



January

2022-

## Maine Drug Monitoring Initiative Report

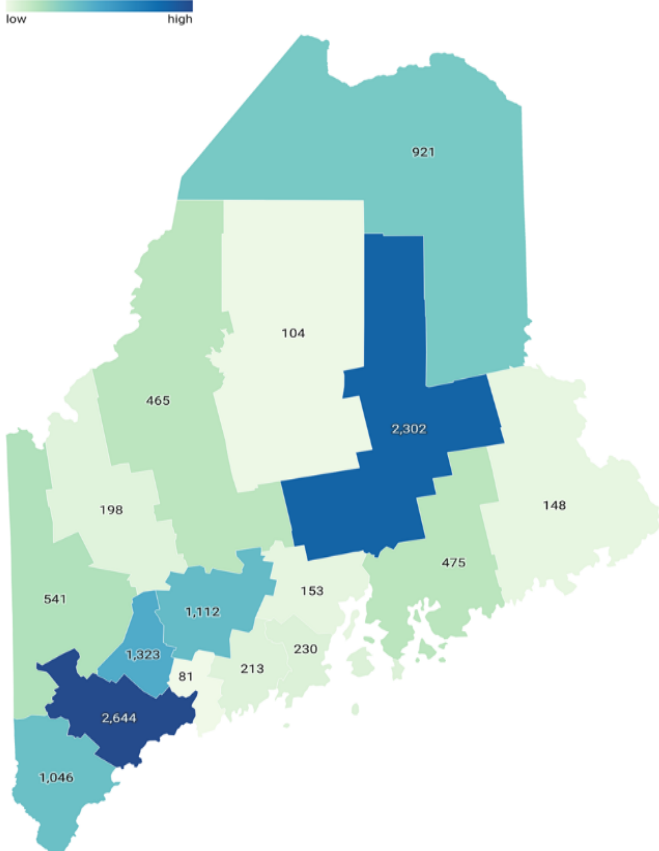
*(U) Scope Note: The Maine Information and Analysis Center (MIAC) has prepared the following report to provide situational awareness to Maine (ME) stakeholders regarding ME's drug statistical data. The MIAC obtains information from multiple sources while also collaborating with New England HIDTA and the ME CDC to produce this report for all stakeholders.*

### (U) DRUG ARREST STATISTICS

**Analyst Note:** *These Arrests do not include arrests made in Maine by federal law enforcement agencies and encompass all drug charges by statute.*  
**Source:** *Maine Bureau of Identification*

#### (U) Total Drug Arrests by County Last 12 Months

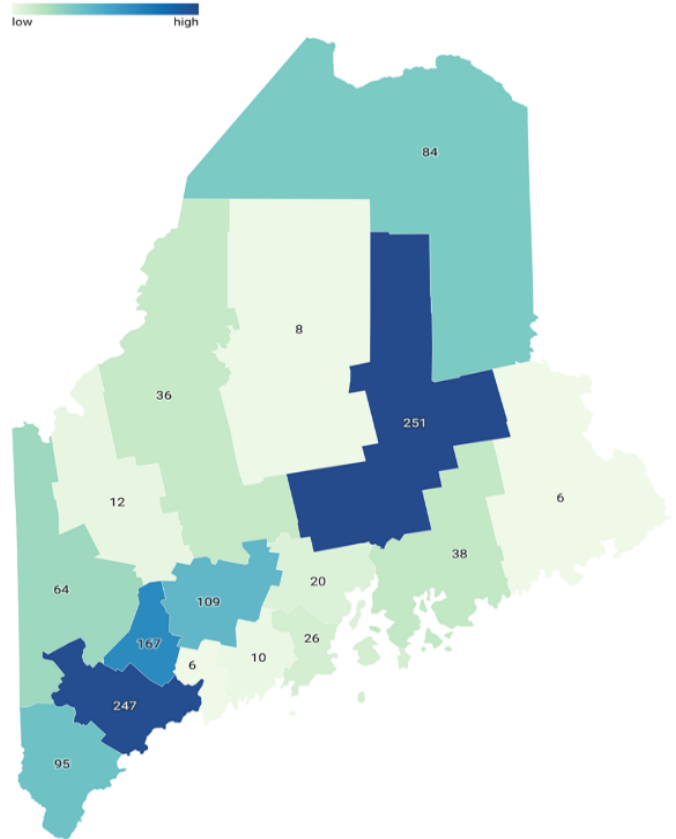
(U) For the last 12 months (April 2022 through March 2023) in Maine there have been 11,996 drug arrests. Cumberland county has accounted for 22%, Penobscot 19%, followed by Androscoggin with 11%, Kennebec and York 9%, and Aroostook 8%. In total, approximately 78% of all drug arrests occurred in these 6 counties over the last year.



Created with Datawrapper

#### (U) Total Drug Arrests by County March 2023

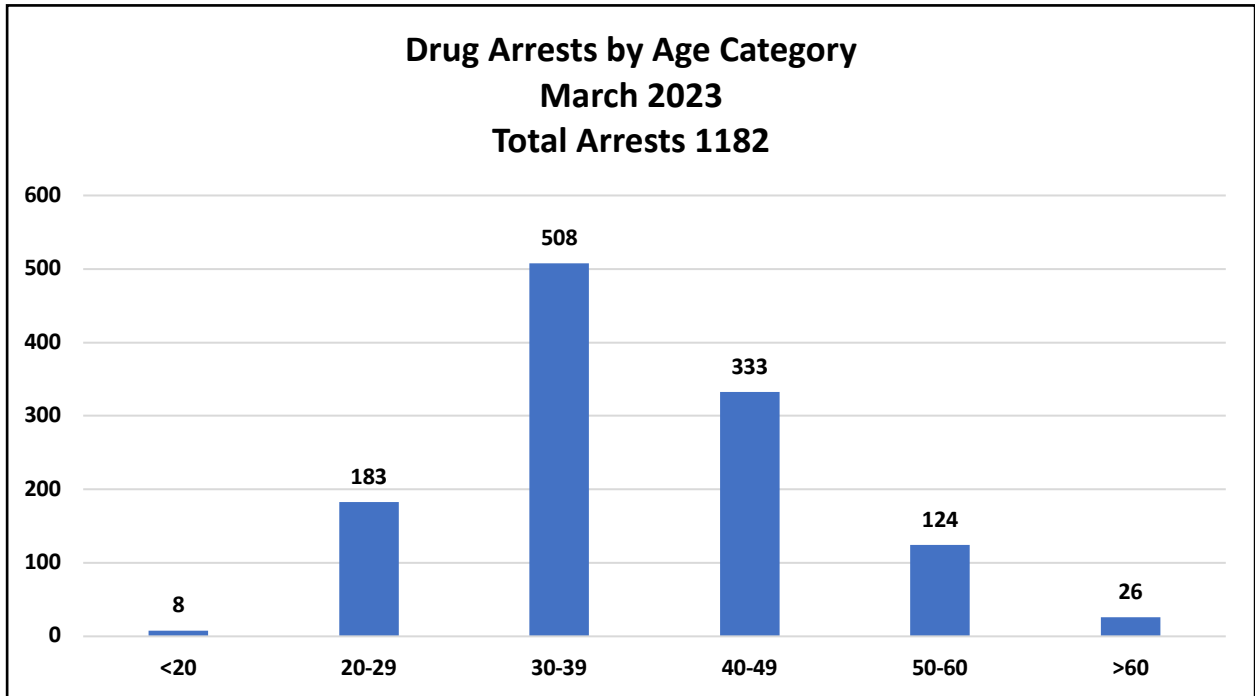
(U) In March there were 1,182 Drug Arrests. Penobscot and Cumberland County accounted for 21% of the drug arrests followed by Androscoggin County 14%, Kennebec 9%, York 8%, and Aroostook 7%. In total, approximately 80% of all drug arrests in March occurred in these 6 counties.



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### (U) Maine Drug Arrests by Age Category:

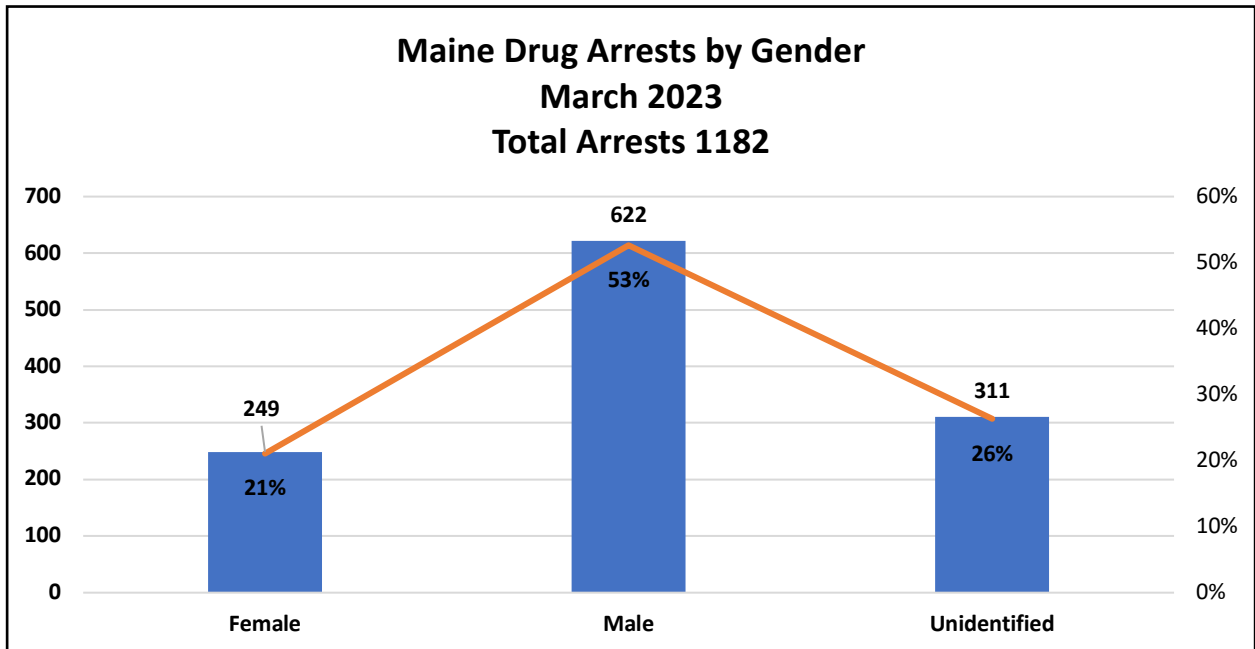
(U) Individuals who are between the age of 30-39 accounted for the greatest percentage of drug arrests in March with 43%, followed by those who are 40-49 years old 28% and those 20-29 years old 15%.



Source: Maine Bureau of Identification

### (U) Maine Drug Arrest by Gender:

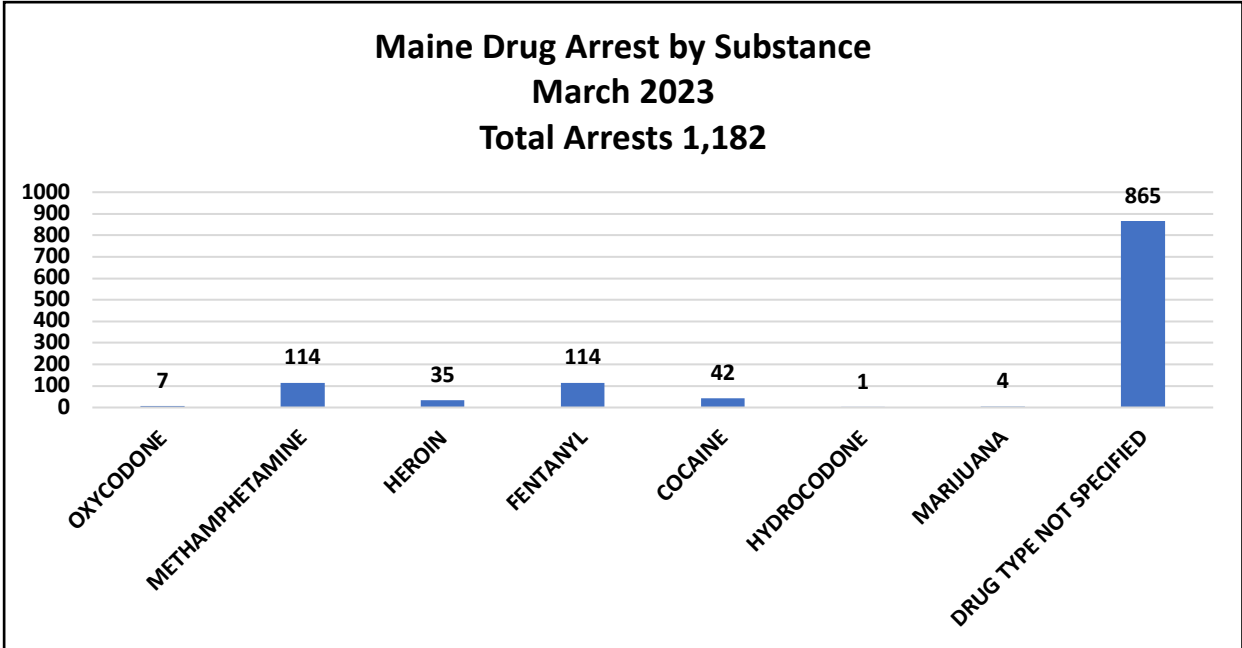
(U) In March, Individuals that were male accounted for the greatest percentage of drug arrests with 53%, followed by unidentified gender 26%. Females comprised the remaining 21% of drug arrests in March.



Source: Maine Bureau of Identification

**(U) Maine Drug Arrest by Substance:**

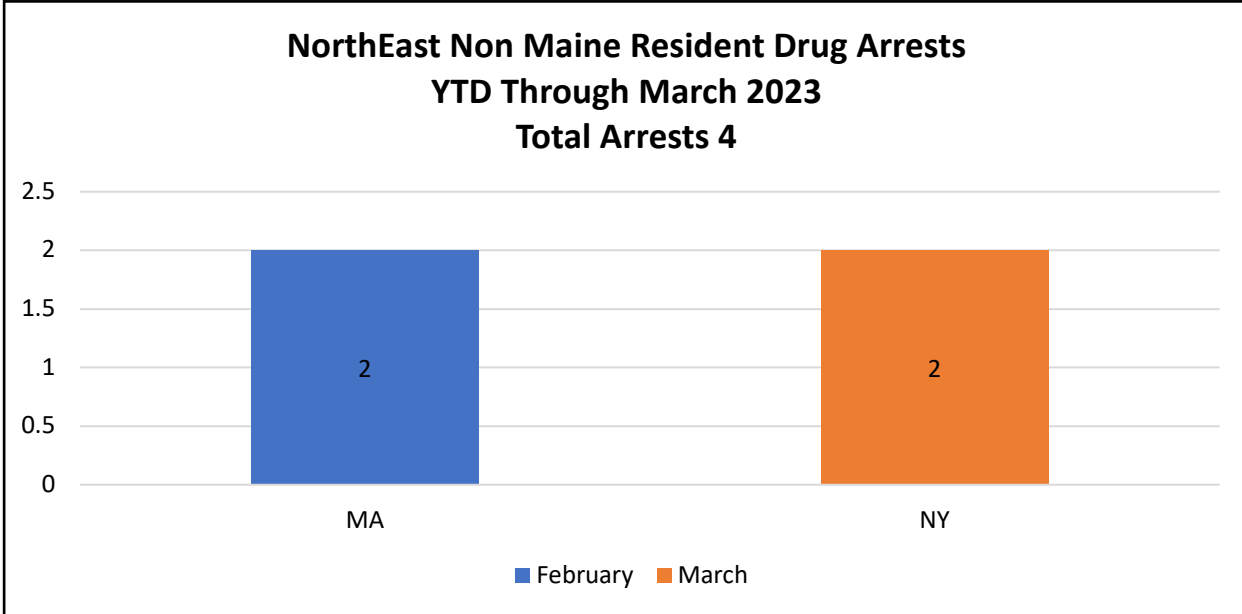
(U) In March, there were 1,182 drug arrests. Drug type not specified was the most frequently identified, 865 arrests 73%, followed by Fentanyl and Methamphetamine each involved in 10% of arrests. Cocaine arrests were 4% and Heroin 3%. Oxycodone, Hydrocodone, and Marijuana accounted for the remaining arrests.



Source: Maine Bureau of Identification

**(U) Non-Maine Resident Drug Arrest:**

(U) Through March there have been 4 drug arrests in Maine involving out of state subjects, 2 were from Massachusetts, 2 were from New York.



Source: Maine Bureau of Identification

## (U) MAINE DRUG RELATED PUBLIC HEALTH STATISTICS

**Analyst Note 1:** Data for fatal overdoses were collected at the Office of Chief Medical Examiner and data regarding nonfatal overdoses were contributed by the Maine CDC, Maine Emergency Medical Services, Maine ODMAP initiative, Maine Naloxone Distribution Initiative, and Office of Attorney General Naloxone Distribution.

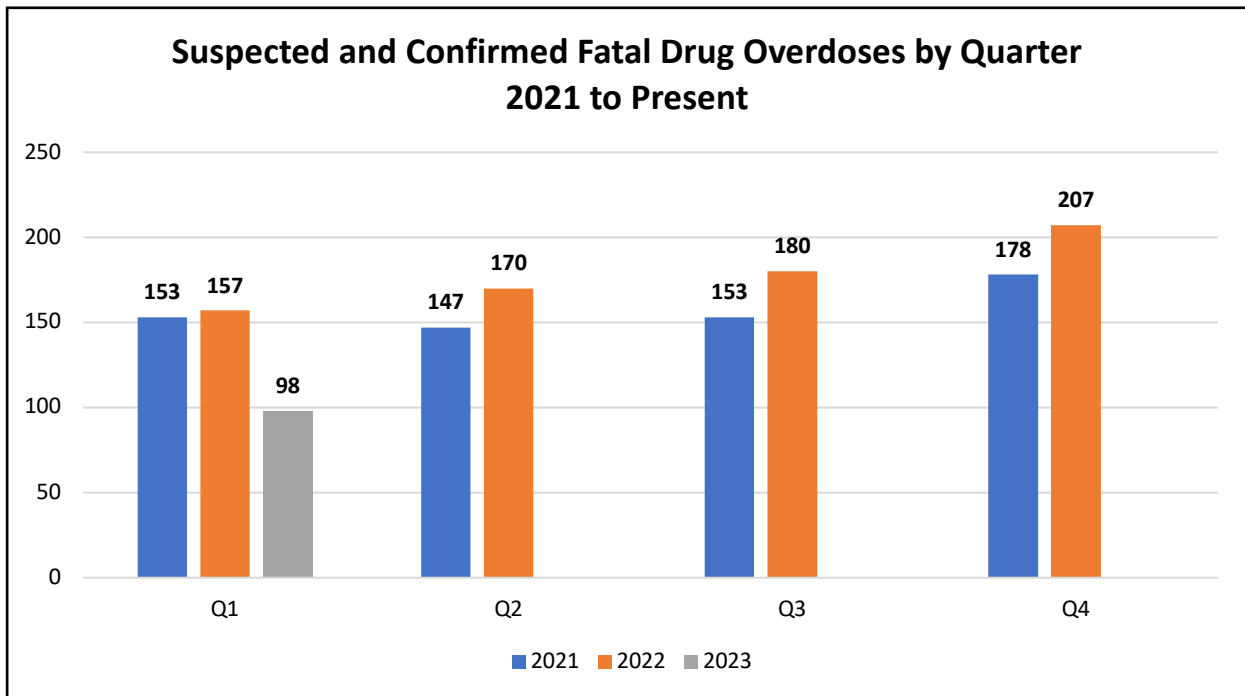
**Analyst Note 2:** The gray areas in the following charts only represent two months, January, and February 2023

### (U) Maine Monthly Overdose Report-February 2023:

(U) Suspected and Confirmed Fatal Drug Overdoses:

(U) Between 2021 and 2022 suspected and confirmed Fatal drug overdoses increased in each quarter. The gray area represents two months.

(U) During February 2023, the proportion of fatal overdoses averaged 5.8% of total overdoses. Monthly proportions of 2022 fatalities have fluctuated from a low of 5.0% in May to a high of 8.7% in December. During the period January–December 2022, fatal overdoses comprised 6.8% of all overdoses, slightly higher than the 6.5% for 2021.



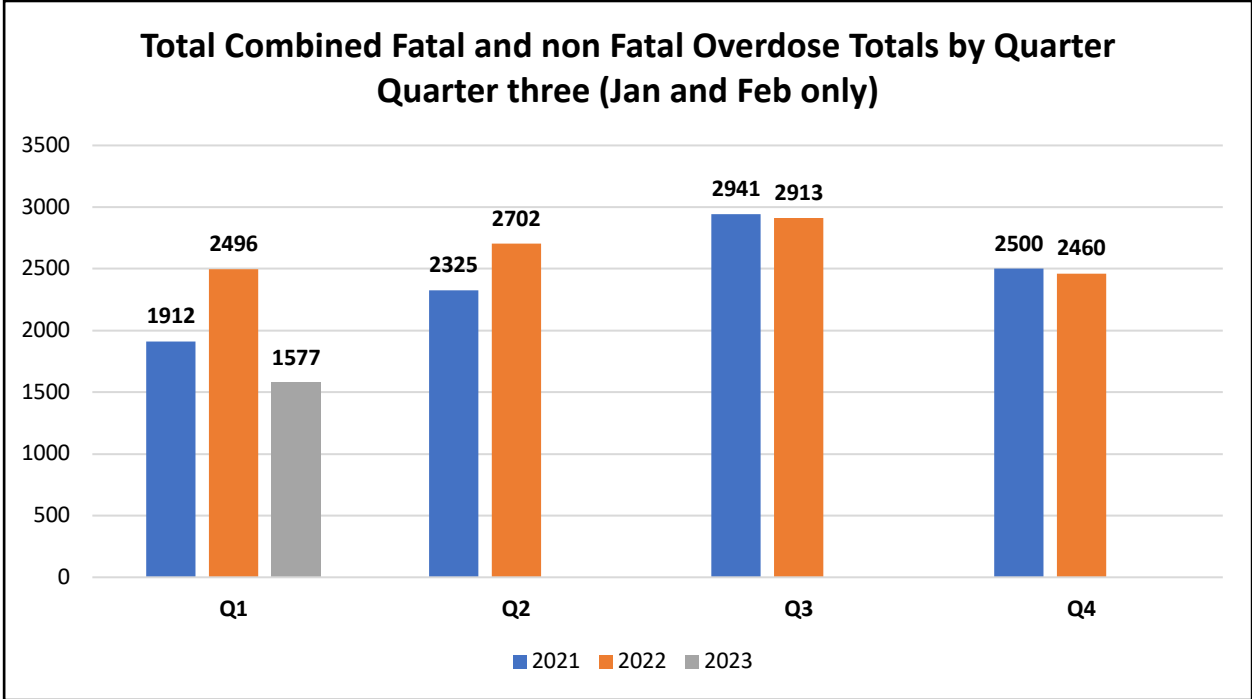
Source: Margaret Chase Smith Policy Center University of Maine

(U) Total Fatal and Non-Fatal Overdoses by Quarter:

(U) Chart 1 shows the total number of quarterly fatal and non-fatal overdoses increased across the first 3 quarters each year before declining over the last quarter.

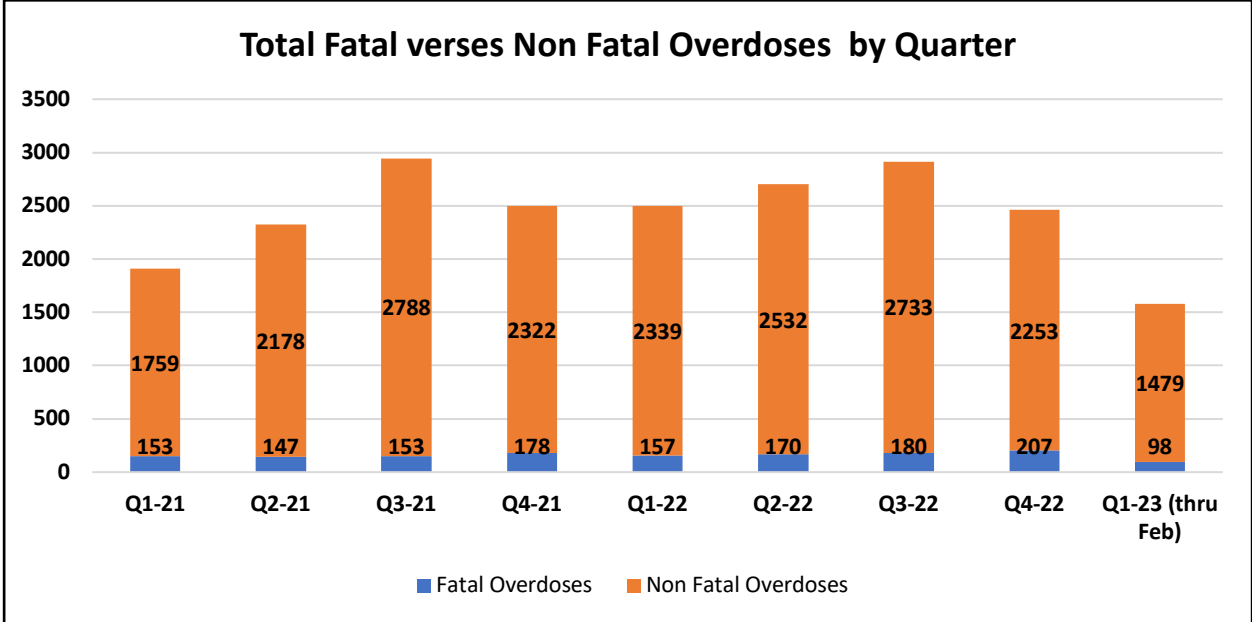
(U) Chart 2 shows the number of quarterly overdose fatalities has remained low in comparison to overall overdose numbers.

Chart 1



Source: Margaret Chase Smith Policy Center University of Maine

Chart 2



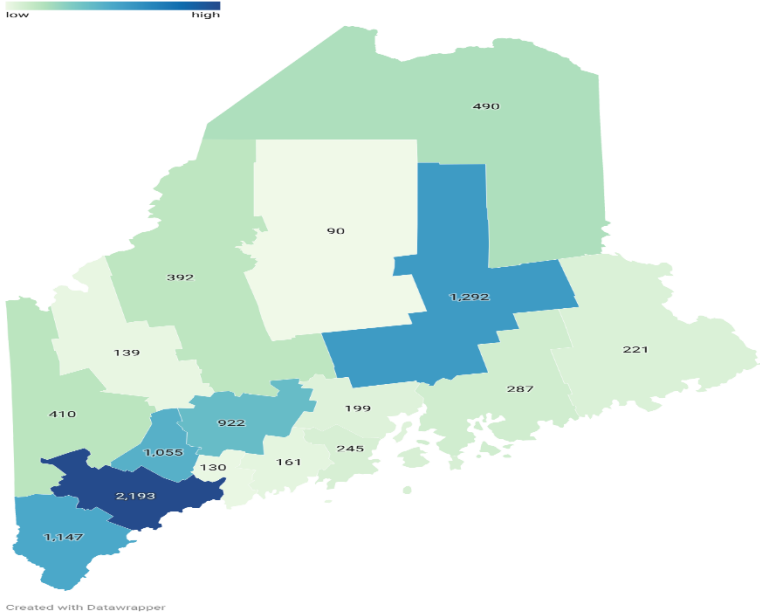
Source: Margaret Chase Smith Policy Center University of Maine

(U) Total Fatal and Non-Fatal Overdoses by County:

**Analyst Note:** Please note, due to small numbers, random fluctuations can occur over time and across counties and may not indicate a statistically significant .

**(U) 2022 County of Incident among 9,373 suspected and confirmed nonfatal overdoses.**

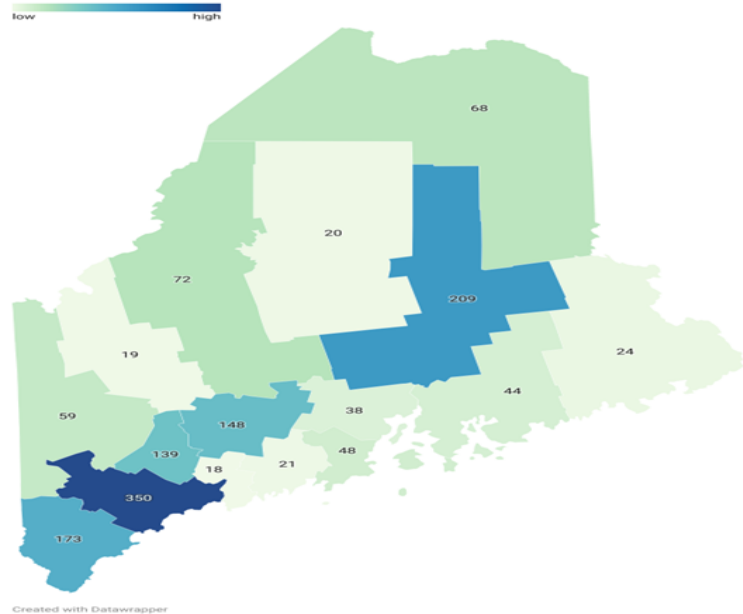
(U) During 2022, most counties' nonfatal overdose rate fall within 0 - 1 percentage points of their 2020 census distribution with a few exceptions. York County is 4 percentage points lower; Sagadahoc is 2 percentage points lower; Androscoggin and Penobscot counties are 3 percentage points higher.



Source: Margaret Chase Smith Policy Center University of Maine

**(U) 2023 County of Incident among 1,450 suspected and confirmed nonfatal overdoses.**

(U) So far in 2023 through February, most counties nonfatal overdose rate fall within 0 - 1 percentage points of their 2020 census distribution with a few exceptions. York County is 4 percentage points lower; Sagadahoc and Lincoln are 2 percentage points lower; Androscoggin and Cumberland are 2 percentage points higher, and Penobscot County is 3 percentage points higher.

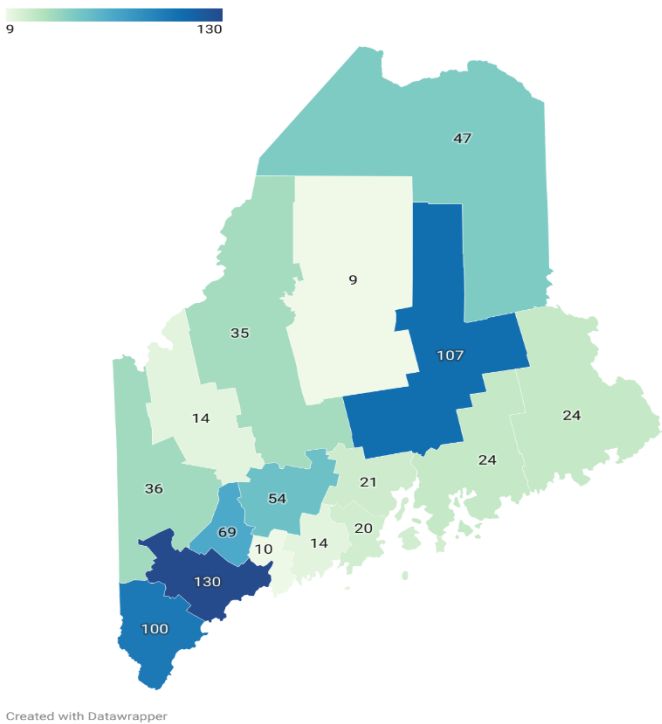


Source: Margaret Chase Smith Policy Center University of Maine

(U) The chart below shows the county where overdose deaths occurred in Maine. Please note, the county listed is the county where the death occurred not the county of residence of the decedent. Also note, non-Maine residents are included.

**2022 County of death among suspected and confirmed fatal overdoses**

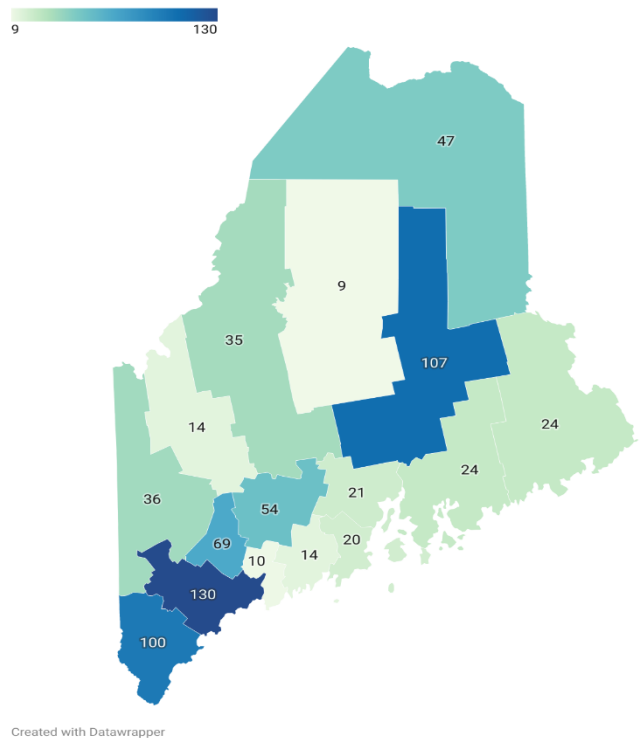
(U) In 2022, the rate of fatal overdose for most counties fell within 0 - 1 percentage points of the 2020 census distribution with several exceptions. Penobscot county is 4 percentage points higher; Androscoggin and Aroostook Counties are 2 percentage points higher. Cumberland County is 4 percentage points lower, and Sagadahoc and York Counties are 2 percentage points lower.



Source: Margaret Chase Smith Policy Center University of Maine

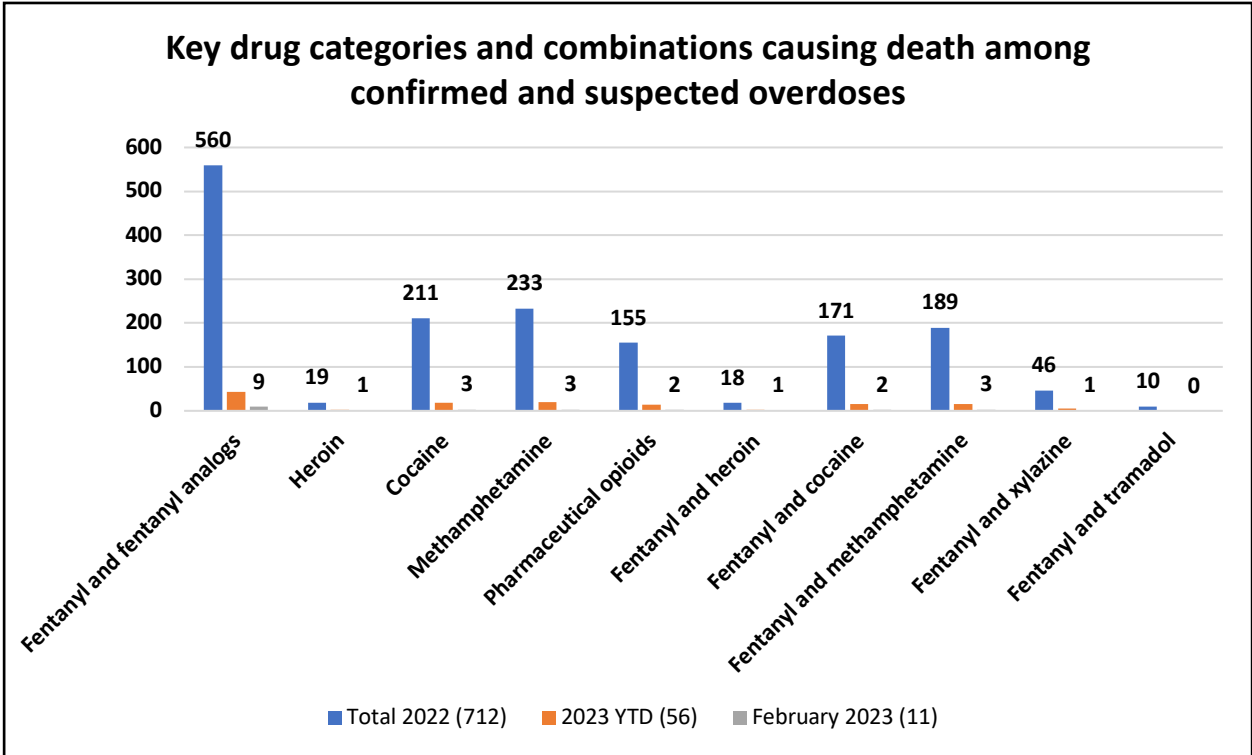
**2022 County of death among 714 suspected and confirmed fatal overdoses.**

(U) In 2022, the rate of fatal overdose for most counties fell within 0 - 1 percentage points of the 2020 census distribution with several exceptions. Penobscot county is 4 percentage points higher; Androscoggin and Aroostook Counties are 2 percentage points higher. Cumberland County is 4 percentage points lower, and Sagadahoc and York Counties are 2 percentage points lower.



Source: Margaret Chase Smith Policy Center University of Maine

(U) The following chart shows the key drug categories and combinations causing death among confirmed fatal overdoses. Please note that most decedents have more than one drug contributing to their death. The average number of drugs involved in a fatal overdose is 3 in the State of Maine. Most deaths (79%) in 2022 were caused by nonpharmaceutical fentanyl alone or in combination with other drugs. Recently, illicit stimulants including cocaine and methamphetamine have been involved in an increasing number of fatal overdoses, usually in combination with fentanyl.



Source: Margaret Chase Smith Policy Center University of Maine

(U) Emergency Medical Services (EMS):

(U) Maine Emergency Medical Services (EMS) plays an integral role in reducing fatal overdoses by responding to opioid-related emergencies with naloxone to prevent drug deaths.

(U) Maine EMS responds to a variety of opioid-associated resuscitative emergencies involving patient conditions including chronic pain management for musculoskeletal pain or cancer-related pain, illicit drug use, and intentional overdose. By administering naloxone in the out-of-hospital setting, opioid-related overdoses are reversed, and lives are saved.

(U) These [data metrics](#) track the incidents responded to by Maine EMS that require the administration of naloxone. The metrics available through this [link](#) are an indicator of fatal and nonfatal opioid overdoses, both accidental and intentional. The data is provided by Maine EMS. The data is updated monthly. Data for latest month is provisional. Naloxone administrations can occur for non-opioid-related incidents as a treatment to respond to unconscious patients.

## (U) KEY RESOURCES

[Governor’s Office of Policy Innovation and the Future-Opioid Response](#): Under Director of Opioid Response, the [Mills Administration has developed an Opioid Response Strategic Plan \(PDF\)](#) to address the opioid crisis, which was updated in 2021 to address particular challenges stemming from the COVID-19 pandemic and the increased prevalence of the lethal non-pharmaceutical fentanyl, which is now responsible for nearly 80 percent of all fatal overdoses in Maine.

[Maine Drug Data Hub](#): The Maine Drug Data Hub contains nearly 300 data metrics, nearly 200 reports and resources, as well as dozens of dashboards, maps, and other data products.

[Maine Options](#): The Overdose Prevention Through Intensive Outreach Naloxone and Safety (OPTIONS) initiative is a coordinated effort of the [Maine Office of Behavioral Health \(OBH\)](#) and other state agencies to improve the health of Mainers using substances through harm reduction strategies, helping them on the road to recovery, and dramatically reducing the number of fatal and non-fatal drug overdoses. The OPTIONS co-responder initiative embeds licensed behavioral health clinicians within local emergency medical services (EMS) and law enforcement agencies in every county across Maine.

[Get Maine Naloxone](#): Naloxone can be obtained in the state of Maine through several locations and programs depending on if you are an individual, an organization, or a member of a public safety or emergency medical response agency.

[2-1-1](#): 211 is a free, confidential information and referral service that connects people of all ages across Maine to local services. 211 Maine is based in Maine and available 24 hours a day, seven days a week.

[NEHIDTA](#): Designated in 1999, the New England HIDTA provides funding resources, facilitates, and enhances coordination of federal, state, and local law enforcement agencies in designated areas, enabling them to combine and leverage resources and capabilities to carry out activities to address the specific drug threats of those areas.

[CDCF](#): The CDC Foundation is an independent nonprofit and the sole entity created by Congress to mobilize philanthropic and private-sector resources to support the Centers for Disease Control and Prevention’s critical health protection work.

[MIAC](#): The MIAC mission is to collect, process, analyze, and appropriately share intelligence between the federal government and the State of Maine. This shall be accomplished through the combination of resources from principle agencies, and the establishment of relationships from all levels of government and the private sector.

[Overdose Response Strategy \(ORS\)](#): The Overdose Response Strategy (ORS) is an unprecedented and unique collaboration between public health and public safety, created to help local communities reduce drug overdoses and save lives by sharing timely data, pertinent intelligence, and evidence-based and innovative strategies.