

Tenn. halts immigrant driving certificates

In USA Today, February 24, 2006

http://www.usatoday.com/news/nation/2006-02-24-immigrant-drivers_x.htm?csp=34#

NASHVILLE (AP) — Tennessee stopped issuing driving certificates to illegal immigrants Friday after investigations found they were being shuttled from other states, using fake residency papers and sometimes bribing state workers to get the cards.

Safety Commissioner Jerry Nicely said the program was being suspended while authorities reassess it "to ensure we're doing what's best for Tennesseans."

"This program was a good idea in theory, but there have been issues with implementation," Nicely said.

The certificates, which are stamped "not valid for identification," were meant to improve driving safety by making sure immigrants living in the state knew traffic rules. Recent federal investigations found that illegal immigrants were traveling hundreds of miles to get the certificates illegally.

Non-citizens who can prove they are in the country legally will still be allowed to get the certificates.

Tennessee is among 11 U.S. states that have not required proof of legal residence to obtain driving documents.

In early 2001, the state started issuing full driver's licenses without requiring a Social Security number, and more than 180,000 people obtained licenses. The driving certificates were created in 2004 to satisfy homeland security concerns; about 51,000 were issued.

Applicants are now required to provide two documents, such as a utility bill or lease, to show they live in Tennessee, along with a Social Security number or a sworn affidavit if there is none. They also must pass an eye exam, a driving rules test and a road test.

Two major federal arrests in recent months exposed shuttles bringing South and Central American immigrants from as far away as New Jersey to state licensing centers in Knoxville, where the immigrants got certificates using fake residency papers.

In January, a third sweep revealed what prosecutors called a conspiracy in which state license examiners in Murfreesboro accepted bribes to provide illegal immigrants with driver's licenses and certificates without testing.

OREGON HIDTA PROGRAM

2013 THREAT ASSESSMENT AND COUNTER-DRUG STRATEGY

OREGON HIDTA
OREGON DEPARTMENT OF JUSTICE

I. EXECUTIVE SUMMARY

Illicit drug use in Oregon continues to exceed the national per capita average. The latest federal reporting shows that Oregon ranked fourth in the United States for reported rates of past month illicit drug use by people ages 12 or older.¹ More recently, a 2012 study of arrestees revealed that 73 percent of adult males charged for offenses ranging from misdemeanors to felonies in Portland, Oregon tested positive for at least one drug in 2011.² Moreover, of the 10 cities studied,^a Portland had the highest percentage of arrestees who reported past 30 day use for marijuana (56%), powder cocaine (10%), and heroin (17%), with methamphetamine ranking second (25%) to Sacramento, California (36%).³

The estimated economic cost of illicit drugs in the United States is enormous, recently assessed at over \$200 billion annually in the areas of productivity, healthcare and criminal justice.⁴ The problem is compounded as drug users and distributors are often involved in illegal activities such as money laundering, identity theft, burglaries, property theft, fraud and other crimes to support drug addictions and to finance trafficking and distribution operations.

Drug offenders comprise the largest proportion of individuals in the Oregon corrections population^b (24%), nearly twice the number for assault (13%), and more than twice the number for theft (10%) and burglary (9%) offense categories.⁵

Drug-related deaths rose substantially statewide in 2011, with fatalities rising 20 percent from 2010 (200) to 2011 (240). Deaths related to heroin use reflected the highest number of fatalities, increasing 59 percent from 2010 (90) to 2011 (143). The second highest number of deaths was related to methamphetamine, which increased by one between 2010 (106) and 2011 (107). Cocaine-related deaths also rose in the last year, increasing 65 percent from 2010 (20) to 2011 (33). Multnomah County, the most populous county in Oregon, reported the highest number of drug-related deaths statewide (119).⁶

Methamphetamine and marijuana use and trafficking remain widespread in Oregon. Marijuana production is widespread and expanding in scale.

Methamphetamine continues to be widely used and trafficked throughout the HIDTA (High Intensity Drug Trafficking Area) region and statewide.^c However, reported local methamphetamine lab seizures remain at low levels. From 2004 (448) to 2011 (10), labs reported by law enforcement declined 98 percent due largely to strict pseudoephedrine control legislation enacted by the Oregon legislature, as well as the enactment of the Federal Combat Methamphetamine Epidemic Act of 2005.

Analysis suggests that despite declines reflected by some indicators, methamphetamine use remains at a high level in the state. A majority (61%) of Oregon law enforcement officers surveyed in 2012 reported methamphetamine as their area's greatest drug threat, with most indicating methamphetamine as the drug which contributes most toward violent crime (70%) and

property crime (78%).⁷ Methamphetamine-related crime, such as identity theft, abused and neglected children, and

^a Includes Atlanta, GA; Charlotte, NC; Chicago, IL; Denver, CO; Indianapolis, IN; Minneapolis, MN; New York, NY; Portland, OR; Sacramento, CA; and Washington D.C..

^b Includes incarcerated offenders and those on parole or probation. Based on offenders' most serious active offense and includes categories of possession, manufacturing and delivery.

^c The HIDTA region includes Clackamas, Deschutes, Douglas, Lane, Jackson, Marion, Multnomah, Umatilla, and Washington counties and the Warm Springs Indian Reservation.

other serious person and property crimes, continues to be a daily problem and is prevalent throughout the state.

During the last six years, the form of methamphetamine seized by law enforcement has switched from powder to a form called "ice" or "crystal meth." Oregon legislation to restrict the availability of pseudoephedrine appears to have reduced the number of methamphetamine labs reported to be operating in the state; however, these new laws may have contributed to an increase in trafficking of finished product, such as Mexican-made "ice".

While the number of reported methamphetamine labs in Oregon declined to an historic low in 2011 (10), crystal meth continues to be available as Mexican drug traffickers import the finished product from laboratories outside the state and from Mexico.

In addition to methamphetamine use, marijuana use, cultivation, and trafficking are also expanding.

Law enforcement officers report that the size of outdoor marijuana cultivation sites discovered on public and private lands in Oregon has increased over the past several years - primarily due to the expansion of operations by Mexican National Drug Trafficking Organizations (MNDTOs). Of the total outdoor plants eradicated in Oregon, 97 percent were seized from MNDTO based grow sites. The discovered plants in grow sites number in the thousands per and the harvested product is distributed both locally and nationally. The number of outdoor plants seized in Oregon has decreased overall since 2007.

The drop can be largely attributed to increasingly limited law enforcement budgets to search for grow sites and the strategic relocation of cultivation operations by MNDTOs to areas with a smaller law enforcement presence. Even with the decline, however, outdoor plant seizures in 2011 (125,232) were more than three times the number seized in 2005 (40,015).

Oregon's Medical Marijuana Act,^d which allows for quantities of marijuana to be grown and used for pain suppression, continues to be exploited by local producers who use it to facilitate illegal cultivation for commercial purposes. The number of medical marijuana cardholders has grown dramatically in Oregon, rising over 400 percent between April 2006 and April 2012. The law presents a major barrier to effective enforcement and prosecution efforts and conflicts with the national safety regulations and requirements for medicines established by the Food and Drug Administration (FDA).

Additionally, federal authorities report that Asian crime groups are increasingly involved in marijuana trafficking and have established large coordinated indoor grow operations in Oregon, Washington and Northern California.

Heroin, non-medical prescription drug use, and cocaine constitute the next level of major drug threat to Oregon communities.

Heroin, primarily Mexican black tar, is readily available in Oregon. Availability and use appear to have increased in some areas as production in Mexico has expanded in recent years.

The threat posed by non-prescribed use of prescription drugs has grown in recent years and mirrors national trends.⁸ Law enforcement reporting indicates users of prescription opiates are increasingly switching to heroin because it is more available, less expensive, and provides a more intense high than diverted prescription opiates. Anecdotal reporting from Oregon law enforcement

d Oregon Revised Statutes 475.300 - 475.346.

officers suggests that the new controlled-release formula for Oxycontin^{e,f} has created a shortage in supply for the prior, more easily abused, form of the medication and is another factor in increased heroin use.⁹

Cocaine, primarily the powder form, continues to be available, although use of the drug appears to have diminished in many areas of the HIDTA region.

The Oregon HIDTA counter-drug enforcement strategy is intended to be responsive to the above noted threat indicators and to complement legislative, treatment, and prevention strategies within the state and HIDTA regions. Community anti-drug coalitions are active in Oregon and the non-profit Oregon Partnership has been an important catalyst for community action and prevention education.

As of this writing, the Oregon HIDTA participating agencies have identified 66 Drug Trafficking Organizations (DTOs) and one (1) Money Laundering Organization with foreign and domestic connections that are actively operating in the HIDTA region and throughout Oregon.

Reflecting national trends, Mexican-based drug trafficking organizations continue to dominate the illicit drug market in Oregon. Mexican National DTOs control the transportation and distribution of heroin, methamphetamine, cocaine, Mexican-produced marijuana, and marijuana cultivated from outdoor grows in the state, while Caucasian DTOs and independent groups control transportation and distribution of locally-produced indoor marijuana.

Other criminal groups, such as criminal street gangs, Outlaw Motorcycle Gangs (OMGs), and local independent dealers also transport and distribute drugs, but to a lesser extent. MDMA (3,4-methylenedioxy-methamphetamine), GHB (gamma-hydroxybutyric acid), LSD (lysergic acid diethylamide), 2C-E (2,5-dimethoxy-4-ethylphenethylamine), hash oil, khat, ketamine (ketamine hydrochloride), psilocybin (hallucinogenic mushrooms), and DMT (Dimethyltryptamine) are also smuggled into the HIDTA region.¹⁰

Felony drug fugitives pose a significant threat to the citizens of Oregon and, specifically, to the

personal safety of Oregon law enforcement officers. The United States Marshal's Service (USMS) Portland office (a HIDTA fugitive task force) recently surveyed federal warrants in the District of Oregon and identified one individual tied to Regional Priority Organization Targets (RPOT), two individuals tied to Consolidated Priority Organization Targets (CPOT), 29 people tied to active Organized Crime Drug Enforcement Task Force (OCDETF) cases, and another 100 individuals connected to active federal felony drug warrants. Since 2006, the Oregon USMS has made over 3,600 arrests with nearly half of the arrests classified as drug-related. Furthermore, 60 percent of individuals arrested by the USMS Fugitive Task Force were classified as violent offenders in 2011.¹¹

e Oxycodone/Oxycontin: Oxycodone hydrochloride is an opioid pain reliever and is the active ingredient in several

prescription pain medications. OxyContin is a trade name for time-release oral oxycodone and was reformulated in 2010 to discourage misuse of the tablets.

f The U.S. Food and Drug Administration approved a new formulation of the controlled-release drug OxyContin designed to help discourage misuse and abuse of the medication in April 2010.