

# Drug Early Warning System

*Working Together to Identify Emerging Drug Trends in Maryland*

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## Juvenile Offender Population Urinalysis Screening Program (OPUS)

### Intake Study

#### Findings from Frederick County



October 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](mailto:dews@cesar.umd.edu), [www.cesar.umd.edu/dews.htm](http://www.cesar.umd.edu/dews.htm).

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*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**

Sixty-four youths processed in the Frederick County Department of Juvenile Justice (DJJ) Intake Office were interviewed and asked to provide a urine specimen between April and June 2000. Twenty-eight percent of the tested juveniles were positive for a drug. Marijuana accounted for all positive tests but one. One youth tested positive for opiates and marijuana. Youths reported that marijuana is the most widely used and easily obtained drug. There was a consensus that ecstasy (MDMA) is becoming increasingly popular.

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, prior research has indicated that offender urinalysis results provide advance warning of drug epidemics in the general population.

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## **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 goals of the project 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 Frederick County between April and June 2000. A final table compares the Frederick 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. However, prior 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**

- 64 of the 65 juveniles approached (99%) agreed to be interviewed.
- 78% (32 males, 15 females) of the interviewed juveniles provided a urine specimen.<sup>1</sup>

### **Characteristics of Tested Juveniles**

- The majority of the tested juveniles were male (68%), white (83%), and 15 or older (78%) (Table 1).
- Almost half of the tested juveniles were charged with a drug-related offense (43%) (Table 1).

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<sup>1</sup>Three urine specimens were lost due to laboratory error.

**Table 1**  
**Demographic Characteristics of Interviewed and Tested Respondents<sup>2</sup>**

Characteristic	Persons interviewed (N=64)	Persons tested (N=47)
<u>Gender</u>	<u>%</u>	<u>%</u>
Male	67	68
<u>Race/Ethnicity</u>		
White	83	83
Black	11	9
Other	6	8
<u>Age</u>		
13 or younger	16	13
14	11	9
15	28	34
16	20	21
17 or older	25	23
		} 78%
<u>Primary Offense*</u>		
Drug-related	38	43
Property	33	30
Violent	17	17
Other	12	10

\* 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, October 2000-Revised.

<sup>2</sup>Three urine specimens were lost due to laboratory error.

### **Urine Test Results**

- 38% of males and 7% of females tested positive for at least one drug (Table 2).
- All but one of the positive drug test results were for marijuana (28%); one youth tested positive for marijuana and opiates (Table 2). The one youth who tested positive for marijuana and opiates was a 16-year-old male charged with theft. The youth stated he was not taking any prescription medications.
- No youths tested positive for cocaine or amphetamines (Table 2).
- The likelihood of a positive drug test increased with age. By age 17, 36% of the youths tested positive (Figure 1).



**Table 2**  
**Urine Test Results,<sup>3</sup> by Gender**

	Males (N=32)		Females (N=15)		Total (N=47)	
<u>Positive For:</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>
Marijuana	12	38	1	7	13	28
Cocaine	0	0	0	0	0	0
Opiates	1	3	0	0	1	2
Amphetamines	0	0	0	0	0	0
Any Drug (of 10)	12	38%	1	7%	13	28%

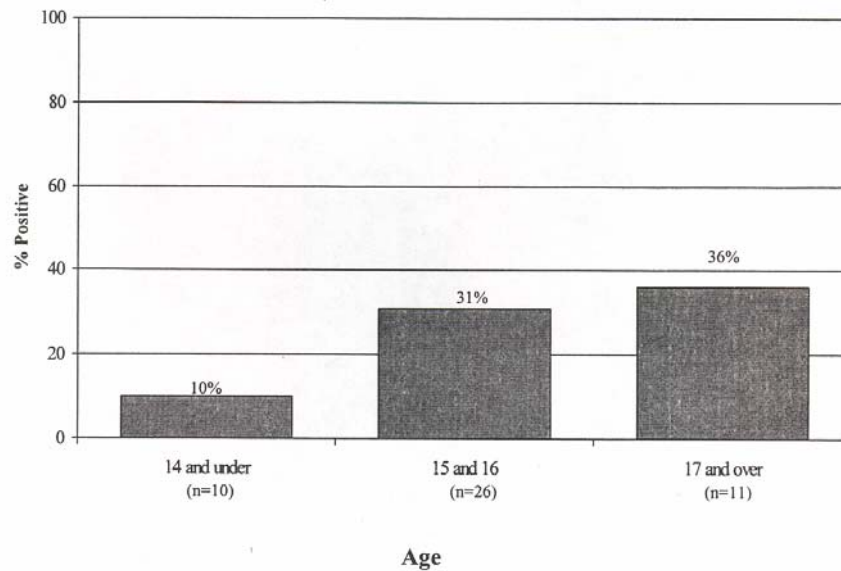
Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, PCP, and propoxyphene. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines, and phenylpropanolamine.

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

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<sup>3</sup>Three urine specimen results were missing due to laboratory error.

**Figure 1**  
**Percentage Positive for Any Drug, by Age**



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

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

## INTERVIEWS WITH JUVENILE OFFENDERS

This section presents juvenile offenders' perceptions of drug use by youths in their schools, neighborhoods, and communities. Drugs are listed in order of those most to least frequently discussed by youth.

### *Ecstasy (MDMA)*

Several youths in Frederick County reported that ecstasy has grown increasingly popular over the past few months. Youths reported that ecstasy is commonly used at house parties and is sometimes used at school. One 17-year-old male contrasted ecstasy as a 'party' drug and marijuana as a 'relaxing' drug. Several youths concurred that, "it's pure MDMA if you're lucky, but it's cut with everything—coke, heroin—it all depends on the dealer and it could be coming from anywhere."

### *Marijuana*

Marijuana is the most popular drug used by Frederick County youths. It can be obtained easily, and respondents believe it is becoming increasingly prevalent in school. While many respondents stated that marijuana is acceptable because it is safe, they also named marijuana as the major drug problem in their community.

### *Heroin*

Several respondents reported that heroin has a reputation as addictive and dangerous. Many respondents mentioned knowing people, especially females, who use heroin. One 16-year-old female said, "It is not as big as coke, but I know it's around."

### *Powder and Crack Cocaine*

Powder and crack cocaine were reported to be available. One 17-year-old male stated, "I guess powder is more popular. They use it on weed, up their nose, or alone and smoked. Crack's nasty." In contrast, another 17-year-old male stated, "Crack cocaine is easier to get than marijuana. You can buy crack in school and people are doing it in school." It is noteworthy that there were no cocaine-positives among the youths interviewed.

### *LSD (Acid)/Psychedelic Mushrooms*

According to the youths, acid is popular among white, upperclass adolescents. Psychedelic mushrooms were mentioned as well. Pricing depends on appearance—the darker the color the better. The effects are described as similar to acid, but last for a shorter amount of time.

### *Other new drugs*

When asked if there were any new drugs available in Frederick County, several youths mentioned ketamine, an animal tranquilizer, but knew little about it beyond, "It's supposed to make you feel good." A few respondents mentioned *nitrous oxide*, an inhalant, becoming increasingly popular. Ritalin and other prescription pills were considered popular at parties, but not easily available in the community.

### **Comparisons Of Urinalysis Results For Males and Females Across Six OPUS Intake Sites**

Table 3 presents comparisons of the urinalysis results across six OPUS intake sites. The complete Intake Study reports for these counties are available from CESAR on the web at [www.cesar.umd.edu](http://www.cesar.umd.edu).

- The percentage testing positive for any drug ranged from 22% in Montgomery County to 44% in Baltimore City, with Frederick County testing positive at 28% (Table 3).
- Marijuana was the most prevalent drug, ranging from 17% in Carroll County to 44% in Baltimore City (Table 3).
- Cocaine and opiates were rarely detected (Table 3).
- The percentage testing positive for amphetamines ranged from none in Baltimore City and Frederick County to 8% in Carroll County.

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

	Carroll County (N=66) July 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	Frederick County (N=47) Jun 2000
Positive For:	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>
Marijuana	17	19	44	31	18	28
Cocaine	5	2	0	0	0	0
Opiates	3	2	0	2	0	2
Amphetamines	8	4	0	6	4	0
Any Drug (of 10)	27%	23%	44%	37%	22%	28%

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](http://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, October 2000-Revised.