Drug Early Warning System

Working Together to Identify Emerging Drug Trends in Maryland

Juvenile Offender Population Urinalysis Screening Program (OPUS)

Intake Study

Findings from Prince George's County

January 2001 - Revised

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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

Sixty-one youths processed in the Prince George's County Department of Juvenile Justice (DJJ) Intake Office were interviewed and asked to provide a urine specimen between March and May 2000. Forty percent tested positive for marijuana. Youths reported that marijuana is the most widely used and easily obtained drug. One youth indicated that once youths heard about medical marijuana, they had an excuse to smoke. There was a consensus that ecstasy (MDMA) is becoming more popular among youths in the county.

OPUS is designed to provide insight into emerging drug trends among the juvenile offender population. It should be noted that these drug use patterns may not be typical of the general youth population in the profiled county. However, prior research has indicated that offender urinalysis results may provide advance warning of future 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 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 Prince George's County between March and May 2000. A final table compares the Prince George's County urine test results with results from other OPUS Intake Study sites.

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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

- 61 of the 62 juveniles approached (98%) agreed to be interviewed.
- 82% (39 males, 11 females) of the interviewed juveniles provided a urine specimen.

Characteristics of Tested Juveniles

- The majority of the tested juveniles were male (78%) and black (68%) (Table 1).
- More than three-quarters of tested youths were 15 or older (Table 1).

Table 1
Demographic Characteristics of Interviewed and Tested Respondents

Characteristics	Persons interviewed (N=61)	Persons tested (N=50)	
Gender	%	%	
Male	71	78	
Race/Ethnicity			
Black	69	68	
White	23	22	
Hispanic	8	10	
Age			
13 or younger	8	8	
14	16	14	
15	20	20	
16	33	34	} 78%
17 or older	23	24	
Primary Offense*			
Property	36	30	
Drug-Related	26	30	
Violent	17	20	
Other	21	20	

*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, January 2001 - Revised.

Urine Test Results

- Forty-nine percent of males and nine percent of females tested positive for at least one drug, primarily marijuana (Table 2).
- Forty percent of the youths tested positive for marijuana (Table 2).
- The one youth who tested positive for amphetamines was a 16-year-old male who was also positive for marijuana and PCP. He stated that he takes the prescription medication Adderall (Table 2).
- Almost half (45%) of the youths charged with a drug-related offense tested positive for marijuana (Table 3).
- The percentage of youths who tested positive for any drug increased by age. The majority of 17-year-old youths (67%) tested positive for any drug (Figure 1).

Table 2
Urine Test Results, by Gender

	Males (N=39)		Females (N=11)		Total (N=50)	
	f	%	f	%	f	%
Positive For:						
Marijuana	19	49	1	9	20	40
Cocaine	0	0	0	0	0	0
Opiates	0	0	0	0	0	0
Amphetamines	1	3	0	0	1	2
Any Drug (of 10)	19	49%	1	9%	20	40%

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, January 2001 - Revised.

Table 3
Demographic Characteristics of Respondents Who Tested Positive for Marijuana

Characteristic	% Positive for Marijuana (N=20)
	%
Gender	
Male	95
Race/Ethnicity	
Black	55
White	30
Hispanic	15
Age	
13 or younger	5
14	10
15	15
16	30
17 or older	40
Offense Charge*	
Drug-related	45
Property	20
Violent	15
Other	20

*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.

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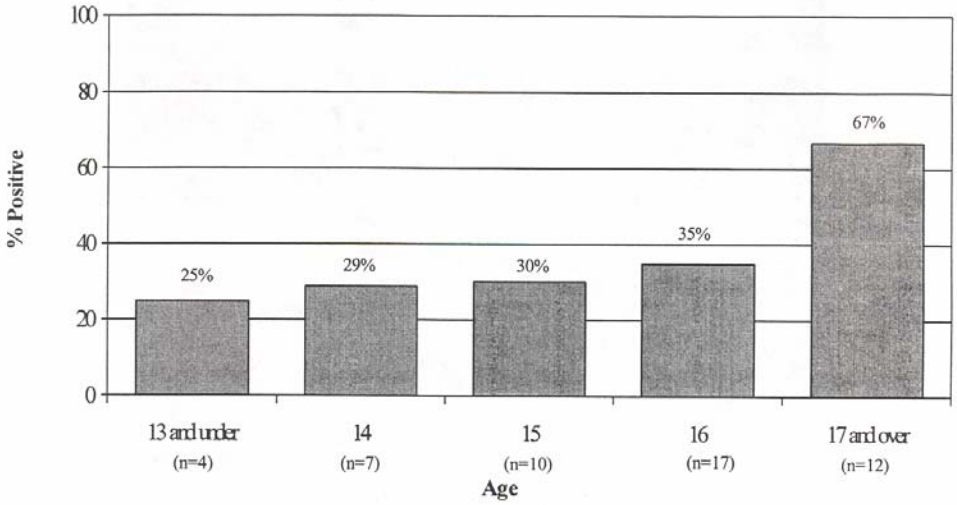
Figure 1
Percentage Testing Positive for Any Drug, by Age



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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 youths.

Marijuana

One 16-year-old male stated, "Everyone smokes it. You see bags lying around the school parking lot. When they roll it up in Philly blunts, you find tobacco all over the ground." A 17-year-old male noted the positive stories that circulate. In one case, a female classmate was said to have made honor roll after she began smoking marijuana. He also claimed that once youths heard about medical marijuana, they had an excuse to smoke. He believes that youths begin smoking as young as ten years of age. A 15-year-old male summed up his view with the following: "If you go to school, you only do weed, but the other drugs are too powerful–you can't go to school. Smoke weed to get a buzz." One 16-year-old male youth voiced a negative view of marijuana by stating, "Marijuana is the worst drug problem because it is easy to grow, easy to sell, easy to smoke, and easy to hide."

Ecstasy (MDMA)

One 15-year-old male stated, "Two years ago it was acid; now it's X." Many interviewees noted the danger associated with impure ecstasy pills. That is, as one 17-year-old male stated, "Sometimes they mix in heroin, coke, mescaline, or speed. But there's always some MDMA in the pills."

Powder and Crack Cocaine

Though several interviewees were aware of the existence of crack in their neighborhoods, they concurred that users are older and that use is not apparent by youths in school. One 16-year-old male stated, "Cocaine isn't really popular with high school kids, mostly just weed and alcohol. But I know it's around...couple of crack houses in my neighborhood." In another statement, a 16-year-old male noted that people on crack withdraw from society and their drug use is not advertised or discussed.

LSD (Acid)

Youths in Prince George's County felt that LSD was harder to get than other drugs and more popular in the summertime. A 15-year-old female stated that sugar cubes are more popular than paper or liquid acid. One sugar cube costs about $9.

Heroin

Few youths in Prince George's County mentioned heroin.

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

Table 4 presents comparisons of the urinalysis results across six OPUS intake sites studied between May 1999 and June 2000. The complete Intake Study reports for these counties are available from CESAR on the web at www.cesar.umd.edu or by contacting CESAR directly (301-403-8329).

- The percentage testing positive for a drug ranged from 22% in Montgomery County to 44% in Baltimore City, with Prince George's County testing positive at 40%.
- Among males and females, marijuana was the most prevalent drug, ranging from 17% in Carroll County to 44% in Baltimore City.
- Baltimore City and Prince George's County had the highest percentage of marijuana positive youth (44% and 40%, respectively).
- Cocaine and opiates were rarely detected.
- The percentage testing positive for amphetamines ranged from 0% in Baltimore City to 8% in Carroll County.

Table 4
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	**P.G. County (N=50) May 2000**
Positive For:	%	%	%	%	%	%
Marijuana	17	19	44	31	18	**40**
Cocaine	5	2	0	0	0	**0**
Opiates	3	2	0	2	0	**0**
Amphetamines	8	4	0	6	4	**2**
Any Drug (of 10)	27%	23%	44%	37%	22%	**40**

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).

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