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High Intensity Drug Trafficking Areas (HIDTA) Program

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Summary

Drug trafficking is a significant public health and safety threat facing the United States. The federal government has taken a variety of actions aimed at countering this threat. These have ranged from giving law enforcement more tools for combatting traffickers to establishing programs and initiatives to reduce the supply of and demand for illegal drugs. Within the larger framework of the federal government's efforts to counter drug trafficking is the High Intensity Drug Trafficking Areas (HIDTA) program. The program supports multiagency activities ranging from enforcement initiatives involving investigation, interdiction, and prosecution, to drug use prevention and treatment initiatives.

Congress initially created the HIDTA program through the Anti-Drug Abuse Act of 1988 (P.L. 100-690) and permanently authorized it in the Office of National Drug Control Policy Reauthorization Act of 2006 (P.L. 109-469). The HIDTA program provides assistance to law enforcement agencies—at the federal, state, local, and tribal levels—operating in areas of the United States that have been deemed as critical drug trafficking regions. The program is designed with the county as its geographic unit of inclusion. There are 29 designated HIDTAs in the United States, cutting across all 50 states, the District Columbia, Puerto Rico, and the U.S. Virgin Islands.

The HIDTA program is administered by the Office of National Drug Control Policy (ONDCP). However, each of the HIDTA regions is governed by its own Executive Board, which has the flexibility to design and implement initiatives that confront the specific drug trafficking threats in its region. For FY2018, Congress appropriated $280.0 million for the HIDTA program, a 10.2% increase over the FY2017 appropriation of $254.0 million. Each HIDTA receives a base amount of funding (ranging from approximately $3.1 million to $14.6 million in FY2017) to support initiatives in its region, and the remainder is allocated to support specific initiatives throughout the country.

There are several issues that policymakers may consider when they debate the future of the HIDTA program. A prevailing issue will be how much funding to provide for the program. Congress may also choose to exercise oversight and evaluate related issues such as whether the county is still the appropriate unit of inclusion for the HIDTA, whether the criteria for inclusion remain adequate, whether the program is effective in accomplishing its goals, whether its tangential effects can be measured, whether the current bounds on the use of HIDTA funds are still appropriate, and which federal entity may be best suited to administer the program.

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Drug trafficking is a significant public health and safety threat facing the United States. Criminals exploit the U.S. demand[1] for illicit drugs, moving product into and throughout the country. Both transnational and domestic trafficking of drugs affects U.S. communities. Mexican transnational criminal organizations (TCOs) "remain the greatest criminal drug threat to the United States; no other group is currently positioned to challenge them."[2] They are responsible for bringing large quantities of marijuana, methamphetamine, cocaine, heroin, and possibly fentanyl into the United States. Once within the United States, Mexican TCOs may manage or influence the wholesale distribution of these drugs throughout the country. They work with local criminal networks and gangs, who are largely responsible for the retail-level transportation and distribution.[3]

The federal government has taken a variety of actions aimed at countering drug trafficking. These activities have ranged from giving law enforcement more tools for combatting traffickers to establishing programs and initiatives to reduce the supply of and demand for illegal drugs. Within the larger framework of the federal government's efforts to counter drug trafficking is the High Intensity Drug Trafficking Areas (HIDTA) program.

Congress initially created the HIDTA program through the Anti-Drug Abuse Act of 1988 (P.L. 100-690).[4] It was permanently authorized through the Office of National Drug Control Policy Reauthorization Act of 2006 (P.L. 109-469). Administered by the Office of National Drug Control Policy (ONDCP), the HIDTA program provides assistance to law enforcement agencies—at the federal, state, local, and tribal levels—operating in areas of the United States that have been deemed as critical drug trafficking regions.[5]

The program aims to reduce drug production and trafficking through four means:

- promoting coordination and information sharing between federal, state, local, and tribal law enforcement;
- bolstering intelligence sharing between federal, state, local, and tribal law enforcement;
- providing reliable intelligence to law enforcement agencies such that they may be better equipped to design effective enforcement operations and strategies; and
- promoting coordinated law enforcement strategies that rely upon available resources to reduce illegal drug supplies not only in a given area, but throughout the country.[6]

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[1] According to the National Survey on Drug Use and Health, "in 2016, 28.6 million people aged 12 or older used an illicit drug in the past 30 days, which corresponds to about 1 in 10 Americans overall (10.6 percent)"; Substance Abuse and Mental Health Services Administration, *Key Substance Use and Mental Health Indicators in the United States: Results from the 2016 National Survey on Drug Use and Health*, September 2017, p. 1.

[2] Drug Enforcement Administration, *2017 National Drug Threat Assessment Summary*, October 2017, p. vi.

[3] Ibid., p. 5.

[4] See §1005(c).

[5] For more information on the program, see Executive Office of the President, Office of National Drug Control Policy (ONDCP), *High Intensity Drug Trafficking Areas (HIDTA) Program*, https://www.whitehouse.gov/ondcp/grants-programs/. See also ONDCP, *High Intensity Drug Trafficking Areas (HIDTA) Program*, November 2017, https://www.whitehouse.gov/wp-content/uploads/2017/11/ONDCP_High-Intensity-Drug-Trafficking-Areas.pdf. The criteria used to designate an area as a HIDTA, or critical drug trafficking area, are discussed in the "HIDTA Designations" section of this report.

[6] 21 U.S.C. §1706(a)(2).

The HIDTA program does not focus on a specific drug threat, such as heroin trafficking; rather, funds are used to support the most pressing initiatives in a region. These range from multiagency enforcement initiatives involving investigation, interdiction, and prosecution, to drug use prevention and treatment initiatives.[7]

This report provides an overview of the HIDTA program, including how areas are designated as part of a HIDTA, and program coordination and funding. It also examines issues that policymakers may consider as they debate the future of the HIDTA program: whether the county is still the appropriate unit of inclusion for the HIDTA, whether the criteria for inclusion remain adequate, whether the program is effective in accomplishing its goals, whether its tangential effects can be measured, whether the current bounds on the use of HIDTA funds are still appropriate, and which federal entity may be best suited to administer the program.

HIDTA Designations

The Director of ONDCP has the authority to designate areas within the United States that are centers of illegal drug production, manufacturing, importation, or distribution as HIDTAs. The director must first consult with the Attorney General, Secretary of the Treasury, Secretary of Homeland Security, heads of the relevant National Drug Control Program Agencies, and the governor of the applicable state.[8] Four main criteria are considered when designating an area as a HIDTA:

> the extent to which [1] the area is a significant center of illegal drug production, manufacturing, importation, or distribution; [2] State, local, and tribal law enforcement agencies have committed resources to respond to the drug trafficking problem in the area, thereby indicating a determination to respond aggressively to the problem; [3] drug-related activities in the area are having a significant harmful impact in the area, and in other areas of the country; and [4] a significant increase in allocation of Federal resources is necessary to respond adequately to drug related activities in the area.[9]

The HIDTA program is designed with the county as its geographic unit of inclusion. As such, if an entire state were to be included in a HIDTA, this would be because each county within the state had been separately designated as a critical drug trafficking area. To begin the designation process, a coalition of law enforcement agencies may petition the Director of ONDCP for a county to be included in a HIDTA.[10] There are 29 designated HIDTAs in the United States and its territories, as outlined in **Table 1**. The most recent HIDTA to be established was the Alaska HIDTA, which was announced on May 1, 2018.[11]

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[7] Executive Office of the President, Office of National Drug Control Policy, *High Intensity Drug Trafficking Areas (HIDTA) Program*, November 2017, https://www.whitehouse.gov/wp-content/uploads/2017/11/ONDCP_High-Intensity-Drug-Trafficking-Areas.pdf. The HIDTA program funds over 750 initiatives across the various HIDTA regions.

[8] See 21 U.S.C. §1706(b)(1). National Drug Control Program Agencies are those agencies that contribute to the National Drug Control Strategy, as developed by ONDCP, and whose drug control activities are included in the scope of the National Drug Control Budget. For more information on both the Strategy and the Budget, see archived CRS Report R41535, *Reauthorizing the Office of National Drug Control Policy: Issues for Consideration*.

[9] Office of National Drug Control Reauthorization Act of 2006 (P.L. 109-469); 21 U.S.C. §1706(d).

[10] Executive Office of the President, Office of National Drug Control Policy, "High Intensity Drug Trafficking Organizations; Petitions for Designation," 72 *Federal Register* 46099 - 46101, August 16, 2007.

[11] ONDCP made the announcement on May 1, 2018, via Twitter at https://twitter.com/ONDCP.

Table 1. High Intensity Drug Trafficking Areas

Participating States and Number of Counties

HIDTA	States (and Number of Counties) Included
Alaska	Alaska (25)[a]
Appalachia	Kentucky (29); Tennessee (31); Virginia (10); West Virginia (19)
Atlanta	Georgia (12); North Carolina (15); South Carolina (5)
Central Florida	Florida (9)
Central Valley California	California (12)
Chicago	Illinois (5)
Gulf Coast	Alabama (6); Arkansas (4); Florida (2); Louisiana (8);[b] Mississippi (8); Tennessee (1)
Hawaii	Hawaii (4)
Houston	Texas (20)
Lake County	Indiana (4)
Los Angeles	California (4)
Michigan	Michigan (12)
Midwest	Illinois (1); Iowa (8); Kansas (14); Missouri (18); Nebraska (11); North Dakota (8); South Dakota (13)
Nevada	Nevada (2)
New England	Connecticut (3); Maine (1); Massachusetts (7); New Hampshire (2); Rhode Island (1); Vermont (1)
New York/New Jersey	New Jersey (9); New York (25)
North Central	Minnesota (5); Wisconsin (7)
North Florida	Florida (12)
Northern California	California (13)
Northwest	Washington (14)
Ohio	Kentucky (3); Ohio (14)
Oregon-Idaho	Idaho (3); Oregon (11)
Philadelphia/Camden	Delaware (1); New Jersey (1); Pennsylvania (4)
Puerto Rico/U.S. Virgin Islands[a]	
Rocky Mountain	Colorado (14); Montana (6); Utah (5); Wyoming (6)
South Florida	Florida (6)
Southwest Border	Arizona (9); California (2); New Mexico (17); Texas (27)
Texoma	Oklahoma (8); Texas (17)
Washington/Baltimore	DC (1); Maryland (14); Virginia (24); West Virginia (2)

Source: Data provided to the Congressional Research Service (CRS) by ONDCP, Office of Congressional Affairs, May 2, 2018.

Notes: For a map of HIDTA counties and intelligence and information sharing initiative locations, see Executive Office of the President, Office of National Drug Control Policy, *High Intensity Drug Trafficking Areas Program Counties, as of May 2018*.

a. Alaska uses boroughs and census areas as its county equivalent. There are 19 organized boroughs and 1 unorganized borough that is comprised of 10 census areas; these 29 areas are divided among four judicial districts. Of the four judicial districts, three are included in the HIDTA program. Within these three districts, there are 17 boroughs and 8 census areas that are included in the HIDTA program.

b. Louisiana uses parishes as its county equivalent.

a. For Puerto Rico and the U.S. Virgin Islands, the entire territories are included in the HIDTA.

Coordination

At the national level, the HIDTA program is administered by ONDCP. However, each of the HIDTA regions is governed by its own Executive Board. Each board consists of representatives from participating federal, state, local, and tribal agencies, and there must be an equal proportion of federal and nonfederal representatives. Additional nonvoting members from nonparticipating agencies or associations are also allowed.[12] Among other duties, each board is responsible for providing direction and oversight in establishing and achieving the goals of the HIDTA, managing the funds of the HIDTA, and selecting the HIDTA director for the region.

ONDCP notes that a "central feature of the HIDTA program is the discretion granted to these Executive Boards to design and implement initiatives that confront the specific drug trafficking threats in their respective regions."[13] This allows a board to tailor its strategy and reassess its initiatives to respond to any changes in local drug threats. Each board is also responsible for ongoing evaluation of the HIDTA's initiatives. This assessment considers whether each initiative is

- in compliance with overall HIDTA program requirements,
- effectively implementing the HIDTA's strategy,
- achieving the performance standards negotiated for the HIDTA, and
- productive enough to merit continued funding from the HIDTA.[14]

Funding

Funding for the HIDTA program is provided by direct appropriation to the HIDTA subaccount under the ONDCP account. Over the past decade, funding for the HIDTA program increased by about $20 million (8.5%) from $234.0 million in FY2009 to $254.0 million in FY2017, and then by $26.0 million (10.2%) to $280.0 million for FY2018, as outlined in **Table 2**.

Table 2. HIDTA Program Appropriations, FY2009-FY2018

In millions of dollars

Fiscal Year	Appropriation	Percentage Change
2009	$234.0	
2010	$239.0	2.1%
2011	$238.5	-0.2%

[12] Executive Office of the President, Office of National Drug Control Policy, *HIDTA Program Policy and Budget Guidance*, January 17, 2017, p. 3-3.

[13] Ibid., p. 2-3.

[14] Ibid., p. 3-5.

Fiscal Year	Appropriation	Percentage Change
2012	$238.5	0.0%
2013	$238.0	-0.2%
2014	$235.5	-1.1%
2015	$245.0	4.0%
2016	$250.0	2.0%
2017	$254.0	1.6%
2018	$280.0	10.2%

Source: FY2009 data are from P.L. 111-8. FY2010 data are from P.L. 111-117. FY2011 data are based on the FY2010 appropriation minus the 0.2% across-the-board rescission as directed by P.L. 112-10. FY2012 data are from P.L. 112-74. FY2013 data are from S.Rept. 113-80 and do not reflect the sequester of funds pursuant to P.L. 112-25. FY2014 data are from P.L. 113-76. FY2015 data are from P.L. 113-235. FY2016 data are from P.L. 114-113. FY2017 data are from P.L. 115-31. FY2018 data are from P.L. 115-141.

Note: Appropriation amounts are in nominal dollars.

Executive Boards meet, at a minimum, four times each year to share information on the drug threats in the regions and the activities of the HIDTA-funded initiatives and task forces. Once a year, they determine which HIDTA task force initiatives to fund within their respective regions. From the total HIDTA program appropriation, each HIDTA receives a base amount of funding to support initiatives in its region. This base funding ranged from approximately $3.1 million to $14.6 million in FY2017—except for the Southwest border HIDTA, as its five regions collectively received over $48.7 million in base funding.[15] The remainder of the overall HIDTA appropriation is allocated to specific initiatives throughout the country—as determined jointly by the HIDTA directors and ONDCP.

HIDTA funds support six types of initiatives, many focused on enforcement and intelligence and information sharing:[16]

- **Enforcement.** Multiagency (federal plus state/local/tribal law enforcement) task force activities focused on investigation, interdiction, fugitive apprehension, and prosecution of serious drug-related crimes and criminals/criminal networks.
- **Intelligence and Information Sharing.** Activities including intelligence analysis, deconfliction services, and information gathering and distribution.
- **Support.** Activities peripheral to core enforcement and intelligence and information sharing activities, including training, crime and forensic labs, shared resource expenses, and information technology needs.
- **Prevention.** Coordination and collaboration between law enforcement and the community[17] to reduce drug use and its consequences and prevent drug related crime.[18]

[15] Information provided to CRS by ONDCP, Office of Congressional Affairs, February 6, 2018.

[16] Information on these six initiative types is taken from Executive Office of the President, Office of National Drug Control Policy, *HIDTA Program Policy and Budget Guidance*, January 17, 2017, p. 4-2.

[17] Community entities include schools and student leaders, parent groups, medical/health professionals and public health agencies, faith-based organizations and religious leaders, and drug use prevention and reduction agencies and coalitions.

[18] HIDTAs can support drug prevention activities, but only a maximum of 5% of funds can be used to establish drug

- **Treatment.** Since 2006, there has been a prohibition on the use of HIDTA funds to establish or expand drug treatment programs.[19] However, the Washington/Baltimore HIDTA has continued its prior funding support to drug courts in its region.[20]
- **Management and Coordination.** Coordination and integration of HIDTA initiatives and program overhead (e.g., HIDTA leadership and administrative staff salaries, rent).

Notably, within the program's history, support for drug prevention initiatives has been more of a recent focus. Now, all HIDTAs support prevention initiatives.

Several initiatives are perennial and not exclusive to one particular HIDTA region. For instance, the Domestic Highway Enforcement strategy supports multijurisdictional law enforcement efforts to counter drug trafficking and money laundering activities that are facilitated by the U.S. highways. The directors of nine HIDTA regions are currently coordinating this strategy. In addition, the National Emerging Threats Initiative identifies "emerging drug threats and their patterns [and addresses] each threat through the use of best practices, promoting cooperation among public safety, public health, regulators, treatment, and prevention entities" and provides solutions to the threats.[21] There is one coordinator and two deputy coordinators for this initiative.

HIDTA Issues for Consideration

There are several issues that policymakers may consider when they debate the future of the HIDTA program. A prevailing issue will be how much funding to provide for the program. Congress may also choose to exercise oversight and evaluate related issues such as whether the county is still the appropriate unit of inclusion for a HIDTA, whether the criteria for inclusion remain adequate, whether the program is effective in accomplishing its goals, whether its tangential effects can be measured, whether the current bounds on its funding usage are still appropriate, and which federal entity may be best suited to administer it.

Unit of Inclusion

As mentioned, the county is the current unit of inclusion for the HIDTA program. There is currently no mechanism to enroll a specific city or an entire state unless it is done on a county-by-county basis. In the realm of drug threats that the HIDTAs are actively combating, however, traffickers and other criminals have little regard for these jurisdictional borders that define the operations of U.S. law enforcement. As such, criminal activity may shift along with supply, demand, and law enforcement pressures. The HIDTA program currently responds to these changes by adding and removing counties from HIDTAs.

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prevention programs; 21 U.S.C. §1706(f).

[19] This prohibition was established when the HIDTA program was formally authorized in the Office of National Drug Control Policy Reauthorization Act of 2006 (P.L. 109-469).

[20] The prohibition on use of HIDTA funds applies to the *establishment* or *expansion* of drug treatment programs. The Washington/Baltimore uses funds to support ongoing drug treatment (drug court) programs in its area. It may not use any funds to expand these programs or to establish new treatment programs.

[21] Executive Office of the President, Office of National Drug Control Policy, *High Intensity Drug Trafficking Areas (HIDTA) Program*, November 2017, https://www.whitehouse.gov/wp-content/uploads/2017/11/ONDCP_High-Intensity-Drug-Trafficking-Areas.pdf.

The current method of county-by-county inclusion has thus far encompassed counties in all 50 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands.[22] Some policymakers may question whether the county is the most suitable unit of inclusion in the HIDTA program and whether the county, as the unit of inclusion, allows for the most appropriate multilateral law enforcement initiatives to receive HIDTA support. One option may be to consider what would happen if the unit of inclusion were changed to a different jurisdictional level, such as the state or city. For instance, changing the unit of inclusion to the state level rather than the county level would, as it stands, include all 50 states, the District of Columbia, and two territories. Because the HIDTA program aims to channel resources to areas that may benefit most from additional law enforcement resources in countering drug trafficking and related threats, some may question whether including 100% of the states in HIDTAs would really accomplish the goal of assisting the most *critical* areas of the country. For some of these states, the total area of the state could reflect the most critical area. For others, it may be that only a portion of the state is impacted by significant drug trafficking activity. And, if the entire states were included in HIDTAs, some may question whether there should also be mechanisms in place to ensure that sufficient resources provided through the HIDTA program would reach the most critical regions.

Some may also question whether the processes for adding *and* removing counties from HIDTAs are sufficient as critical drug trafficking areas shift. Are the policies adequately nimble to allow for timely shifting of HIDTA designations and resources?

County-Level Drug Trafficking Data

Given that the HIDTA program adds and removes counties based on the existing drug trafficking threat in the county, policymakers may be interested in understanding changes in drug trafficking activity in counties before, during, and after they are designated as HIDTA counties. However, the existing landscape of national data on drug trafficking activity is not necessarily captured and aggregated by county. For instance, some databases might capture drug trafficking broken down by region of the United States (e.g., U.S. Customs and Border Protection seizure data in each of the Border Patrol sectors). Other databases may reflect drug trafficking investigations or prosecutions broken down by state or field office (e.g., certain data tracked by federal law enforcement entities such as the Drug Enforcement Administration or Federal Bureau of Investigation). However, national data on drug trafficking aggregated at the county level are scarce; rather, some data may be available from the various state and local law enforcement entities operating in a given county. Notably, there are likely differences in what may be captured in these local-level data. Nonetheless, in conducting oversight of the HIDTA program, policymakers may explore changes in drug trafficking at the county level before the county's inclusion in the program as well as after it becomes eligible for HIDTA support for law enforcement initiatives in its area.

Criteria for Inclusion

As outlined, there are four principal criteria against which counties are evaluated when they are considered for HIDTA inclusion. In conducting oversight, policymakers may reevaluate these criteria to ensure that the counties most at-risk for drug trafficking activities are included in a HIDTA. To evaluate whether these criteria are reliably identifying at-risk counties, policymakers may question how each criterion is measured. Ensuring that the evaluation standards are used consistently for each county will help ensure that the most critical areas are designated in an

[22] The territories of American Samoa, the Commonwealth of the Northern Mariana Islands, and Guam are not included in HIDTAs.

impartial manner. For example, the first criterion against which counties are evaluated is "the extent to which the area is a significant center of illegal drug production, manufacturing, importation, or distribution." One question that may arise when evaluating this criterion is what constitutes a "'significant' center" of illegal drug activity. Petitions to designate a county as part of a HIDTA are evaluated independently, not in relation to other petitions or to the conditions in counties already designated HIDTA counties. Further, there do not appear to be standardized numerical metrics (for levels of drug production or quantities of drugs distributed, for instance) against which counties are evaluated in determining whether they should be included in a HIDTA. As such, what might be considered a *significant* drug threat in one county might not be considered a significant threat in another county. Policymakers may examine what metrics ONDCP uses to determine when the level of drug trafficking in an area reaches a level of significance. A related question policymakers may ask is whether ONDCP has altered or needs to alter the metrics or criteria for evaluating whether a county should be designated as part of a HIDTA as trends in drug production, manufacturing, importation, and distribution change.

Annually, the HIDTA Executive Boards examine—against the four criteria for HIDTA designation—the counties included in their regions. If a board determines that a county "no longer meets the statutory requirements for HIDTA designation," it petitions ONDCP to remove the county's HIDTA designation.[23] For example, if a board deems that a county within its HIDTA region is no longer a *significant* center of drug trafficking, it can petition for the county's removal from the HIDTA. Just as policymakers may question whether there are specific metrics that determine whether a county is a *significant* center of drug trafficking for the purpose of HIDTA designation, they may also question whether any specific metrics are also used in determining whether the designation should be removed.

Program Effectiveness

Policymakers have long expressed interest in ensuring that funding is provided to programs with demonstrated effectiveness. ONDCP has established measures to evaluate whether each HIDTA is (1) reducing drug availability by helping participating law enforcement agencies disrupt and dismantle drug trafficking organizations and (2) improving the effectiveness and efficiency of HIDTA initiatives. Specifically, ONDCP has established a Performance Management Process (PMP) to help evaluate the success of individual HIDTAs as well as the program as a whole in achieving these two goals. The PMP does not allow for comparisons between each HIDTA's performance.[24]

In order to evaluate these two goals, ONDCP requires each HIDTA to provide four items annually: (1) a threat assessment of the drug trafficking and related activities in its area, (2) a strategy for how the HIDTA addresses the threats identified in the threat assessment, (3) a budget proposal including funding needs for initiatives in the area and performance goals for the initiatives, and (4) a report describing activities and progress in executing the HIDTA's strategy.

In conducting oversight regarding ONDCP and the HIDTA program, policymakers may question whether ONDCP is reliably and validly measuring the results and effectiveness of each individual HIDTA as well as the HIDTA program overall; in other words, they may examine the reliability

[23] Executive Office of the President, Office of National Drug Control Policy, *HIDTA Program Policy and Budget Guidance*, January 17, 2017, p. 2-2.

[24] National HIDTA Assistance Center, *HIDTA Management, Participant Guide, v. 3.2, Volume I*, August 9, 2016, p. 6-7.

and validity of the PMP. Policymakers may also question whether or how discretionary funds are allocated to each HIDTA based on its needs and performance.

Program Scope

The HIDTA program provides a platform for enhanced law enforcement coordination in areas that have been deemed critical drug trafficking areas. As the program is tailored, it aims to counter specific threats, namely drug production and trafficking, in those areas where these threats are most prevalent. All task force investigations that are supported with HIDTA grant funding are to have a direct nexus to drug trafficking. However, many criminal networks, such as Mexican drug trafficking organizations, may be involved in a range of illicit activity.[25] As such, while the HIDTA program only directly supports law enforcement initiatives that target the drug trafficking activities of these criminal organizations, the program may indirectly support efforts to combat other crimes committed by drug traffickers. Policymakers may question whether ONDCP has a metric in place to evaluate how the HIDTA program may be indirectly combatting these additional crimes.

Use of Funds for Treatment and Prevention Initiatives

There are six types of initiatives supported with HIDTA funding: enforcement, intelligence and information sharing, support, prevention, treatment, and management and coordination. However, there are specific restrictions on how HIDTA funding can be used for prevention and treatment activities. ONDCP's HIDTA program guidance notes that "HIDTAs support drug treatment and prevention activities to the extent authorized by statute."[26] Of note, the HIDTA authorizing statute outlines that HIDTA funds may not be used to establish or expand drug *treatment* programs. However, up to 5% of HIDTA funds may be used to establish drug *prevention* programs.[27] These restrictions on the use of funding for prevention and treatment initiatives were enacted when the HIDTA program was formally authorized in the Office of National Drug Control Reauthorization Act of 2006 (P.L. 109-469). HIDTA guidance further notes that

> each Executive Board is encouraged to develop a prevention initiative that will increase collaboration between HIDTA law enforcement initiatives and the demand reduction and/or public health community. All HIDTAs are encouraged to engage community-based coalitions (e.g. DFCs [Drug Free Communities]), prevention programs, and/or public health stakeholders to ensure evidence-based prevention activities, strategies, and/or programming are implemented in the community.[28]

[25] While Mexican drug trafficking organizations are involved in drug trafficking, they have also become involved in other crimes such as kidnapping, human trafficking, extortion, and counterfeiting, to name a few.

[26] Executive Office of the President, Office of National Drug Control Policy, *HIDTA Program Policy and Budget Guidance*, January 17, 2017, p. 2-5.

[27] 21 U.S.C. §1706(f). However, the Washington/Baltimore HIDTA provides ongoing funding to drug courts in its area of responsibility. See ibid., p. 4-2.

[28] Executive Office of the President, Office of National Drug Control Policy, *HIDTA Program Policy and Budget Guidance*, January 17, 2017, p. 2-5. Of note, Drug Free Communities is a grant program administered by ONDCP, in partnership with the Substance Abuse and Mental Health Services Administration.

Heroin Response Strategy

In response to the ongoing opioid epidemic, in 2015, ONDCP launched the Heroin Response Strategy (HRS).[29] The HRS is "a multi-HIDTA, cross-disciplinary approach that develops partnerships among public safety and public health agencies at the Federal, state and local levels to reduce drug overdose fatalities and disrupt trafficking in illicit opioids."[30] At the end of 2017, 8 HIDTAs across 20 states were participating in the HRS. Within the HRS, a Public Health and Public Safety Network coordinates teams of drug intelligence officers and public health analysts in each state. The HRS not only provides information to participating entities on drug use and trafficking, but it has "developed and disseminated prevention activities, including a parent helpline and online materials."[31]

As drug threats—and in this particular context, the opioid epidemic—are recognized as both law enforcement and public health problems, there has been additional focus on prevention and treatment activities. The HRS is just one example of this. As noted, a limited portion of HIDTA funds may be used to support prevention activities. Policymakers may question whether, within the scope of the HIDTA program, they wish to maintain or change the existing constraints on how HIDTA funds may be spent on prevention and treatment activities and whether or how this may affect the focus of the HIDTA program on the whole.

HIDTA as an ONDCP Component

Since its inception, the HIDTA program has been administered by ONDCP. As the coordinator of federal drug control efforts, ONDCP has the responsibility for creating policies, priorities, and objectives for the federal drug control program. This national program aims to "reduce illicit drug use, manufacturing and trafficking; drug-related crime and violence; and drug-related health consequences."[32] In addition, ONDCP administers several grant programs, including the HIDTA program, that support the overall federal drug control program.

In the FY2019 budget request, the Administration proposes transferring the administration of the HIDTA program out of ONDCP and to the Department of Justice (DOJ), specifically the Drug Enforcement Administration (DEA).[33] The DEA "participates in and coordinates 24 HIDTAs,"[34] but as noted, it is ONDCP that currently leads the HIDTA program (as it is a grant program providing resources to federal, state, local, and tribal law enforcement). As one of the law enforcement agencies of DOJ, the DEA does not currently administer grant programs. Policymakers may debate a number of issues when considering the Administration's proposal to move the administration of the HIDTA program from ONDCP to the DEA. One is whether there may be sufficient resources (funding, manpower, and expertise) within the DEA for it to undertake a new role of grants administration. Another is whether the HIDTA program, if administered by the DEA, would continue to be seen as a collaborative law enforcement program, not under the direction of any one federal law enforcement agency, supporting law enforcement

[29] For more information on the opioid epidemic, see CRS Report R44987, *The Opioid Epidemic and Federal Efforts to Address It: Frequently Asked Questions*, The Opioid Epidemic and Federal Efforts to Address It: Frequently Asked Questions.

[30] Executive Office of the President, Office of National Drug Control Policy, *Heroin Response Strategy, Annual Program Report for 2016*, May 2, 2017, p. 1.

[31] Ibid.

[32] For more information, see the Office of National Drug Control Policy at https://www.whitehouse.gov/ondcp/.

[33] Office of Management and Budget, *Efficient, Effective, Accountable: An American Budget*, FY2019.

[34] Department of Justice, Drug Enforcement Administration, *FY2019 Performance Budget Congressional Submission*, p. 11.

agencies across the country at multiple levels of government in their efforts to combat drug trafficking and related threats.

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