DISTRICT OF COLUMBIA
COMMUNITY EPIDEMIOLOGICAL PROFILE:
CONSEQUENCES OF ALCOHOL, TOBACCO, AND
ILlicit DRUG USE IN THE
DISTRICT’S COMMUNITIES,
2001–2007

PREPARED FOR
THE ADDICTION PREVENTION AND RECOVERY ADMINISTRATION,
DC DEPARTMENT OF HEALTH

BY
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SECTION I
DISTRICT OF COLUMBIA: INTRODUCTION

Overview
This is the latest in a series of reports produced by the DC Epidemiological Outcomes Workgroup (DCEOW). These reports compile available data on the consumption of alcohol, tobacco, and other drugs and the consequences of use of these substances in the District of Columbia (District, DC). Previous reports have assessed substance abuse problems citywide and amongst District youth. This report, for the first time, assesses community level problems related to the use of alcohol, tobacco, and illegal drug substances. For the purposes of this report, community is defined as group(s) of people whose relationship is based on common geographical space or common interests, culture, shared values and institutions, and who are arranged in a social structure according to relationships developed in the community over a period of time1. In the District, the ward is the most common geographical definition of a community. Therefore, this report assesses drug- and alcohol-related crime, HIV/AIDS, mortality, and drug abuse/dependence citywide and across the District’s eight wards.

Indicators related to substance use consequences and consumption patterns presented in this report were the result of a large list of possible indicators suggested by DCEOW membership and ranked as high priority by these same members. Initial indicators were examined using a standard set of criteria including availability and validity of data, consistently collected data, sensitivity (in detecting change over time), and availability of attributable fractions (to explain incidents or cases related to alcohol and illicit drug use). Indicators that met these five criteria were then reviewed by the DCEOW members and rated as high, medium or low priority for the District using the data presented in the first report of this series. The first annual District of Columbia Epidemiological Profile details how these indicators were selected. This report is available online at www.cesar.umd.edu.

DCEOW
The DCEOW was originally convened in March 2005 by the Department of Health Addiction, Prevention, and Recovery Administration (APRA) at the request of the Mayor’s Interagency Task Force on Substance Abuse Prevention, Treatment and Control. The members meet quarterly to collaborate on ways to strengthen the District’s data sources and to gain a more complete and accurate understanding of drug trends in the District. The current DCEOW mission is as follows:

Monitor the use of alcohol, tobacco, and other drugs and the consequences of their use in DC to identify and prioritize the District’s prevention needs. To achieve this end, the DCEOW will oversee the

1 The definition of community was adapted by the DCEOW from a definition supplied by the New Mexico SEOW in October 2007.
Organization of this Report

This report begins with demographic profiles of the District as a whole and each ward individually, with a description of each population including various demographic breakdowns based on 2000 Census Bureau data, the number of alcohol retailers and tobacco licenses, medical services, educational facilities, and law enforcement stations and specialty units. The profiles are followed by four consequences assessed citywide and by ward. Additional demographic information for all consequences (except HIV/AIDS) is provided for Ward 1, which was selected for special emphasis because APRA staff requested a focus on an individual ward representing the diverse demographics of all District residents. The consequences provided in this report include: crime (violent and property), arrests, HIV/AIDS, substance abuse dependence, and mortality due to alcohol, tobacco and illegal drugs. The final section of the report provides an overview of the consumption patterns for alcohol, tobacco, and illicit drugs in the District at the ward level. Also available on a regional level are the number of recovery meetings, recovery clubs, and available treatment programs in the District of Columbia.

This report was produced with funding from the Substance Abuse and Mental Health Services Administration’s Center for Substance Abuse Prevention. It will be updated and expanded in future years as additional data and funding become available.
SECTION II
SNAPSHOTS

The purpose of this section is to provide the reader with an overview of each ward. Demographic profiles of the District as a whole and of each ward individually are provided on the next few pages. These snapshots include various demographic breakdowns based on 2000 Census Bureau data, the number of alcohol retailers and tobacco licenses in the District, medical services, educational facilities, and law enforcement stations and specialty units.

Before reviewing the consequences of alcohol, tobacco, and illicit drug use, this section outlines the many differences and similarities in the District’s eight wards, and provides an essential background for understanding the information provided in this report.
DISTRICT OF COLUMBIA: SNAPSHOT

Total Population (2000).................................572,059

- Sex
  - Male......................269,366
  - Female..............302,693

- Race
  - Black....................343,312
  - White..................176,101
  - Asian..................15,189
  - American Indian/Alaska Native...1,713
  - Other race.............22,298
  - Two or more races........13,446

- Hispanic (of any race).................44,953

- Age
  - 0-24......................187,629
  - 25-34.....................101,762
  - 35-44......................87,677
  - 45-54......................75,310
  - 55-64......................49,783
  - 65 and over..............69,898
  - Youth (under 18).............114,992

- Median Age .....................34.6

SOURCES:
Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau.
Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov.
Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health.
Medical Services data were taken from the DC Citizen Atlas website.
Law Enforcement data were taken from the Metropolitan Police Department website at www.mpdc.dc.gov.
Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- Total population: 73,364
- Sex
  - Male: 36,861
  - Female: 36,503
- Race
  - Black: 33,554
  - White: 23,276
  - Asian: 2,588
  - American Indian/Alaska Native: 378
  - Other race: 10,260
  - Two or more races: 3,308
- Hispanic (of any race): 18,109
- Age
  - 0-24: 24,488
  - 25-34: 17,959
  - 35-44: 12,007
  - 45-54: 8,326
  - 55-64: 4,900
  - 65 and over: 5,684
  - Youth (under 18): 13,102
- Median Age: 31.8
- Marital Status (age 15 years and over)
  - Never married: 57.4%
  - Now married, except separated: 25.6%
  - Separated: 3.7%
  - Widowed: 5.0%
  - Divorced: 8.2%

Medical Services
- Hospital Centers: 1
- Specialty Hospitals: 0

Educational Facilities
- Elementary: 15
- Middle: 6
- Junior High: 3
- Senior High: 6
- Colleges/Universities: 1
  - Howard University

Distribution Licenses
- Tobacco Licenses: 179
- Alcohol Retailers: 0

Law Enforcement
- Police Stations/Substations: 2
- Specialty Police Units/Divisions
  - Latino Liaison Unit
- Deaf and Hard Hearing Liaison Unit


SOURCES: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Law Enforcement data were taken from the DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- **Total population**: 68,869
- **Sex**
  - Male: 35,167
  - Female: 33,702
- **Race**
  - Black: 13,723
  - White: 45,036
  - Asian: 5,269
  - American Indian/Alaska Native: 234
  - Other race: 2,706
  - Two or more races: 1,901
- **Hispanic (of any race)**: 6,997
- **Age**
  - 0-24: 23,299
  - 25-34: 16,720
  - 35-44: 9,788
  - 45-54: 7,599
  - 55-64: 5,191
  - 65 and over: 6,272
  - Youth (under 18): 5,513
- **Median Age**: 31.7
- **Marital Status (age 15 years and over)**
  - Never married: 61.2%
  - Now married, except separated: 23.9%
  - Separated: 2.6%
  - Widowed: 4.8%
  - Divorced: 7.4%

### Medical Services
- Hospital Centers: 2
- Specialty Hospitals: 0

### Educational Facilities
- Elementary: 18
- Middle: 5
- Junior High: 0
- Senior High: 6
- Colleges/Universities: 3
  - George Washington University
  - Georgetown University
  - Strayer University

### Distribution Licenses
- Tobacco Licenses: 281
- Alcohol Retailers: 591

### Law Enforcement
- Police Stations/Substations: 1
- Specialty Police Units/Divisions: 1
  - Asian Liaison Unit

**NOTE**: 2000 Population Data.

**SOURCES**: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau.
Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov.
Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health.
Medical Services data were taken from the DC Citizen Atlas website.
Law Enforcement data were taken from the DC Citizen Atlas website.
Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- Total population: 73,718
- Sex
  - Male: 32,248
  - Female: 41,470
- Race
  - Black: 4,259
  - White: 61,647
  - Asian: 4,231
  - American Indian/Alaska Native: 140
  - Other: 1,549
- Hispanic (of any race): 5,027
- Age
  - 0-24: 18,681
  - 25-34: 15,519
  - 35-44: 10,863
  - 45-54: 10,864
  - 55-64: 7,653
  - 65 and over: 10,138
  - Youth (under 18): 8,817
- Median Age: 37.4
- Marital Status (age 15 and over)
  - Never married: 41.6%
  - Now married, except separated: 43.2%
  - Separated: 1.5%
  - Widowed: 5.9%
  - Divorced: 7.8%

Medical Services
- Hospital Centers: 1
- Specialty Hospitals: 2

Educational Facilities
- Elementary: 30
- Middle: 16
- Senior High: 11
- Junior High: 1
- Colleges/Universities: 3
  - American University
  - George Washington University
  - University of the District of Columbia

Distribution Licenses
- Tobacco Licenses: 69
- Alcohol Retailers: 147

Law Enforcement
- Police Stations/Substations: 1
- Specialty Police Units/Divisions: None

SOURCES: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Law Enforcement data were taken from DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.
District of Columbia: Community Profile

WARD 4: SNAPSHOT


- Total population: 74,092
- Sex
  - Male: 34,454
  - Female: 39,638
- Race
  - Black: 52,407
  - White: 13,112
  - Asian: 721
  - American Indian/Alaska Native: 222
  - Other race: 5,369
  - Two or more races: 2,261
- Hispanic (of any race): 9,237
- Age
  - 0-24: 21,414
  - 25-34: 9,438
  - 35-44: 11,629
  - 45-54: 11,478
  - 55-64: 7,441
  - 65 and over: 12,692
  - Youth (under 18): 15,691
- Median Age: 40.3
- Marital Status (age 15 years and over)
  - Never married: 37.8%
  - Now married, except separated: 37.3%
  - Separated: 4.2%
  - Widowed: 10.0%
  - Divorced: 10.7%

Medical Services
- Hospital Centers: 0
- Specialty Hospitals: 1

Educational Facilities
- Elementary: 36
- Middle: 16
- Junior High: 1
- Senior High: 11
- Colleges/Universities: 0

Distribution Licenses
- Tobacco Licenses: 117
- Alcohol Retailers: 84

Law Enforcement
- Police Stations/Substations: 1
- Specialty Police Units/Divisions
- Civil Rights and Force Investigations Branch
- Force Investigation Team

SOURCES: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- **Total population**: 72,527
- **Sex**
  - Male: 33,840
  - Female: 38,687
- **Race**
  - Black: 62,846
  - White: 6,796
  - Asian: 607
  - American Indian/Alaska Native: 230
  - Other race: 897
  - Two or more races: 1,151
- **Hispanic (of any race)**: 1,856
- **Age**
  - 0-24: 23,358
  - 25-34: 8,764
  - 35-44: 10,734
  - 45-54: 10,077
  - 55-64: 6,670
  - 65 and over: 12,924
  - Youth (under 18): 15,328
- **Median Age**: 38.9
- **Marital Status (age 15 years and over)**
  - Never married: 42.6%
  - Now married, except separated: 29.2%
  - Separated: 5.1%
  - Widowed: 11.5%
  - Divorced: 11.5%

### Medical Services
- Hospital Centers: 2
- Specialty Hospitals: 4

### Educational Facilities
- Elementary: 25
- Middle: 20
- Junior High: 3
- Senior High: 23
- Colleges/Universities: 3
  - Catholic University
  - Gallaudet University
  - Trinity College

### Distribution Licenses
- Tobacco Licenses: 152
- Alcohol Retailers: 90

### Law Enforcement
- Police Stations/Substations: 1

### Specialty Police Units/Divisions
- Family Violence and Child Protection Unit
- Forensic Biology Section
- Forensic Science Services Division
- Missing Persons Section

**NOTE**: 2000 Population Data.

**SOURCES**: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Law Enforcement data were taken from the DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- Total population: 68,035
- Sex
  - Male: 34,037
  - Female: 33,998
- Race
  - Black: 42,678
  - White: 21,513
  - American Indian/Alaska Native: 202
  - Asian: 1,339
  - Other race: 872
  - Two or more races: 1,431
- Hispanic (of any race): 2,053
- Age
  - 0-24: 18,074
  - 25-34: 14,016
  - 35-44: 11,934
  - 45-54: 9,939
  - 55-64: 6,287
  - 65 and over: 7,785
  - Youth (under 18): 11,657
- Median Age: 36.6
- Marital Status (age 15 years and over)
  - Never married: 50.7%
  - Now married, except separated: 25.1%
  - Separated: 4.5%
  - Widowed: 8.7%
  - Divorced: 11.0%
- Education (age 25 years and over)
  - High school graduate or higher: 78.8%
  - Bachelor’s degree or higher: 43.6%
  - Graduate or professional degree: 22.5%
- Civilian Labor Force Status (age 16 and over)
  - Employed: 90.4%
  - Unemployed: 9.6%
- Poverty
  - Families: 19.1%
  - Individuals: 21.1%
- Housing Units
  - Total: 35,510
  - Occupied: 90.0%
  - Vacant: 10.0%

Medical Services
- Hospital Centers: 0
- Specialty Hospitals: 1

Educational Facilities
- Elementary: 24
- Middle: 11
- Junior High: 4
- Senior High: 4
- Colleges/Universities: 2
  - National Defense University
  - Southeastern University

Distribution Licenses
- Tobacco Licenses: 147
- Alcohol Retailers: 202

Law Enforcement
- Police Stations/Substations: 1

Specialty Police Units/Divisions
- Air Support Unit
- Arson Task Force
- Auto Theft Unit
- Bank/Hotel Robbery Squad
- Computer Crime and Forensic Unit
- Domestic Violence Unit
- Executive Protection Unit
- Explosive Ordnance Disposal Unit
- Field Operations Support Unit
- Financial Crimes and Fraud Unit
- Gang Crimes/Narcotics
- Gay and Lesbian Liaison Unit
- Harbor Patrol
- Major Crash Investigations
- Major Narcotics Branch
- Pawn Unit
- Prostitution Unit


SOURCES: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov.

Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Law Enforcement data were taken from the DC Citizen Atlas website. Educational Facilities data were taken from www.deschoolsearch.dc.gov.

- **Total population:** 70,540
- **Sex**
  - Male: 30,988
  - Female: 39,552
- **Race**
  - Black: 68,312
  - White: 976
  - Asian: 133
  - American Indian/Alaska Native: 155
  - Other race: 718
- **Hispanic (of any race):** 658
- **Age**
  - 0-24: 25,141
  - 25-34: 8,808
  - 35-44: 10,634
  - 45-54: 9,382
  - 55-64: 6,726
  - 65 and over: 9,849
  - Youth (under 18): 19,420
- **Median Age:** 36.2
- **Marital Status (age 15 years and over)**
  - Never married: 45.5%
  - Now married, except separated: 26.6%
  - Separated: 6.3%
  - Widowed: 9.8%
  - Divorced: 11.8%

### Medical Services
- Hospital Centers: 0
- Specialty Hospitals: 0

### Educational Facilities
- Elementary: 29
- Middle: 12
- Junior High: 0
- Senior High: 5
- Colleges/Universities: 0

### Distribution Licenses
- Tobacco Licenses: 92
- Alcohol Retailers: 48

### Law Enforcement
- Police Stations/Substations: 3
- Specialty Police Units/Divisions
  - Environmental Crimes Unit
  - Family Liaison Specialist Unit
  - Horse Mounted Unit

**NOTE:** 2000 Population Data.

**SOURCES:** Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Law Enforcement data were taken from the DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.

- Total population: 70,914
- Sex
  - Male: 31,771
  - Female: 39,143
- Race
  - Black: 65,533
  - White: 3,745
  - Asian: 301
  - American Indian/Alaska Native: 152
  - Other race: 399
  - Two or more races: 784
- Hispanic (of any race): 1,016
- Age
  - 0-24: 33,174
  - 25-34: 10,538
  - 35-44: 10,088
  - 45-54: 7,645
  - 55-64: 4,915
  - 65 and over: 4,554
  - Youth (under 18): 25,464
- Median Age: 27.2
- Marital Status (age 15 years and over)
  - Never married: 50.6%
  - Now married, except separated: 26.0%
  - Separated: 6.4%
  - Widowed: 7.0%
  - Divorced: 9.9%

Medical Services
- Hospital Centers: 2
- Specialty Hospitals: 1

Educational Facilities
- Elementary: 29
- Middle: 10
- Junior High: 1
- Senior High: 6
- Colleges/Universities: 0

Distribution Licenses
- Tobacco Licenses: 90
- Alcohol Retailers: 36

Law Enforcement
- Police Stations/Substations: 1
- Specialty Police Units/Divisions: None

SOURCES: Population data were prepared by the DC Office of Planning/State Data Center from data provided by the U.S. Census Bureau. Alcohol Licenses data were taken from the DC Alcoholic Beverage Regulation Administration’s (ABRA) website at www.abra.dc.gov. Tobacco Licenses data were provided by the Addiction Prevention and Recovery Administration (APRA), a division of the DC Department of Health. Medical Services data were taken from the DC Citizen Atlas website. Law Enforcement data were taken from DC Citizen Atlas website. Educational Facilities data were taken from www.dcschoolsearch.dc.gov.
SECTION III
CONSEQUENCE:
VIOLENT AND PROPERTY CRIME

For the consequence category, we have included eight indicators that are a part of the crime and criminal justice Center for Substance Abuse Prevention National Outcome Measures (CSAP NOMs) domain. The data presented within each of the eight indicators listed below allow us to assess the prevalence of both drug- and alcohol-related violent and property crime in the District of Columbia.

- Violent Crime
  - Robberies
  - Sex Abuse
  - Assault with a Deadly Weapon
  - Homicide

- Property Crime
  - Burglary
  - Theft
  - Theft from Auto
  - Stolen Autos

These eight indicators were selected in accordance with CSAP requirements. The purpose of these selected indicators is to describe major community-wide consequences of alcohol and illicit drug use. The following diagrams and tables provide an in-depth look at alcohol-related violent crime, drug-related property crime, and drug-related homicides in the District of Columbia.

The MPD records homicide occurrences in a database separate from all other violent crime. Because of this, it was possible to include detailed information about homicide occurrences in the District.

All statistics presented here are based on preliminary DC index crime data. The data do not represent official statistics submitted to the Federal Bureau of Investigation (FBI) under the Uniform Crime Reporting program (UCR). All preliminary offenses are coded based on DC criminal code and not the FBI offense classifications. All statistics are subject to change due to a variety of reasons, such as a change in classification, the determination that certain offense reports were unfounded, or late reporting. Please understand that any comparisons between MPD preliminary data as published here and the official crime statistics published by the FBI under the UCR Program are inaccurate and misleading. Excludes crimes for which no address could be identified (between 1% and 3% of all crimes). All homicide data are verified through the Violent Crimes Branch (VCB).

Source: Geocoded Analytical Services Application (ASAP) data as of May 7, 2007.

- **Theft from Auto**: The number of thefts from autos in the District decreased 33.5% between 2002 and 2006.
- **Burglary**: The number of burglaries decreased 25.9% between 2002 and 2006.
- **Stolen Auto**: The number of stolen auto offenses in the District decreased 25.1% between 2002 and 2006.
- **Assault with a Deadly Weapon (ADW)**: The number of ADW offenses decreased 14.5% between 2002 and 2006.
- **Sex Abuse**: The number of sex abuse offenses in the District decreased 12.4% between 2002 and 2006.
- **Robbery**: The number of robberies decreased 7.2% between 2002 and 2006.
- **Theft**: The number of theft offenses increased 5.7% between 2002 and 2006.

**Figure 1: Rank-Ordered Violent and Property Crime Offenses in the District: Average Numbers between 2002 and 2006**

- Theft from Auto (avg. = 8,313)
- Stolen Auto (avg. = 7,571)
- Theft (avg. = 7,557)
- Burglary (avg. = 4,487)
- Robbery (avg. = 4,074)
- Assault with a Deadly Weapon (avg. = 3,595)
- Sex Abuse (avg. = 343)

**HIGHLIGHTS**

- Overall, violent and property crime offenses in the District decreased between 2002 and 2006, except for theft which increased nearly six percent.
- Theft from auto, stolen autos, theft, and burglary were the four most frequently reported property crimes in the District.
- Although theft from auto (n=8,313) was the most frequently reported property crime, it also had the greatest overall decline (-33.5%) from 2002 to 2006.
- Burglary and stolen auto offenses declined approximately 25 percent; ADW, sex abuse, and robbery decreased 14.5 percent, 12.4 percent, and 7.2 percent respectively.

**NOTE**: All statistics presented here are based on preliminary DC index crime data.

**SOURCE**: Geocoded Analytical Services Application (ASAP) Preliminary Crime Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
DISTRICT-WIDE: ALL VIOLENT AND PROPERTY CRIME


- **Stolen Auto**: The number of stolen auto offenses in the District decreased 7.7% between 2005 and 2006.
- **Robbery**: The number of District robberies decreased 4.4% between 2005 and 2006.
- **Theft**: The number of theft offenses decreased 1.0% between 2005 and 2006.

- **Sex Abuse**: The number of sex abuse offenses increased 10.7% between 2005 and 2006.
- **Theft from Auto**: The number of thefts from autos increased 3.2% between 2005 and 2006.
- **Burglary**: The number of burglaries increased 0.6% between 2005 and 2006.
- **Assault with a Deadly Weapon**: The number of ADW offenses in the District increased 0.4% between 2005 and 2006.

- Theft, stolen autos, and robbery were three of the four most frequently reported violent and property crimes in the District in 2005 and 2006; however, each of the three decreased during this time while theft from autos increased. However, trends varied within the wards.
  - Ward 8 had the greatest percent increase (44.6%) in theft offenses, while Ward 6 had the greatest decrease (-18%) between 2005 and 2006.
  - Ward 8 had the greatest percent increase (12.5%) of stolen autos, while Ward 3 had the greatest decrease (-34.6%) between 2005 and 2006.
  - Ward 4 had the greatest percent increase (12.3%) of robbery offenses, while Ward 7 had the greatest decrease (-14.3%) between 2005 and 2006.

- Sex abuse, theft from auto, burglary, and assault with a deadly weapon (ADW) offenses increased in the District between 2005 and 2006. Within the wards the following trends were noted:
  - Sex abuse offenses increased from 288 in 2005 to 317 in 2006, with the greatest percent increase (63.0%) during this time occurring in Ward 1.
  - Theft from auto offenses had the greatest percent increase (36.3%) in Ward 2, while Ward 8 had the greatest decrease (-31.6%) between 2005 and 2006.
  - Burglary offenses had the greatest percent increase (27.8%) in Ward 1, while Ward 6 decreased 18.0 percent between 2005 and 2006.
  - Of all violent and property crimes, ADW offenses changed the least (0.4%) between 2005 and 2006; the largest decrease (-20.0%) was recorded in Ward 3, and the largest increase (18.8%) was recorded in Ward 2 during this period.

NOTE: All statistics presented here are based on preliminary DC index crime data.
SOURCE: Geocoded Analytical Services Application (ASAP) Preliminary Crime Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
## District-Wide: Alcohol- and Drug-Related Violent and Property Crime

### Table 1: Estimated Number of District of Columbia Alcohol-Related Violent Crime Offenses and Drug-Related Property Crime Offenses: 2002–2006

<table>
<thead>
<tr>
<th>District of Columbia</th>
<th>Attributable Fraction*</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>US Estimate</td>
<td>Total #</td>
<td>Estimated # Alcohol/Drug Related</td>
<td>Total #</td>
<td>Estimated # Alcohol/Drug Related</td>
<td>Total #</td>
</tr>
<tr>
<td>Violent Crime Offenses: Alcohol-Related</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery</td>
<td>3%</td>
<td>4,188</td>
<td>126</td>
<td>4,418</td>
<td>133</td>
<td>3,816</td>
</tr>
<tr>
<td>Sex Abuse</td>
<td>23%</td>
<td>362</td>
<td>83</td>
<td>440</td>
<td>101</td>
<td>306</td>
</tr>
<tr>
<td>Assault with a Deadly Weapon (ADW)</td>
<td>30%</td>
<td>3,916</td>
<td>1,175</td>
<td>3,947</td>
<td>1,184</td>
<td>3,431</td>
</tr>
<tr>
<td>Total</td>
<td>---</td>
<td>8,466</td>
<td>1,384</td>
<td>8,805</td>
<td>1,418</td>
<td>7,553</td>
</tr>
</tbody>
</table>

| Property Crime Offenses: Drug-Related |
| Burglary            | 30%         | 5,237  | 1,571 | 5,011 | 1,503 | 4,447 | 1,334 | 3,857  | 1,157 | 3,882  | 1,165 |
| Theft               | 30%         | 7,025  | 2,108 | 8,053 | 2,416 | 7,781 | 2,334 | 7,500  | 2,250 | 7,425  | 2,228 |
| Theft from Auto     | 30%         | 10,970 | 3,291 | 9,008 | 2,702 | 7,225 | 2,168 | 7,068  | 2,120 | 7,294  | 2,188 |
| Stolen Auto         | 7%          | 8,203  | 574   | 8,955 | 627   | 7,897 | 553   | 6,655  | 466   | 6,145  | 430   |
| Total               | ---         | 31,435 | 7,544 | 31,027 | 7,248 | 27,350 | 6,389 | 25,080 | 5,993 | 24,746 | 6,011 |

### Notes: * Attributable fraction percent estimates for alcohol-related violent crimes and drug-related property crimes were provided by the State Epidemiological System (SEDS). Estimates of the percentage of crimes attributable to illicit drugs are derived primarily from self-reports of incarcerated offenders. The actual percentages attributable to alcohol or drugs may vary across geographic units or subpopulations.

### Highlights
- Among violent crimes in the United States, approximately three percent of robberies, 23 percent of sexual assaults, and 30 percent of assaults with a deadly weapon (ADW) are estimated by using attributable fractions (to explain incidents or cases related to alcohol use).
- Among property crimes in the United States, approximately 30 percent of burglaries, theft offenses, and thefts from auto, and seven percent of stolen autos are estimated to be drug related.
- When the attributable fractions were applied to District crime, theft and theft from auto offenses were the top two drug-related offenses in 2005 and 2006.
- Assault with a deadly weapon was the most frequently reported alcohol-related violent crime in the District each year between 2002 through 2006, although the estimated number has declined slightly during this time.

### Notes: All statistics presented here are based on preliminary DC index crime data.

### Source: Geocoded Analytical Services Application (ASAP) Preliminary Crime Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.

Attributable fraction percent estimates for alcohol-related violent crimes and drug-related property crimes were provided by the State Epidemiological System (SEDS) from *The Economic Costs of Alcohol and Drug Abuse in The United States – 1992* (http://www.nida.nih.gov/economiccosts/index.html). Estimates of the percentage of crimes attributable to illicit drugs are derived primarily from self-reports of incarcerated offenders. The actual percentages attributable to alcohol or drugs may vary across geographic units or subpopulations.
### Table 2: Estimated Number of District of Columbia Alcohol-Related Violent Crime Offenses and Drug-Related Property Crime Offenses by Ward in 2006

<table>
<thead>
<tr>
<th>2006</th>
<th>Attributable Fraction* US Estimate</th>
<th>DC</th>
<th>WARD</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violent Crime Offenses: Estimated Number Related to Alcohol Use</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery</td>
<td>3%</td>
<td>117</td>
<td>23</td>
<td>15</td>
<td>3</td>
<td>12</td>
<td>18</td>
<td>16</td>
<td>14</td>
<td>16</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Sex Abuse</td>
<td>23%</td>
<td>73</td>
<td>10</td>
<td>5</td>
<td>2</td>
<td>8</td>
<td>12</td>
<td>7</td>
<td>11</td>
<td>18</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Assault with a Deadly Weapon (ADW)</td>
<td>30%</td>
<td>1,004</td>
<td>136</td>
<td>101</td>
<td>10</td>
<td>86</td>
<td>163</td>
<td>138</td>
<td>161</td>
<td>208</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Total Alcohol Related</td>
<td>---</td>
<td>1,194</td>
<td>169</td>
<td>121</td>
<td>15</td>
<td>106</td>
<td>193</td>
<td>161</td>
<td>186</td>
<td>242</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Property Crime Offenses: Estimated Number Related to Drug Use</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burglary</td>
<td>30%</td>
<td>1,165</td>
<td>182</td>
<td>204</td>
<td>70</td>
<td>93</td>
<td>169</td>
<td>153</td>
<td>135</td>
<td>157</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Theft</td>
<td>30%</td>
<td>2,228</td>
<td>270</td>
<td>712</td>
<td>224</td>
<td>178</td>
<td>234</td>
<td>325</td>
<td>122</td>
<td>161</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Theft from Auto</td>
<td>30%</td>
<td>2,188</td>
<td>436</td>
<td>493</td>
<td>115</td>
<td>138</td>
<td>270</td>
<td>405</td>
<td>205</td>
<td>119</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Stolen Auto</td>
<td>7%</td>
<td>430</td>
<td>64</td>
<td>33</td>
<td>6</td>
<td>47</td>
<td>72</td>
<td>65</td>
<td>73</td>
<td>69</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Total Drug Related</td>
<td>---</td>
<td>6,011</td>
<td>952</td>
<td>1,442</td>
<td>415</td>
<td>456</td>
<td>745</td>
<td>948</td>
<td>535</td>
<td>506</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

**NOTES:** Estimated numbers are rounded to the nearest whole number.

*Attributable fraction percent estimates for alcohol-related violent crimes and drug-related property crimes were provided by the State Epidemiological System (SEDS). Estimates of percentage of crimes attributable to illicit drugs are derived primarily from self-reports of incarcerated offenders. Actual percentages attributable to alcohol or drugs may vary across geographic units or subpopulations.

### HIGHLIGHTS

- Based on the attributable fractions, alcohol-related violent crimes occurred most frequently in Ward 8 in 2006.
- In 2006, Ward 8 had the greatest number of alcohol-related sex abuse and ADW offenses.
- Ward 1 had a greater number of estimated alcohol-related robberies than all other wards in 2006.
- In 2006, Ward 2 had the greatest number of estimated drug-related burglary, theft, and theft from auto offenses.
- In 2006, Ward 3 had an estimated total of 15 alcohol-related violent crimes, the lowest of all eight wards; Ward 3 also had the lowest number of all estimated drug-related property crimes, except theft (which was lowest in Ward 7).

**NOTE:** All statistics presented here are based on preliminary DC index crime data.

**SOURCE:** Geocoded Analytical Services Application (ASAP) Preliminary Crime Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.

Attributable fraction percent estimates for alcohol-related violent crimes and drug-related property crimes were provided by the State Epidemiological System (SEDS) from *The Economic Costs of Alcohol and Drug Abuse in The United States – 1992* (http://www.nida.nih.gov/economiccosts/index.html). Estimates of the percentage of crimes attributable to illicit drugs are derived primarily from self-reports of incarcerated offenders. The actual percentages attributable to alcohol or drugs may vary across geographic units or subpopulations.
WARD 1: ALL VIOLENT AND PROPERTY CRIME

Table 3: Total Number and Percent of All Ward 1 Violent and Property Crime Offenses in the District of Columbia: 2002–2006

<table>
<thead>
<tr>
<th>WARD 1</th>
<th>CRIME OFFENSES</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total #</td>
<td>%</td>
<td>Total #</td>
<td>%</td>
<td>Total #</td>
<td>%</td>
</tr>
<tr>
<td>Violent Crime Offenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery</td>
<td>727</td>
<td>17.4</td>
<td>819</td>
<td>18.5</td>
<td>741</td>
<td>19.4</td>
</tr>
<tr>
<td>Sex Abuse</td>
<td>54</td>
<td>14.9</td>
<td>62</td>
<td>14.1</td>
<td>41</td>
<td>13.4</td>
</tr>
<tr>
<td>Assault with a Deadly Weapon (ADW)</td>
<td>513</td>
<td>13.1</td>
<td>508</td>
<td>12.9</td>
<td>399</td>
<td>11.6</td>
</tr>
<tr>
<td>Total Violent Crime Offenses</td>
<td>1,294</td>
<td></td>
<td>1,389</td>
<td></td>
<td>1,181</td>
<td></td>
</tr>
<tr>
<td>Property Crime Offenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burglary</td>
<td>833</td>
<td>15.9</td>
<td>655</td>
<td>13.1</td>
<td>490</td>
<td>11.0</td>
</tr>
<tr>
<td>Theft</td>
<td>848</td>
<td>12.1</td>
<td>985</td>
<td>12.2</td>
<td>904</td>
<td>11.6</td>
</tr>
<tr>
<td>Theft from Auto</td>
<td>1,581</td>
<td>14.4</td>
<td>1,607</td>
<td>17.8</td>
<td>1,240</td>
<td>17.2</td>
</tr>
<tr>
<td>Stolen Auto</td>
<td>1,002</td>
<td>12.2</td>
<td>1,006</td>
<td>11.2</td>
<td>928</td>
<td>11.8</td>
</tr>
<tr>
<td>Total Property Crime Offenses</td>
<td>4,264</td>
<td></td>
<td>4,253</td>
<td></td>
<td>3,562</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Column totals will not equal 100%. Percentages depict the percent of Ward 1 offenses among all incidents occurring in the eight wards of the District.

HIGHLIGHTS

- Property crimes decreased steadily in Ward 1 from 2003 to 2005 and then increased slightly in 2006.
- Between 2002 and 2006, violent crimes fluctuated slightly, but always ranged between 1,200 and 1,400 offenses.
- Theft from auto was the most frequently reported violent or property crime each year from 2002 through 2006.
- Nearly 20 percent of all robbery and theft from auto offenses in the District in 2006 occurred in Ward 1. All other violent and property crimes ranged from 12-16 percent.
WARD 1: ALCOHOL- AND DRUG-RELATED VIOLENT AND PROPERTY CRIME

Table 4: Estimated Number of Alcohol- and Drug-Related Crimes in Ward 1:
2002–2006

<table>
<thead>
<tr>
<th>Attributable Fraction*</th>
<th>Violent Crime Offenses: Alcohol-Related</th>
<th>YEAR</th>
<th>Property Crime Offenses: Drug-Related</th>
</tr>
</thead>
<tbody>
<tr>
<td>WARD 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Violent Crime Offenses: Alcohol-Related</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery</td>
<td>3%</td>
<td>22</td>
<td>25</td>
</tr>
<tr>
<td>Sex Abuse</td>
<td>23%</td>
<td>12</td>
<td>14</td>
</tr>
<tr>
<td>Assault with a Deadly Weapon (ADW)</td>
<td>30%</td>
<td>154</td>
<td>152</td>
</tr>
<tr>
<td>Total</td>
<td>--</td>
<td>188</td>
<td>191</td>
</tr>
<tr>
<td>Property Crime Offenses: Drug-Related</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burglary</td>
<td>30%</td>
<td>250</td>
<td>197</td>
</tr>
<tr>
<td>Theft</td>
<td>30%</td>
<td>254</td>
<td>296</td>
</tr>
<tr>
<td>Theft from Auto</td>
<td>30%</td>
<td>474</td>
<td>482</td>
</tr>
<tr>
<td>Stolen Auto</td>
<td>7%</td>
<td>70</td>
<td>70</td>
</tr>
<tr>
<td>Total</td>
<td>--</td>
<td>1,048</td>
<td>1,045</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- Based on the attributable fractions, ADW was the most frequently reported alcohol-related violent crime in Ward 1 each year, and theft from auto was the most frequently reported drug-related property crime between 2002 and 2006.

- All alcohol- and drug-related crimes decreased in Ward 1 between 2003 and 2005, then increased in 2006, except robbery which fluctuated between 22 and 25 alcohol-related offenses during this time.

NOTE: *Attributable fraction percent estimates for alcohol-related violent crimes and drug-related property crimes were provided by the State Epidemiological System (SEDS) from The Economic Costs of Alcohol and Drug Abuse in The United States – 1992 (http://www.nida.nih.gov/economiccosts/index.html). Estimates of the percentage of crimes attributable to illicit drugs are derived primarily from self-reports of incarcerated offenders. The actual percentages attributable to alcohol or drugs may vary across geographic units or subpopulations. All statistics presented here are based on preliminary DC index crime data.

SOURCE: Geo-coded Analytical Services Application (ASAP) Preliminary Crime Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
DISTRICT-WIDE: HOMICIDE BY WARD

HIGHLIGHTS

- Overall, the number of homicides in the District decreased 36 percent from 262 in 2002, to 169 in 2006.
- Compared to 2002, in 2006 the number of reported homicides decreased for all wards except Ward 2, which stayed about the same.
- In each year since 2002, Ward 8 consistently had more homicides than all other wards, while Ward 3 consistently had fewer homicides than all other wards.
- Wards 4, 5, 6, and 8 reported fewer homicides in 2006 than in any of the prior four years.

Source: Violent Crimes Branch (VCB) Homicide Data provided by the VCB through the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.

<table>
<thead>
<tr>
<th>WARD</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Drug-Related (#)</td>
<td>% of Ward Total</td>
<td>Drug-Related (#)</td>
<td>% of Ward Total</td>
<td>Drug-Related (#)</td>
</tr>
<tr>
<td>Total</td>
<td>89</td>
<td>34.0</td>
<td>63</td>
<td>25.8</td>
<td>33</td>
</tr>
<tr>
<td>Ward 1</td>
<td>6</td>
<td>24.0</td>
<td>5</td>
<td>27.8</td>
<td>2</td>
</tr>
<tr>
<td>Ward 2</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Ward 3</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Ward 4</td>
<td>5</td>
<td>21.7</td>
<td>4</td>
<td>26.7</td>
<td>2</td>
</tr>
<tr>
<td>Ward 5</td>
<td>27</td>
<td>49.1</td>
<td>10</td>
<td>20.0</td>
<td>7</td>
</tr>
<tr>
<td>Ward 6</td>
<td>6</td>
<td>21.4</td>
<td>7</td>
<td>25.9</td>
<td>6</td>
</tr>
<tr>
<td>Ward 7</td>
<td>26</td>
<td>43.3</td>
<td>18</td>
<td>31.0</td>
<td>11</td>
</tr>
<tr>
<td>Ward 8</td>
<td>19</td>
<td>30.6</td>
<td>19</td>
<td>26.8</td>
<td>5</td>
</tr>
</tbody>
</table>

Note: *A drug-related homicide means that the primary motive for the homicide was recorded as “drugs” by the DC Metropolitan Police Department.

HIGHLIGHTS

- Approximately one in ten homicides committed in the District in 2006 was drug related.
- Consistent with the five-year trend in total District homicides which decreased, drug-related homicides also decreased, from 89 in 2002 to 19 in both 2005 and 2006.
- Wards 5 and 7 experienced the greatest decreases (78 percent and 92.3 percent respectively) in drug-related homicides between 2002 and 2006.
- Ward 3 reported no drug-related homicides between 2002 and 2006; Ward 2 reported no drug-related homicides between 2002 and 2005 and only one in 2006.
- Wards 1, 4, and 6 reported fewer than 10 drug-related homicides each year between 2002 and 2006.

Source: Violent Crimes Branch (VCB) Homicide Data provided by the VCB through the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
WARD 1: HOMICIDE

Table 6: Descriptives for Ward 1 Homicides in the District of Columbia: 2002–2006

<table>
<thead>
<tr>
<th>WARD 1</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total #</td>
<td>%</td>
<td>Total #</td>
<td>%</td>
<td>Total #</td>
</tr>
<tr>
<td>Total # of Homicides</td>
<td>25</td>
<td>9.5</td>
<td>18</td>
<td>7.3</td>
<td>9</td>
</tr>
<tr>
<td>Decedent's Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>19</td>
<td>8.3</td>
<td>18</td>
<td>7.9</td>
<td>9</td>
</tr>
<tr>
<td>Female</td>
<td>6</td>
<td>18.2</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Decedent's Race</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>22</td>
<td>9.1</td>
<td>14</td>
<td>6.1</td>
<td>9</td>
</tr>
<tr>
<td>White</td>
<td>1</td>
<td>11.1</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Hispanic</td>
<td>2</td>
<td>22.2</td>
<td>4</td>
<td>40.0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Motive</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Altercation</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Argument</td>
<td>9</td>
<td>15.5</td>
<td>6</td>
<td>9.2</td>
<td>0</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>1</td>
<td>25.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Domestic</td>
<td>2</td>
<td>11.8</td>
<td>1</td>
<td>10.0</td>
<td>1</td>
</tr>
<tr>
<td>Drug</td>
<td>6</td>
<td>6.7</td>
<td>5</td>
<td>7.9</td>
<td>2</td>
</tr>
<tr>
<td>Gang Related</td>
<td>1</td>
<td>12.5</td>
<td>1</td>
<td>33.3</td>
<td>0</td>
</tr>
<tr>
<td>Mistaken Identity</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Negligence</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Retaliation</td>
<td>4</td>
<td>15.4</td>
<td>1</td>
<td>3.4</td>
<td>2</td>
</tr>
<tr>
<td>Robbery</td>
<td>0</td>
<td>0.0</td>
<td>1</td>
<td>3.3</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>7.1</td>
<td>1</td>
<td>16.7</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
<td>4.2</td>
<td>2</td>
<td>4.9</td>
<td>1</td>
</tr>
</tbody>
</table>

NOTES: Percentages equal the percent occurring in Ward 1 out of the total for all Wards; therefore, columns will not add up to 100%.
A drug-related homicide means that the primary motive for the homicide was recorded as “drugs” by the DC Metropolitan Police Department.

HIGHLIGHTS

- The number of homicides in Ward 1 decreased 64 percent between 2002 and 2004, then doubled in 2005, and remained about the same in 2006.
- In 2006, nearly 12 percent of all District homicides took place in Ward 1, which was the highest percentage in the past five-year period.
- In 2006, all homicide decedents in Ward 1 were male and 90 percent were Black.
- Drug-related homicides decreased each year between 2002 and 2004 in Ward 1. In both 2005 and 2006 there were no drug-related homicides reported in Ward 1.
- In 2006, arguments and retaliation accounted for 50 percent of all motives for homicide in Ward 1.

SOURCE: Violent Crimes Branch (VCB) Homicide Data provided by the VCB through the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
SECTION IV
CONSEQUENCE: ARREST

For this consequence category, we include eleven indicators that are part of the crime and criminal justice Center for Substance Abuse Prevention National Outcome Measures (CSAP NOMs) domain. The data presented within each of the eleven indicators (listed below) allow us to assess the prevalence of both alcohol- and drug-related arrests in the District of Columbia.

- Alcohol-Related Arrests
  - Drinking in Public
  - Possession of Open Alcohol
- Alcohol- and/or Drug-Related Arrests
  - Driving Under the Influence
  - Driving Under the Influence and Refusing a Test
  - Driving While Intoxicated
- Drug-Related Arrests
  - Conspiracy to Distribute
  - Distribution
  - Possession
  - Possession with Intent to Distribute
  - Possession of Drug Paraphernalia
  - Any Other Narcotic Violation

These eleven indicators were selected in accordance with CSAP requirements. The purpose of these selected indicators is to describe a major community-wide consequence of alcohol and illicit drug use. The following tables provide an in-depth look at alcohol- and/or drug-related arrests for DC, both as a whole and at the ward level.

Alcohol- and drug-related arrest data were provided by the Metropolitan Police Department (MPD). Totals are based solely on the top arrest charge. One person may have been booked on more than one arrest charge. Excludes arrests for which no address could be identified (between 1% and 3% of all arrests).

Source: Geocoded Criminal Justice Information System (CJIS) data as of May 7, 2007.
**HIGHLIGHTS**

- Between 2002 and 2006, adult arrests accounted for 99 to 100 percent of all substance-related driving and alcohol-related arrests.
- The total number of substance-related driving and alcohol-related arrests increased between 2002 and 2005, and then slightly decreased in 2006.
- For each year, the greatest number of substance-related driving and alcohol-related arrests occurred for possession of open alcohol.
- For each year, the fewest number of substance-related driving and alcohol-related arrests occurred for refusing a test while allegedly driving under the influence.
- Between 2002 and 2006, six of the eight juvenile substance-related driving and alcohol-related arrests occurred for possession of open alcohol.
Table 8: Total Number* of Substance-Related Driving and Alcohol-Related Arrests in the District of Columbia by Ward in 2006

<table>
<thead>
<tr>
<th>District of Columbia</th>
<th>WARD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ward 1</td>
</tr>
<tr>
<td>Total Arrests (All Causes)</td>
<td>6,118</td>
</tr>
<tr>
<td>Substance-Related Driving and Alcohol-Related Arrests***</td>
<td>853</td>
</tr>
</tbody>
</table>

**Type of Violation**

- Driving Under the Influence - Alcohol/Drugs: 192, 273, 13, 15, 38, 79, 36, 23, 701
- Driving Under the Influence - Refusing Test: 42, 77, 8, 12, 17, 74, 7, 4, 258
- Driving While Intoxicated - Alcohol/Drugs: 56, 235, 47, 66, 48, 355, 24, 26, 899
- Drinking in Public: 44, 55, 1, 559, 16, 683, 287, 399, 273
- Possession of Open Alcohol: 519, 470, 31, 54, 505, 54, 27, 14, 3,593

**NOTES:**
* Total population includes the total number of juvenile and adult arrestees.
** Rows may not sum to total because Ward was defined as zero, or unspecified for 1,679 all-cause arrests and 239 drug-related arrests.
*** Excludes arrests for liquor law and other ABC violations.

- Substance-related driving and alcohol-related arrests accounted for 11 percent of total arrests (all causes) in the District of Columbia in 2006.
- In 2006, Ward 6 (n=1,245) and Ward 2 (n=1,110) had the greatest number of substance-related driving and alcohol-related arrests among all eight wards.
  - Combined, Wards 2 and 6 accounted for 41 percent of the substance-related driving and alcohol-related arrests in 2006.
- Forty-two percent of those arrested for substance-related driving and alcohol-related arrests in Ward 2 were arrested for possession of open alcohol.
- Fifty-five percent of those arrested for substance-related driving and alcohol-related arrests in Ward 6 were arrested for drinking in public.
- Ward 3 (n=100) had the fewest number of substance-related driving and alcohol-related arrests in 2006; Ward 7 had the second fewest at 381 substance-related driving and alcohol-related arrests.

**NOTES:**
Totals are based solely on the most serious arrest charge, since one individual may be booked on more than one arrest charge.
The above data reflect arrests made by all agencies in the District of Columbia.
SOURCE: Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
WARD 1: SUBSTANCE-RELATED DRIVING AND ALCOHOL-RELATED ARRESTS

Table 9: Number of Ward 1 Substance-Related Driving and Alcohol-Related Arrests in the District of Columbia: 2002–2006

<table>
<thead>
<tr>
<th>Ward 1</th>
<th>Year</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Arrest</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Arrests (All Causes)</td>
<td></td>
<td>6,706</td>
<td>5,775</td>
<td>7,179</td>
<td>5,869</td>
<td>6,118</td>
</tr>
<tr>
<td>Total Substance-Related Driving and Alcohol-Related Arrests</td>
<td></td>
<td>492</td>
<td>598</td>
<td>1,009</td>
<td>1,048</td>
<td>853</td>
</tr>
<tr>
<td>Driving Under the Influence - Alcohol/Drugs</td>
<td></td>
<td>24</td>
<td>32</td>
<td>8</td>
<td>19</td>
<td>192</td>
</tr>
<tr>
<td>Driving Under the Influence - Refusing Test</td>
<td></td>
<td>12</td>
<td>16</td>
<td>9</td>
<td>13</td>
<td>42</td>
</tr>
<tr>
<td>Driving While Intoxicated - Alcohol/Drugs</td>
<td></td>
<td>103</td>
<td>113</td>
<td>67</td>
<td>70</td>
<td>56</td>
</tr>
<tr>
<td>Drinking in Public</td>
<td></td>
<td>61</td>
<td>57</td>
<td>86</td>
<td>91</td>
<td>44</td>
</tr>
<tr>
<td>Possession of Open Alcohol</td>
<td></td>
<td>292</td>
<td>380</td>
<td>839</td>
<td>855</td>
<td>519</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Juvenile (under 18)</td>
<td></td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Adult (18 or older)</td>
<td></td>
<td>492</td>
<td>597</td>
<td>1,009</td>
<td>1,048</td>
<td>851</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td>449</td>
<td>544</td>
<td>939</td>
<td>946</td>
<td>747</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td>43</td>
<td>54</td>
<td>70</td>
<td>102</td>
<td>106</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td></td>
<td>279</td>
<td>320</td>
<td>655</td>
<td>681</td>
<td>500</td>
</tr>
<tr>
<td>White</td>
<td></td>
<td>211</td>
<td>271</td>
<td>349</td>
<td>367</td>
<td>352</td>
</tr>
<tr>
<td>Asian</td>
<td></td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- In every year between 2002 and 2006, adult males and adult Blacks accounted for the greatest percentage of arrests in Ward 1.
- From 2005 to 2006, there was a tenfold increase in the number of arrests for driving under the influence of alcohol and/or drugs in Ward 1 and a 39 percent decrease in possession of open alcohol.
- The total number of substance-related driving and alcohol-related arrests in Ward 1 nearly doubled between 2003 and 2004, reached a high in 2005, and then decreased in 2006.

NOTES: Totals are based solely on the most serious arrest charge, since one individual may be booked on more than one arrest charge. The above data reflect arrests made by all agencies in the District of Columbia.

SOURCE: Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
DISTRICT-WIDE: DRUG-RELATED ARRESTS

Table 10: Number of Adult and Juvenile Drug-Related Arrests in the District of Columbia:
2002–2006

<table>
<thead>
<tr>
<th>District of Columbia</th>
<th>Total Arrests</th>
<th>Number of Juvenile and Adult Arrests</th>
<th>Adults (18+)</th>
<th>Juveniles (Under 18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug-Related Arrests</td>
<td>6,706</td>
<td>7,259</td>
<td>8,712</td>
<td>8,760</td>
</tr>
<tr>
<td>Conspiracy to Distribute</td>
<td>18</td>
<td>34</td>
<td>40</td>
<td>31</td>
</tr>
<tr>
<td>Distribution</td>
<td>1,587</td>
<td>1,373</td>
<td>1,739</td>
<td>1,809</td>
</tr>
<tr>
<td>Possession</td>
<td>2,617</td>
<td>3,126</td>
<td>3,930</td>
<td>4,059</td>
</tr>
<tr>
<td>Possession with Intent to Distribute</td>
<td>2,203</td>
<td>2,174</td>
<td>2,358</td>
<td>2,127</td>
</tr>
<tr>
<td>Possession of Drug Paraphernalia</td>
<td>217</td>
<td>314</td>
<td>448</td>
<td>619</td>
</tr>
<tr>
<td>Any Other Narcotic Violation*</td>
<td>64</td>
<td>238</td>
<td>197</td>
<td>115</td>
</tr>
<tr>
<td>Amphetamines</td>
<td>7</td>
<td>5</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1,599</td>
<td>1,427</td>
<td>1,761</td>
<td>1,890</td>
</tr>
<tr>
<td>Cocaine (Crack)</td>
<td>895</td>
<td>1,017</td>
<td>1,442</td>
<td>1,536</td>
</tr>
<tr>
<td>Marijuana</td>
<td>2,626</td>
<td>2,855</td>
<td>3,391</td>
<td>3,248</td>
</tr>
<tr>
<td>Heroin</td>
<td>1,016</td>
<td>1,047</td>
<td>1,178</td>
<td>1,042</td>
</tr>
<tr>
<td>PCP</td>
<td>159</td>
<td>270</td>
<td>161</td>
<td>175</td>
</tr>
<tr>
<td>Other**</td>
<td>184</td>
<td>319</td>
<td>319</td>
<td>232</td>
</tr>
</tbody>
</table>

NOTES: There were no manufacturing arrests between 2002 and 2006. Columns may not sum to total drug-related arrests because arrests for possession of drug paraphernalia, forge narcotic prescription, and violation of pharmacy laws are not accounted for among drug type of arrest.
* Includes the following offenses: "forged narcotic prescription," "violation of pharmacy laws," and "any other narcotic violation." Some possession arrests share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.
** Includes arrests for barbiturates, Dilauid, and "any other narcotic violation." Some drugs share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

HIGHLIGHTS

- Between 2002 and 2006, drug-related arrests ranged from 15 percent to 18 percent of all arrests in the District.
- Adults (18+) represented the majority of drug-related arrests in the District for all years between 2002 and 2006.
- In every year between 2002 and 2006, possession and intent to distribute accounted for the majority of all drug-related arrests in the District.
- In 2006, simple possession accounted for 50 percent of all drug-related arrests in the District.
- Between 2002 and 2006, marijuana-related arrests represented the majority of all District arrests.
- Among juveniles, possession with intent to distribute and distribution represented a larger percentage of drug-related arrests than any other type of drug-related arrest in the District.
Table 11: Total Number* of Drug-Related Arrests in the District of Columbia by Ward in 2006

<table>
<thead>
<tr>
<th>District of Columbia</th>
<th>Ward 1</th>
<th>Ward 2</th>
<th>Ward 3</th>
<th>Ward 4</th>
<th>Ward 5</th>
<th>Ward 6</th>
<th>Ward 7</th>
<th>Ward 8</th>
<th>Total**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Arrests (All Causes)</td>
<td>6,118</td>
<td>6,628</td>
<td>1,071</td>
<td>5,154</td>
<td>7,570</td>
<td>10,098</td>
<td>6,890</td>
<td>7,339</td>
<td>52,547</td>
</tr>
<tr>
<td>Drug-Related Arrests</td>
<td>1,001</td>
<td>595</td>
<td>39</td>
<td>990</td>
<td>1,318</td>
<td>2,224</td>
<td>1,414</td>
<td>1,464</td>
<td>9,308</td>
</tr>
</tbody>
</table>

Type of Violation

<table>
<thead>
<tr>
<th>Type of Violation</th>
<th>Ward 1</th>
<th>Ward 2</th>
<th>Ward 3</th>
<th>Ward 4</th>
<th>Ward 5</th>
<th>Ward 6</th>
<th>Ward 7</th>
<th>Ward 8</th>
<th>Total***</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conspiracy to Distribute</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Distribution</td>
<td>140</td>
<td>80</td>
<td>1</td>
<td>37</td>
<td>290</td>
<td>406</td>
<td>361</td>
<td>220</td>
<td>1,573</td>
</tr>
<tr>
<td>Possession</td>
<td>475</td>
<td>338</td>
<td>27</td>
<td>554</td>
<td>636</td>
<td>1,277</td>
<td>530</td>
<td>685</td>
<td>4,669</td>
</tr>
<tr>
<td>Possession with Intent to Distribute</td>
<td>194</td>
<td>102</td>
<td>5</td>
<td>229</td>
<td>323</td>
<td>336</td>
<td>451</td>
<td>475</td>
<td>2,172</td>
</tr>
<tr>
<td>Possession of Drug Paraphernalia</td>
<td>183</td>
<td>70</td>
<td>5</td>
<td>160</td>
<td>56</td>
<td>169</td>
<td>61</td>
<td>52</td>
<td>771</td>
</tr>
<tr>
<td>Violation of Pharmacy Laws</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Any Other Narcotic Violation***</td>
<td>8</td>
<td>4</td>
<td>1</td>
<td>10</td>
<td>13</td>
<td>34</td>
<td>11</td>
<td>31</td>
<td>117</td>
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</tbody>
</table>

Drug Type of Arrest****

<table>
<thead>
<tr>
<th>Drug Type of Arrest****</th>
<th>Ward 1</th>
<th>Ward 2</th>
<th>Ward 3</th>
<th>Ward 4</th>
<th>Ward 5</th>
<th>Ward 6</th>
<th>Ward 7</th>
<th>Ward 8</th>
<th>Total****</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>255</td>
<td>214</td>
<td>25</td>
<td>424</td>
<td>474</td>
<td>572</td>
<td>423</td>
<td>546</td>
<td>3,049</td>
</tr>
<tr>
<td>Cocaine</td>
<td>230</td>
<td>127</td>
<td>3</td>
<td>296</td>
<td>171</td>
<td>345</td>
<td>381</td>
<td>306</td>
<td>1,897</td>
</tr>
<tr>
<td>Cocaine (Crack)</td>
<td>195</td>
<td>137</td>
<td>2</td>
<td>40</td>
<td>381</td>
<td>779</td>
<td>259</td>
<td>234</td>
<td>2,075</td>
</tr>
<tr>
<td>Heroin</td>
<td>93</td>
<td>21</td>
<td>1</td>
<td>45</td>
<td>138</td>
<td>245</td>
<td>202</td>
<td>86</td>
<td>853</td>
</tr>
<tr>
<td>PCP</td>
<td>13</td>
<td>5</td>
<td>0</td>
<td>5</td>
<td>36</td>
<td>24</td>
<td>63</td>
<td>185</td>
<td>347</td>
</tr>
<tr>
<td>Amphetamines (includes Preludin)</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>27</td>
</tr>
<tr>
<td>Other****</td>
<td>27</td>
<td>20</td>
<td>2</td>
<td>16</td>
<td>59</td>
<td>88</td>
<td>21</td>
<td>47</td>
<td>288</td>
</tr>
</tbody>
</table>

NOTE: There were no manufacturing, forged narcotic prescription, barbiturates, or Dilaudid arrests in 2006. Columns may not sum to total drug-related arrests because arrests for possession of drug paraphernalia, forge narcotic prescription, and violation of pharmacy laws are not been accounted for among drug type of arrest.

HIGHLIGHTS

- In 2006, a total of 17.7 percent of the 52,547 arrests in the District of Columbia were drug related.
- Nearly 17 percent of all drug-related arrests were for conspiracy to distribute or distribution; fifty-eight percent were for simple possession of drugs or drug paraphernalia and 23.3 percent of the drug-related arrests were for possession with intent to distribute.
- More than 42 percent of all drug-related arrests were for cocaine or cocaine (crack) and nearly one third of all drug-related arrests were for marijuana.

NOTES: Totals are based solely on the most serious arrest charge, since one individual may be booked on more than one arrest charge. The above arrests reflect arrests made by all agencies in the District of Columbia.

SOURCE: Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
WARD 1: DRUG-RELATED ARRESTS

Table 12: Number of Ward 1 Adult and Juvenile Drug-Related Arrests in the District of Columbia: 2002–2006

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult (18+)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Arrests (All Causes)</td>
<td>6,157</td>
<td>5,543</td>
<td>6,876</td>
<td>5,657</td>
<td>5,773</td>
<td>273</td>
<td>232</td>
<td>303</td>
<td>212</td>
<td>345</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug-Related Arrests</td>
<td>970</td>
<td>933</td>
<td>1,376</td>
<td>965</td>
<td>970</td>
<td>48</td>
<td>37</td>
<td>39</td>
<td>10</td>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug Type of Arrest**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amphetamines</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cocaine</td>
<td>285</td>
<td>203</td>
<td>425</td>
<td>254</td>
<td>224</td>
<td>12</td>
<td>3</td>
<td>9</td>
<td>1</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cocaine (Crack)</td>
<td>111</td>
<td>87</td>
<td>138</td>
<td>114</td>
<td>187</td>
<td>11</td>
<td>12</td>
<td>10</td>
<td>4</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td>258</td>
<td>262</td>
<td>450</td>
<td>382</td>
<td>243</td>
<td>23</td>
<td>16</td>
<td>18</td>
<td>5</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heroin</td>
<td>254</td>
<td>254</td>
<td>197</td>
<td>80</td>
<td>92</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PCP</td>
<td>2</td>
<td>11</td>
<td>8</td>
<td>9</td>
<td>12</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other**</td>
<td>16</td>
<td>11</td>
<td>32</td>
<td>8</td>
<td>25</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: There were no manufacturing, forged narcotic prescription, barbiturates, or Dilaudid arrests from 2002–2006. Columns may not sum to total drug-related arrests because arrests for possession of drug paraphernalia, forge narcotic prescription, and violation of pharmacy laws are not accounted for among drug type of arrest.

* Includes the following offenses: "violation of pharmacy laws," and "any other narcotic violation." Some possession arrests share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

** Includes arrests for "any other narcotic violation." Some drugs share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

HIGHLIGHTS

- Adult offenders (18+) represented a greater percentage of drug-related arrests than juvenile offenders (under 18) for all years in Ward 1.
- Among adult offenders in Ward 1, possession arrests accounted for a greater percentage of violations than for any other type of violation in each year between 2002 and 2006.
- Among juvenile offenders in Ward 1, arrests for possession with intent to distribute accounted for a greater percentage of arrests than any other type of drug-related arrest.
- Among adult and juvenile offenders in Ward 1, marijuana-related arrests accounted for a greater percentage of all drug arrests.

NOTES: Totals are based solely on the most serious arrest charge, since one individual may be booked on more than one arrest charge. The above data reflect arrests made by all agencies in the District of Columbia.

SOURCE: Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
### WARD 1: DRUG-RELATED ARRESTS

#### Table 13: Number of Ward 1 Drug-Related Arrests by Gender in the District of Columbia: 2002–2006

<table>
<thead>
<tr>
<th>WARD 1</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Arrest</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Arrests (All Causes)</td>
<td>5,273</td>
<td>4,811</td>
</tr>
<tr>
<td>Drug-Related Arrests</td>
<td>891</td>
<td>840</td>
</tr>
<tr>
<td><strong>Type of Violation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conspiracy to Distribute</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Distribution</td>
<td>254</td>
<td>118</td>
</tr>
<tr>
<td>Possession</td>
<td>298</td>
<td>367</td>
</tr>
<tr>
<td>Possession with Intent to Distribute</td>
<td>307</td>
<td>273</td>
</tr>
<tr>
<td>Possession of Drug Paraphernalia</td>
<td>31</td>
<td>77</td>
</tr>
<tr>
<td>Any Other Narcotic Violation*</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td><strong>Drug Type of Arrest</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amphetamines</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Cocaine</td>
<td>258</td>
<td>179</td>
</tr>
<tr>
<td>Cocaine (Crack)</td>
<td>110</td>
<td>86</td>
</tr>
<tr>
<td>Marijuana</td>
<td>268</td>
<td>257</td>
</tr>
<tr>
<td>Heroin</td>
<td>208</td>
<td>224</td>
</tr>
<tr>
<td>PCP</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Other**</td>
<td>14</td>
<td>8</td>
</tr>
</tbody>
</table>

**NOTE:** There were no manufacturing, forged narcotic prescription, barbiturates, or Dilaudid arrests from 2002–2006. Columns may not sum to total drug-related arrests because arrests for possession of drug paraphernalia, forge narcotic prescription, and violation of pharmacy laws are not accounted for among drug type of arrest.

* Includes the following offenses: "violation of pharmacy laws," and "any other narcotic violation." Some possession arrests share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

** Includes arrests for "any other narcotic violation." Some drugs share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

**HIGHLIGHTS**

- Males represented a greater percentage of all drug-related arrests than females for all years in Ward 1.
- Males in Ward 1 were more likely to be arrested for possession than females.

**NOTES:** Totals are based solely on the most serious arrest charge, since one individual may be booked on more than one arrest charge. The above data reflect arrests made by all agencies in the District of Columbia.

**SOURCE:** Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
HIGHLIGHTS

- Blacks represented a greater percentage of all drug-related arrests than Whites and Others for all years in Ward 1.
- Between 2002 and 2006, in Ward 1, Blacks were more likely to be arrested for marijuana-related incidences, followed by cocaine-related incidences, and heroin-related incidences third.
- Between 2002 and 2006, in Ward 1, Whites were more likely to be arrested for marijuana-related incidences, followed by cocaine-related incidences, and heroin-related incidences third.

**Table 14: Number of Ward 1 Drug-Related Arrests by Race in the District of Columbia: 2002–2006**

<table>
<thead>
<tr>
<th>Type of Arrest</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
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<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
<th>RACE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Arrests (All Causes)</td>
<td>5,054</td>
<td>4,322</td>
<td>4,947</td>
<td>4,179</td>
<td>3,988</td>
<td>1,330</td>
<td>1,427</td>
<td>1,434</td>
<td>1,416</td>
<td>1,562</td>
<td>22</td>
<td>9</td>
<td>614</td>
<td>235</td>
<td>568</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Drug-Related Arrests</td>
<td>863</td>
<td>824</td>
<td>1,257</td>
<td>860</td>
<td>893</td>
<td>149</td>
<td>145</td>
<td>157</td>
<td>115</td>
<td>104</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Type of Violation**

<table>
<thead>
<tr>
<th></th>
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<th></th>
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**Drug Type of Arrest**

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<td>Marijuana</td>
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<td>425</td>
<td>337</td>
<td>223</td>
<td>39</td>
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<td>50</td>
<td>32</td>
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<td>0</td>
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<tr>
<td>Heroin</td>
<td>224</td>
<td>217</td>
<td>175</td>
<td>67</td>
<td>88</td>
<td>32</td>
<td>40</td>
<td>23</td>
<td>13</td>
<td>5</td>
<td>0</td>
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<td>0</td>
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<td>12</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other**</td>
<td>11</td>
<td>8</td>
<td>26</td>
<td>8</td>
<td>22</td>
<td>5</td>
<td>3</td>
<td>7</td>
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<td>0</td>
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</tr>
</tbody>
</table>

**NOTE:** There were no manufacturing, forged narcotic prescription, barbiturates, or Dilaudid arrests from 2002–2006. Columns may not sum to total drug-related arrests because arrests for possession of drug paraphernalia, forge narcotic prescription, and violation of pharmacy laws are not accounted for among drug type of arrest. Rows may not sum to number of arrests due to missing data cells.

* Includes the following offenses: "violation of pharmacy laws," and "any other narcotic violation." Some possession arrests share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

** Includes arrests for "any other narcotic violation." Some drugs share an offense code (1826) with "any other narcotic violation" including LSD possession, felony and misdemeanor Preludin possession, and misdemeanor heroin possession.

**REFERENCES:**

- There are no manufacturing, forged narcotic prescription, barbiturates, or Dilaudid arrests from 2002–2006.
- The above data reflect arrests made by all agencies in the District of Columbia.
- Sources: Geocoded Criminal Justice Information System (CJIS) Arrest Data provided by the Research and Analysis Division, Office of Professional Development, Professional Development Bureau.
DISTRICT OF COLUMBIA
COMMUNITY EPIDEMIOLOGICAL PROFILE:
CONSEQUENCES OF ALCOHOL, TOBACCO, AND
ILlicit DRUG USE IN THE
DISTRICT’S COMMUNITIES,
2001–2007

PART II

PREPARED BY
THE ADDICTION PREVENTION AND RECOVERY ADMINISTRATION,
DC DEPARTMENT OF HEALTH
AND
THE CENTER FOR SUBSTANCE ABUSE RESEARCH,
UNIVERSITY OF MARYLAND, COLLEGE PARK
SECTION V
CONSEQUENCE: HIV/AIDS

For this consequence category, we assessed eight indicators in the reduced morbidity CSAP NOMs domain. The data presented within each of the eight indicators allows us to assess new incidents and the prevalence of HIV and AIDS in the District of Columbia.

- HIV (not AIDS)
  - Rate of Newly Reported
  - Number of Newly Reported
  - Mode of Transmission
- AIDS
  - Rate of Newly Reported
  - Number of Newly Reported
  - Living Cases
  - Mortality
  - Mode of Transmission

These eight indicators were selected in accordance with CSAP requirements. The purpose of these selected indicators is to describe a major health consequence of illicit drug use at the ward level for the District of Columbia. The maps and tables provided in this report take a closer look at ward-level HIV and AIDS cases for combined years between 2001–2006. You can access more detailed HIV/AIDS information at the District level at <http://doh.dc.gov/doh/cwp/view,A,1371,Q,603431.asp>.
DISTRICT-WIDE: HIV (NOT AIDS) BY WARD


HIGHLIGHTS

- The average rate of newly diagnosed HIV (not AIDS) cases by ward ranged between 8.6 and 115.1 cases per 100,000 population.
- The highest rates were found in Wards 6 and 8, where the rates were 115.1 and 105.1 cases per 100,000, respectively. The next highest rate was in Ward 1: 96.8 cases per 100,000.
- The lowest rates were found in Ward 3: 8.6 cases per 100,000.

### Table 15: Number of Newly Reported HIV (not AIDS) Cases by Ward, District of Columbia: Cumulative for Years 2001–2006

<table>
<thead>
<tr>
<th>Ward</th>
<th>Newly Reported HIV (not AIDS) Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ward 1</td>
<td>426</td>
</tr>
<tr>
<td>Ward 2</td>
<td>378</td>
</tr>
<tr>
<td>Ward 3</td>
<td>38</td>
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<tr>
<td>Ward 4</td>
<td>267</td>
</tr>
<tr>
<td>Ward 5</td>
<td>383</td>
</tr>
<tr>
<td>Ward 6</td>
<td>470</td>
</tr>
<tr>
<td>Ward 7</td>
<td>336</td>
</tr>
<tr>
<td>Ward 8</td>
<td>447</td>
</tr>
<tr>
<td>Jail Population</td>
<td>216</td>
</tr>
<tr>
<td>Homeless Population</td>
<td>91</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,052</strong></td>
</tr>
</tbody>
</table>

### HIGHLIGHTS

- The number of reported HIV (not AIDS) cases ranged from 38 cases in Ward 3 to 470 cases in Ward 6 between 2001 and 2006.
- The largest number of newly reported HIV (not AIDS) cases between 2001 and 2006 were living in Wards 1 6 (n=470), 8 (n=447), and 1 (n=426) at the time of diagnosis.
- More than 300 HIV (not AIDS) cases were reported among persons who were in the DC jail or homeless during this time period.

### SOURCE
### Table 16: Number and Percentage of Newly Reported HIV (not AIDS) Cases by Mode of Transmission, District of Columbia: Cumulative for Years 2001–2006

<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>MSM</td>
<td>146</td>
<td>27.0</td>
<td>189</td>
<td>27.5</td>
<td>172</td>
<td>28.0</td>
<td>116</td>
</tr>
<tr>
<td>IDU</td>
<td>70</td>
<td>13.0</td>
<td>96</td>
<td>14.0</td>
<td>84</td>
<td>13.7</td>
<td>84</td>
</tr>
<tr>
<td>MSM/IDU</td>
<td>10</td>
<td>1.9</td>
<td>12</td>
<td>1.7</td>
<td>15</td>
<td>2.4</td>
<td>9</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>208</td>
<td>38.5</td>
<td>263</td>
<td>38.3</td>
<td>209</td>
<td>34.0</td>
<td>189</td>
</tr>
<tr>
<td>RNI/Unknown</td>
<td>106</td>
<td>19.6</td>
<td>127</td>
<td>18.5</td>
<td>135</td>
<td>22.0</td>
<td>143</td>
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<tr>
<td>Total</td>
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<td>100.0</td>
<td>687</td>
<td>100.0</td>
<td>615</td>
<td>100.0</td>
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</tbody>
</table>

**NOTES:** Mode of transmission is the means by which HIV is transmitted from one individual to another. MSM means men who had sex with other men. IDU means intravenous drug use. MSM/IDU means men who have sex with other men and are intravenous drug users. Heterosexual means heterosexual contact. RNI means risk not identified. Other includes hemophilia, blood transfusions, and occupational exposure (healthcare workers).

### HIGHLIGHTS

- Between 2001 and 2006, there were 3,269 newly reported cases of HIV (not AIDS).
- The most frequently-reported mode of transmission among new HIV (not AIDS) cases was heterosexual contact (37.4 percent between 2001 and 2006).
- The largest decrease in cases by mode of transmission was among HIV (not AIDS) cases attributed to IDU. The number of cases decreased from 108 cases in 2002 to 42 cases in 2006, a 61 percent reduction.

The average rate of newly diagnosed AIDS cases by ward ranged between 9.5 and 134 cases per 100,000 population.

The highest rates were found among cases living in Wards 5, 6, 7, and 8, where the rates were 129.4, 131.3, 127.8, and 134.0 cases per 100,000, respectively.

The lowest rates were found among cases living in Ward 3, with 9.5 cases per 100,000 population.
HIGHLIGHTS

- The number of reported AIDS cases ranged from 42 to 570 cases per ward between 2001 and 2006.
- The largest numbers of reported AIDS cases were living in Wards 8 (n=570), 7 (n=541), 5 (n=563), 6 (n=536), and 1 (n=520) at the time of AIDS diagnosis.
- The smallest number of reported AIDS cases were living in Ward 3 (n=42) at the time of diagnosis.
- More than 375 AIDS cases were diagnosed among persons incarcerated at the DC jail during this time period.

DISTRICT-WIDE: AIDS BY WARD

Table 18: Number of Living AIDS Cases and AIDS Mortality Cases by Ward, District of Columbia: Cumulative for Years 2001–2006

<table>
<thead>
<tr>
<th>Ward</th>
<th>Living AIDS Cases</th>
<th>AIDS Mortality Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ward 1</td>
<td>1,102</td>
<td>206</td>
</tr>
<tr>
<td>Ward 2</td>
<td>940</td>
<td>149</td>
</tr>
<tr>
<td>Ward 3</td>
<td>139</td>
<td>14</td>
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<tr>
<td>Ward 4</td>
<td>599</td>
<td>153</td>
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<tr>
<td>Ward 5</td>
<td>983</td>
<td>264</td>
</tr>
<tr>
<td>Ward 6</td>
<td>1,014</td>
<td>244</td>
</tr>
<tr>
<td>Ward 7</td>
<td>808</td>
<td>198</td>
</tr>
<tr>
<td>Ward 8</td>
<td>851</td>
<td>247</td>
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<tr>
<td>Jail Population</td>
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<td>22</td>
</tr>
<tr>
<td>Homeless Population</td>
<td>342</td>
<td>28</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7,414</strong></td>
<td><strong>1,525</strong></td>
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</tbody>
</table>

HIGHLIGHTS

- The number of persons living with AIDS ranged from 139 persons in Ward 3 to 1,102 persons in Ward 1.
- The greatest numbers of people living with AIDS in the District were living in Wards 1 (n=1,102) and 6 (n=1,014).
- Nearly 1,000 persons living with AIDS in the District were either homeless or in the DC jail.
- The number of people who died with an AIDS diagnosis between 2001 and 2006 ranged from 14 people in Ward 3 to 264 in Ward 5.
- Wards 5 (n=264), 8 (n=247), and 6 (n=244) recorded the highest AIDS mortality levels during the years 2001-2006.

### Table 19: Number and Percentage of Newly Reported AIDS Cases by Mode of Transmission, District of Columbia: Cumulative for Years 2001–2006

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
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<td>MSM</td>
<td>197</td>
<td>29.3</td>
<td>309</td>
<td>31.7</td>
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<td>29.7</td>
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<td>25.4</td>
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<td>20.9</td>
<td>190</td>
<td>27.1</td>
<td>1,294</td>
<td>27.7</td>
</tr>
<tr>
<td>IDU</td>
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<td>20.4</td>
<td>191</td>
<td>19.6</td>
<td>167</td>
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<td>23.2</td>
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<td>1,023</td>
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<td>3.4</td>
<td>24</td>
<td>2.9</td>
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<td>3.2</td>
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<td>3.4</td>
<td>158</td>
<td>3.4</td>
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<tr>
<td>Heterosexual</td>
<td>148</td>
<td>22.0</td>
<td>244</td>
<td>25.0</td>
<td>209</td>
<td>24.9</td>
<td>206</td>
<td>25.4</td>
<td>188</td>
<td>27.7</td>
<td>246</td>
<td>35.1</td>
<td>1,241</td>
<td>26.5</td>
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<tr>
<td>RNI</td>
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<td>19.7</td>
<td>185</td>
<td>22.0</td>
<td>181</td>
<td>22.3</td>
<td>119</td>
<td>17.5</td>
<td>102</td>
<td>14.6</td>
<td>940</td>
<td>20.1</td>
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<td>--</td>
<td>6</td>
<td>0.6</td>
<td>6</td>
<td>0.7</td>
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<td>--</td>
<td>&lt;3</td>
<td>--</td>
<td>4</td>
<td>0.6</td>
<td>22</td>
<td>0.5</td>
</tr>
<tr>
<td>Total</td>
<td>673</td>
<td>100.0</td>
<td>975</td>
<td>100.0</td>
<td>841</td>
<td>100.0</td>
<td>810</td>
<td>100.0</td>
<td>679</td>
<td>100.0</td>
<td>700</td>
<td>100.0</td>
<td>4,678</td>
<td>100.0</td>
</tr>
</tbody>
</table>

**NOTES:** Mode of transmission is the means by which HIV is transmitted from one individual to another.
MSM means men who had sex with other men.
IDU means intravenous drug use.
MSM/IDU means men who have sex with other men and are intravenous drug users.
Heterosexual means heterosexual contact.
RNI means risk not identified.
Other includes hemophilia, blood transfusions, and occupational exposure (healthcare workers).

### HIGHLIGHTS

- Between 2001 and 2006, 4,678 AIDS cases were newly recorded.
- Overall, the most frequently reported mode of transmission among AIDS cases was MSM; however, in 2005, the highest proportion of AIDS cases was attributed to IDU; and in 2006, the highest proportion of AIDS cases was attributed to heterosexual contact.

Table 20: Number and Percentage of Living AIDS Cases by Mode of Transmission, District of Columbia: 2001–2006

<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>MSM</td>
<td>2,736</td>
<td>46.7</td>
<td>2,893</td>
<td>44.3</td>
<td>2,988</td>
<td>42.2</td>
</tr>
<tr>
<td>IDU</td>
<td>1,530</td>
<td>26.1</td>
<td>1,648</td>
<td>25.2</td>
<td>1,739</td>
<td>24.6</td>
</tr>
<tr>
<td>MSM/IDU</td>
<td>295</td>
<td>5.0</td>
<td>308</td>
<td>4.7</td>
<td>309</td>
<td>4.4</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>1,044</td>
<td>17.8</td>
<td>1,328</td>
<td>20.3</td>
<td>1,587</td>
<td>22.4</td>
</tr>
<tr>
<td>RNI</td>
<td>202</td>
<td>3.5</td>
<td>304</td>
<td>4.7</td>
<td>400</td>
<td>5.6</td>
</tr>
<tr>
<td>Other</td>
<td>48</td>
<td>0.8</td>
<td>53</td>
<td>0.8</td>
<td>57</td>
<td>0.8</td>
</tr>
<tr>
<td>Total</td>
<td>5,855</td>
<td>100.0</td>
<td>6,534</td>
<td>100.0</td>
<td>7,080</td>
<td>100.0</td>
</tr>
</tbody>
</table>

HIGHLIGHTS
- Between 2001 and 2006, the number of those living with AIDS increased by 42.9 percent; this was most likely due to increased use of Highly Active Antiretroviral Therapy (HAART) and prophylactic therapies resulting in delayed progression from AIDS to death.
- The most frequently reported mode of AIDS transmission was attributed to MSM contact. In 2006, MSM accounted for 36.7 percent of all living AIDS cases, a reduction from 46.7 percent in 2001.
- IDU and MSM/IDU accounted for 28.3 percent of all living AIDS cases in 2006.


<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>MSM</td>
<td>85</td>
<td>25.3</td>
<td>85</td>
<td>25.9</td>
<td>84</td>
<td>23.9</td>
<td>86</td>
</tr>
<tr>
<td>IDU</td>
<td>117</td>
<td>34.8</td>
<td>111</td>
<td>33.8</td>
<td>125</td>
<td>35.6</td>
<td>102</td>
</tr>
<tr>
<td>MSM/IDU</td>
<td>14</td>
<td>4.2</td>
<td>19</td>
<td>5.8</td>
<td>17</td>
<td>4.8</td>
<td>15</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>71</td>
<td>21.0</td>
<td>76</td>
<td>23.2</td>
<td>88</td>
<td>25.1</td>
<td>90</td>
</tr>
<tr>
<td>RNI</td>
<td>47</td>
<td>14.0</td>
<td>37</td>
<td>11.3</td>
<td>37</td>
<td>10.5</td>
<td>47</td>
</tr>
<tr>
<td>Other</td>
<td>&lt;3</td>
<td>--</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
<td>&lt;3</td>
</tr>
<tr>
<td>Total</td>
<td>336</td>
<td>100.0</td>
<td>328</td>
<td>100.0</td>
<td>351</td>
<td>100.0</td>
<td>341</td>
</tr>
</tbody>
</table>

HIGHLIGHTS
- The largest proportion of deaths was among those with mode of transmission attributed to IDU (32.9%), heterosexual contact (25.3%), and MSM (24.4%).

NOTES: Mode of transmission is the means by which HIV is transmitted from one individual to another.
- MSM means men who had sex with other men.
- IDU means intravenous drug use.
- MSM/IDU means men who have sex with other men and are intravenous drug users.
- Heterosexual means heterosexual contact.
- RNI means risk not identified.
- Other includes hemophilia, blood transfusions, and occupational exposure (healthcare workers).

For this consequence category, we included the four indicators listed below that were a part of the reduced morbidity NOMs domain. The data presented for this indicator allowed us to assess the estimated number of persons in the District of Columbia who met the criteria for alcohol or illicit drug dependence or abuse based on the definition found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV).

- Alcohol-Related
  - Persons aged 12 or older meeting DSM-IV criteria for dependence or abuse
  - Persons aged 12 or older meeting DSM-IV criteria for dependence only

- Illicit Drug-Related
  - Persons aged 12 or older meeting DSM-IV criteria for dependence or abuse
  - Persons aged 12 or older meeting DSM-IV criteria for dependence only

These indicators were selected in accordance with CSAP requirements. The purpose of these indicators is to describe a major public health consequence of continued alcohol and illicit drug use. The figures and tables provided in this report provide estimates based on averages for data collected between 2002 and 2004. These estimates provided a means to examine alcohol and illicit drug-related dependence and abuse for individuals aged 12 or older at the ward level.
Figure 5: Percent of Residents Aged 12 or Older Reporting Past Year Dependence or Abuse of Alcohol: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS

- The percentage of residents aged 12 or older reporting past year alcohol dependence or abuse was similar across all eight wards.

Table 22: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Dependence or Abuse of Alcohol: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>2.20 - 5.74</td>
</tr>
<tr>
<td>18 to 25</td>
<td>13.36 - 23.06</td>
</tr>
<tr>
<td>26 or older</td>
<td>7.82 - 14.45</td>
</tr>
</tbody>
</table>

- Based on annual averages for 2002–2004, residents aged 12 to 17 were less likely to report past year alcohol dependence or abuse than all other residents in Ward 1.

NOTES: Dependence or abuse based on definitions found in 4th edition of the Diagnostic and Statistical Manual of Mental Disorders. The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. SOURCE: Adapted by CESAR from data from the 2002, 2003, and 2004 National Survey on Drug Use and Health, Office of Applied Studies, Substance Abuse and Mental Health Services Administration.
Figure 6: Percent of Residents Aged 12 or Older Reporting Past Year Alcohol Dependence: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- The percentage of residents aged 12 or older reporting past year alcohol dependence was similar across all eight wards.

Table 23: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Alcohol Dependence: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>0.89 - 3.11</td>
</tr>
<tr>
<td>18 to 25</td>
<td>5.13 - 11.28</td>
</tr>
<tr>
<td>26 or older</td>
<td>3.96 - 8.45</td>
</tr>
</tbody>
</table>

- Based on the annual averages for 2002–2004, residents aged 12 to 17 reported lower estimates of past year alcohol dependence than all other residents in Ward 1.
- The estimate for residents aged 18 to 25 was similar to that of residents aged 26 or older for past year alcohol dependence.

NOTES: Dependence based on definitions found in 4th edition of the Diagnostic and Statistical Manual of Mental Disorders. The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. SOURCE: Adapted by CESAR from data from the 2002, 2003, and 2004 National Survey on Drug Use and Health, Office of Applied Studies, Substance Abuse and Mental Health Services Administration.
Figure 7: Percent of Residents Aged 12 or Older Reporting Past Year Dependence or Abuse of Any Illicit Drug: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- The percentage of residents aged 12 or older reporting past year illicit drug dependence or abuse was about the same across all eight wards.

Table 24: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Dependence or Abuse of Any Illicit Drug: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>2.65 - 6.71</td>
</tr>
<tr>
<td>18 to 25</td>
<td>5.78 - 11.43</td>
</tr>
<tr>
<td>26 or older</td>
<td>2.02 - 5.35</td>
</tr>
</tbody>
</table>

- Based on annual averages for 2002–2004, Ward 1 residents aged 18 to 25 were more likely to report past year illicit drug dependence or abuse than residents aged 26 or older.

NOTES: Dependence or abuse based on definitions found in 4th edition of the Diagnostic and Statistical Manual of Mental Disorders. Illicit drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutic used nonmedically. The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. SOURCE: Adapted by CESAR from data from the 2002, 2003, and 2004 National Survey on Drug Use and Health, Office of Applied Studies, Substance Abuse
Figure 8: Percent of Residents Aged 12 or Older Reporting Past Year Illicit Drug Dependence: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- The percentage of residents aged 12 or older reporting past year illicit drug dependence or abuse was similar across all eight wards.

Table 25: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Illicit Drug Dependence: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>1.24 - 3.67</td>
</tr>
<tr>
<td>18 to 25</td>
<td>3.77 - 8.94</td>
</tr>
<tr>
<td>26 or older</td>
<td>1.31 - 3.70</td>
</tr>
</tbody>
</table>

- Based on annual averages for 2002–2004, Ward 1 residents aged 18 to 25 were more likely to report past year illicit drug dependence than residents aged 12 to 17 and 26 or older.

NOTES: Dependence based on definitions found in 4th edition of the Diagnostic and Statistical Manual of Mental Disorders. Illicit drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutic used nonmedically. The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

For this consequence, we included two indicators that were a part of the reduced mortality CSAP NOMs domain. The data presented within each of the indicators allowed us to assess the prevalence of chronic liver disease as a consequence of alcohol use and both lung cancer and chronic obstructive pulmonary disease (COPD) and emphysema as consequences of tobacco use in the District of Columbia.

- Alcohol-Related
  - Chronic Liver Disease
- Tobacco/Smoking-Related
  - Lung Cancer
  - COPD and Emphysema

These indicators were selected in accordance with CSAP recommendations. The purpose of these selected indicators was to describe major public health consequences of alcohol use and tobacco use/smoking. The charts and tables provided in this report take an in-depth look at DC deaths related to liver disease, lung cancer and COPD and emphysema by examining gender, race, and age at the ward-level.
**HIGHLIGHTS**

- The number of deaths due to chronic liver disease fluctuated from 2001 to 2005, peaking in 2002 and 2005 with 97 deaths.
- Ward 2 experienced an increase in chronic liver disease deaths between 2004 and 2005, while all other wards experienced a decrease or remained about the same.
- Among chronic liver disease deaths in the United States, approximately 40 percent of them were estimated to be alcohol related.
- Ward 1 experienced a decrease in reported deaths due to chronic liver disease between 2001 and 2005, while Ward 3 held between two and five deaths throughout this time; all other wards reported an increase in chronic liver disease deaths over the past five.

**NOTE:** Long term, heavy alcohol consumption is the leading cause of chronic liver disease; in particular cirrhosis. The data provided in this table are based on recorded deaths; cases of cirrhosis morbidity are not reflected in the data.

**SOURCE:** Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division.

Attributable fraction percent estimate for alcohol-related chronic liver disease deaths was provided by Alcohol-Related Disease Impact (ARDI).
WARD 1: CHRONIC LIVER DISEASE DEATHS

Table 26: Number of Chronic Liver Disease Deaths in Ward 1 in the District of Columbia: 2001–2005

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>56</td>
<td></td>
<td>17</td>
<td>10</td>
<td>7</td>
<td>13</td>
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<tr>
<td>Sex</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>43</td>
<td></td>
<td>12</td>
<td>9</td>
<td>5</td>
<td>9</td>
<td>8</td>
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<tr>
<td>Female</td>
<td>13</td>
<td></td>
<td>5</td>
<td>1</td>
<td>2</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>40</td>
<td></td>
<td>12</td>
<td>10</td>
<td>7</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>White</td>
<td>14</td>
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<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
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<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 or Younger</td>
<td>1</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>35-44</td>
<td>12</td>
<td></td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>45-54</td>
<td>16</td>
<td></td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>55-64</td>
<td>16</td>
<td></td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>65-74</td>
<td>7</td>
<td></td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>75 and Older</td>
<td>4</td>
<td></td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>24</td>
<td></td>
<td>4</td>
<td>7</td>
<td>1</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Married</td>
<td>13</td>
<td></td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>3</td>
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<tr>
<td>Widowed</td>
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<td>2</td>
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<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Divorced</td>
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<td></td>
<td>6</td>
<td>0</td>
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<td>1</td>
<td>0</td>
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<td>2</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

NOTES: * 2003 numbers may be underreported due to 53 deaths in the District that were not accounted for in our analysis. In 2003, there was a discrepancy of 53 deaths between the total number of resident deaths included in the District-wide data set used to conduct the analysis reported above, and the 5,478 total resident deaths reported by the District of Columbia Department of Health, State Center for Health Statistics Administration. ** The total number of deaths for 2005 has not been confirmed with the District of Columbia Department of Health, State Center for Health Statistics Administration.

HIGHLIGHTS

- There were a total of 56 chronic liver disease deaths in Ward 1 between 2001 and 2005; based on 2000 Census Bureau data, this was a rate of 7.6 chronic liver disease deaths in Ward 1 per 10,000 residents.
- Individuals dying of chronic liver disease in Ward 1 were most likely to be male, Black, 45-64, and single.
- In Ward 1 between 2001 and 2005, males (11 deaths per 10,000) were more than three times as likely as females (3 deaths per 10,000) to die of chronic liver disease.
- Since 2001, the racial differences in chronic liver disease deaths for Blacks and Whites appear to be diminishing; in 2005, about the same number of Blacks and Whites died of chronic liver disease.

NOTE: Long term, heavy alcohol consumption is the leading cause of chronic liver disease, in particular cirrhosis. The data provided in this table are based on recorded deaths; cases of cirrhosis morbidity are not reflected in the data.

SOURCE: Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division.
### HIGHLIGHTS

- From 2001 to 2005, the total number of lung cancer deaths in the District ranged from a high of 325 in 2001 to a low of 278 in 2004.

- Among lung cancer deaths in the United States, approximately 80-90 percent are attributable to cigarette smoking, indicating that between 235 and 264 total deaths in the District could be attributed to cigarette smoking in 2005, a rate of 32-36 deaths per 10,000 residents.

- More residents in Ward 4 died from lung cancer each year than in all other wards.

**NOTE:** Lung cancer results from long-term tobacco use, and is the most common form of cancer mortality in the U.S. Lung cancer has a long latency period therefore, it may be many years before changes in smoking affect population mortality.

**SOURCE:** Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division. Attributable fraction percent estimate for tobacco-related lung cancer was provided by the State Epidemiological System (SEDS). Actual percentage attributable to tobacco may vary across geospatialic units or subpopulation.
WARD 1: LUNG CANCER DEATHS

Table 27: Number of Lung Cancer Deaths in Ward 1 in the District of Columbia: 2001–2005

<table>
<thead>
<tr>
<th>WARD 1</th>
<th>Total (2001–2005)</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2001</td>
</tr>
<tr>
<td>Total</td>
<td>130</td>
<td>31</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
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</tr>
<tr>
<td>Male</td>
<td>82</td>
<td>20</td>
</tr>
<tr>
<td>Female</td>
<td>48</td>
<td>11</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>99</td>
<td>21</td>
</tr>
<tr>
<td>White</td>
<td>30</td>
<td>9</td>
</tr>
<tr>
<td>Other</td>
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<td>1</td>
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<tr>
<td>Age</td>
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</tr>
<tr>
<td>34 or Younger</td>
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</tr>
<tr>
<td>35-44</td>
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<td>45-54</td>
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<td>55-64</td>
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<td>65-74</td>
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<td>75-84</td>
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<td>9</td>
<td>3</td>
</tr>
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<td>Unknown</td>
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<td>0</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>40</td>
<td>9</td>
</tr>
<tr>
<td>Married</td>
<td>32</td>
<td>8</td>
</tr>
<tr>
<td>Widowed</td>
<td>28</td>
<td>7</td>
</tr>
<tr>
<td>Divorced</td>
<td>24</td>
<td>7</td>
</tr>
</tbody>
</table>

NOTES: * 2003 numbers may be underreported due to 53 total deaths in the District that were not accounted for in our analysis. In 2003, there was a discrepancy of 53 deaths between the total number of resident deaths included in the District-wide data set used to conduct the analysis reported above, and the 5,478 total resident deaths reported by the District of Columbia Department of Health, State Center for Health Statistics Administration.

** The total number of deaths for 2005 has not been confirmed with the District of Columbia Department of Health, State Center for Health Statistics Administration.

HIGHLIGHTS

- Overall, there were a total of 130 lung cancer deaths in Ward 1 between 2001 and 2005; based on the attributable fraction (80-90%), between 104 and 117 lung cancer deaths in Ward 1 were related to tobacco use during this time.
- Individuals dying of chronic liver disease in Ward 1 were most likely to be male, Black, and 55-74.
- Blacks (29 deaths per 10,000) were more than twice as likely as Whites (12 deaths per 10,000) to die of lung cancer during this five-year period.
- Single residents were slightly more likely than married, widowed, or divorced residents to die from lung cancer in 2005.

NOTE: Lung cancer results from long-term tobacco use, and is the most common form of cancer mortality in the U.S. Lung cancer has a long latency period therefore; it may be many years before changes in smoking affect population mortality.

SOURCE: Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division.
Figure 11: Number of COPD and Emphysema Deaths in the District of Columbia by Ward: 2001–2005

<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2002</th>
<th>2003*</th>
<th>2004</th>
<th>2005**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total***</td>
<td>128</td>
<td>127</td>
<td>116</td>
<td>131</td>
<td>128</td>
</tr>
<tr>
<td>Ward 1</td>
<td>15</td>
<td>13</td>
<td>3</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Ward 2</td>
<td>11</td>
<td>19</td>
<td>11</td>
<td>20</td>
<td>14</td>
</tr>
<tr>
<td>Ward 3</td>
<td>26</td>
<td>16</td>
<td>14</td>
<td>19</td>
<td>17</td>
</tr>
<tr>
<td>Ward 4</td>
<td>23</td>
<td>24</td>
<td>23</td>
<td>29</td>
<td>22</td>
</tr>
<tr>
<td>Ward 5</td>
<td>17</td>
<td>13</td>
<td>18</td>
<td>16</td>
<td>15</td>
</tr>
<tr>
<td>Ward 6</td>
<td>9</td>
<td>11</td>
<td>8</td>
<td>14</td>
<td>10</td>
</tr>
<tr>
<td>Ward 7</td>
<td>17</td>
<td>18</td>
<td>7</td>
<td>17</td>
<td>18</td>
</tr>
<tr>
<td>Ward 8</td>
<td>10</td>
<td>13</td>
<td>7</td>
<td>6</td>
<td>18</td>
</tr>
</tbody>
</table>

**NOTE:** * 2003 numbers may be underreported due to 53 deaths that were not accounted for in our analysis. In 2003, there was a discrepancy of 53 deaths between the total number of resident deaths included in the data set used to conduct the analysis reported above, and the 5,478 total resident deaths reported by the District of Columbia Department of Health, State Center for Health Statistics Administration.

**NOTE:** **The total number of deaths for 2005 has not been confirmed with the District of Columbia Department of Health, State Center for Health Statistics Administration.

**NOTE:** ***Totals for all wards for each year may not add up to the total number of COPD and emphysema deaths due to some deaths in which the ward variable was missing.

**HIGHLIGHTS**

- Approximately 80 percent of COPD and emphysema deaths in the United States are attributable to smoking, indicating that an estimated 102 deaths in the District could be attributed to smoking in 2005, a rate of nearly 14 deaths per 10,000 residents.
- Ward 8 experienced an increase in COPD and emphysema deaths in 2005, while all other wards experienced a decrease or remained about the same.
- In 2001, more COPD and emphysema deaths occurred in Ward 3 compared to all other wards; however, since 2002, more COPD and emphysema deaths occurred in Ward 4 than all other wards.

**NOTE:** Statistics provided in the chart are based on recorded deaths; cases of morbidity from respiratory disease are not reflected in this indicator. Death from respiratory disease reflects long-term, chronic cigarette smoking; it may be many years before changes in smoking affect population mortality.

**SOURCE:** Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division. Attributable fraction percent estimates for tobacco-related COPD and emphysema deaths were provided by the State Epidemiological System (SEDS). Actual percentage attributable to tobacco may vary across geographic units or subpopulations.
## WARD 1: COPD AND EMPHYSEMA DEATHS

Table 28: Number of COPD and Emphysema Deaths in Ward 1 in the District of Columbia: 2001–2005

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>52</td>
<td></td>
<td>15</td>
<td>13</td>
<td>3</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>25</td>
<td></td>
<td>5</td>
<td>7</td>
<td>2</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Female</td>
<td>27</td>
<td></td>
<td>10</td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>42</td>
<td></td>
<td>10</td>
<td>12</td>
<td>2</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>White</td>
<td>10</td>
<td></td>
<td>5</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 or Younger</td>
<td>0</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>35-44</td>
<td>0</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>45-54</td>
<td>1</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>55-64</td>
<td>7</td>
<td></td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>65-74</td>
<td>14</td>
<td></td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>75-84</td>
<td>18</td>
<td></td>
<td>6</td>
<td>6</td>
<td>2</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>85 and Older</td>
<td>12</td>
<td></td>
<td>4</td>
<td>4</td>
<td>1</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>17</td>
<td></td>
<td>5</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Married</td>
<td>10</td>
<td></td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Widowed</td>
<td>20</td>
<td></td>
<td>5</td>
<td>6</td>
<td>1</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Divorced</td>
<td>5</td>
<td></td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

NOTES: *2003 numbers may be underreported due to 53 total deaths in the District that were not accounted for in our analysis. In 2003, there was a discrepancy of 53 deaths between the total number of resident deaths included in the District-wide data set used to conduct the analysis reported above, and the 5,478 total resident deaths reported by the District of Columbia Department of Health, State Center for Health Statistics Administration. **The total number of deaths for 2005 has not been confirmed with the District of Columbia Department of Health, State Center for Health Statistics Administration.

### HIGHLIGHTS

- Overall, there were a total of 52 COPD and emphysema deaths in Ward 1 between 2001 and 2005; based on the attributable fraction of 80 percent, an estimated 41 COPD and emphysema deaths in Ward 1 were related to smoking.
- Between 2001 and 2005, more Ward 1 females (7 per 10,000 female residents) than males (6 per 10,000 male residents) died of COPD or emphysema.
- Unlike other alcohol- and tobacco-related deaths, slightly more Whites (12 per 10,000) died from COPD or emphysema than Blacks (11 per 10,000).
- More individuals aged 55-74 died from COPD or emphysema than all other age groups.
- A greater number of widowed individuals died of COPD or emphysema between 2001 and 2005 than individuals who were single, married, or divorced.

NOTE: Statistics provided in the table are based on recorded deaths; cases of morbidity from respiratory disease are not reflected in this indicator. Death from respiratory disease reflects long-term, chronic cigarette smoking; it may be many years before changes in smoking affect population mortality.

SOURCE: Statistics prepared by the Center for Substance Abuse Research with data provided by the DC Department of Health, Vital Records Division.
SECTION VIII
ALCOHOL, ILLICIT DRUG, AND TOBACCO CONSUMPTION

For this section, we included the following seven indicators to monitor the consequences of illicit drug use. The data presented for these seven indicators allowed us to assess the estimated number of persons in the District of Columbia who reported alcohol, illicit drug, and/or tobacco use in the past 30 days.

- Alcohol-Related
  - Persons aged 12 or older reporting past month use
  - Underage alcohol consumption past month and binge drinking
- Illicit Drug-Related (marijuana, cocaine, nonmedical use of prescription pain relievers, illicit drugs other than marijuana)
  - Persons aged 12 or older reporting past month use
  - Persons aged 12 to 20 reporting past month use
  - Drug-testing results on the DC adult arrestee population
- Tobacco-Related
  - Persons aged 12 or older reporting past month use
- Arrestee Urinalysis Tests
  - Arrestees testing positive for cocaine, opiates, PCP, and amphetamines

These indicators were selected in accordance with CSAP requirements. The consumption tables included in this report do not provide a complete understanding of the alcohol, illicit drug, and tobacco use patterns in the District of Columbia; however, they do allow for some ward-level estimates based on averages provided with confidence intervals (95%) for data collected between 2002 and 2004.
DISTRICT-WIDE: ALCOHOL CONSUMPTION BY WARD

Figure 12: Percent of Residents Aged 12 or Older Reporting Past Month Alcohol Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS

- Based on annual averages for 2002–2004, residents aged 12 or older in Wards 2, 3, and 6 reported higher percentages of past month alcohol use than residents of the same age in Wards 5, 7, and 8.

Table 29: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Month Alcohol Use: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>9.01 - 17.01</td>
</tr>
<tr>
<td>18 to 25</td>
<td>*</td>
</tr>
<tr>
<td>26 or older</td>
<td>*</td>
</tr>
</tbody>
</table>

* Low precision estimate.

- An estimated range of 9.01 to 17.01 percent of Ward 1 residents aged 12 to 17 reported past month alcohol use based on 2002–2004 annual averages.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

Figure 13: Percent of Residents Aged 12 to 20 Reporting Past Month Underage Alcohol Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- Based on annual averages for 2002–2004, residents aged 12 to 20 in Wards 2 and 3 reported the highest percentages of underage past month alcohol use compared to all other wards.

Figure 14: Percent of Residents Aged 12 to 20 Reporting Past Month Underage Binge Alcohol Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- Based on annual averages for 2002–2004, residents aged 12 to 20 in Wards 2 and 3 reported the highest percentages of underage past month binge alcohol use compared to all other wards.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. Binge alcohol use is drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past 30 days.

Figure 15: Percent of Residents Aged 12 or Older Reporting Past Month Marijuana Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS

- Based on annual averages for 2002–2004, residents aged 12 or older exhibited similar consumption patterns of past month marijuana use across all eight wards.

Table 30: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Month Marijuana Use: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>3.80 - 9.69</td>
</tr>
<tr>
<td>18 to 25</td>
<td>*</td>
</tr>
<tr>
<td>26 or older</td>
<td>4.31 - 10.00</td>
</tr>
</tbody>
</table>

* Low precision estimate.

- Based on 2002–2004 annual averages, an estimated range of 3.8 to 9.69 percent of Ward 1 residents aged 12 to 17, and an estimated range of 4.31 to 10.0 percent of Ward 1 residents aged 26 or older reported past month marijuana use.

NOTE The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

DISTRICT-WIDE: ANY ILLICIT DRUG CONSUMPTION OTHER THAN MARIJUANA BY WARD

Figure 16: Percent of Residents Aged 12 or Older Reporting Past Month Use of Any Illicit Drug Other than Marijuana: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- Based on annual 2002–2004 averages, residents aged 12 or older exhibited similar consumption patterns of past month use of any illicit drug other than marijuana across all eight wards.

Table 31: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Month Use of Any Illicit Drug Other than Marijuana: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>2.98 - 6.84</td>
</tr>
<tr>
<td>18 to 25</td>
<td>4.51 - 9.60</td>
</tr>
<tr>
<td>26 or older</td>
<td>2.38 - 5.97</td>
</tr>
</tbody>
</table>

- Based on 2002–2004 annual averages, Ward 1 residents in all three age groups exhibited similar consumption patterns of past month use of any illicit drug other than marijuana.

NOTES: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. Any illicit drug other than marijuana includes cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutic used nonmedically.

HIGHLIGHTS

- Based on 2002–2004 annual averages, residents aged 12 or older all eight wards exhibited similar consumption patterns of past year cocaine use.

Table 32: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Cocaine Use:
Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>*</td>
</tr>
<tr>
<td>18 to 25</td>
<td>3.43 - 7.96</td>
</tr>
<tr>
<td>26 or older</td>
<td>1.77 - 5.31</td>
</tr>
</tbody>
</table>

* Low precision estimate.

- Based on 2002–2004 annual averages, an estimated range of 3.43 to 7.96 percent of Ward 1 residents aged 18 to 25, and an estimated range of 1.77 to 5.31 percent of the Ward’s residents aged 26 or older reported past year cocaine use.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

DISTRIBUTION-WIDE: NONMEDICAL CONSUMPTION OF PAIN RELIEVERS BY WARD

Figure 18: Percent of Residents Aged 12 or Older Reporting Past Year Nonmedical Use of Pain Relievers: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- Based on 2002–2004 annual averages, residents aged 12 or older across all eight wards exhibited similar consumption patterns of past year nonmedical use of pain relievers.

Table 33: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Nonmedical Use of Pain Relievers: Estimates Based on 2002–2004 Annual Averages

- Based on the annual averages for 2002–2004, past year nonmedical use of pain relievers had similar consumption patterns by residents in Ward 1 for all three age groups.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

DISTRICT-WIDE: DRUG TEST RESULTS FOR ADULT ARRESTEES BY WARD

Figure 19: Percentage of Positive Drug Tests for Adult Arrestees in the District of Columbia: 2004–2007

<table>
<thead>
<tr>
<th>Percentage</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ward 1</td>
<td>48.7%</td>
<td>45.8%</td>
<td>51.0%</td>
<td>53.9%</td>
</tr>
<tr>
<td>Ward 2</td>
<td>47.5%</td>
<td>51.7%</td>
<td>58.4%</td>
<td>57.4%</td>
</tr>
<tr>
<td>Ward 3</td>
<td>36.0%</td>
<td>29.0%</td>
<td>36.5%</td>
<td>44.3%</td>
</tr>
<tr>
<td>Ward 4</td>
<td>45.2%</td>
<td>45.6%</td>
<td>48.0%</td>
<td>51.5%</td>
</tr>
<tr>
<td>Ward 5</td>
<td>50.1%</td>
<td>50.5%</td>
<td>54.1%</td>
<td>52.5%</td>
</tr>
<tr>
<td>Ward 6</td>
<td>50.2%</td>
<td>49.2%</td>
<td>54.1%</td>
<td>54.5%</td>
</tr>
<tr>
<td>Ward 7</td>
<td>46.7%</td>
<td>44.4%</td>
<td>47.9%</td>
<td>53.1%</td>
</tr>
<tr>
<td>Ward 8</td>
<td>43.3%</td>
<td>43.8%</td>
<td>47.1%</td>
<td>48.9%</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- The DC Pretrial Services conducts urinalyses on adult arrestees (age 18 and older) for amphetamines, cocaine, opiates, and phencyclidine (PCP).
- In fiscal year (FY) 2007, the percentage of adult arrestees testing positive ranged from 44.3 to 57.4 percent across all wards, with the highest percentage in Ward 2 and the lowest in Ward 3.
- The percentage of adult arrestees testing positive for any drug increased in FY2006 for all wards, and continued to increase in FY2007 for Wards 1, 3, 4, 6, 7, and 8.
- The percentage of positive drug test results decreased in only two of the eight wards: Ward 2 (1.0%) and Ward 5 (1.6%).

NOTES: The District of Columbia Pretrial Services Agency does not test all arrestees for drug substances. Percentages shown are for adult arrestees actually tested for drug substances.
Each year represents the fiscal year beginning October 1 and ending September 30th.
DISTRICT-WIDE: DRUG TEST RESULTS FOR ADULT ARRESTEES BY WARD

Table 34: Percentage of Positive Drug Test Results for Adult Arrestees in the District of Columbia by Drug and Ward: Fiscal Year 2007

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamines</td>
<td>2.1</td>
<td>4.8</td>
<td>3.3</td>
<td>2.0</td>
<td>3.5</td>
<td>4.2</td>
<td>6.4</td>
<td>6.7</td>
</tr>
<tr>
<td>Cocaine</td>
<td>44.6</td>
<td>46.1</td>
<td>37.7</td>
<td>44.7</td>
<td>40.6</td>
<td>42.9</td>
<td>38.7</td>
<td>33.0</td>
</tr>
<tr>
<td>Opiates</td>
<td>9.7</td>
<td>11.7</td>
<td>9.8</td>
<td>10.9</td>
<td>11.4</td>
<td>12.3</td>
<td>11.0</td>
<td>8.6</td>
</tr>
<tr>
<td>Phencyclidine</td>
<td>9.4</td>
<td>9.2</td>
<td>3.3</td>
<td>7.8</td>
<td>11.0</td>
<td>11.5</td>
<td>12.8</td>
<td>14.3</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- In FY2007, a greater percentage of adult arrestees (aged 18 and older) tested positive for cocaine than for any other drug in all eight wards.
- The highest percentages of adult arrestees testing positive for cocaine were in Wards 1, 2, and 4, with nearly half of arrestees testing positive.
- One in ten adult arrestees in all eight wards tested positive for opiates.
- Fewer than seven percent of adult arrestees in any ward tested positive for amphetamines.
- Ward 8 had the lowest percentage of adult arrestees testing positive for cocaine and opiates, but the highest percentage testing positive for PCP and amphetamines.

NOTES: The District of Columbia Pretrial Services Agency does not test all arrestees for drug substances. Percentages shown are for adult arrestees actually tested for drug substances. Each year represents the fiscal year beginning October 1 and ending September 30th.

WARD 1: DRUG TEST RESULTS FOR ADULT ARRESTEES

Table 35: Ward 1 Drug Test Results for Adult Arrestees in the District of Columbia: Fiscal Years 2004–2007

<table>
<thead>
<tr>
<th>Year</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Tested (#)</td>
<td>988</td>
<td>874</td>
<td>977</td>
<td>983</td>
</tr>
<tr>
<td>Total Positive (%)</td>
<td>48.7</td>
<td>45.8</td>
<td>51.0</td>
<td>53.9</td>
</tr>
</tbody>
</table>

**HIGHLIGHTS**

- The percentage of positive drug test results for adult arrestees in Ward 1 has increased steadily since FY2004.

Table 36: Ward 1 Drug Test Results by Gender for Adult Arrestees in the District of Columbia: Fiscal Years 2004–2007

<table>
<thead>
<tr>
<th>Year</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>807</td>
<td>717</td>
<td>784</td>
<td>783</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>46.5</td>
<td>42.4</td>
<td>49.2</td>
<td>50.7</td>
</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>181</td>
<td>155</td>
<td>189</td>
<td>197</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>58.6</td>
<td>60.7</td>
<td>58.7</td>
<td>67.5</td>
</tr>
</tbody>
</table>

**NOTE:** Column totals for each gender do not add up to totals provided due to missing gender data for some cases in years 2005-2007

**HIGHLIGHTS**

- In Ward 1, a higher percentage of female adult arrestees tested positive each year than males; in FY2007, two-thirds of females and half of males tested positive.

**NOTES:** The District of Columbia Pretrial Services Agency does not test all arrestees for drug substances. Percentages shown are for adult arrestees actually tested for drug substances. Each year represents the fiscal year beginning October 1 and ending September 30th. **SOURCE:** DC Office of Forensic, Pretrial Services Agency, December 2007.
WARD 1: DRUG TEST RESULTS FOR ADULT ARRESTEES

Table 37: Ward 1 Drug Test Results by Race for Adult Arrestees in the District of Columbia: Fiscal Years 2004–2007

<table>
<thead>
<tr>
<th>WARD 1</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>782</td>
<td>707</td>
<td>773</td>
<td>790</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>51.8</td>
<td>48.9</td>
<td>54.0</td>
<td>57.1</td>
</tr>
<tr>
<td>White</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>201</td>
<td>160</td>
<td>193</td>
<td>182</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>36.3</td>
<td>30.6</td>
<td>38.9</td>
<td>41.8</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

NOTES: Column totals for each year do not add up to totals provided due to missing race data for some cases in each year. Percentages not reported due to low cell count.

HIGHLIGHTS

- At least four times more Black adult arrestees (aged 18 and older) were tested each year than White adult arrestees.
- More than half of Black adult arrestees tested positive each year, compared to approximately 30-40 percent of White adult arrestees.

NOTES: The District of Columbia Pretrial Services Agency does not test all arrestees for drug substances. Percentages shown are for adult arrestees actually tested for drug substances. Each year represents the fiscal year beginning October 1 and ending September 30th. SOURCE: DC Office of Forensic, Pretrial Services Agency, December 2007
WARD 1: DRUG TEST RESULTS FOR ADULT ARRESTEES

Table 38: Ward 1 Drug Test Results by Age for Adult Arrestees in the District of Columbia: Fiscal Years 2004–2007

<table>
<thead>
<tr>
<th>Age</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>18-24</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>563</td>
<td>507</td>
<td>572</td>
<td>572</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>47.4</td>
<td>41.6</td>
<td>48.6</td>
<td>52.4</td>
</tr>
<tr>
<td><strong>25-34</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>236</td>
<td>198</td>
<td>232</td>
<td>226</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>50.8</td>
<td>53.5</td>
<td>54.3</td>
<td>56.2</td>
</tr>
<tr>
<td><strong>35-44</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>105</td>
<td>97</td>
<td>99</td>
<td>103</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>53.3</td>
<td>57.7</td>
<td>63.6</td>
<td>55.3</td>
</tr>
<tr>
<td><strong>45-54</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>38</td>
<td>34</td>
<td>25</td>
<td>31</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>52.6</td>
<td>47.1</td>
<td>44.0</td>
<td>61.3</td>
</tr>
<tr>
<td><strong>55 and older</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tested (#)</td>
<td>4</td>
<td>3</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Positive (%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

NOTES: Column totals for each year do not add up to totals provided due to missing age data for some cases in each year. Percentages not reported due to low cell count.

HIGHLIGHTS

- Since FY2004, arrestees 18-24 years old have made up the largest population of arrestees tested for illegal substances; however, arrestees aged 25 and older consistently have a higher percentage of positive drug tests.

Figure 20: Percent of Residents Aged 12 or Older Reporting Past Month Cigarette Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
• Based on 2002–2004 annual averages, Ward 4 residents aged 12 or older reported lower percentages of past month cigarette use than residents in Wards 1, 2, and 8.

Table 39: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Month Cigarette Use: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>4.30 - 9.10</td>
</tr>
<tr>
<td>18 to 25</td>
<td>27.02 - 38.96</td>
</tr>
<tr>
<td>26 or older</td>
<td>24.50 - 35.26</td>
</tr>
</tbody>
</table>

• Based on 2002–2004 annual averages, Ward 1 residents aged 12 to 17 reported lower estimates of past month cigarette use than all other residents in the Ward.
• Residents aged 18 to 25 and 26 or older reported similar estimates of past month cigarette use.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval. SOURCE: Adapted by CESAR from data from the 2002, 2003, and 2004 National Survey on Drug Use and Health, Office of Applied Studies, Substance Abuse and Mental Health Services Administration.
SECTION IX
TREATMENT

For this section, we have included the following eight indicators that are useful in monitoring the availability of support groups and treatment for individuals abusing or dependent on alcohol or illicit drugs. The data presented for these eight indicators allowed us to assess the availability of support groups and treatment, as well as the need for treatment in the District of Columbia.

- Support Groups/Treatment
  - Alcoholics Anonymous Meetings
  - Narcotics Anonymous Meetings
  - Cocaine Anonymous Meetings
  - Crystal Meth Anonymous Meetings
  - Recovery Clubs
  - Treatment Programs

- Need for Treatment
  - Needing alcohol treatment
  - Needing illicit drug treatment

These indicators were selected in accordance with CSAP requirements. The tables providing data on the need for alcohol and/or illicit drug treatment do not provide a complete understanding of the need for treatment, nor do available support groups and treatment options provide an exhaustive list for the District of Columbia. The information provided does, however, provide some ward-level information on the need for treatment and options for individuals who currently abuse and/or are dependent on alcohol and/or illicit drugs.
**District of Columbia: Community Profile**

**DISTRICT-WIDE: WEEKLY RECOVERY MEETINGS, RECOVERY CLUBS AND TREATMENT PROGRAMS BY REGION**

<table>
<thead>
<tr>
<th>Region</th>
<th>Alcoholics Anonymous Meetings</th>
<th>Narcotics Anonymous Meetings</th>
<th>Cocaine Anonymous Meetings</th>
<th>Crystal Meth Anonymous Meetings</th>
<th>Recovery Clubs</th>
<th>Treatment Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NORTHWEST REGION</strong></td>
<td>411</td>
<td>92</td>
<td>0</td>
<td>5</td>
<td>5</td>
<td>27</td>
</tr>
<tr>
<td><strong>NORTHEAST REGION</strong></td>
<td>53</td>
<td>33</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td><strong>SOUTHWEST REGION</strong></td>
<td>14</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>SOUTHEAST REGION</strong></td>
<td>90</td>
<td>27</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>7</td>
</tr>
</tbody>
</table>

**Sources:** Provided to CESAR by Faces and Voices of Recovery using data from the following sources: the Washington Area Intergroup Association; the Chesapeake and Potomac Region of Narcotics Anonymous; the Cocaine Anonymous Washington, DC; Maryland and Northern Virginia Area Website; Crystal Meth Anonymous; and the Bounce Back Guide to Recovery in Washington, DC, 2007, published by Recovery Works, Washington, DC.
DISTRIBUTED: NEEDING BUT NOT RECEIVING TREATMENT FOR ALCOHOL USE BY WARD

Figure 21: Percent of Residents Aged 12 or Older Reporting Past Year Need but No Treatment for Alcohol Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS
- Based on 2002–2004 annual averages, residents aged 12 or older in Wards 7 and 8 reported lower percentages of needing but not receiving treatment for alcohol use than in Ward 2.

Table 40: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Need but No Treatment for Alcohol Use: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>Ward 1 Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>1.96 - 5.30</td>
</tr>
<tr>
<td>18 to 25</td>
<td>12.53 - 21.99</td>
</tr>
<tr>
<td>26 or older</td>
<td>7.50 - 14.06</td>
</tr>
</tbody>
</table>

- Based on 2002–2004 annual averages, Ward 1 residents aged 12 to 17 reported lower estimates of needing but not receiving treatment for alcohol use in the past year than all other (older) Ward 1 residents.
- Residents aged 18 to 25 and residents aged 26 or older reported similar estimates.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.

DISTRICT-WIDE: NEEDING BUT NOT RECEIVING TREATMENT FOR ILLICIT DRUG USE BY WARD

Figure 22: Percent of Residents Aged 12 or Older Reporting Past Year Need but No Treatment for Illicit Drug Use: Ward Estimates Based on 2002–2004 Annual Averages

HIGHLIGHTS

- Based on the 2002–2004 annual averages, residents aged 12 or older needing but not receiving treatment for illicit drug use in the past year had similar consumption patterns across all eight wards.

Table 41: Percent Prediction Interval of Ward 1 Residents Aged 12 or Older Reporting Past Year Need but No Treatment for Illicit Drug Use: Estimates Based on 2002–2004 Annual Averages

<table>
<thead>
<tr>
<th>Age</th>
<th>95% Prediction Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 to 17</td>
<td>2.60 - 6.46</td>
</tr>
<tr>
<td>18 to 25</td>
<td>5.49 - 11.11</td>
</tr>
<tr>
<td>26 or older</td>
<td>1.51 - 4.06</td>
</tr>
</tbody>
</table>

- Based on 2002–2004 annual averages, Ward 1 residents aged 18 to 25 reported higher estimates of needing but receiving no treatment for past year illicit drug use than residents aged 26 or older.

NOTE: The statistics presented here are based on an average calculated from annual averages for years 2002, 2003, and 2004. Data should be interpreted with caution due to estimates calculated using a 95% confidence interval.
Illicit drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutic used nonmedically.

The five consequences highlighted in this report (violent and property crime, arrest, HIV/AIDS, dependence and abuse, and mortality) represent a deeper analysis of data initially presented in the “District of Columbia Epidemiological Profile” released in March 2007. This new report was prepared during the initial phase of a ward-level data analysis plan initiated by the DCEOW. It is the latest in a series of reports that are designed to assess the consequences and consumption of alcohol, tobacco, and other drugs in the District of Columbia. The purpose of this report is to analyze existing data regarding the use of alcohol, tobacco, and other drugs at the community level and to fill data gaps that were detected in the first citywide report completed last year.

In order to assess District needs on the ward-level, additional data were requested and obtained by the DCEOW from various District agencies. Analyses of these data allowed the DCEOW to assess the consequences and consumption patterns related to alcohol, tobacco, and other drugs at the ward-level. Moreover, many of the data gaps were minimized with the addition of ward-level data. These additional data allowed for various demographic breakdowns that were previously not available or reported. Analyses included in this report will be used by city and local coalitions to conduct needs assessments and identify District funding priorities associated with the consequences and consumption of alcohol, tobacco, and other drug substances.

Future reports of the DCEOW will expand on the information provided in this report and the earlier citywide report. As additional citywide and ward-level data become available, they will be added to future DCEOW reports.
As part of Chief Cathy Lanier's dedication to improving crime data tracking and analysis, in 2008, the Metropolitan Police Department (MPD) upgraded key data systems. The data provided for the "District of Columbia: Community Profile" was disseminated prior to these upgrades and should not be compared with datasets released thereafter.

**Violent and Property Crime**

Source: Geocoded Analytical Services Application (ASAP) data as of May 7, 2007.

All statistics presented here are based on preliminary DC index crime data. The data do not represent official statistics submitted to the Federal Bureau of Investigation (FBI) under the Uniform Crime Reporting program (UCR). All preliminary offenses are coded based on DC criminal code and not the FBI offense classifications. All statistics are subject to change due to a variety of reasons, such as a change in classification, the determination that certain offense reports were unfounded, or late reporting. Please understand that any comparisons between MPD preliminary data as published here and the official crime statistics published by the FBI under the UCR Program are inaccurate and misleading. Excludes crimes for which no address could be identified (between 1% and 3% of all crimes). All homicide data are verified through the Violent Crimes Branch (VCB).

**Arrests**

Source: Geocoded Criminal Justice Information System (CJIS) data as of May 7, 2007.

Totals are based solely on the top arrest charge. One person may have been booked on more than one arrest charge. Excludes arrests for which no address could be identified (between 1% and 3% of all arrests).