

Drug Early Warning System

Working Together to Identify Emerging Drug Trends in Maryland

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DEWS News

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Maryland Adolescent Survey Highlights Ecstasy Concerns

The 2001 *Maryland Adolescent Survey* (MAS), released September 25, 2001, found that overall drug use decreased among 6th, 8th, 10th, and 12th graders from 1998 to 2001. The MAS results also suggest that Maryland's high school seniors are less likely to use alcohol than seniors nationally. Just over 47% of Maryland's 12th grade students had used alcohol in the past thirty days, while 50% of 12th graders nationally had used alcohol during that time, according to a 2000 *Monitoring the Future* (MTF) national survey.

Says Lt. Governor Kathleen Kennedy Townsend, "This report shows we are getting results. We can win this battle - one neighborhood, one classroom, and one person at a time."

While the 2001 MAS revealed mainly good news, reported past thirty day use of "designer drugs" (e.g., ecstasy) was higher than 1998 levels among 8th, 10th, and 12th graders. Of those surveyed, 2.4% of 8th graders, 4.8% of 10th graders, and 4.8% of 12th graders had used designer drugs during the past thirty days, according to the 2001 survey.

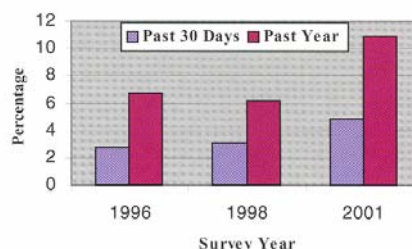
DEWS drug scan surveys had already revealed the ecstasy trend, as counties reporting ecstasy as an emerging drug increased from 2 in 1998 to 18 in 2000. The Maryland Drug Early Warning System (DEWS) began monitoring ecstasy and similar drugs in 1998.

To address ecstasy use, Maryland's Lt. Governor announced the Ecstasy Action Plan in September 2000. The Action Plan focuses on educating the public, intensifying and focusing law enforcement efforts, ensuring proper diagnosis and treatment of users, and assessing and monitoring ecstasy use in Maryland. Since the Plan's enactment, the DEWS Action Team has organized a training network for medical personnel, created a public service announcement that has aired more than 2,400 times, made an ecstasy slide that has shown in 113 theaters across the state, and helped to pass several new drug laws. The Maryland State Department of Education (MSDE) has distributed updated information to all safe and drug-free school coordinators and has integrated emerging drugs, such as ecstasy, into its prevention education program. Currently the MSDE is working collaboratively with the University of Maryland's Center for Substance Abuse Research (CESAR) to produce an educational video for middle school students.

A copy of the entire MAS is available on the Maryland State Department of Education website at www.msde.state.md.us. Additional information on ecstasy and Maryland's Ecstasy Action Plan is available at www.ecstasyfacts.org.

The Maryland Adolescent Survey is conducted by the Maryland State Department of Education. The most recent survey was concluded in spring of 2001. The survey questioned 6th, 8th, 10th, and 12th graders in Maryland public schools about their own drug use, the availability of substances, factors that affected their use (or non-use) of drugs, impaired driving, and safety issues. Eighty percent (27,704 youths) of sampled respondents provided data for the survey.

Designer Drug Use Among Maryland 12th Graders in the Past 30 Days and Past Year, by Year



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What Young Offenders Are Saying: St. Mary's and Wicomico Counties

The OPUS (Offender Population Urinalysis Screening) Intake Study interviews youths in juvenile justice facilities to obtain data on emerging trends in drug use. The following are summaries of youths' views of drug use by their peers. The drug use patterns reported here may not be typical of the general youth population in the profiled counties, but may provide an early warning of new drug use trends. Two counties are featured in each DEWS newsletter.

St. Mary's County (70 youths)

Ecstasy (MDMA):

Interviewed youths suggested that ecstasy was available and prevalent in St. Mary's County. Most youths were uncertain of the exact components of ecstasy, but they were aware of myriad forms of the drug. One 16-year-old male stated, "There's different stuff every week. Ecstasy comes in hundreds upon hundreds of prints [brands]; you don't know what you're getting." "Brands" mentioned by St. Mary's County youths included *Mitsubishis, Mercedes, White Nikes, Donald Ducks, Fishies, Pickachus, Fish Pellets, Dolphins, Rainbows, Triple Stacks, and Red, White, and Blues. Mitsubishis and Triple Stacks* were considered the strongest ecstasy pills. Youths also reported "candy flipping" or "trolling" (tripping and rolling), the practice of combining ecstasy with LSD or PCP, respectively.

Cocaine:

Powder and crack cocaine were frequently mentioned as drugs available for purchase and use. Crack cocaine was not generally considered to be a drug used by juveniles. A 17-year-old male stated that powder cocaine use was a new trend among the youth population. Several interviewed youths reported peers snorting powder cocaine and using marijuana laced with powder cocaine.

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LSD and Hallucinogens:

Many youths indicated that ecstasy and acid go hand in hand, both in terms of availability and popularity. LSD is available in paper, sugar cube, eye drop, bubble gum, and gel tab forms.

Wicomico County (39 youths)

Illegal Drug Use:

When asked to comment upon illegal drug use among their friends, one 16-year-old male stated, "They need to take heroin and cocaine off the streets because people rob, steal, and sell their bodies or their possessions to get those drugs. They need to leave marijuana and LSD on the street." Other youths agreed that drugs such as marijuana and alcohol are acceptable while crack cocaine and heroin are not. On the other hand, marijuana scares some youths because they know 8-year-olds who have used it and because they fear it will propel them toward "bigger and better highs." A number of youths claimed that they would disassociate from friends who started using any drugs. Opinions such as "horrible people think [drug use] should be legal" and "too many drugs out there are killing people" were commonly shared.

Speed:

The term "speed" was defined broadly by youths. One youth referred to speed as any pill that youths take as a "last resort drug." Another interviewee stated that "crank," synonymous with speed by his account, is popular. He said that it costs \$80 per gram and appears as a white powder with a pink shade to it. According to one 17-year-old male, "[I am] around it a lot. It's usually snorted or taken as a pill. Some drink with it and some shoot it up."

Matrix:

When asked what drugs were new, several respondents mentioned *Matrix*. The contents of the drug were unknown and youths' perceptions of its popularity varied. A 17-year-old female believed it was a mix of cough syrups and over-the-counter drugs. A 16-year-old male believed it was an "all natural type of thing in pill form." He claimed that the first time friends took the pill, they became sick. A third respondent, a 17-year-old male, thought it was heroin, coke, and ecstasy in a pill form at \$30 a pill.

Ideas or Insights?

DEWS is considering creating a new publication directed toward parents and caregivers about youth substance abuse and its prevention and treatment. If you would be interested in receiving such a publication, or if you have ideas or suggestions for topics, please contact DEWS by email at DEWS@cesar.umd.edu, fax at 301-403-8342, or phone at 877-234-DEWS.



COMMUNITY PERSPECTIVE

by Shirley Andrews, R.N., M.S., in collaboration with Linda Auerback, Founder and President of RAD

Although the DEWS program is statewide, it was originally started in response to a spike in heroin-related deaths that occurred in rural Carroll County in 1998. Since its inception, DEWS has worked cooperatively with local citizens' groups, governments, and school districts. This continued relationship has enabled both DEWS and local groups to work more effectively in implementing proactive drug education and prevention programs. In the following essay a community activist tells how the consequences of drug abuse in her own family led to her involvement with local and state politics.

On June 5, 1996, my life changed forever. In the early dawn of that morning, upon entering my son's room, I found his still, lifeless body. An autopsy report indicated the cause of his death was a heroin overdose. My son Scott would have turned seventeen years old two weeks later, on June 19.

In reflecting back over my son's life, I remember a typical teenager in middle and high school. He wrestled and played football in ninth and tenth grade. He had a part-time job at a local restaurant and conference center and was considering a career in culinary arts and restaurant management.

It was in the latter part of his sophomore year in high school that I began to notice changes—increased mood swings and periods of depression. He began weekly counseling and started taking an anti-depressant in addition to medication taken for ADHD. In spite of the medication and weekly counseling, I continued to see adverse subtle changes in Scott—he was sleeping more than usual, he defied the rules at home and in school, and he lacked motivation for doing anything. As time progressed these symptoms became even more exaggerated, and I became concerned that there were other things going on in my son's life. A drug screen positive for opiates and cocaine confirmed my suspicions.

Within the next few days Scott entered a substance abuse treatment program. He was placed in-patient for two days and then into an intensive outpatient program. Unfortunately, Scott died after being in the program for only eight weeks.

In 1996 Scott's death was viewed as an isolated incident in rural Carroll County; however, I continued to hear about my son's friends being hooked on heroin. It was not until January 1998, when another high school student died of a heroin overdose, that students and parents alike became concerned.

One voice alone cannot get results. So, after talking by phone and alerting the media, concerned parents rallied at the State Attorney's Office. Our group was challenged to turn its "mob of protestors" into a coalition of level-headed activists who could become catalysts for change. We named our group Residents Attacking Drugs (RAD) and organized to educate students and other parents about drug use in our community.

Within two weeks, our group was asked to testify before the judiciary committee of the House of Delegates. The following year a bill passed to include the sale of narcotics as a reportable offense to school superintendents. Next, RAD played a major role in organizing a countywide concert for our youths, uniting 1,700 people for the purposes of raising funds and increasing drug abuse awareness.

With the funds we gathered, we made an educational video, *Heroin Kills*, about a young man who yields to pressure to snort heroin. This venture was truly cooperative, and we had the support of local school systems, treatment and prevention agencies, law enforcement agencies, a local funeral home, and the Medical Examiner's Office. To date, 1,800 copies of the video are being used in 43 states and six countries. In the fall of 2000, a public service announcement was produced, and it has aired in Maryland, Pennsylvania, and Maine. Most recently, our group created an MTV-style music video; it is now airing in Baltimore City and Carroll County.

RAD continues to use every contact and opportunity to educate our community. Our motto is "a community working together saves lives," and our symbol of the starfish means "each one matters."

For more information on the activities of RAD or DEWS, please see the websites www.heroinkills.com or www.cesar.umd.edu/dews.htm



Yearly DEWS Action Team Meeting Held

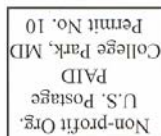
On October 25, the DEWS Action Team met at the University of Maryland's Inn and Conference Center to review the year's accomplishments, discuss drug use trends, and define new policy objectives. The DEWS Drug Action Plan was revised and will be released soon. Among the highlights of the current Ecstasy Action Plan are:

- **Legislative advances:** The legislature passed significant drug-related bills, including HB 37, the drug analogues bill, and HB 192, which stiffens penalties for ecstasy use and distribution.
- **Prevention strategies:** The DEWS team mailed back-to-school packages to 382 prevention specialists and successfully "got the word out" through movie slide shows and public service announcements.
- **Treatment advances:** The Maryland Poison Center began training healthcare workers about ecstasy effects and the diagnosis and care of those who have taken it.
- **Research Progress:** The 2001 Drug Scan is well underway. OPUS research has already been completed in 16 counties and is ongoing in 6 other counties.

Future actions include developing educational programs for parents, creating activities for middle and high school students, encouraging continuing professional development among substance abuse professionals, and strengthening relationships with crime labs and other criminal justice agencies.



From left to right: Eric Wish of the Center for Substance Abuse Research (CESAR), Robert Penland of the Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA), Erin Artigiani of CESAR, Lynn Widdowson of the Maryland State Department of Education (MSDE), and Lts. Vernon Conaway and Randy Bounds of the Maryland Department of State Police (MSP) were among the presenters at this year's DEWS Action Team Meeting.



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