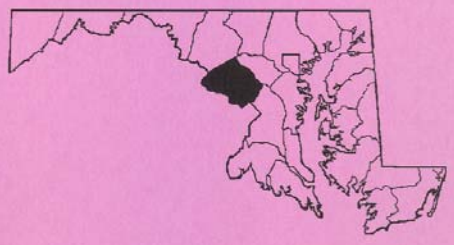
Drug Early Warning System

Working Together to Identify Emerging Drug Trends in Maryland

Juvenile Offender Population Urinalysis Screening Program (OPUS)

Intake Study

Findings from Montgomery County



September 2000 - Revised

CESAR
Center for Substance Abuse Research
University of Maryland
4321 Hartwick Road, Suite 501
College Park, MD 20740
301-403-8329 Fax: 301-403-8342

Juvenile OPUS is a component of the DEWS Program. Juvenile OPUS and other findings are disseminated in DEWS Faxes. The DEWS Fax is published monthly. To receive DEWS Faxes, please contact CESAR: 301-403-8329, 1-877-234-DEWS (toll-free), 301-403-8342 (fax), dews@cesar.umd.edu, www.cesar.umd.edu/dews.htm.

Supported by the Cabinet Council on Criminal and Juvenile Justice, Lt. Governor Kathleen Kennedy Townsend, Chair, and the Governor's Office of Crime Control & Prevention.

ABSTRACT

Fifty-nine youths processed in the Montgomery County Department of Juvenile Justice (DJJ) Intake Office were interviewed and asked to provide a urine specimen. Twenty-two percent tested positive for at least one drug, primarily marijuana (18%). Youths reported that marijuana was the most widely used and easily obtained drug. There was a consensus that ecstasy (MDMA) is becoming increasingly popular. Though reports of use were isolated and information limited, speed was mentioned as a drug used by youths.

OPUS is designed to provide insight into emerging drug trends among the juvenile offender population. It should be noted that OPUS drug use patterns may not be typical of the general youth population. However, research has indicated that offender urinalysis results provide advance warning of drug epidemics in the general population.

TABLE OF CONTENTS

Juvenile Offender Population Urinalysis Screening (OPUS)

PROJECT OVERVIEW

Juvenile OPUS is one component of Maryland's Drug Early Warning System (DEWS), an initiative of the Cabinet Council on Criminal and Juvenile Justice, Lt. Governor Kathleen Kennedy Townsend, Chair. DEWS is supported by a grant from the Governor's Office of Crime Control & Prevention.

The Juvenile OPUS Study was implemented by the Center for Substance Abuse Research (CESAR) in June 1998 as a urinalysis monitoring program for juveniles processed by the Department of Juvenile Justice (DJJ). The project goals are to monitor changes in drug use and to identify emerging drugs of abuse among the juvenile offender population.

The Juvenile OPUS Project takes place in two venues: Intake and Detention. The Intake Study obtains interviews and urine specimens from youths being assessed in DJJ county offices. Twice a year the Detention Study obtains urine specimens only from youths newly admitted to DJJ's five detention facilities.

This report presents results from the Intake Study conducted in Montgomery County between January and March 2000. A final table compares the Montgomery County urine test results with results from other OPUS Intake Study sites.

OPUS is designed to provide insight into emerging drug trends among the juvenile offender population. It should be noted that OPUS drug use patterns may not be typical of the general youth population in this county. However, research has indicated that offender urinalysis results provide advance warning of drug epidemics in the general population.

METHODS

- Interviewers requested informed consent from youths (intake referrals and probationers) and their parents.

- Interviewers administered a 10-15 minute, semi-structured interview. The interview provided youths the opportunity to talk about drug use by their peers and in their communities. Youths were not asked about their own drug use.

- A voluntary and anonymous urine specimen was collected and screened for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, phencyclidine (PCP), and propoxyphene. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines, and phenylpropanolamine.

- A candy bar was offered to respondents as an incentive for participation.

FINDINGS

Response Rates

- 59 of the 61 juveniles approached (97%) agreed to be interviewed.
- 85% (36 males, 14 females) of the interviewed juveniles provided a urine specimen.

Characteristics of Tested Juveniles

- The majority of the tested juveniles were male (72%) and 16 or older (68%) (Table 1).
- 42% of the tested juveniles were charged with a property-related crime, 28% with a violent offense, and 24% with a drug-related offense (Table 1).

Table 1
Demographic Characteristics of Interviewed and Tested Respondents

Characteristic	Persons interviewed (N=59)	Persons tested (N=50)	
Gender	%	%	
Male	73	72	
Race/Ethnicity			
White	39	32	
Black	31	32	
Hispanic	23	28	
Other	7	8	
Age			
13 or younger	9	8	
14	10	6	
15	17	18	
16	29	30	68%
17 or older	35	38	
Primary Offense*			
Property	42	42	
Violent	31	28	
Drug-Related	22	24	
Other	5	6	

*Property offenses include arson, breaking and entering, burglary, destruction of property, larceny/theft, stolen property, stolen vehicle, and trespassing. Violent offenses include assault, attempted murder, carjacking, homicide, manslaughter, robbery, sexual assault/rape, sex offense, and weapons. Drug-related crimes include drug, tobacco, and alcohol possession and sale, and DUI/DWI. Other offenses include unauthorized use of vehicles, truancy, and public peace.

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, September 2000 - Revised.

Urine Test Results

- 22% of males and 21% of females tested positive for at least one drug, primarily marijuana (Table 2).
- There were no positive drug test results for cocaine or opiates (Table 2).
- There were two youths who tested positive for amphetamines. One youth was a 17-year-old female charged with theft and the other youth was a 12-year-old male charged with felony theft. Both youths stated they were taking the prescription medication Adderall (Table 2).
- Youths 16 and over were more likely to test positive for any drug (24%) than youths under 16 (19%) (Figure 1).

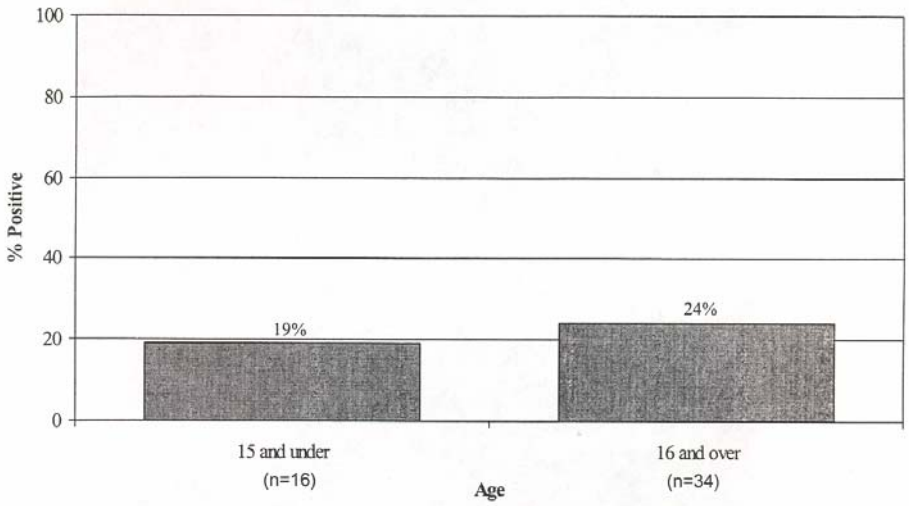
Table 2
Urine Test Results, by Gender

	Males (N=36)		Females (N=14)		Total (N=50)	
	f	%	f	%	f	%
Positive For:						
Marijuana	7	19	2	14	9	18
Cocaine	0	0	0	0	0	0
Opiates	0	0	0	0	0	0
Amphetamines	1	3	1	7	2	4
Any Drug (of 10)	8	22%	3	21%	11	22%

Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, PCP, and propoxyphene. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines, and phenylpropanolamine.

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, September 2000 - Revised.

Figure 1
Percentage Positive for Any Drug, by Age



Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, marijuana, cocaine, methadone, methaqualone, opiates, PCP, and propoxyphene. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines and phenylpropanolamine.

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, September 2000 - Revised.

INTERVIEWS WITH JUVENILE OFFENDERS

This section presents juvenile offenders' perspectives on drug use by youths in their schools, neighborhoods, and communities. The responses have been categorized using DEWS definitions: emerging drugs, primary drugs, or isolated incidents.

Emerging Drugs

An emerging drug is one that has been identified as a problem within the past six to twelve months. It is strongly connected to a specific subculture and is moving into the broader population (e.g., youth rave scene to all youths).

Ecstasy (MDMA)

Montgomery County youths seem to be more familiar with ecstasy than youths interviewed in other counties. The drug has a reputation as both a "sex drug" and a "fun drug" with no negative effects. Respondents listed several illicit drugs they believe ecstasy can be mixed with, including heroin (which makes pills more brown), cocaine, and speed. Respondents commented that they thought the trend to use ecstasy was just beginning and that they expected ecstasy to gain popularity in the coming year.

Primary Drugs

A primary drug is one that presents a problem that continues for more than one year in multiple populations and is identified as a drug of choice.

Marijuana

As in other counties, marijuana is the most widely reported and used drug among young people. Youths often cited boredom as a reason for drug use, explaining that it is better to be high than to be idle or playing video games. Many respondents compared marijuana to cigarettes. Also, they stated that it is easier to purchase marijuana than alcohol because "you need an ID for alcohol." Most respondents reported that marijuana was an acceptable drug that *everybody* uses. Respondents reported mixing marijuana with crack, cocaine, PCP, ecstasy, formaldehyde, and Raid.

Isolated Incidents

Drugs categorized as isolated incidents are those reported in a random manner. The drug may be loosely connected to a specific subculture, but no indications of increased use exist. OPUS interviewers asked the respondents, "Have you heard of any new drug identified within the past two years?" If respondents had new drug information, they were probed for details, such as cost per quantities, appearance of the drug, methods of use, age of users, and social settings of use. One or more respondents mentioned the following drugs; these are continuously monitored by OPUS interviewers.

Heroin

Although considered a primary drug based on overdose and treatment center information in many Maryland jurisdictions, youth respondents in Montgomery County reported heroin to be a "junkie" drug. One youth explained that "no one really messes with it." This youth felt that it may be because of a "needle phobia" or because it is "too pricey."

Speed

A small number of respondents mentioned speed as an available drug. Most described taking pills to stay awake through a class or all night. Several youths associated speed with enhanced sexual performance. According to one respondent, speed is not a drug that youths would seek out, but instead one that youths would use if someone offered it to them. While isolated at this time, it is noteworthy that Montgomery County youths mentioned speed with higher frequency than youths in other counties.

Powder and Crack Cocaine

A few youths reported powder cocaine use to be popular with older teenagers and young adults. Most believed that the drug was being snorted. Youths cited price as a barrier to cocaine's popularity with young people. Although few youths mentioned crack cocaine as a popular drug, many cited it as the worst drug problem, pointing out the strength of the addiction and the effects that addiction has on users, such as driving them to steal from friends to maintain their habit.

LSD (Acid)/Psychedelic Mushrooms

According to youths, acid is available in three forms in Montgomery County: liquid, geltab, and paper square. Perhaps because paper squares are easy to hide, youths seemed to think that they are available (and sometimes used) in school. "Ravers prefer the liquid acid," according to one 15-year-old male respondent. *South Parks* are reportedly the most common brand used by youths in Montgomery County. The popularity of acid may be declining, however; some youths believe ecstasy use is taking its place. Psychedelic mushrooms were mentioned as preferable to acid and some youths suggested that when they are available, they are more popular than acid. Because psychedelic mushrooms are a more natural drug, they are feared less by youths.

Comparisons Of Urinalysis Results For Males and Females Across Five OPUS Intake Sites

This section presents comparisons of the urinalysis results across five OPUS intake sites. The complete Intake Study reports for Carroll County, Baltimore County, Baltimore City, and Harford County are available from CESAR on the web at www.cesar.umd.edu or by contacting CESAR directly (301-403-8329).

- As in other counties, Montgomery County youths were more likely to test positive for marijuana than any other drug (Table 3).
- In Baltimore City and Harford County, more than one-third of the respondents tested positive for any drug compared to about one-quarter of youths tested in Carroll, Baltimore, and Montgomery Counties (Table 3).
- The range of positive tests for cocaine and opiates in Carroll County was four and three percent and in Baltimore County two percent for both; in Harford County, two percent of youths tested positive for opiates and no youths tested positive for cocaine. In Baltimore City and Montgomery Counties, no youths tested positive for cocaine or opiates (Table 3).
- The range of positive tests for amphetamines in Carroll, Baltimore, Harford, and Montgomery Counties was four to eight percent. No youths tested positive for amphetamines in Baltimore City (Table 3).

Table 3
Urine Test Results for Males and Females, by Site*

	Carroll County (N=66) Jul 1999	Baltimore County (N=147) Oct 1999	Baltimore City (N=48) Dec 1999	Harford County (N=51) Mar 2000	**Montgomery County (N=50) Mar 2000**
	%	%	%	%	%
Positive For:					
Marijuana	17	19	44	31	**18**
Cocaine	5	2	0	0	**0**
Opiates	3	2	0	2	**0**
Amphetamines	8	4	0	6	**4**
Any Drug (of 10)	27	23	44	37	**22**

Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, PCP, and propoxyphene.

*The full Intake Study Findings reported in this table are available through CESAR on the web at www.cesar.umd.edu or by contacting CESAR directly (301-403-8329).

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, September 2000-Revised.