment by persons in the 51-55 age group
- Persons seeking treatment at the Substance Abuse Foundation in 2018 used marijuana for the first time at 10 years and under.

Centre for Counselling Addiction Support Alternatives (CASA)

- Fifty three persons sought treatment at CASA during 2018, the majority of whom were males under the age of 30.
- The less than 20 age group was the single largest group of treatment seekers.
- Three out four persons admitted at CASA during 2018 were treated for marijuana use.
- The Magistrates Courts/Police, Drug Treatment Court, family and friends and The Psychiatric Hospital were the main sources of referral for persons seeking treatment at CASA in 2018.

Inmate Drug Rehabilitation and Counselling (IDRC) Programme

- Seventy-four persons were admitted to the IDRC programme in 2018, the majority of whom were male (86%) and between the ages of 26 and 40.
- Crack cocaine (54%) was the main drug motivating the need for treatment among the inmates followed by marijuana (23%).
- Most persons seeking treatment for crack cocaine were over 26 years (45%)
- There was an equal distribution of persons seeking treatment for crack cocaine across the 36 to 40 and the 31 to 35 age categories.

1.5. Supply Control

Royal Barbados Police Force (RBPF)

- Drug offences accounted for 18% of offences recorded by the RBPF during 2018.
- The percentage of males (93%) charged with drug offences was far greater than the percentage of females (7%).
- Most persons arrested for drug offences were between the ages 20 -49 age group, with 20-29 age category being the single largest group.
- Marijuana offences far outnumbered cocaine offences during the year.
- Possession of Cannabis was the most common cannabis-related offence and far outranked other cannabis offences recorded during the period.
- Possession of Cannabis was the most common cannabis-related offence followed by Trafficking Cannabis and Intent to Supply Cannabis respectively
- Cannabis both compressed and in plant form, was the most commonly seized drug during 2018.
- The emergence of Xanax along with previous recordings of meth/ecstasy present a potential risk to public health and the development of criminal networks

Barbados Prison Service

- Males far outnumbered females incarcerated for drug offences in 2018.
- Most persons incarcerated for drug offences were in the 20-34 age range
- Drug Possession was the most common offence, followed by Possession of Apparatus and Drug Trafficking
- The majority of persons incarcerated for Drug Possession were in the 20 and 35 age category.

1.6 Select Trend Analysis 2011-2018

- The NCSA's Primary School Programme consistently accounted for the largest proportion of persons participating in the Council's drug prevention programmes and activities between 2011 and 2018.
- The percentage of students testing positive for marijuana use at the Edna Nicholls Centre fluctuated marginally between 2013 and 2018, ranging from 17.0% at its lowest to 23% at its highest.
- Cannabis-related drug offences were the most common between 2012 and 2015. Other cannabis offences were greater than
- Possession of Cannabis was the most common offence recorded between 2012 and 2015. In 2016 and 2018, the possession of cannabis offences and other cannabis offences were similar. However in 2017 the percentage of other cannabis offences was greater than the possession of cannabis offences.

1.7. Summary of Recommendations to Expand and Improve BARDIN

- Improve data collection and reporting.
- Ensure consistency in data collection.
- Address data gaps.

1.8 Summary of Recommendations to Enhance National Response to Drug Situation

- A greater need to inform young people about the harms associated with the consumption of marijuana.
- Increase drug education on the knowledge and harms of New Psychoactive Substances (NPS).
- Design and implement an Early Warning System for the detection and monitoring of a NPS.
- Promote training for persons involved in the treatment of co-occurring disorders.
- Create opportunities for persons addicted to drugs to find work
- Investigate the issues relating to women and substance abuse

2. Introduction

The Barbados Drug Information Network (BARDIN) is the mechanism through which the National Council on Substance Abuse (NCSA) collects and disseminates information on the local drug situation¹. The main goal of Drug Information Networks (DINs), such as BARDIN, is to ensure that reliable and current data is available for trend analysis and to guide the development and modification of policies, programmes and other responses aimed at reducing the drug problem.

The NCSA publishes BARDIN reports annually. These reports are based primarily on existing data received from stakeholder agencies in the Demand Reduction and Supply Control sectors. From time to time, findings from previously conducted surveys and other relevant studies/projects are also included in the reports. In the main, BARDIN is a compilation of secondary data and publicly available information and should not be confused with primary research. Researchers conduct primary research to investigate specific issues or answer specific questions and involve the use of questionnaires, surveys or interviews to collect new data (NCSA, 2016; National Task Force on Crime Prevention 2005).

The objectives of BARDIN are as follows:

- To strengthen the capacity of Barbados to respond to changing drug use trends
- To provide current epidemiological and other information on substance abuse
- To regularly update this information
- To identify trends in drug consumption and offences related to illicit drugs
- To provide relevant information for the planning, evaluation and management of drug control programmes

The present report covers the period January 1 to December 31, 2018, and includes contributions from: the National Council on Substance Abuse, the Edna Nicholls Centre, the Centre for Counselling Addiction Support Alternatives, the Substance Abuse Foundation, the Inmate Drug Rehabilitation and Counselling Programme, the Royal Barbados Police Force and HMP Dodds. As in previous reports, the data is divided into three broad sections: Demand Reduction, Treatment and Rehabilitation, and Supply Control.

¹ A detailed explanation of BARDIN is presented in the 2011 BARDIN report which can be accessed at www.ncsa.org.bb

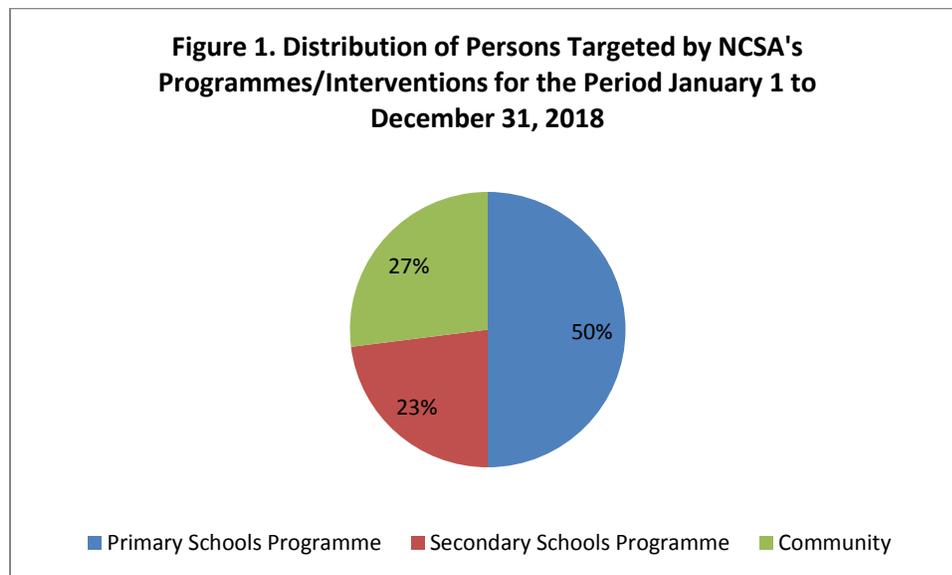
3. Demand Reduction

3.1 National Council on Substance Abuse (NCSA)

Demand reductions activities at the National Council on Substance Abuse (NCSA) include Drug Education in the primary and secondary schools and interventions in the community including Drug Counselling.

Drug Education Programming

Figure 1 presents the distribution of persons reached by the NCSA between January 1 and December 31, 2018. During this period, the Primary School Programme had the largest reach, accounting for 50% of persons participating in the Council’s programmes/activities. This was followed by the Community (27%) and Secondary School (23%) Programmes (See Figure 1).



N= 4, 794

Source: National Council on Substance Abuse

Detailed data regarding the number of participants as well as participant age and gender is presented in Table 1. The table shows that the NCSA targets both males and females of varying ages, from 4 to 65 years.

When considering the totals for each Programme (Community, Primary & Secondary Schools), it should be noted that mass-based events are not included as they have the potential to artificially inflate the number of persons reached.

Table 1.

BARDIN 2018

Drug Education Programmes in Schools and the Community

Intervention	Age Range/ Population Targeted	No. of Males Targeted	No. of Females Targeted	Total no. of Persons Targeted
<u>Primary School Programme</u>				
General Drug Education	4-11 years	n/a	n/a	400
Safe & Unsafe	5-7 years	28	29	57
LEC Summer Camp	6-16 years	412	215	627
General Drug Education	11-19 years	n/a	n/a	100
Drugs & Decisions	9-11 years	85	82	167
Games 4 Life	10-11 years	377	297	674
Cub Scouts	7-11 years	45		45
Drugs and My World	7-9 years	65	288	353
TOTAL				2,423
<u>Secondary School Programme</u>				
Drugs & Life Skills Awareness Programme	11-16 years			1098

Mass-based Events²	Various ages			4000*
TOTAL				1098
<u>Community Activities</u>				
Edna Nicholls Centre³	11-16 years			
Project Soft Residential Camp		20	15	35
Prevention First Club Parents				26
Prevention First Club Children		20	15	35
Signs and Symptoms Workshop				10
Workplace Drug Education	21-65 years	397	751	1148
Drug Counselling⁴	12-58 years	18	1	19
Mass based events	8-65 years	439	581	1002*
TOTAL⁵				1,273

¹ The Edna Nicholls Out-of-School Programme aims to provide rehabilitative programmes for secondary school students who have been suspended and referred to the Edna Nicholls Centre. Please note that the NCSA conducted sessions at this institution during 2018; however, data were not available for gender and persons targeted for inclusion in this report.

⁴ This total excludes persons reached via the programme held at the Edna Nicholls Centre.

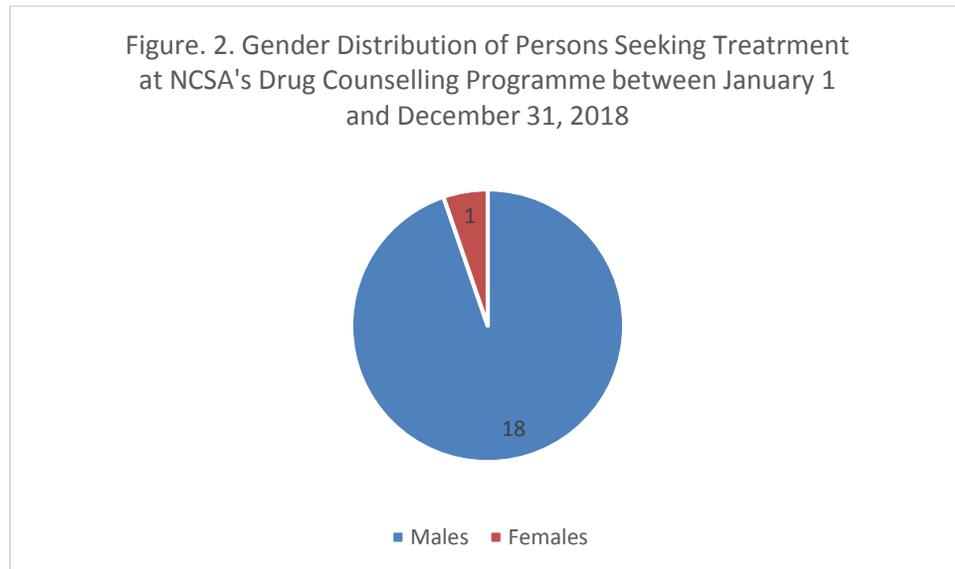
² Mass based events are not counted as programmes but estimates based on attendance at outreach activities including Health and Career showcases.

⁴ The NCSA's Drug Counselling programme is a non-residential/out-patient programme for individuals with mild to moderate cases of substance use/abuse. In this programme, a client works with a counsellor who serves as a support system to help him/her overcome drug use/dependency and become self-sufficient. The counsellor may also work closely with the family of the client as substance abuse affects the loved ones of the chemically dependent person.

3.2 Drug Counselling Programme

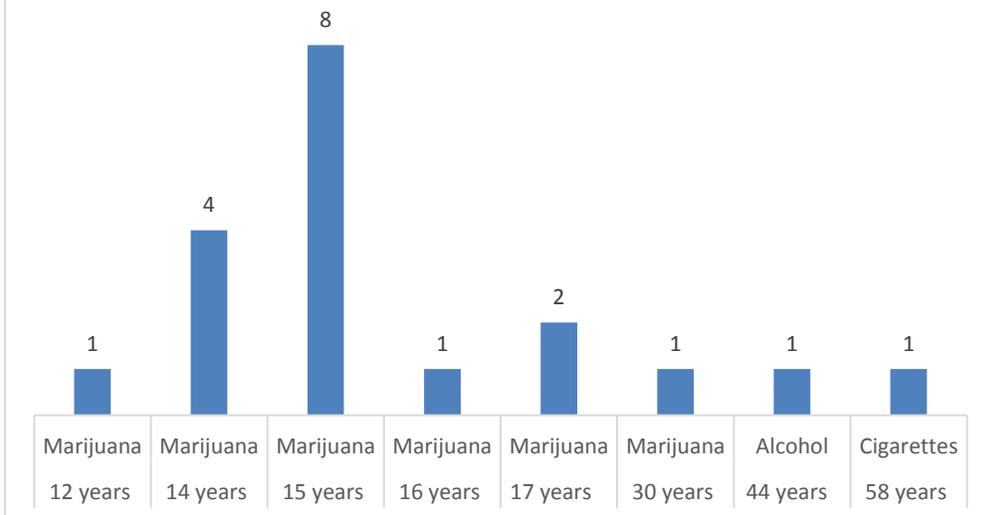
The NCSA's Drug Counselling programme is a non-residential/out-patient programme for individuals with mild to moderate cases of substance use/abuse. In this programme, a client works with a counsellor who serves as a support system to help him/her overcome drug use/dependency and become self-sufficient. The counsellor may also work closely with the family of the client as substance abuse affects the loved ones of the chemically dependent person.

In 2018, 19 persons were admitted to the NCSA's Drug Counselling Programme, the majority of whom were male and 15 years of age (See Figure 2). Persons seeking treatment ranged from 12 years to 58 years (See Figure 3).



Source: National Council on Substance Abuse

Figure 3. Age Distribution and Drug Type for Persons Seeking Treatment at NCSA's Drug Counselling Programme between January 1 and December 31, 2018

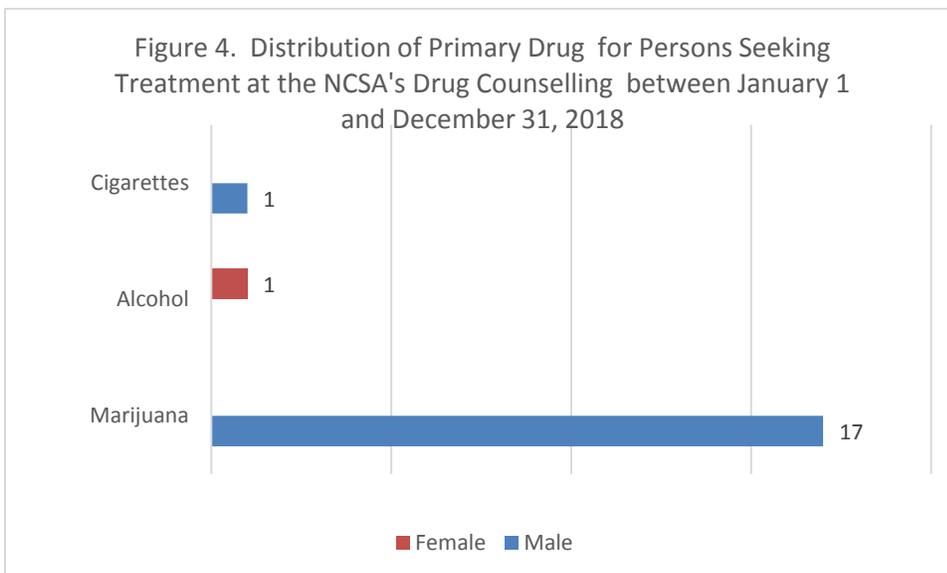


Source: National Council on Substance Abuse

Drug use profile

In 2018 marijuana was the primary drug for which treatment was sought by persons admitted to the NCSA Drug Counselling Programme (See Figure 4).

Figure 4. Distribution of Primary Drug for Persons Seeking Treatment at the NCSA's Drug Counselling between January 1 and December 31, 2018



Family History Drug use

Sixteen persons admitted to the NCSA’s Drug Counselling programme indicated that members of their families had a history of drug use (Figure 5; Table 2).

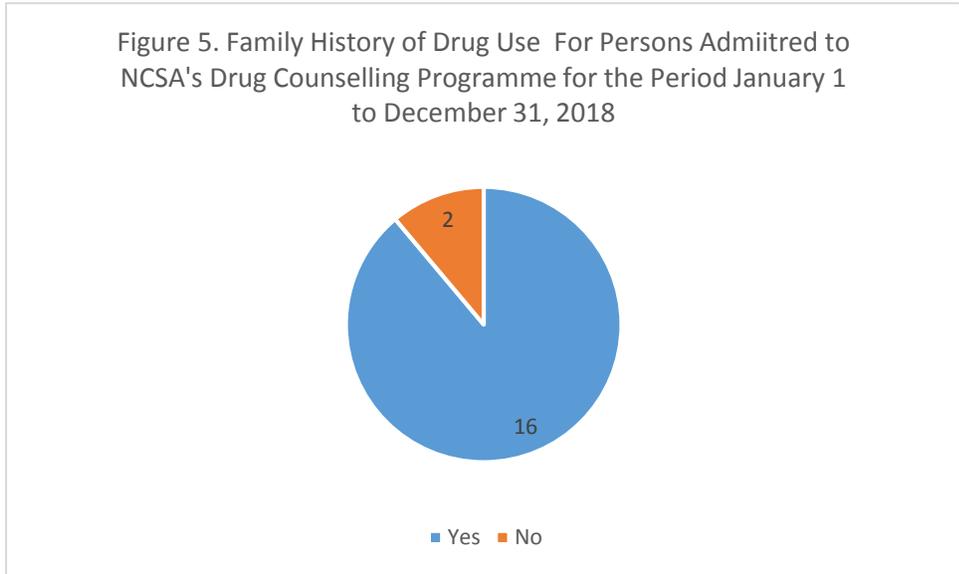


Table 2. Family History of Drug Use for Persons Seeking Treatment at NCSA’s Drug Counselling Programme between January 1 and December 31, 2018

Relationship	Drug/Combination of Drugs
Father	Marijuana, Alcohol and Cigarettes
Mother	Alcohol, Cigarettes
Uncle	Alcohol, Marijuana, Crack cocaine , Cigarettes
Brother	Marijuana

Demographic profile

Most persons admitted to the NCSA's Drug Counselling programme were single, living in rented accommodation and unemployed (See Figures 6, 7 and 8).

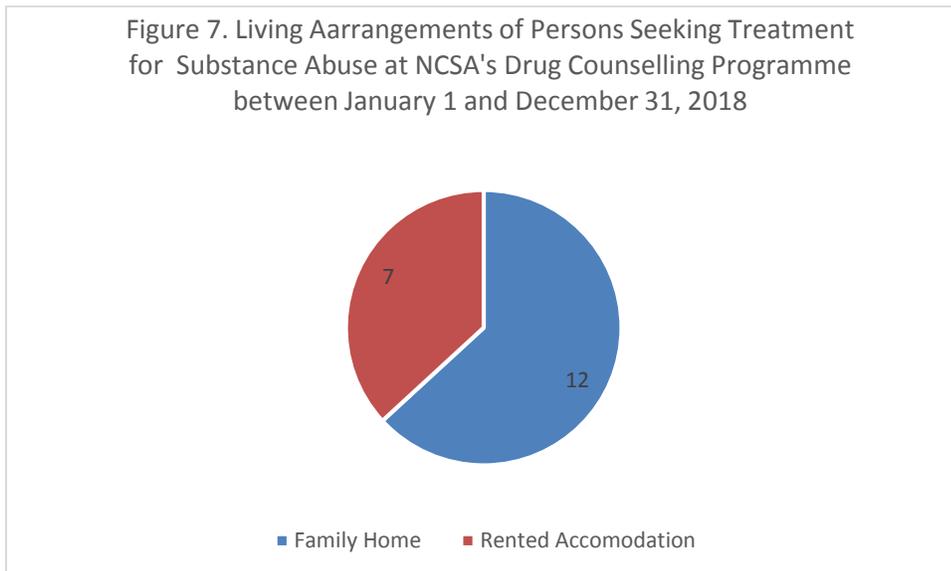
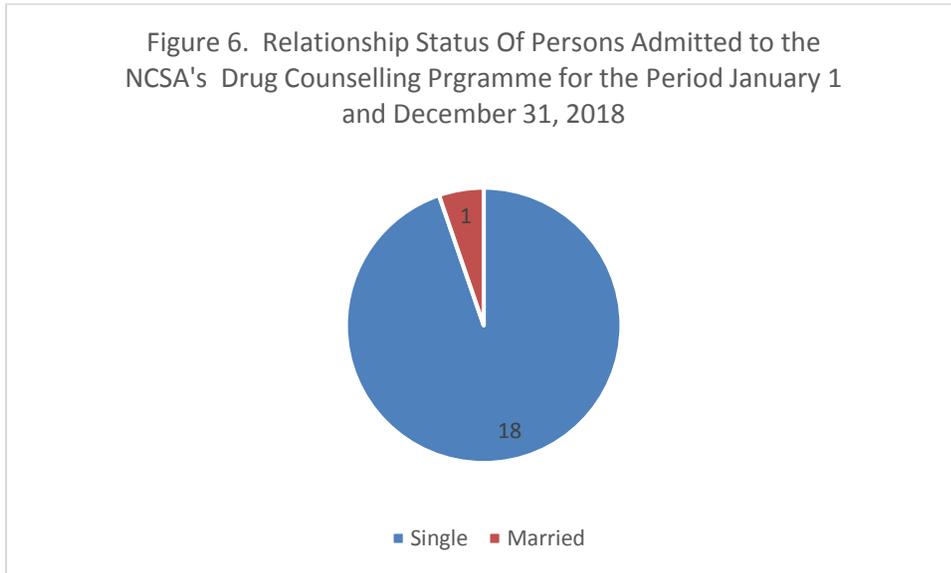
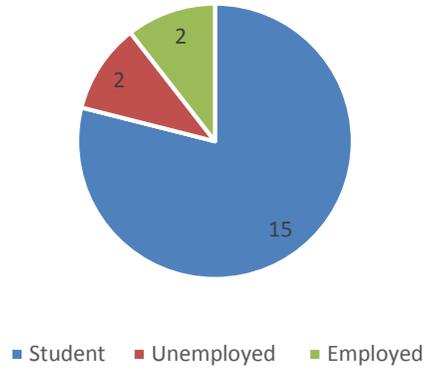


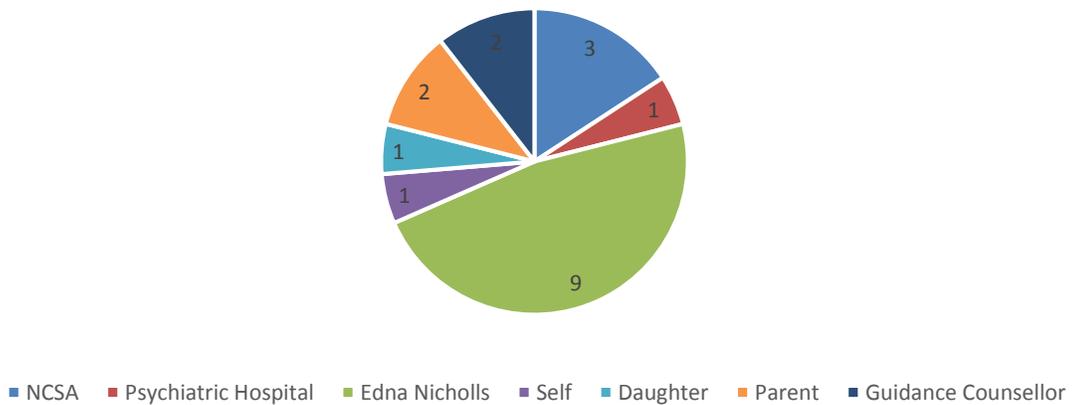
Figure 8. Employment Status of Persons Seeking Treatment for Substance Abuse at the NCSA between January 1 and December 31, 2018



Referrals

In 2018 the Edna Nicholls Centre accounted for the largest number of persons referred to the NCSA's Drug Counselling programme (See Figure 9).

Figure 9. Referrals to NCSA's Drug Counselling Programme between January 1 and December 31, 2018



3.3 The Edna Nicholls Centre

Table 4 presents the number of persons admitted to the Edna Nicholls Centre during Terms 2 and 3 of the academic year 2017 and 2018 and Term 1 of the academic year 2018/2019.

Table 3: Admissions to the Edna Nicholls Centre by Term between January 1 and December 31, 2019

Term	Academic Year	Number of Students
2 January - March 2018	2017/2018	43
3 April – July 2018	2017/2018	34
1 September – December 2018	2018/2019	65

Source: The Edna Nicholls Centre

One hundred and forty two students were enrolled at the Edna Nicholls Centre between January 1 and December 31, 2018. Thirty six students tested positive for marijuana, 33 were male and 3 female (See Figure 10). Figure 11 shows that students tested positive for marijuana were between 12 and 16 years of age. Most of these students were 15 years old (42%).

Figure 10. Gender Distribution for Students Admitted to the Edna Nicholls Centre Fopr the Period January 1 to December 31, 2018

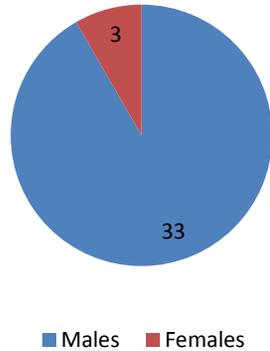
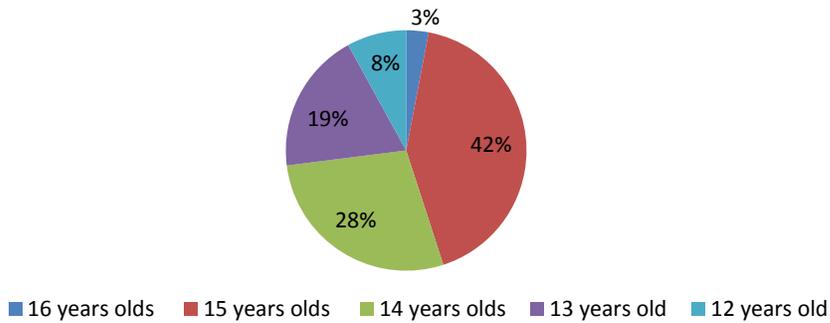


Figure 11. Age Distribution for Students Testing Positive For Marijuana Use between January 1 and December 31, 2018



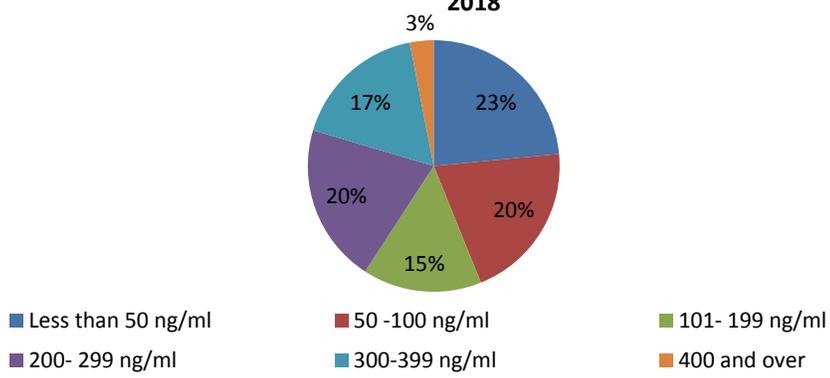
N=36

Source: Edna Nicholls Centre

Drug Use Profile

Twenty three per cent (23%) of the students were considered to have trace amounts of the drug within their system while the remaining 77% had results ranging from 50 ng/ml to 481 ng/ml (See Figure 12).

Figure 12. Marijuana Test Results for Students at the Edna Nicholls Centre Testing Positive for Marijuana Use between January 1 and December 31, 2018



N=36

Source: Edna Nicholls Centre

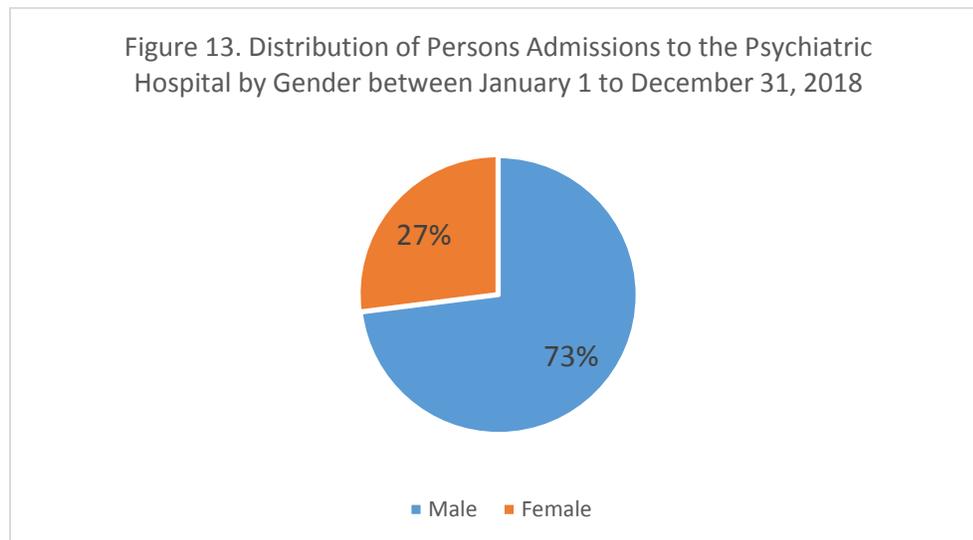
4. Treatment and Rehabilitation

4.1 Psychiatric Hospital

In previous BARDIN reports, the Psychiatric Hospital data was based solely on persons seeking substance abuse treatment from the Hospital's Drug Rehabilitation Unit. The data presented here is a reflection of the general admissions to the Psychiatric Hospital during 2018, with a specific focus on persons who received diagnoses of mental and behavioural disorders due to drug use.

2018 Admissions to the Psychiatric Hospital

During 2018, a total of 1253 persons were admitted to the Psychiatric Hospital, the majority of whom were males (73%) (See Figure 13).

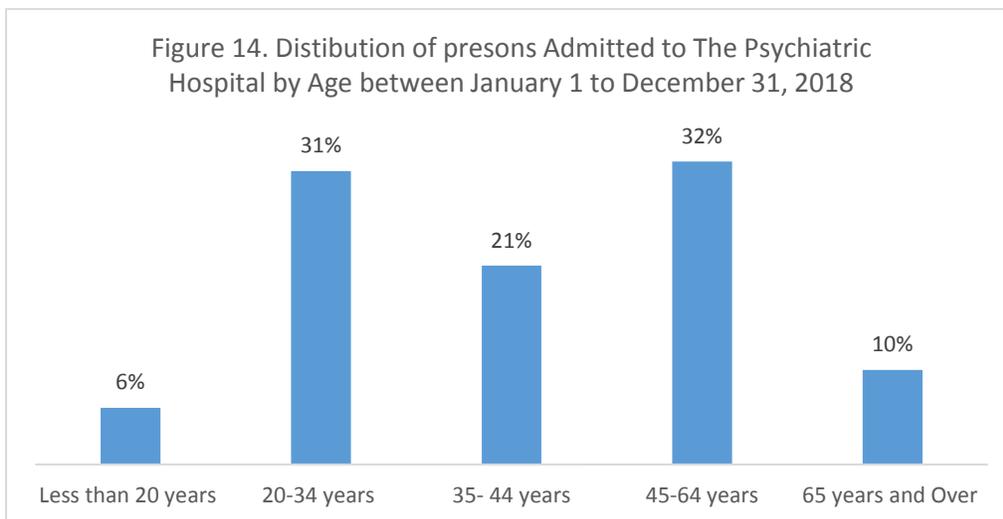


N= 1253

Source: The

Psychiatric Hospital

With respect to age, persons in the 45-64 age group were the most numerous (32%), followed by those in the 20-34 (31%) and 35-44 (21%) age groups respectively (See Figure 14). There were noticeably fewer persons in the Under 20 (6%) and 65 and over (10%) age groups admitted to the Psychiatric Hospital in 2018 (See Figure 14).



N= 1253

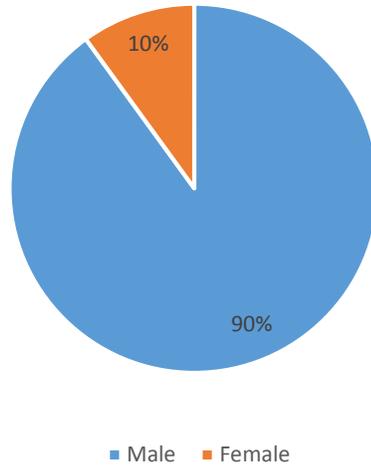
Source: The Psychiatric Hospital

Diagnoses Related to Drug Use

Just over one third (21%) of the Psychiatric Hospital's admissions in 2018 were for co-morbid diagnoses⁶ including substance abuse disorder ; the majority of whom were males (90%) between 25 and 44 years (See Figures 15 and 16).

⁶ The term co-occurring disorders or comorbidity describes two or more disorders occurring in the same person. They can occur at the same time or one after the other. Comorbidity also implies interactions between the illness that can worsen the course of both

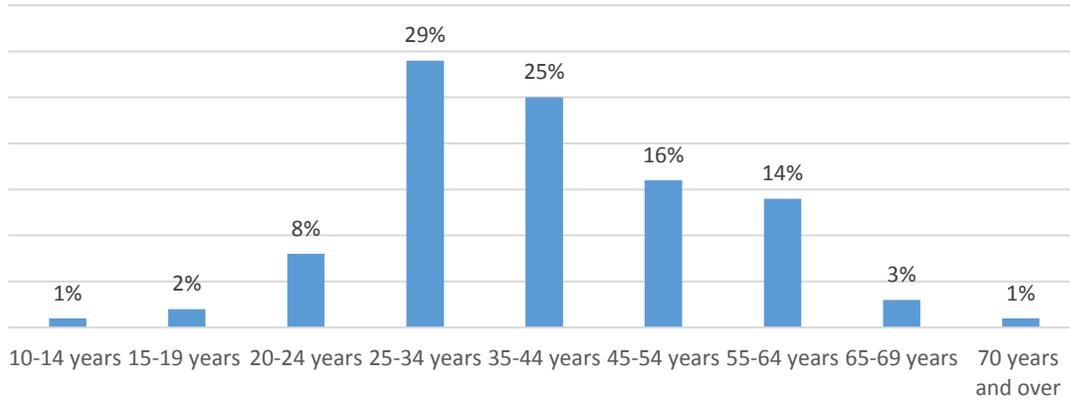
Figure 15. Distribution of Persons Admitted To Psychiatric Hospital by Co-Morbid Diagnoses including Substance Abuse Disorders by Gender



N= 265

Source: The Psychiatric Hospital

Figure 16. Distribution of Persons Admitted to the Psychiatric Hospital by Age and Co-Morbid Diagnoses including Substance Abuse Disorders January 1 to December 31, 2018

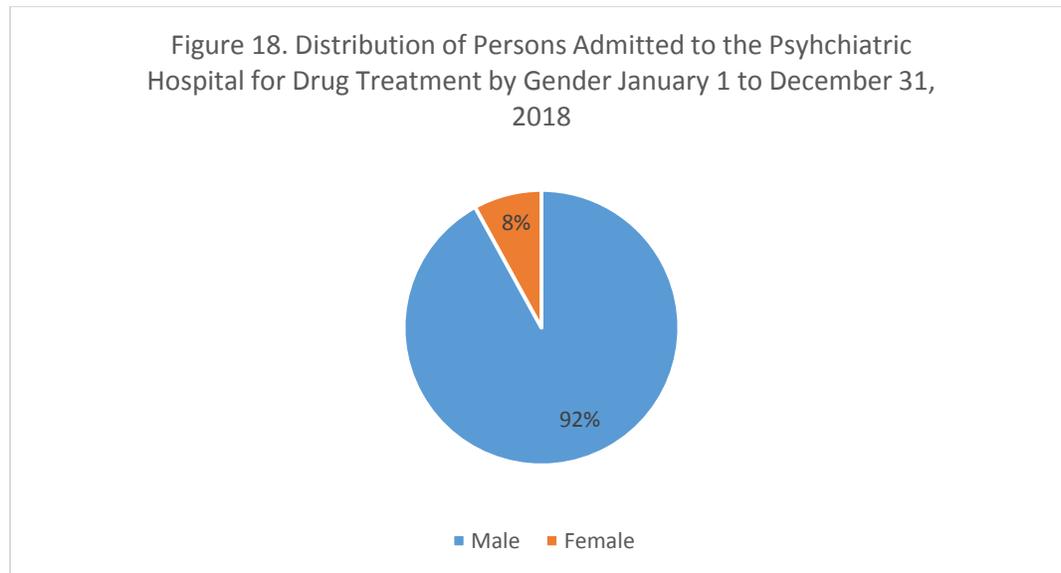
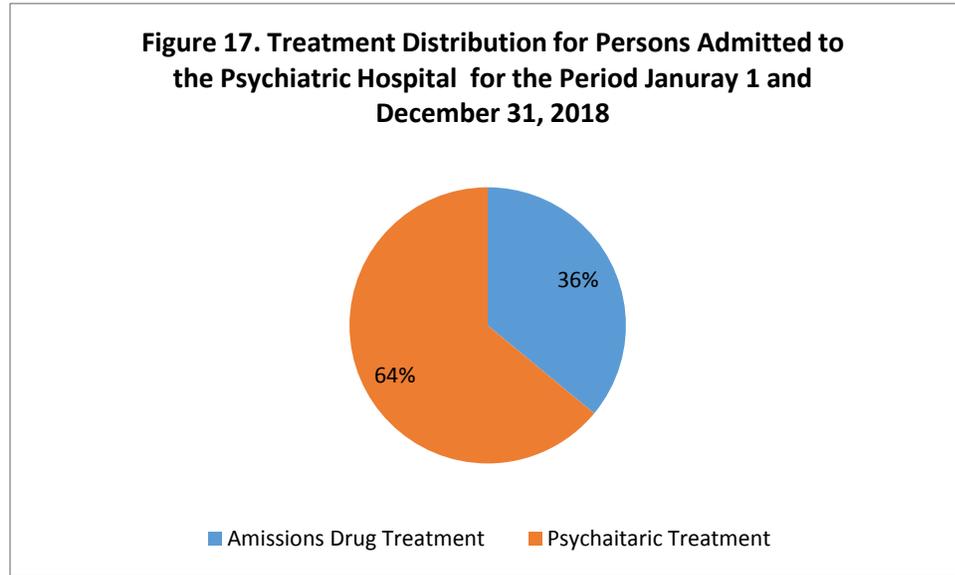


N=265

Source: The Psychiatric Hospital

2018 Admissions to the Psychiatric Hospital for Drug Treatment

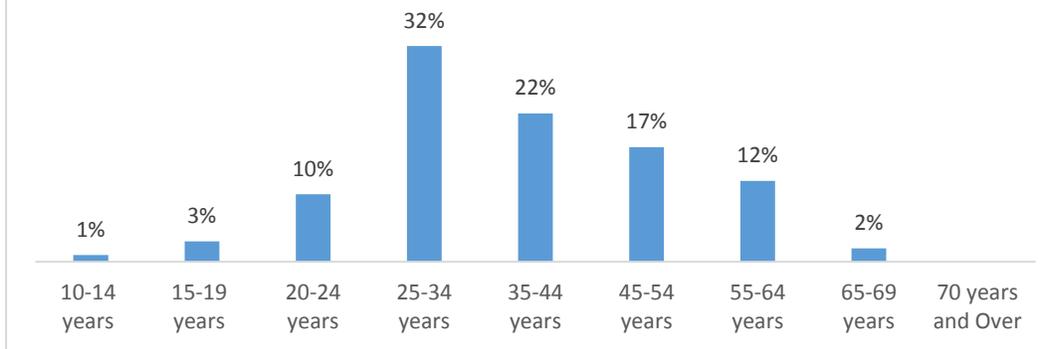
During 2018, a total of 425 or 36% of persons seeking treatment at the Psychiatric Hospital were admitted for Drug Treatment (Figure 17). The majority of whom were males (92%) between 25 and 44 years (See Figures 18 and 19).



N= 425

Source: The Psychiatric Hospital

Figure 19. Distribution of Persons Admitted to Psychaitric Hospital For Drug Treatment By Age between January 1 to December 31, 2018



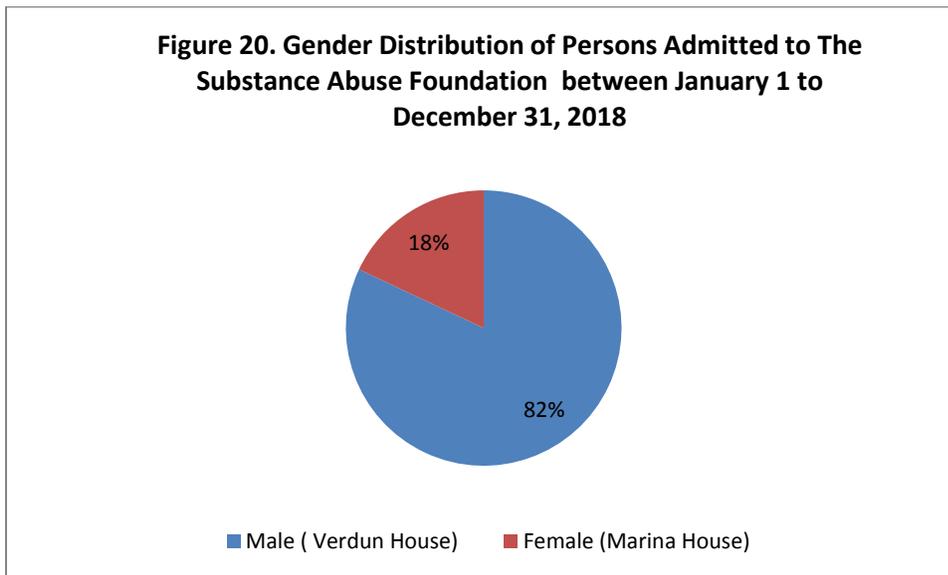
N= 425

Source: *The Psychiatric Hospital*

4.2 Substance Abuse Foundation Inc.

Demographic Profile

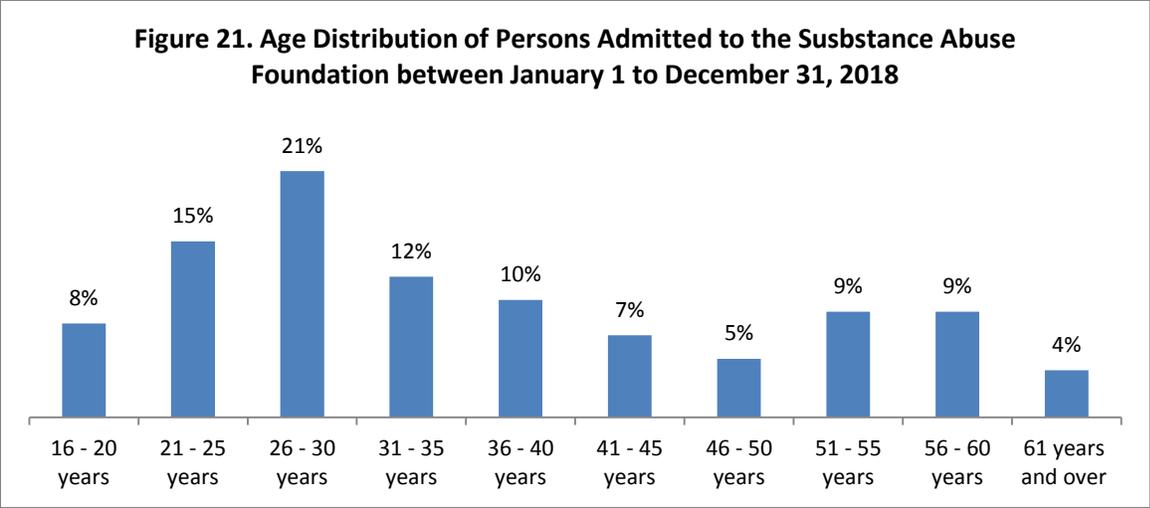
Eighty-one persons (81) received treatment from the Substance Abuse Foundation Inc. (SAF) between January 1 and December 31, 2018. Of those, 66 were male (treated at Verdun House) and 15 were female (treated at Marina House). Figure 20 presents the percentage distribution of males versus females.



N=81

Source: Substance Abuse Foundation Inc.

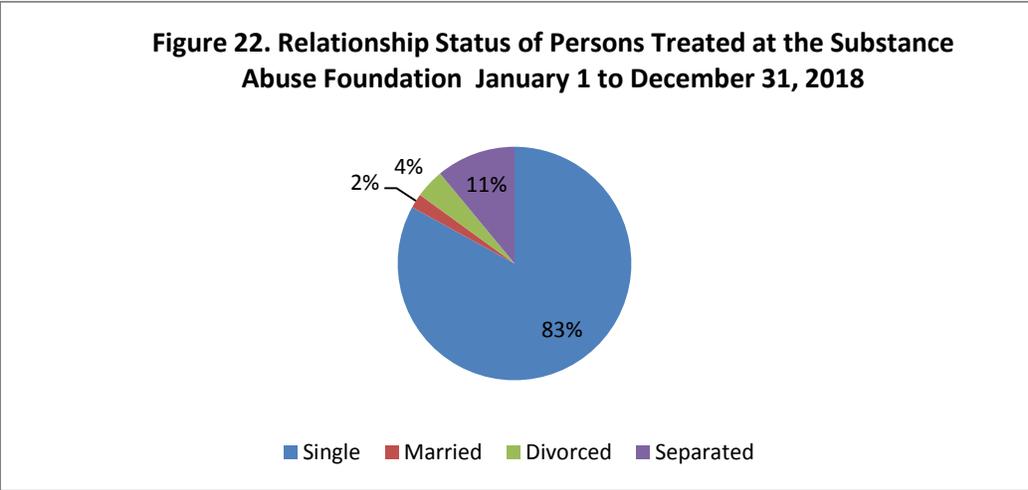
With respect to age, the 26-30 age category was the single largest group of treatment seekers closely followed by the 21-25 and 31-35 age groups respectively (See Figure 21). The percentage of persons in the 36 and over age categories range from 4% to 10%. While those persons in the 16-20 age groups were approximately 8% (See Figure 21). Overall, the majority of persons receiving treatment from the SAF in 2018 were between the age of 21 and 40 (See Figure 21).



N= 81

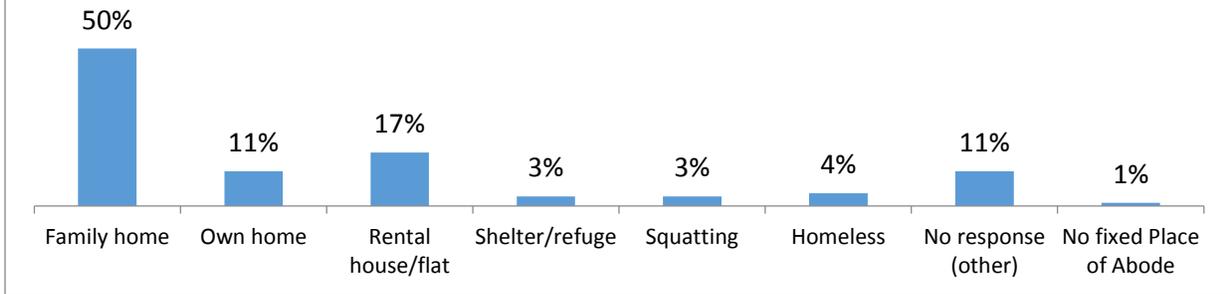
Source: Substance Abuse Foundation Inc.

The majority of SAF treatment seekers during 2018 were single (Figure 22), living at the family home (Figure 23) had no dependents (Figure 24). Most persons completed secondary level education (Figure 25) and were unemployed (Figure 26).



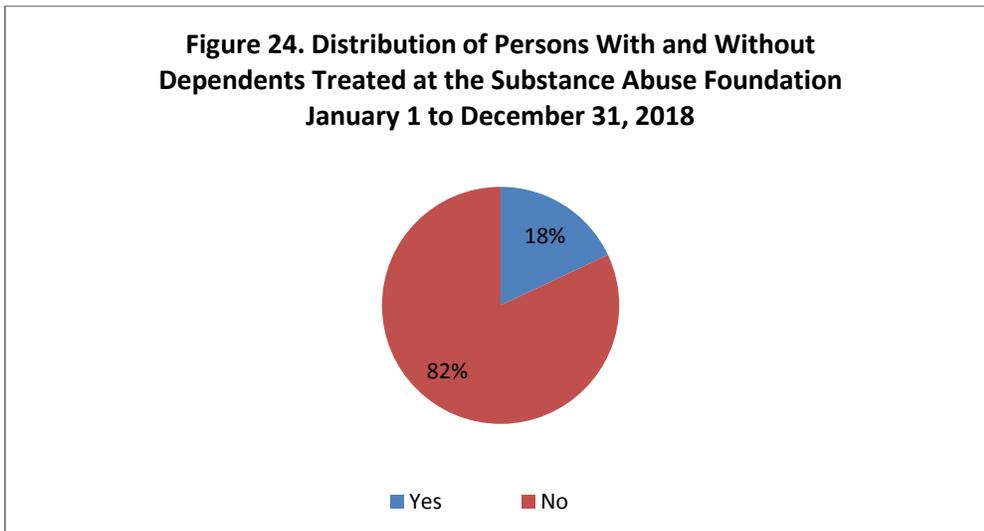
Source: Substance Abuse Foundation Inc.

Figure 23. Living Arrangements For Persons Treated at the Substance Abuse Foundation January 1 to December 31, 2018



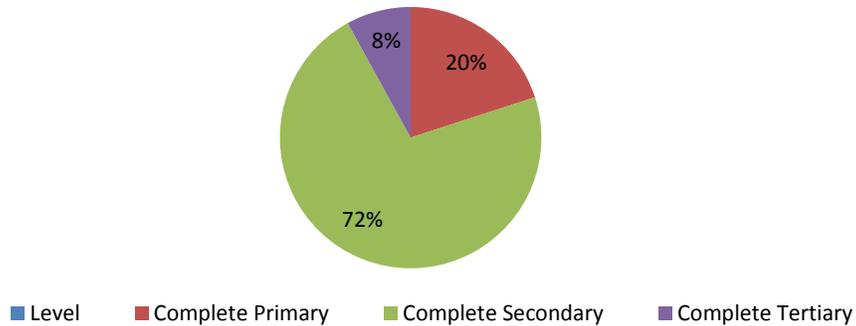
Source: Substance Abuse Foundation Inc.

Figure 24. Distribution of Persons With and Without Dependents Treated at the Substance Abuse Foundation January 1 to December 31, 2018



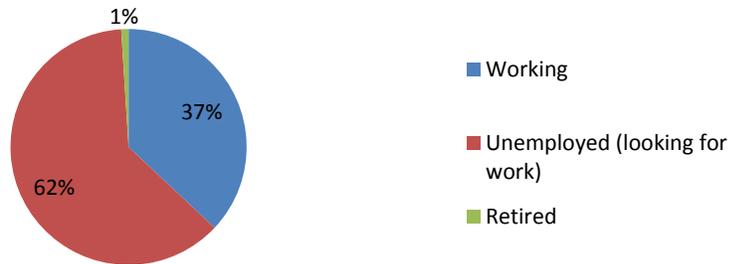
Source: Substance Abuse Foundation Inc.

Figure 25. Highest Education of Persons Treated at The Substance Abuse Foundation January 1 to December 31, 2018



Source: Substance Abuse Foundation Inc.

Figure 26. Employment Status of Persons Treated at Substance Abuse Foundation January 1 to December 31, 2018



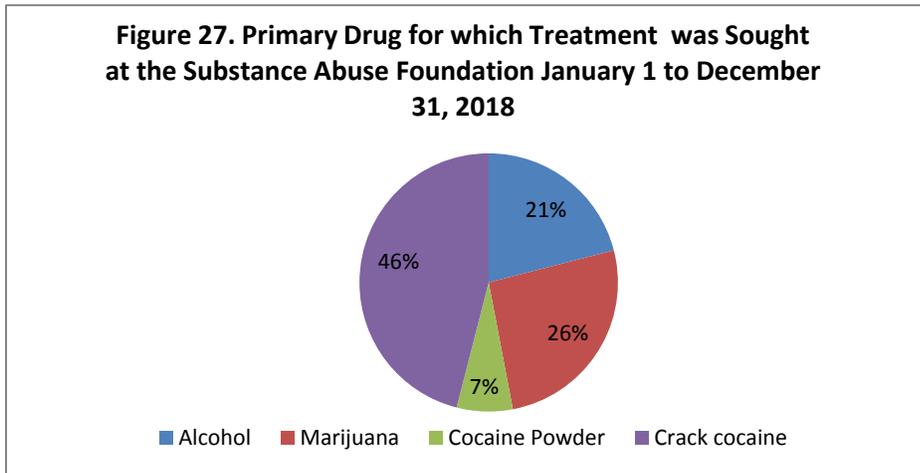
Source: Substance Abuse Foundation Inc.

Drug Use Profile

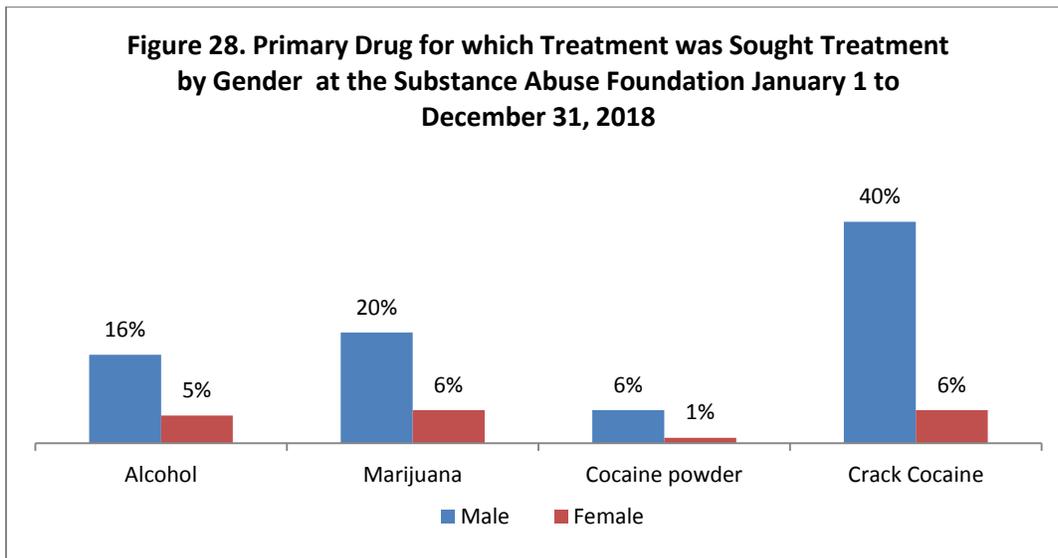
The primary drug for which treatment was sought at the SAF during 2018 was crack cocaine⁷ (46%) followed by marijuana (26%), alcohol (21%) and cocaine powder (7%) (Figure 27). More males than

⁷ Crack cocaine is a variation of cocaine made by dissolving powder cocaine in water, adding baking soda, and heating. The cocaine and the baking powder form an airy condensate, that when dried, takes the form of hard,

females sought treatment for crack cocaine, marijuana and alcohol (Figure 28). Crack cocaine was the primary drug sought for treatment in the 26 -30 age group. Marijuana the primary drug sought for treatment for persons 16-20 years and 21 and 25 years while alcohol was the primary drug sought for treatment by persons in the 51-55 age group (See Table 4).



Source: Substance Abuse Foundation Inc.



smokeable 'rocks'. A pebble –sized piece of crack, which contains roughly one-tenth a gram of pure cocaine provides an intense high, but one that lasts only fifteen minutes (Fryer, Heaton, levitt & Murphy, 2006).

Source: Substance Abuse Foundation Inc.

Table 4: Primary Drugs for Which Treatment was Sought at the Substance Abuse Foundation Between January 1 and December 31, 2018 by Age.

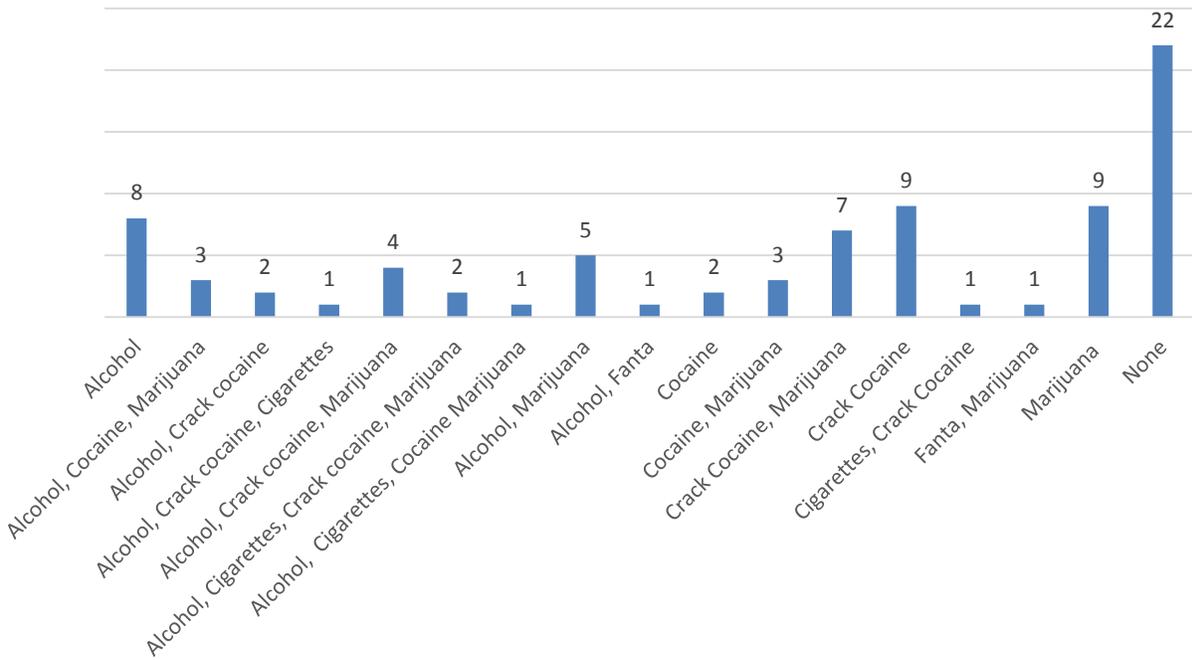
Drug	Age Category									
	16-20 years	21-25 years	26-30 years	31-35 years	36-40 years	41-45 years	46-50 years	51-55 years	56-60 years	61 years and over
Alcohol	1	1	1		2	3	2	5	1	1
Marijuana	4	5	4	5	2	1				
Cocaine powder	1	3			1				1	
Crack Cocaine	1	3	12	5	3	2	2	2	5	2

Drug use in last 30 days

The most common drugs used in the last 30 days were crack cocaine, marijuana and alcohol (Figure 29). More Males than females use drugs in the last 30 days (Table 5). In the last 30 days persons under 20 years seeking treatment for substance abuse at the Substance Abuse Foundation (SAF) in 2018 used either alcohol, marijuana or cocaine. However, persons between 16 and 61 years tended to use combinations of drugs or polydrug use⁸ (Table 6)

⁸ Polydrug use is when a person uses more than one type of drug, either at the same time or at different times. Polydrug use occurs when a person: uses two or more drugs in combination. Uses one drug to counteract the effects (or the after effects) of another (Herbeck, Brecht, Lovinger, Raihan, Christou & Sheaff, 2015)

Figure 29. Distribution of Persons Seeking Treatment at the Substance Abuse Foundation and Used Drugs in the Last 30 days during the Period January 1 to December 31, 2018



Source: Substance Abuse Foundation Inc.

Table 5. Drugs used in the Past 30 days by Gender

Drug	Male	Female	Total
Alcohol	7	1	8
Alcohol, Cocaine, Marijuana	3	0	3
Alcohol, Crack Cocaine	1	2	3
Alcohol, Crack Cocaine, Cigarettes	1	0	1

Alcohol, Crack Cocaine, Marijuana	4	0	4
Alcohol, Cigarettes, Crack Cocaine, Marijuana	0	2	2
Alcohol, Cigarettes, Cocaine Marijuana	1	0	1
Alcohol, Marijuana	2	2	4
Alcohol, Fanta	1	0	1
Marijuana	8	1	9
Cocaine	2	0	2
Cocaine, Marijuana	0	1	1
Crack Cocaine, Marijuana	6	1	7
Crack Cocaine	9	1	10
Cigarettes, Crack Cocaine	1	0	1
Fanta, Marijuana	1	0	1
None	19	4	23
Total	66	15	81

Table 6. Drugs used in the Past 30 days by Age

Drug/Drug Combination	Age Category									
	16-20 years	21-25 years	26-30 years	31-35 years	36-40 years	41-45 years	46-50 years	51-55 years	56-60 years	61 years and over
Alcohol	1		1			1	2	2	2	1
Alcohol, cocaine , marijuana		1	1	1						
Alcohol, Crack cocaine			2						1	
Alcohol , Crack Cocaine Cigarettes							1			
Alcohol, Crack cocaine , Marijuana					2			1	1	
Alcohol, Cigarettes, Crack Cocaine, Marijuana					1	1				
Alcohol, Cigarettes,					1					

Cocaine , Marijuana										
Alcohol, Marijuana			1	1		1		1		
Alcohol, Fanta								1		
Marijuana	2	2	1	2		1	1			
Cocaine	1					1				
Cocaine, Marijuana		2		1						
Crack cocaine , Marijuana		1	3	1	1			1		
Crack cocaine		2	3	2		1			1	1
Fanta, Marijuana			1							
None	3	4	4	3	3		2	1	2	1

Source: Substance Abuse Foundation Inc.

Age of first Drug use

Though some persons seeking treatment for substance abuse at the SAF in 2018 used marijuana for the first time at 10 years and under; most persons seeking treatment at the SAF used marijuana for the first time between 11 and 15 years. Similarly, some persons seeking treatment at the SAF in 2018 used alcohol for the first time at 10 years but most persons who consume alcohol for the first time were in the 16-20 age group (See Table 7).

Table 7: Age of fist Drug use by Drug Type

Drug	Age Category											
	10 years and under	11 -15 years	16-20 years	21-25 years	26-30 years	31-35 years	36-40 years	41-45 years	46-50 years	51-55 years	56-60 years	61 years and over
Alcohol	4	14	9	2								
Cigarettes (Nicotine)	1	3	2		1							
Marijuana	11	23	8				1				1	
Crack Cocaine				1	1							

Source: Substance Abuse Foundation Inc.

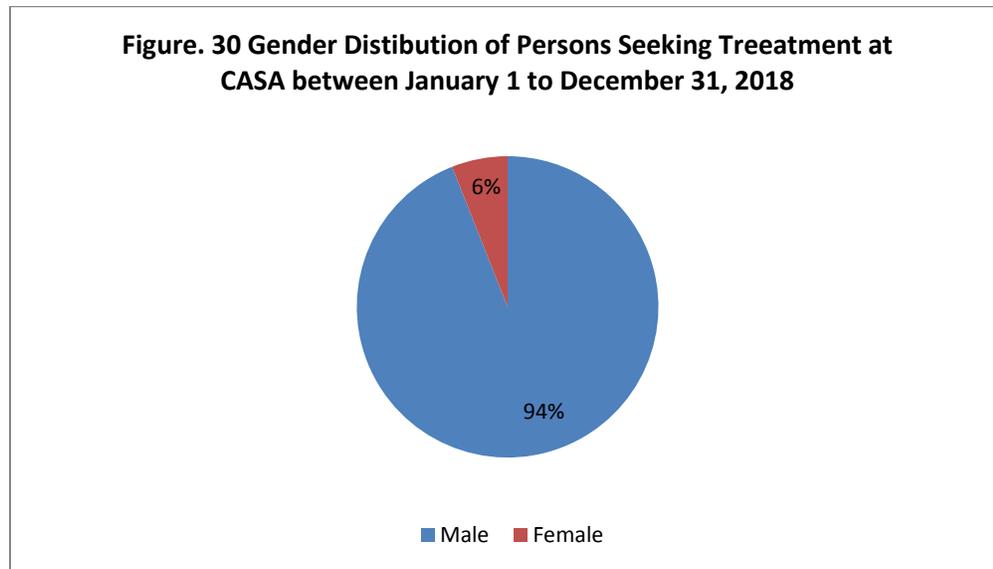
4.3 Centre for Counselling Addiction Support Alternatives (CASA)

Demographic Profile

Fifty three persons received substance abuse treatment at the Centre for Counselling Addiction Support Alternatives (CASA) between January 1 and December 31, 2018. The majority of treatment seekers were males (See Figure 30).

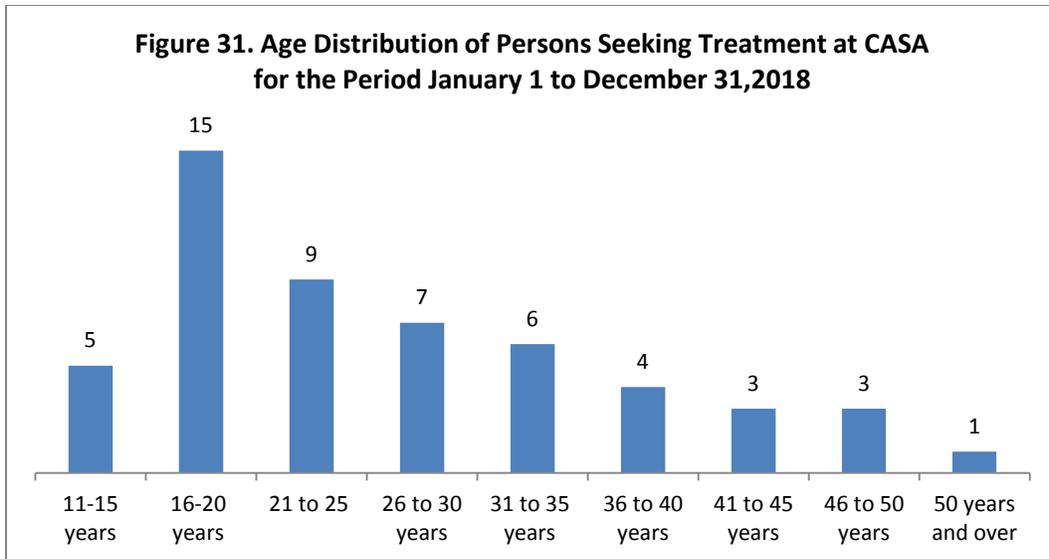
The less than 20 age category contained the single largest group of treatment seekers at CASA during the period under review. This was followed by the 21-25, 26-30 and 31-35 age categories respectively (See Figure 31). Persons from other age groups were treated with less frequency.

Previous BARDIN reports have also shown the Under 20 age category to be the single largest group of treatment seekers.



N= 53

Source: Centre for Counselling Addiction Support Alternatives



N=53

Source: Centre for Counselling Addiction Support Alternatives

In addition to age and gender, the following demographic characteristics were also assessed: living arrangements, employment status and education level. Analysis revealed that the majority of clients receiving treatment at CASA during 2018 lived in their family home (See Figure 32). Just about half completed a secondary school education (See Figure 33). With respect to employment status, employed persons accounted for the largest percentage of treatment seekers (43%) (This was followed by students (30%) and retired persons (2%) (See Figure 34).

Figure 32. Living Arrangements of Persons Seeking Treatment at CASA January 1 to December 31, 2018

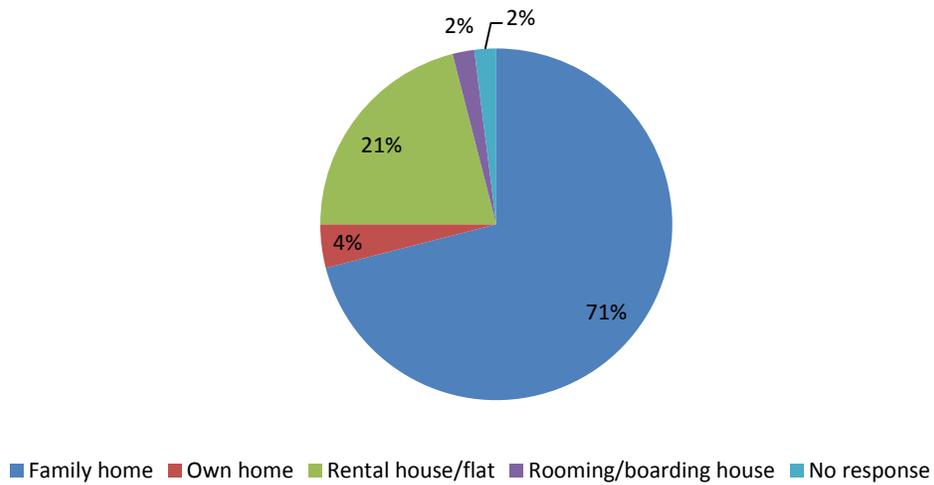


Figure 33. Education Level Completed for Persons Seeking Treatment at CASA between January 1 to December 31, 2018

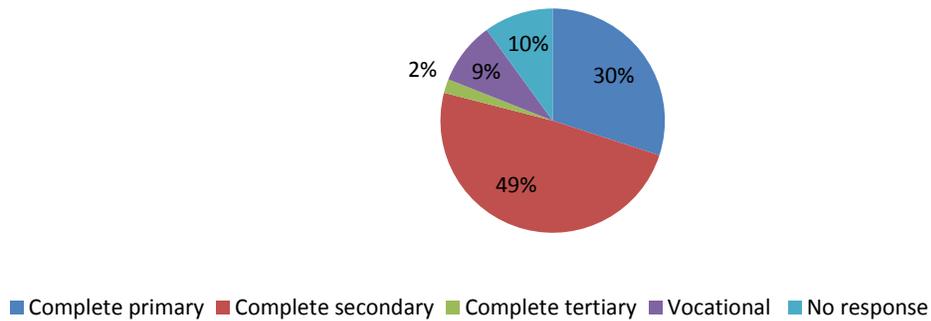
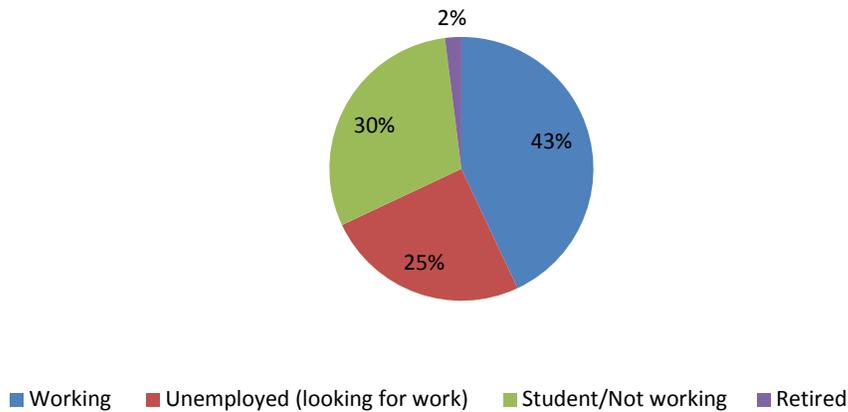


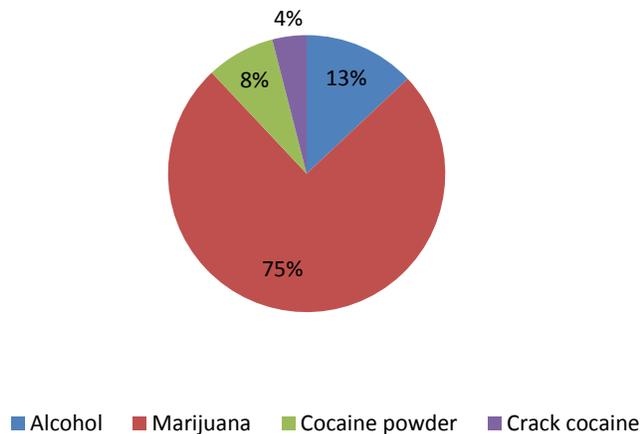
Figure 34. Employment Status of Persons Seeking Treatment at CASA between January 1 to December 31, 2018



Drug Use Profile

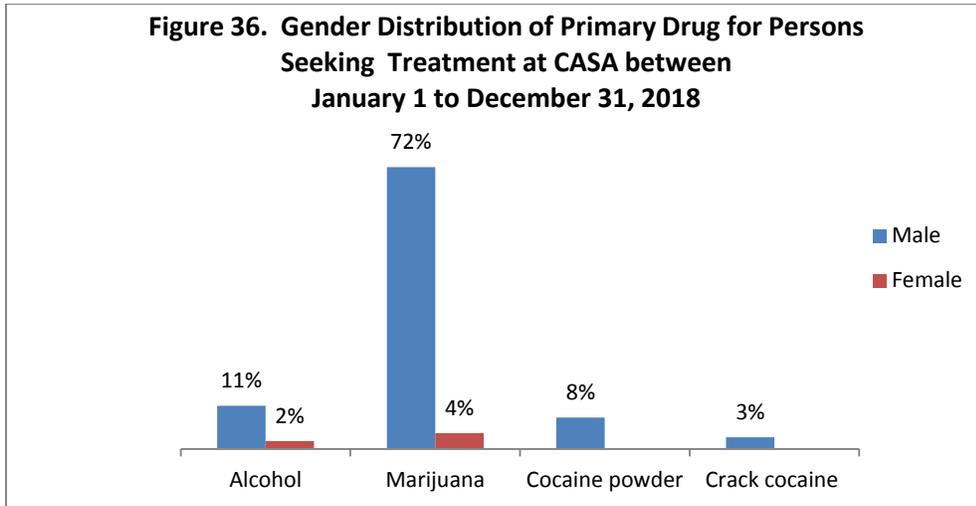
Three out four (75%) of all persons treated at CASA during 2018 were treated for marijuana use (See Figure 35). Alcohol was the second most common (8%) drug which motivated the need for treatment, followed by crack cocaine (4%) (See Figure 54). Males accounted for the largest demographic treated for marijuana (72%), alcohol (11%) cocaine powder (8%) and crack cocaine (3%) (See Figure 36). Most persons seeking treatment for marijuana were in the 16-20 age group (Figure 37) and marijuana smoked was the most frequent administration of drugs consumed (See Figure 38).

Figure 35. Primary Drug of Persons Seeking Treatment at CASA January 1 to December 31, 2018

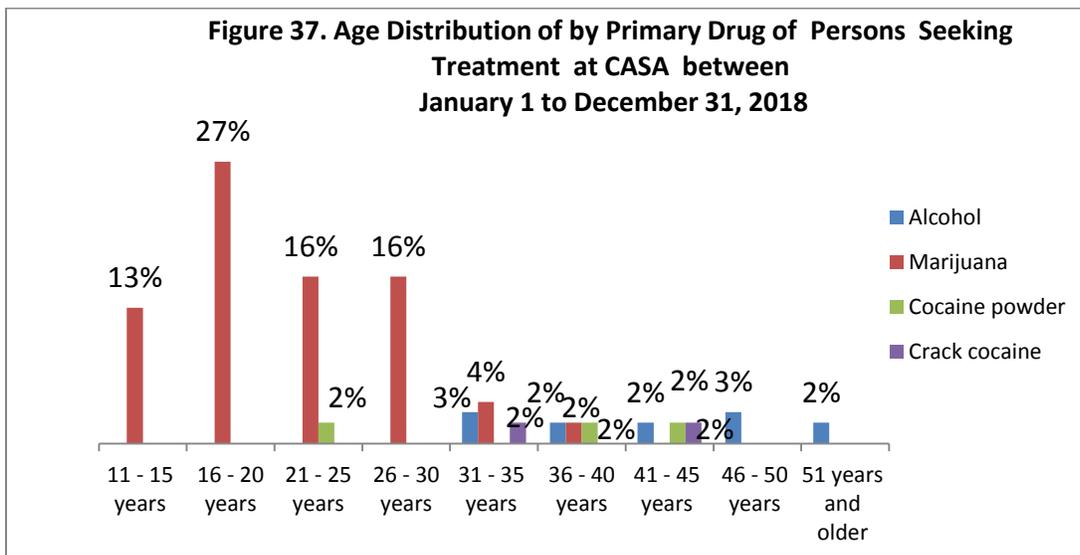


N=53

Source: Centre for Counselling Addiction Support Alternatives

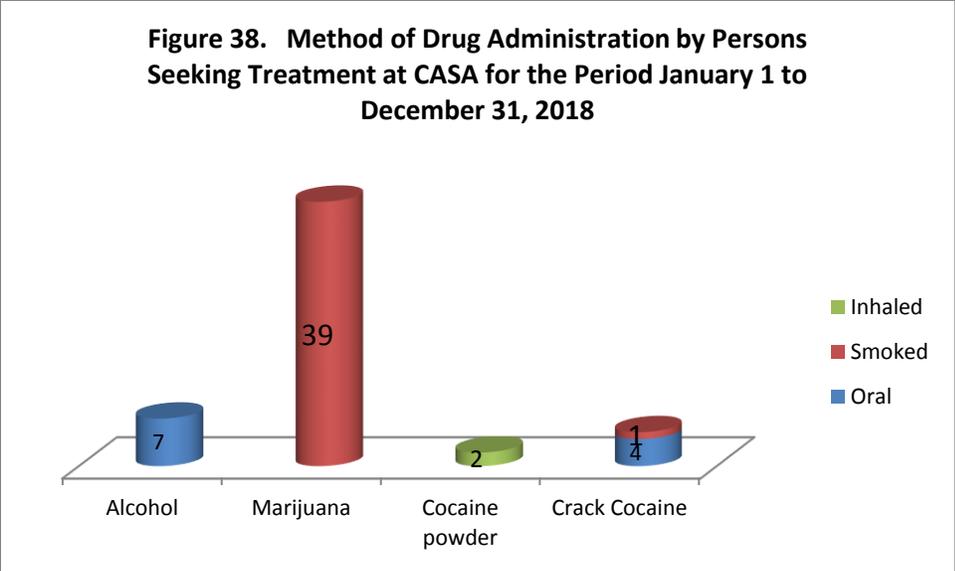


N=53



N=53

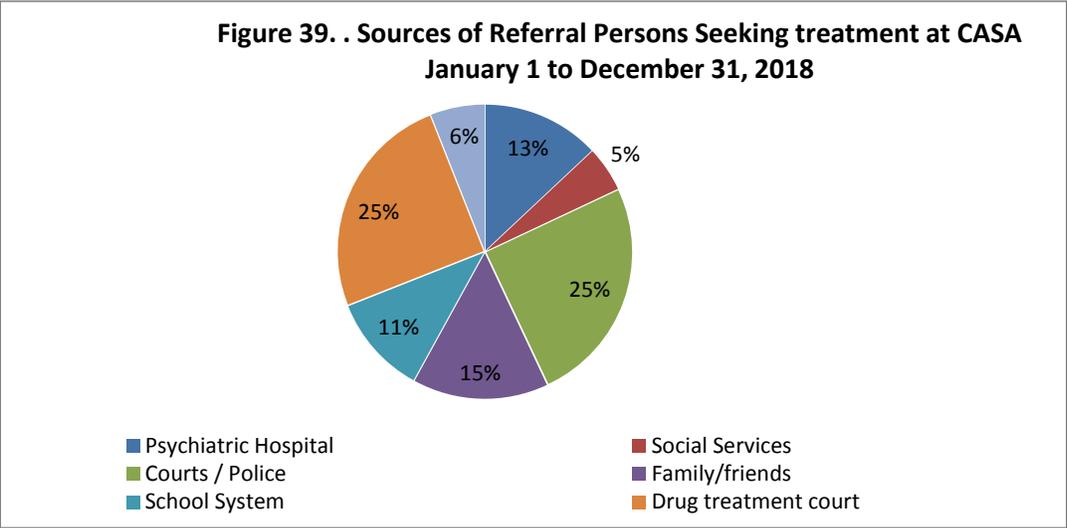
Source: Centre for Counselling Addiction Support Alternatives



N=53

Sources of Referral

The most common sources of referral among persons receiving treatment at CASA in 2018 were: the Courts/Police, the Drug Treatment Court⁹ and Family /friends, respectively (See Figure 39). There were notably fewer referrals from the Prison and the Queen Elizabeth Hospital (See Figure 39).

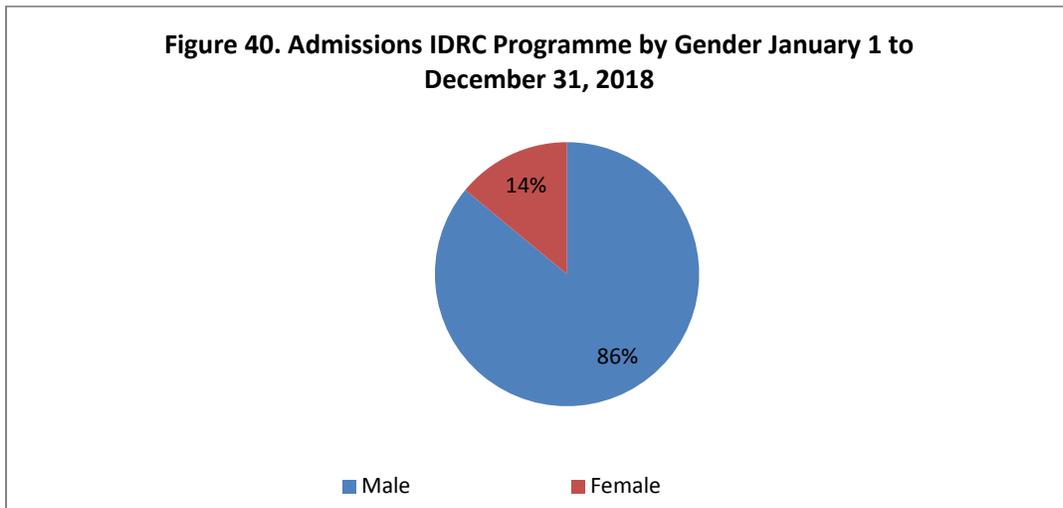


N= 53

⁹ On February 11, 2014 Barbados formally inaugurated the country’s first pilot Drug Treatment Court as an alternative to incarceration for drug dependent offenders, at the Supreme Court in the city of Bridgetown

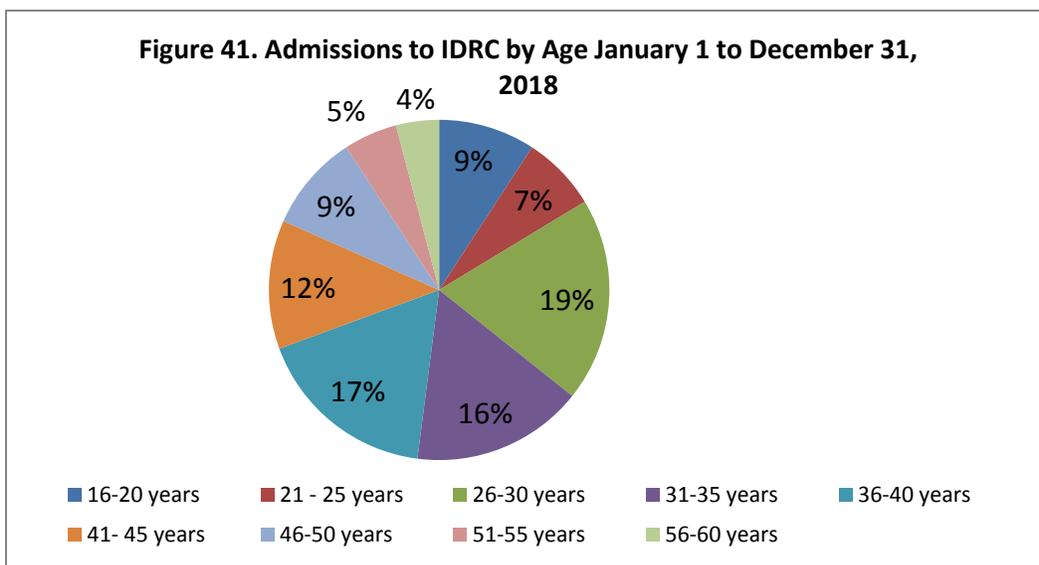
4.4 Inmate Drug Rehabilitation and Counselling (IDRC) Programme

Seventy-four persons were admitted to the Inmate Drug Rehabilitation and Counselling (IDRC) Programme at the Barbados Prison Service (BPS) during the 2018 calendar year. Males accounted for 86% of the admissions while females accounted for the remaining 14% (See Figure 40). With respect to age, just over half (52%) of persons enrolled in the IDRC programme were between the ages of 26 and 40 (See Figure 41).



N= 74

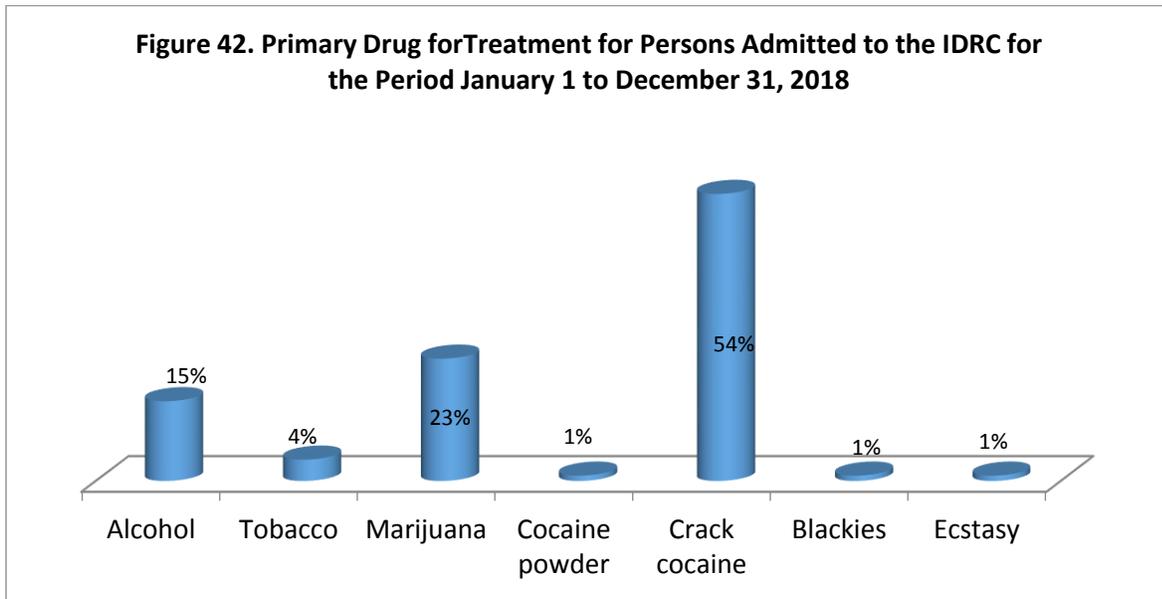
Source: Barbados Prison Service



N=74

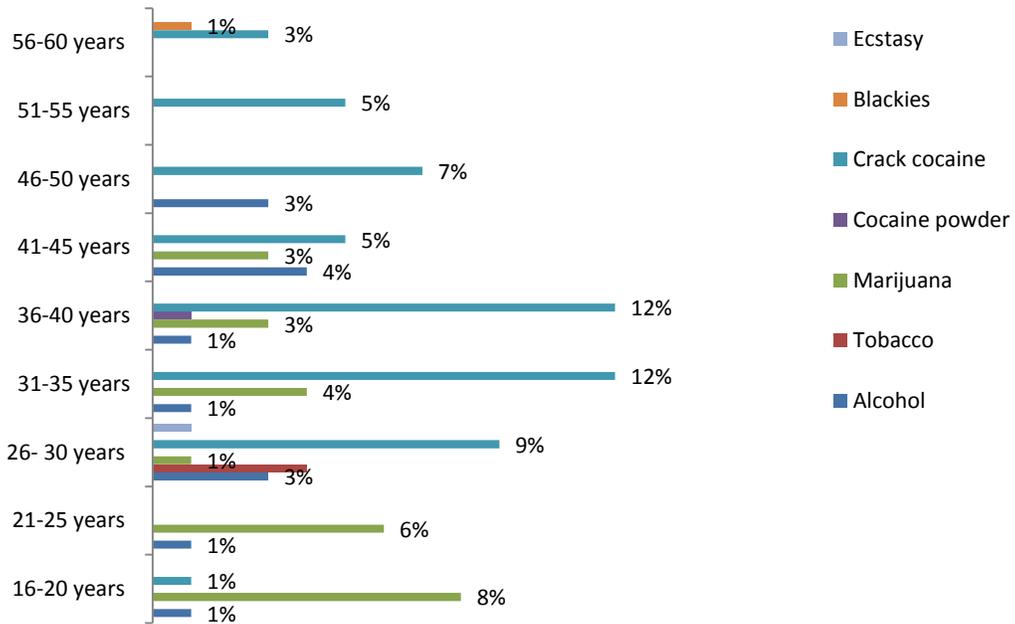
Drug Use Profile

Crack cocaine (54%) followed by Marijuana (23%) was the primary drug for treatment for persons admitted to the IDRC programme in 2018 (See Figure 42). Crack cocaine was the primary drug for treatment among the 36-40 and 31-35 age groups while marijuana was the primary drug for treatment in the 21-25 and 16 -20 age groups (See Figure 43).



Source: Barbados Prison Service

Figure 43. Age and Primary Drug Distribution of Persons Admitted to the IDRC between January 1 to December 31, 2018



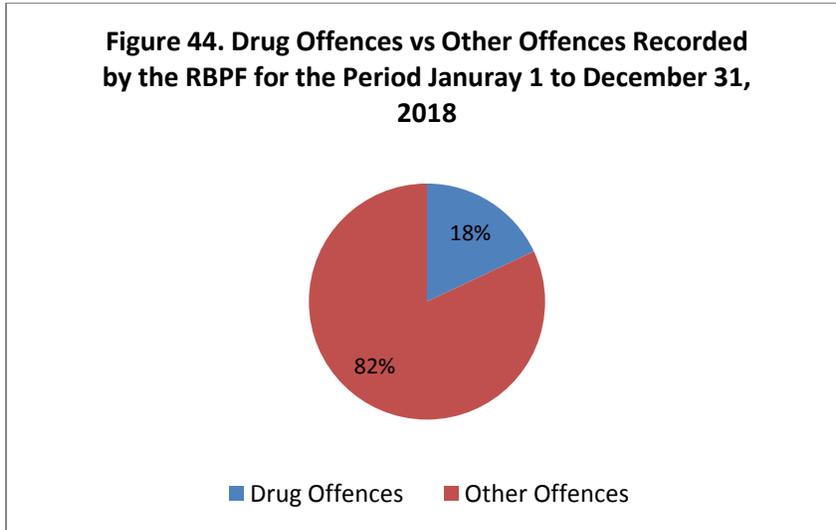
N=74

Source: Barbados Prison Service

5. Supply Control

5.1 Royal Barbados Police Force

The Royal Barbados Police Force (RBPf) recorded 7921 offences during the period January 1 to December 31, 2018. Of these, 18% were drug offences (See Figure 44).



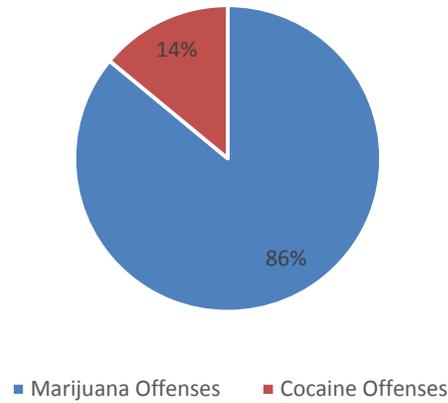
Source: Royal Barbados Police Force

Distribution of Drug Offences by Drug Type

From Figure 45, the 2018 drug offences were of mostly of two types: they were mostly marijuana-related¹⁰ or cocaine-related. The marijuana offences far outnumbered the cocaine offences during this period (See Figure 45). Though fewer offences of other drugs were reported, the emergence of synthetic drugs including Xanax, methamphetamine and ecstasy need to be carefully monitored as they present a significant risk to public health and the development of criminal networks (See Figure 46).

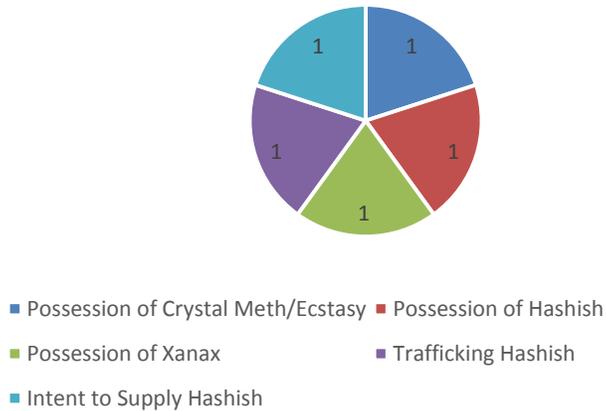
¹⁰ Cannabis also known as marijuana among other names, is a psychoactive drug from the Cannabis plant used for medical or recreational purposes. The main psychoactive part of cannabis is tetrahydrocannabinol, one of the 443 known compounds in the plant, including at least 65 other cannabinoids.

Figure 45. Drug Offences by Drug Type for the Period January 1 to December 31, 2018



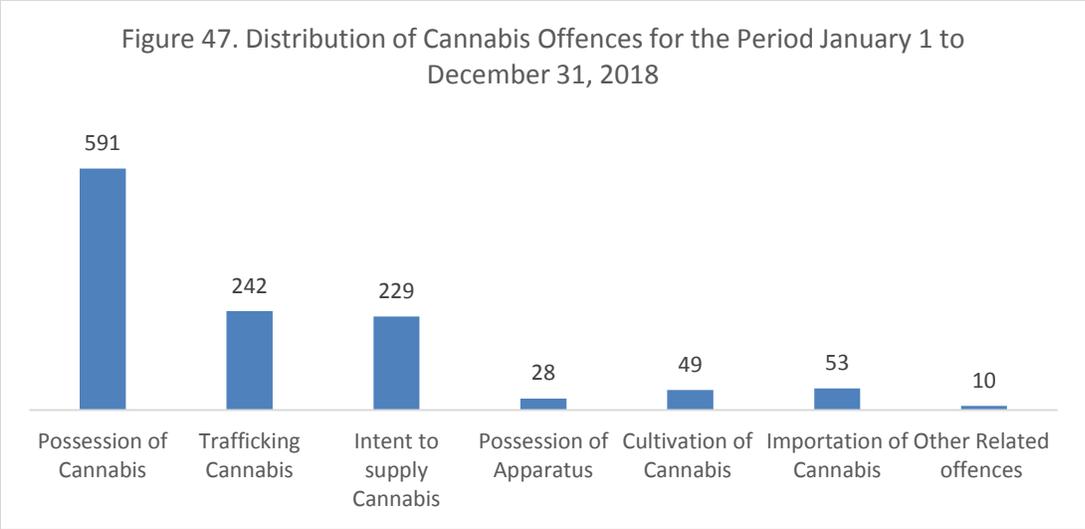
Source: Royal Barbados Police Force

Figure 46. Synthetic Drugs Reported by the RBPF between January 1 to December 31, 2018



Cannabis Offences

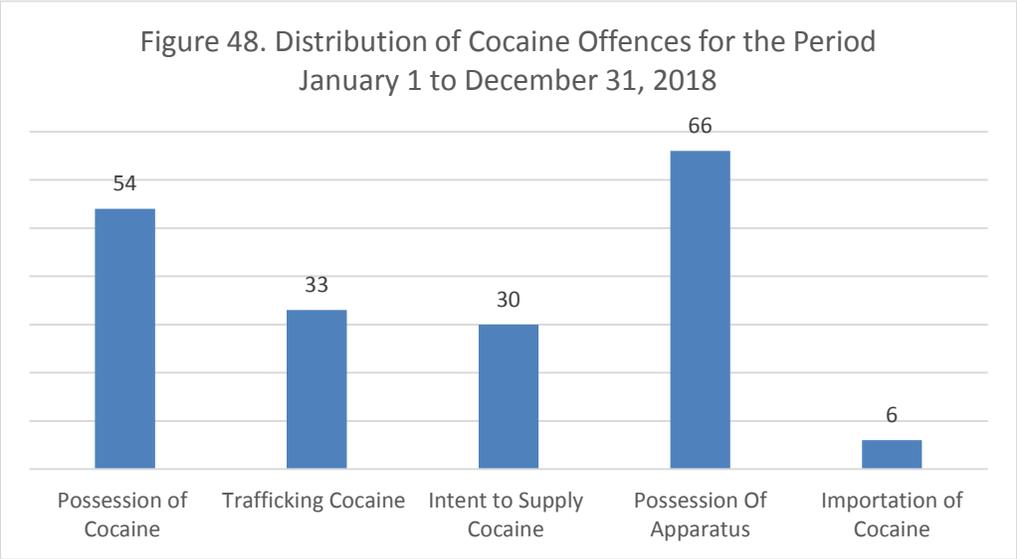
Figure 47 presents the distribution of cannabis offences for the period January 1 to December 31, 2018. From the graph it can be seen that Possession of Cannabis was the most common cannabis-related offence followed by Trafficking Cannabis and Intent to Supply Cannabis respectively (See Figure 47). Offences such as Possession of Apparatus, Cultivation of Cannabis, Importing Cannabis, and Other Drug Crimes were less numerous (See Figure 47).



Source: Royal Barbados Police Force

Cocaine Offences

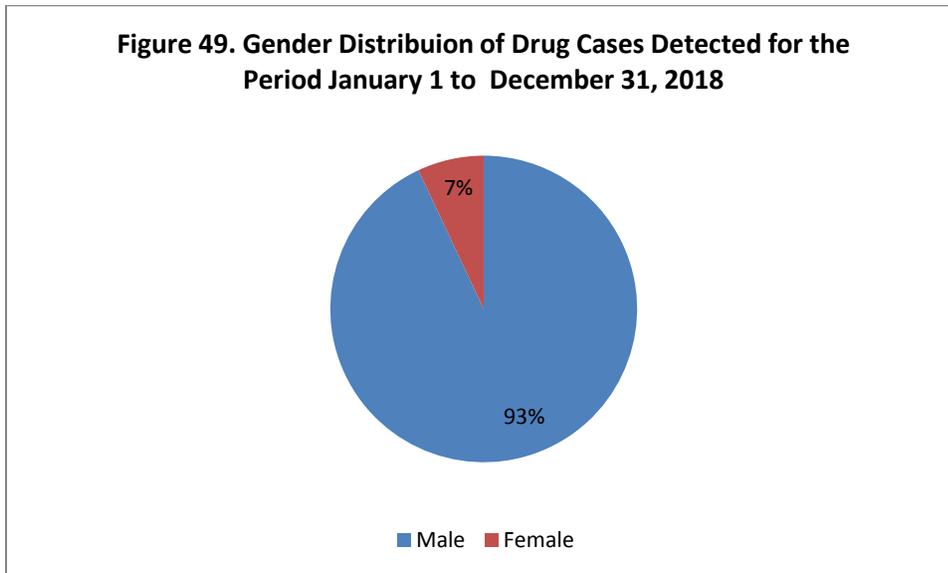
Figure 48 reveals that Possession of Cocaine was the most common cocaine-related offence in 2018. This was closely followed by Possession of Apparatus, Trafficking of Cocaine and Intent to Supply Cocaine (See Figure 48). Importing Cocaine was the least common cocaine-related offence for the year (See Figure 48).



Source: Royal Barbados Police Force

Drug Cases Detected¹¹

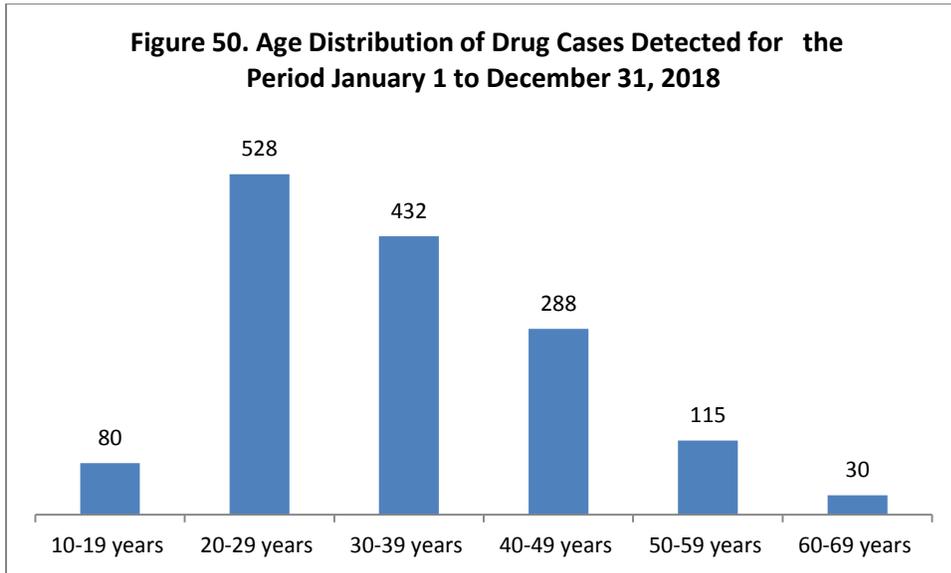
In 2018, 1,473 drug cases were detected. Males accounted for 93% of cases detected while females accounted for the remaining 7% (See Figure 49). The 20- 29 years age category contained the single largest group of drug cases detected during the period under review. This was followed by the 30-39, and the 40-49 age groups (See Figure 50).



Source: Royal Barbados Police Force

¹¹ An undertaking that seeks, collects, and gathers evidence of a crime for a specific purpose. In 2018 688 persons were arrested for various drug offences, clearing the 1396 drug cases for that year.

Age Distribution of Drug Cases Detected January 1 to December 31, 2018



Source: Royal Barbados Police Force

Drug Seizures

In 2018 Cannabis (4512.5kg) and Cannabis plants were the most commonly seized drugs by the RBPF Narcotics Unit during 2018 (See Tables 8 and 9).

Table 8: Drug Seizures by the Narcotics Unit between January 1 and December 31, 2018

Drug	Quantity Seized (kg)
Cannabis	4512.5
Cocaine	40.9
Methamphetamine	0.02

Source: The Royal Barbados Police Force

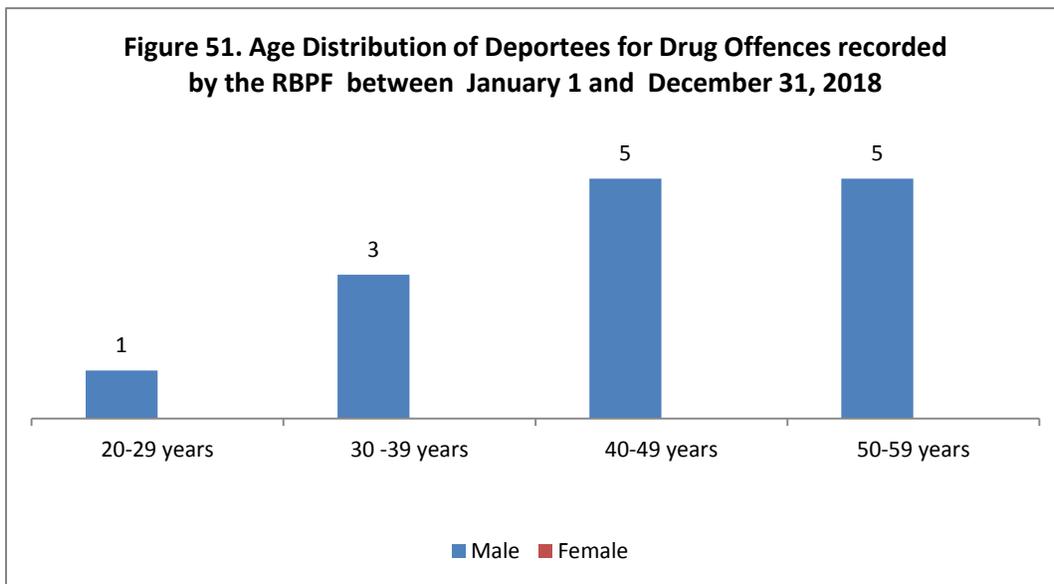
Table 9. Cannabis plants seized by the Narcotics Unit between January 1 and December 31, 2018

Drug	Quantity Seized
Cannabis Plants	3,487

Source: The Royal Barbados Police Force

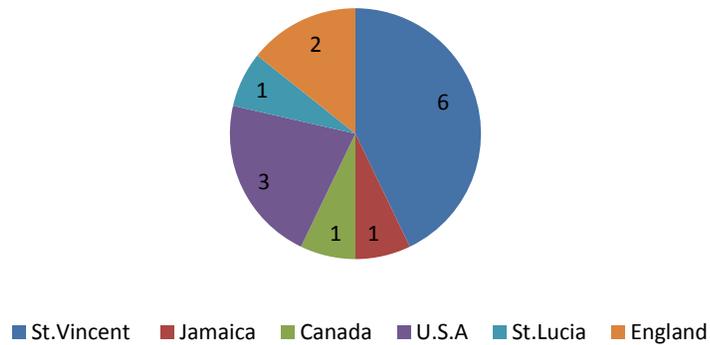
Deportees for Drug Offences

Fourteen persons were deported for drug offences in 2018 (See Figure 51). The 30-59 age groups reflected the largest number of deportees. Most deportees were nationals of St. Vincent (See Figure 52).



Source: Royal Barbados Police Force

Figure 52. Countries of Origin Distribution of Deportees recorded by the RBPF between January 1 and December 31, 2018



Source: Royal Barbados Police Force

5.2 Financial Intelligence Unit (FIU)

Statistics on Drug –Related Suspicious Transactions (STR) 2018

During the period January 1 to December 31, 2018, the FIU received 428 STRs, 27 (6%) of which were related to drugs (See Table 10).

Table 10

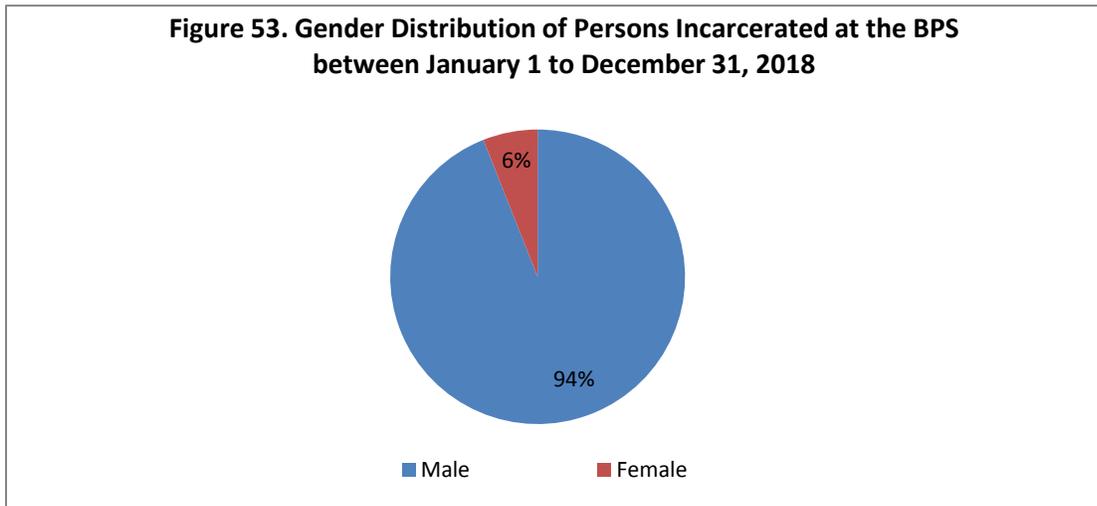
5.3 Barbados Prison Service

Year	STRs Total in Each Year	No. of Drug – Related STRS Identified	No. Of STRs Where the predicated offence could not be easily identified	Percentage of Drug –Related STRs in relation to STRs total per year
2018	428	27	138	6%

A total of 836 persons were incarcerated at the Barbados Prison Service (BPS) between January 1 and December 31, 2018. Most persons incarcerated at the BPS were Male and between 20 and 35 years (See Figures 53 and 54).

Of the 836 persons incarcerated at BPS, 167 (20%) were incarcerated for various drug offences (See Figure 55). Drug Possession was the most common offence, followed by Possession of Apparatus and Drug Trafficking (See Figure 56). Figures 57 and 58 display the gender and age distribution for the drug offences recorded during this period.

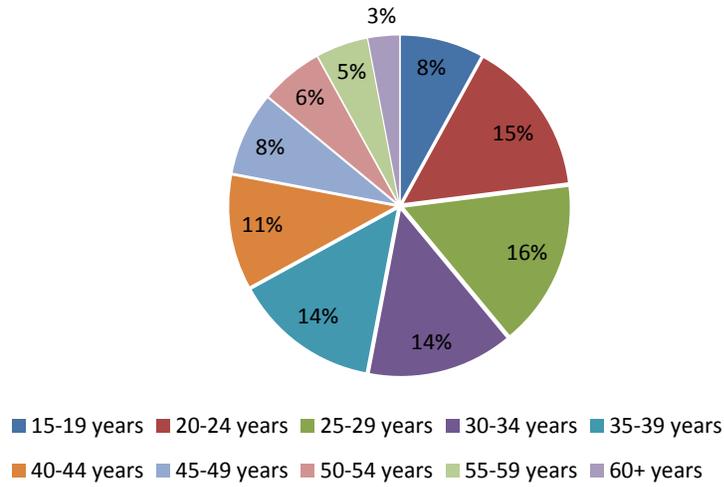
Figure 53 reveals that males far outnumbered females in terms of incarcerations for drug offences during 2018. This may be a reflection of the wider incarceration statistics, as there are typically more males than females incarcerated at the BPS.



N=83

Source: Barbados Prison Service

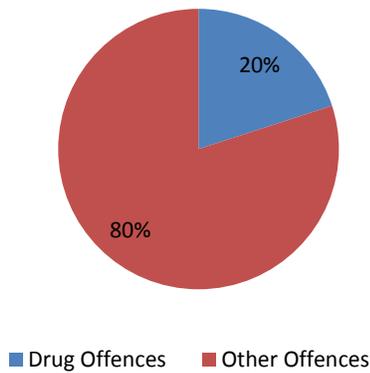
Figure 54. Age Distribution of Persons Incarcerated at the BPS between January 1 to December 31 2018



N=836

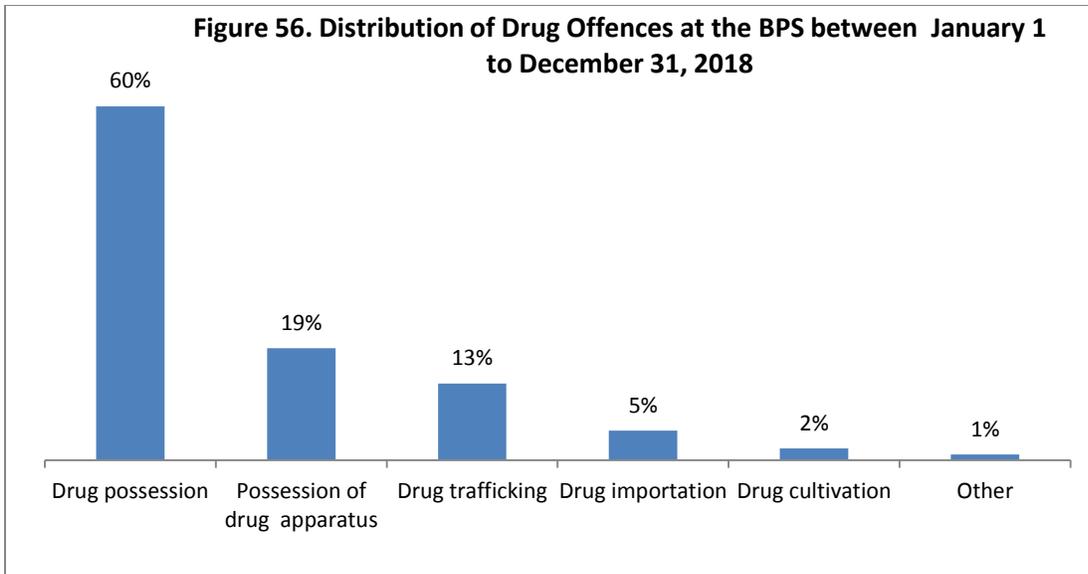
Source: Barbados Prison Service

Figure 55. Distribution of Drug Offences vs Other Offences for Persons Incarcerated at the BPS between January 1 and December 31, 2018



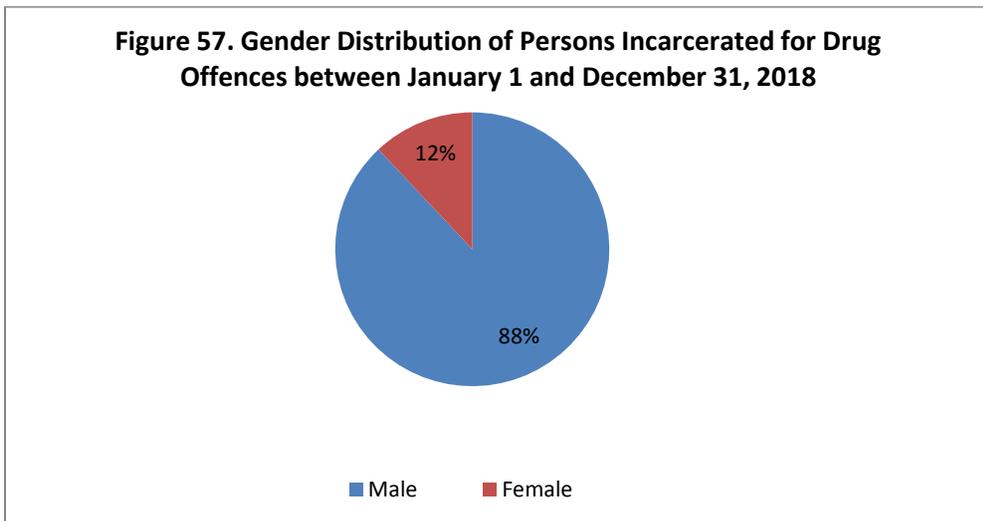
N=836

Source: Barbados Prison Service



N=167

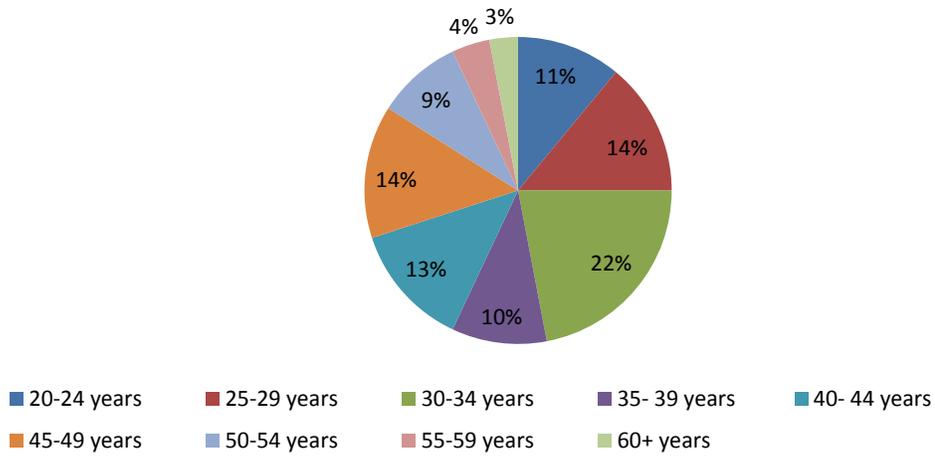
Source: Barbados Prison Service



N=167

Source: Barbados Prison Service

Figure 58. Age Distribution of Persons Incarcerated at the BPS for Drug Offences between January 1 to December 31, 2018



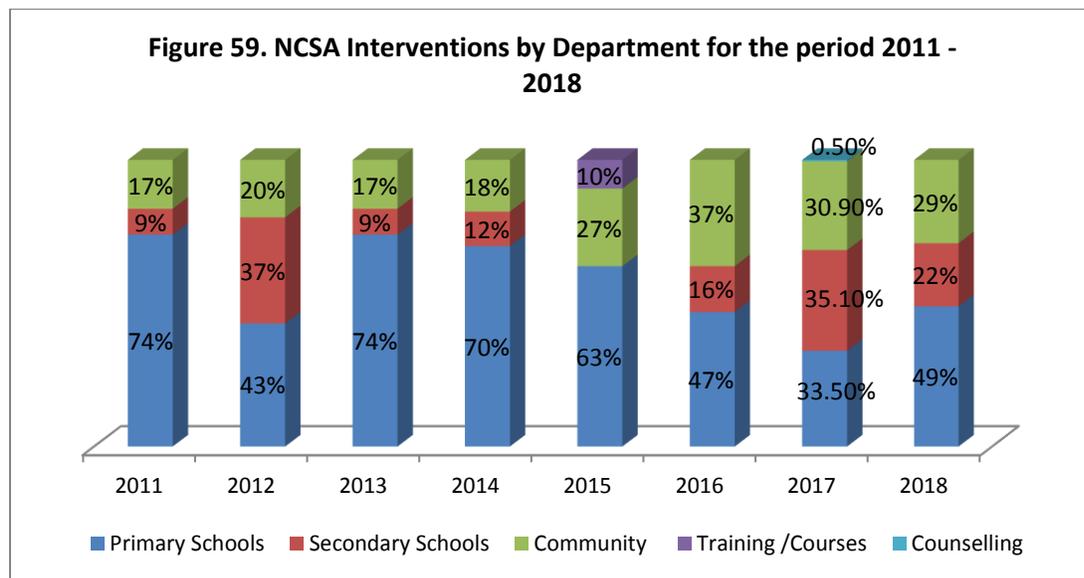
N=167

Source: Barbados Prison Service

6. Select Trend Analysis

Select trend analyses were included in the 2013, 2014 and 2015 BARDIN reports. However, data collection challenges and inconsistencies in data collection, severely limited the ability to evaluate the trends. As such, trend data will only be presented for the National Council on Substance Abuse the Royal Barbados Police Force and the Edna Nicholls Centre (See Figures 59, 60 and 61).

6.1 National Council on Substance Abuse



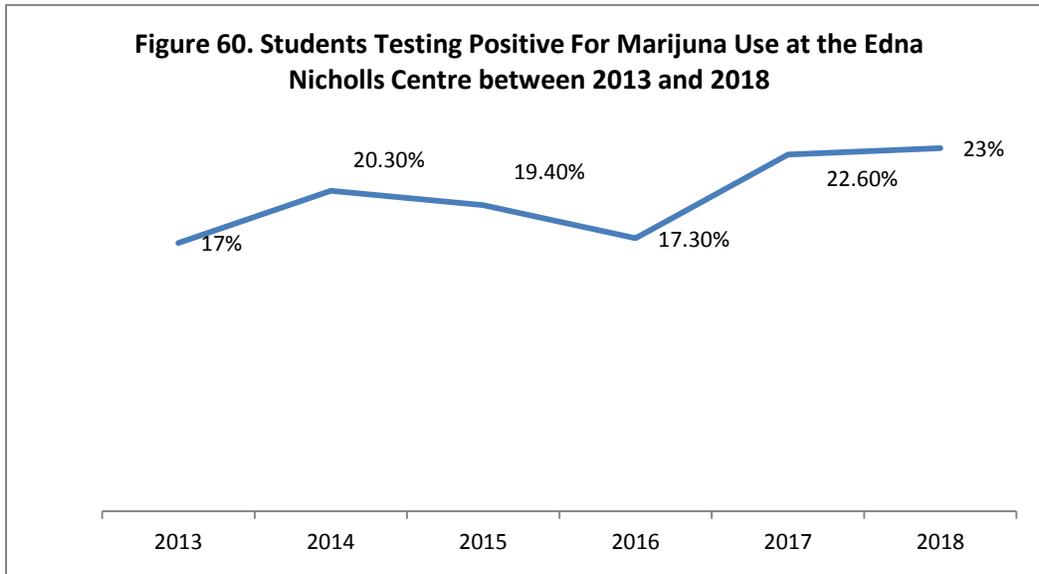
Source: Barbados Drug Information Network

Figure 59 shows that NCSA's Primary School Programme consistently accounted for the largest proportion of persons participating in the Council's drug prevention programmes and activities for the years 2011 through to 2016. In 2017, a higher proportion of students participated in the Secondary School Programme than those participating in the Primary Schools Programme. The Secondary School programme also had the second largest number of persons participating in NCSA programmes in 2012 while Community programming accounted for the second largest persons reached for the years 2013 through 2016 and in 201 (See Figure 59).

Source: Barbados Drug Information Network

6.2 Enda Nicholls Centre

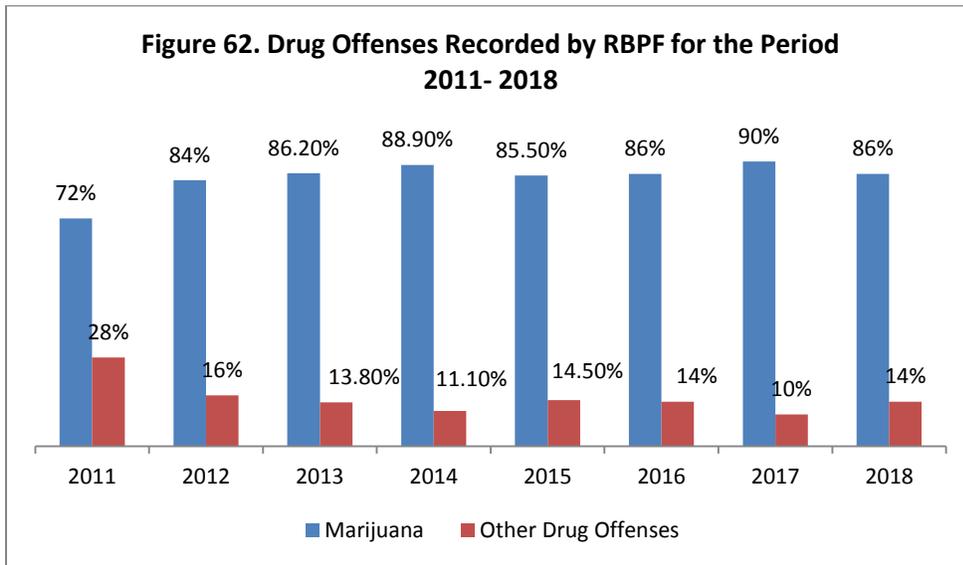
Figure 60 shows that the percentage of students testing positive for marijuana use at the Edna Nicholls Centre fluctuated marginally between 2013 and 2018, ranging from 17.0% at its lowest to 23% at its highest.



Source: Barbados Drug Information Network

6.3 Royal Barbados Police Force

Figure 61 shows that cannabis-related drug offences were the most common during the years 2011 through 2018. Additionally, the percentage of cannabis offences was very similar between 2012 and 2016 and in 2018 (See Figure 62).



Source: Barbados Drug Information Network

The trend in drug offences also shows that offences related to marijuana are the dominant drug offences (See Figure 62). The Possession of Cannabis was the most common drug related offense between 2012 and 2015. However, between 2016 and 2018 possession of cannabis no longer outranked the combined total for all other cannabis offences, rather, a near even split was observed in 2016 and 2018 (See Figure 63).

7. Discussion

The 2018 Data

A vital feature of the Bardin 2018 report is that marijuana continues to be the illegal drug of choice among young people than adults. Persons who use marijuana are mostly males who use this drug for the first time before their tenth birthday. Researchers have found that the younger a person initiates marijuana use the higher the risk for serious health consequences including psychiatric symptoms and cognitive alterations depending on the dose, frequency, and earliness of use (Ratzan, 2014; Volkow, Baler, Compton, & Weiss, 2014). Though the NCSA has placed significant efforts in providing drug education to young people, information about the harms of drug use remains critical to deterring the consumption of marijuana among young people (Midford et al. 2014; Midford, Munro, McBride, Snow, & Ladzinski, 2002).

Among adults, alcohol and crack are the leading drugs motivating the need for treatment. Data from the SAF showed that among the 51-55 age group alcohol was the primary drug for which persons sought treatment. The IDRC programme of the prison reported that crack cocaine was the primary drug for treatment among the 36-40 and 31-35 age groups. Because researchers have linked crack cocaine to acquisitive crimes (Perez, Benschop, Blanken & Korf, 2015; Kessler et al., 2012), the use of this drug should be of concern to both treatment and crime prevention practitioners.

In this report, a noticeable trend in drug use in Barbados is poly drug use. Crack cocaine, marijuana and alcohol continue to be consumed singly or in various combinations. Persons who consume multiple drugs are more difficult to treat as specific combinations of substances may present a greater need for intensive interventions (Wu et al., 2013). Moreover, treatment practitioners may require adequate training to explore and apply a range of modalities to reduce addiction stemming from poly drug use (Mcketin, Hickey, Devlin & Lawrence, 2010). Persons, who use a combination of drugs, therefore present a more significant challenge to health care including the potential higher costs associated with substance abuse treatment (Brown, Stout & Mueller, 1999).

The need for a mix of modalities to address drug addiction is even more critical, given the evidence of co-occurring disorders (Bardin, 2016; Peters, Wexler, & Lurigio, 2015). A Co-occurring disorder is found typically among persons diagnosed with a substance abuse disorder along with major depression and schizophrenia (Peters, Wexler, & Lurigio, 2015). A person who experiences a co-occurring disorder tends to relapse at a higher rate than those who do not experience a co-occurring disorder (Skeem, Manchak, & Peterson, 2011). In this report, co-occurring disorders continue to be a significant problem among

males (Bardin, 2016). In 2018 cases of co-morbidity were reported primarily among males between the ages of 25 and 44 years and the 20 to 34 years age groups.

Though males continue to outnumber females receiving treatment for substance abuse, the problems related to substance abuse may lie in the broader social environment. Males who seek treatment for drug addiction completed or received secondary education, but most of them were unemployed. Evidence indicates that persons with drug addiction problems and are unemployed tend to relapse into drug use and crime (Chaple et al., 2016). Creating opportunities for persons addicted to drugs may, therefore, help them to find work and reintegrate into society as productive citizens.

A reason that a lower number of women to men seek treatment for substance abuse may lie in social factors (BARDIN reports 2011-2016). One of the reasons why women who seek treatment for substance abuse are unable to do so is their inability to find caretakers for their children (Green, 2006). Knowledge of the difficulties women face in accessing substance abuse treatment creates opportunities to investigate why women are less likely to seek treatment for substance abuse in Barbados than men.

Finally, the trend in drug crimes suggests that most drug offences related to marijuana. A considerable challenge law enforcement faces in reducing marijuana-related crimes is the location for growing cannabis (RBPF, 2019). The illegal cultivation of marijuana takes place in small fields, and 'backyards' in rural areas when compared with the more suburban districts and business areas. Moreover, the increased vegetation in rural areas provides cover for the growth and the nurturing of cannabis plants (RBPF, 2019).

Impact of Data Collection Challenges on 2018 Report

The inability to make comparisons to data from previous years prevented the identification of trends. This is a significant shortcoming as collecting reliable data for comparison and the identification of emerging trends is among the key activities and outputs of a Drug Information Network (DIN), such as BARDIN (OAS/CICAD, 2017). Though efforts were made to select trend data, the Bardin report 2018 was generally restricted to analyzing the data in isolation from previous years. Such an approach makes it difficult to interpret or draw meaning from the data.

8. Recommendations

Recommendations for the Expansion and Improvement of BARDIN

In an effort to increase the value of data presented in future BARDIN reports, a number of recommendations are presented below. These promote trend analysis and the filling of data gaps.

1. Improve data collection & reporting

Some challenges exist in obtaining the quantity of drugs seized is reported primarily from the Drug Unit of the RBPF rather than police stations in general. Information on the purity of drugs is also not available in this report.

Though reported in small quantities, the emergence of New Psychoactive Substances (NPS) such as amphetamines presents a potential risks to public health. Also the speeds at which an NPS can be modified and distributed suggest the importance of establishing an Early Warning Systems (EWS)¹² to the monitoring and control of an NPS and the surveillance of criminal networks linked to these drugs.

2. Ensure Consistency in Data Collection

From year to year, there have been inconsistencies in the data collection categories used by contributing agencies (e.g. age groups). These are due in part to changes in data collection personnel as well as changes in data collection approaches at the agencies. Such changes reduce the ability to compare data over time and identify trends. As such, it is recommended that agencies use the same data collection categories each year.

¹² The Early Warning System (EWS) is designed to detect, test and distribute information on New Psychoactive Substances (NPS) promptly. NPS are drugs that are not controlled by the 1961 United Nations Single Convention on Narcotic Drugs or the 1971 United Nations Convention on Psychotropic Substances, but which may pose a public health threat comparable to that posed by substances listed in these conventions. NPS include range drugs that may mimic illegal drugs, are New' to the market or newly misused.

3. Address Data Gap

While BARDIN provides an overview of the local drug situation, there are data gaps in a number of areas. These include but are not limited to: drug-related accidents, mortality and morbidity; drug-related money laundering and asset seizure cases; and data on controlled chemical substances. These gaps reduce the ability to fully determine the magnitude of the drug problem and by extension prevent the formulation a comprehensive response. As such, every effort should be made to fill these gaps thereby expanding the coverage offered by BARDIN.

In 2018 the NCSA signed a Memorandum of Understanding with the Psychiatric Hospital, the Barbados Prison Service (BPS), the Edna Nicholls Centre, the Barbados Drug Service, the Centre for Counselling Addiction Support Alternatives, the Criminal Justice Research and Planning Unit the Financial Crimes Unit. The MOU represented a formal agreement between the NCSA and stakeholders of the BARDIN to produce requested data in a timely manner. The MOU also allowed for revisit of data collection protocols designed to collect the appropriate data for BARDIN.

Recommendations for Enhancing the National Response to the Drug Situation

In addition to the foregoing, the below are a number of recommendations aimed at enhancing the national response to the local drug situation. These recommendations are based on the findings of the present report.

1. A greater need to inform young people about the harms associated with the consumption of marijuana.
2. A Greater need to inform adults about the harms related to alcohol abuse.
3. Increase drug education on the knowledge and harms of New Psychoactive Substances (NPS).
4. Increased drug education on the harms related to polydrug use.
5. Design and implement an Early Warning System for the detection and monitoring of a NPS.
6. Promote training for persons involved in the treatment of co-occurring disorders.

7. Ensure adequate staffing to facilitate the treatment of drug-addicted offenders at the BPS.
8. Create opportunities for persons addicted to drugs to find work
9. Investigate the issues relating to women and substance abuse
10. Need for further research on drug- related crime in Barbados

9. Conclusion

The treatment of drug addiction is a multifaceted process encompassing various treatment modalities. The use of illegal drugs at an early age suggests the need for more significant interventions at primary and secondary schools. Of particular importance to the treatment of persons addicted to drugs is the problem of co-occurring disorders and the appropriate treatment for persons who experience these psychotic experiences. The social issues driving drug addiction highlight the need for employment among males, child care for mothers seeking treatment and generally improving women's abilities to access drug treatment. Finally, the risks presented by an NPS to public health and law enforcement require a greater emphasis on the implementation of Early Warning Systems (EWS).

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