

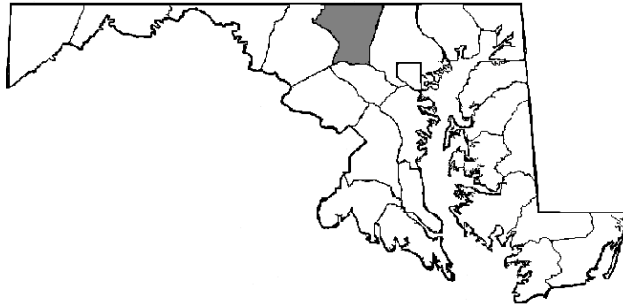
Drug Early Warning System

Working Together to Identify Emerging Drug Trends in Maryland

Juvenile Offender Population Urinalysis Screening Program (OPUS)

Intake Study

Findings from Carroll County 02



April 2002

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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

Fifty-three youths processed in the Carroll County Department of Juvenile Justice (DJJ) Intake Office were interviewed and asked to provide a urine specimen between January and February 2002. Twelve percent of the 50 tested juveniles were positive for at least one drug, primarily marijuana. The youths reported that marijuana was the most easily obtainable and popular drug in Carroll County. Youths also reported that in addition to powder or crack cocaine, marijuana can also be laced with LSD, PCP, heroin, and ecstasy. There was a consensus that ecstasy (MDMA) was becoming an increasingly popular drug. It was reported that users often take ecstasy alongside ketamine, LSD, or marijuana.

Noteworthy statements made by interviewed youths were:

- “Everybody drinks alcohol, mostly everybody smokes weed, cocaine is starting to be okay, everybody hates heroin.” (15-year-old female)
- About ecstasy’s composition: “Some are really dopey (have more heroin), some are speedy or cokey, and some are trippy.” (18-year-old female)

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 those of the general youth population. However, prior research has indicated that juvenile offender urinalysis results may 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 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 Carroll County between January and February 2002. The last two figures offer comparisons of Carroll County urinalysis test results collected between May-July 1999 with those collected in January-February 2002 and of the percentage of juveniles testing positive for marijuana, by County Intake Site and data collection period.

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 those of the general youth population. However, prior research has indicated that offender urinalysis results may 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 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, opiates, phencyclidine (PCP), propoxyphene, and MDMA. MDMA has been substituted for methaqualone in the any drug (of 10) positive category as no positives for methaqualone were ever detected in OPUS studies.
- A candy bar was offered to respondents as a reward for participation.

FINDINGS

Response Rates

- 53 of the 54 juveniles approached (98%) agreed to be interviewed.
- 96% (42 males, 9 females) of the interviewed juveniles provided a urine specimen.

Characteristics of Tested Juveniles

- The majority of the tested juveniles were male (82%), white (92%), and 17 or older (47%) (Table 1).
- 39% were charged with property offenses, 18% with drug-related offenses, 12% with violent offenses, and 12% with violation of probation (Table 1).

Table 1
Demographic Characteristics of Interviewed and Tested Respondents

Characteristics	Persons interviewed (N=53)	Persons tested ¹ (N=51)
<u>Gender</u>	<u>%</u>	<u>%</u>
Male	81	82
<u>Race/Ethnicity</u>		
White	92	92
Black	8	8
<u>Age</u>		
13 or younger	8	8
14	11	12
15	15	12
16	21	21
17 or older	45	47
<u>Primary Offense*</u>		
Property	40	39
Drug-related	17	18
Violent	13	12
Violation of Probation	11	12
Status Offense	8	8
Other	11	12

*Property offenses include arson, breaking and entering, burglary, destruction of property, larceny/theft, stolen property, and stolen vehicle. Violent offenses include assault, attempted murder, carjacking, homicide, manslaughter, robbery, sexual assault/rape, and sex offense. Drug-related crimes include drug possession and sale, tobacco possession, and DUI/DWI. Status offenses include runaway, truancy, possession of alcohol, curfew, failed placement, and violation of home supervision. Other offenses include weapons, resisting arrest, traffic, trespassing, and failure to appear.

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, April 2002.

¹ Fifty-one of the interviewed juveniles provided a urine specimen. Due to insufficient quantity, one specimen was not tested.

Urinalysis Test Results

- 12% of males and 13% of females tested positive for at least one drug, primarily marijuana (Table 2).
- 8% of all youths tested positive for marijuana (Table 2).
- Two youths tested positive for amphetamines. One was a 15-year-old male charged with violation of probation. He stated that he was taking the prescription medications Adderall, Depakote, and Risperdal. The second youth was a 17-year-old male charged with malicious destruction of property. He stated that he was taking the prescription medications Adderall, Risperdal, Tegretal, and Zoloft.
- One youth tested positive for propoxyphene. The youth was a 17-year-old male charged with burglary and felony theft. The youth was also positive for marijuana and stated he was not taking any prescription medications.
- No youths 14 or under tested positive for any drug. Youths ages 15 and 16 were most likely to test positive for a drug (Figure 1).

Table 2
Urinalysis Test Results,* by Gender

	Males (N=42)		Females (N=8)		Total (N=50) ²	
<u>Positive For:</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>
Marijuana	3	7	1	13	4	8
Cocaine	0	0	0	0	0	0
Opiates	0	0	0	0	0	0
Amphetamines	2	5	0	0	2	4
Any Drug (of 10)	5	12	1	13	6	12

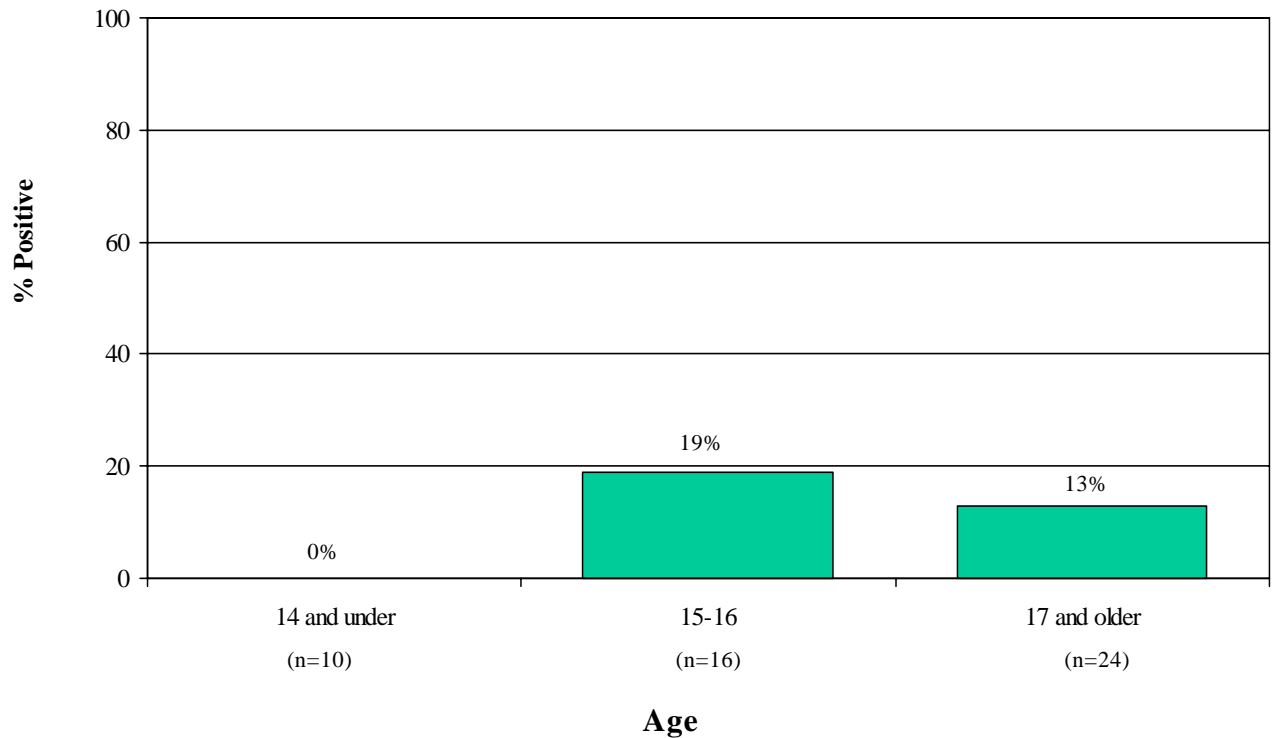
Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, opiates, phencyclidine (PCP), propoxyphene, and MDMA. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines, phenylpropanolamine, and MDMA.

*One respondent tested positive for propoxyphene. No one tested positive for barbiturates, benzodiazepines, methadone, methaqualone, or PCP.

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, April 2002.

² Fifty-one of the interviewed juveniles provided a urine specimen. Due to insufficient quantity, one specimen was not tested.

Figure 1
Percentage Positive for Any Drug, by Age



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

Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, April 2002.

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

Marijuana was reported to be the most popular and most commonly used drug in Carroll County. Youths identified different kinds of marijuana available: *Schwag*, considered by youths to be the least potent, was thought to be the most difficult to find. Youths defined *Middies* (or *middle grade*) as a second type and *nuggets* (also referred to as *Kind Bud*) as the third and most potent type of marijuana. Several types of *nuggets* considered available in the county included *Blueberry*, *Hydro*, *Jamaican Red Hair*, *Skunk*, *White Widow*, and *Chronic* (which is marijuana laced with either powder or crack cocaine). Youths reported that in addition to powder or crack cocaine, marijuana may also be laced with LSD, PCP, heroin, and ecstasy. Opium and hash were also mentioned as being commonly smoked on top of marijuana. Many of the youths stated that the differences between the types of marijuana are in the taste, the potency, the effect, and the price. An 18-year-old male stated that differences are a result of plants being "cross-breeded."

Ecstasy (MDMA)

Ecstasy was reported to be a popular drug and to be among the newer drugs used by juveniles in Carroll County. The majority of interviewed youths were unsure of ecstasy's composition. However, most youths who indicated any knowledge believed it included heroin and cocaine, among other things. One 18-year-old female stated, "Some are really dopey (have more heroin), some are speedy or cokey, and some are trippy." A 16-year-old male expressed his opinion about the different experiences that males and females have while doing ecstasy: "On it, dudes have a great time. Girls freak out—their hormones are different." It was reported that users often take ecstasy alongside ketamine, LSD, or marijuana. An 18-year-old male stated, "Users smoke marijuana at the beginning of their 'roll' to stop grinding their teeth—to relax."

Heroin

Most interviewed youths believed that Carroll County continues to have a problem with heroin use. Youths reported that heroin was available in pill or powder form and that it can be injected (after being melted down), snorted, or smoked (on top of marijuana). A couple of youths reported that when users mixed heroin with either powder or crack cocaine, it was referred to as "speed balling." An 18-year-old male stated, "[if it is] grayish-brown in color, not cut with baby powder, that's the good [stuff]." Most youths believed that it was easy to identify heroin users by the way they look and by their apathetic attitude toward life. A 17-year-old male summed up the way a majority of youths look at heroin users by saying, "[They're] people that don't do anything—burnouts, skaters."

LSD (Acid)/ Hallucinogens

Juveniles reported LSD to be available in several forms: gel tabs, blotter paper, liquid drops, and sugar cubes. A 17-year-old male reported that users put acid “in eyes, mouth, on elbows and hands.” He also stated that acid “is the hardest drug to find. One person happens to run into it (every now and then).” Youths reported that it was common for users to smoke marijuana alongside taking acid or to mix acid with ecstasy (known as “candy-flipping”). An 18-year-old male stated that psychedelic mushrooms were “available in the springtime when the cow manure is right.” A 17-year-old male stated that “there are differences in coloration, some ‘*shrooms* have different effects—more body or more visual. Can eat them, or bake ‘em in stuff.” Several youths reported smoking marijuana alongside taking psychedelic mushrooms.

Powder and Crack Cocaine

According to youths, powder cocaine users are sniffing, smoking (on top of marijuana), or shooting the drug. An 18-year-old female stated that some users “cook it down with vinegar and shoot it.” A 17-year-old male stated, “Users usually snort it; [they] smoke it, too, but that’s a waste of time and money.” This youth claimed that smoking minimized its effects, and therefore, “wasted” the drug. The most frequently identified slang terms used for powder cocaine were “yay,” or “yay-yo.” Youths also reported that crack cocaine was smoked alone or mixed with marijuana and smoked. Most youths who had knowledge of crack cocaine referred to it as “ready rock.”

Prescription Drugs

According to respondents, OxyContin is the newest drug available and is popular among youths. An 18-year-old male stated, “Heroin addicts would prefer OxyContin over heroin because it’s a more pure form—cleaner.” Many youths believed that users are eating, snorting, and using the drug intravenously. A 16-year-old male stated that OxyContin is “a 12-14 hour high; every four hours a different shell of the drug breaks apart. Users swallow the pill—will kill [themselves] if they try to snort. Users smoke marijuana or drink alcohol with it. If you smoke marijuana with it you will throw up and won’t overdose. Most drug addicts can make themselves vomit, kind of like a self-awareness [mechanism].” A 17-year-old male stated, “Users snort it, smoke alongside use, maybe drink alcohol. Get over the internet, or from others; *MC-Contin* is given to heroin addicts just out of detox, and they sell them so they can get dope.” A 16-year-old female stated that OxyContin was “the most addictive drug.”

According to youths, Percocet, Valium, Ritalin, Adderall, Xanax, and hydrocodeine are available and generally sold for about \$5 per pill. A 17-year-old male stated that it was more popular to “parachute” (swallow a tissue containing the powder of prescription pills) because snorting “burns the nose.” Most youths believed that prescription pills were obtained from friends or family members who were prescribed these drugs. Many respondents agreed alcohol and marijuana were used alongside prescription pills.

Other drug trends

Ketamine (known as *Special K*) was reported by several youths to be available in Carroll County. It was reported that users usually snort the drug and often smoke marijuana while using it. Speed was another drug mentioned by youths as being available in the county. However, a 17-year-old male stated, "Nobody but truckers uses speed." Several youths also reported that crystal methamphetamine (known as "ice") was a popular drug among their peers and that users of this drug generally smoked it. A 16-year-old male commented on its effects: "One hit will get [users] high, two hits and you will be stoned off your ass, three hits will kill you." This youth also stated, "Most people don't even know about it, though." Few youths reported the use of inhalants. One 15-year-old male youth stated, "[It is] stupid; [you] can die if you take too much."

Youths' opinions of the problems associated with drugs

When juveniles were asked whether they believed Carroll County had a drug problem, there gave a variety of responses. Many of the youths who believed there was definitely a problem said the problems tended to involve heroin, alcohol, and marijuana. A 17-year-old male stated, "From what I hear by word of mouth there's a problem in North Carroll." A large number of youths believed there was little anyone could do to improve the problems. A 17-year-old male stated, "Can't stop people from doing [drugs]. If [someone is] dependent on it they will find a way." Youths tended to agree that more entertainment options were needed. A 16-year-old female stated, "There's nothing to do [in Carroll County]." An 18-year-old female offered a suggestion for solving some of the problems, "Parents need to keep a tight watch on children and know background on what to look for; parents just don't know the signs."

A 15-year-old female stated, "Everybody drinks alcohol, mostly everybody smokes weed, cocaine is starting to be okay, everybody hates heroin." Respondents reported that different substances were popular in different regions of the county. An 18-year-old male stated, "In South Carroll there is alcohol, in North Carroll and Westminster heroin is popular, in Liberty and Liganore marijuana is the most popular." Juveniles differed about the presence of drugs in school. Those youths who believed drugs are less likely to be in school today than they were in the past cite that there are frequent drug searches, with police dogs searching lockers and cars, while students are confined to their classrooms. "The easiest way to get caught with drugs would be to bring drugs into schools to use, buy, or sell them. But, it would also be the easiest way to make money" (16-year-old male).

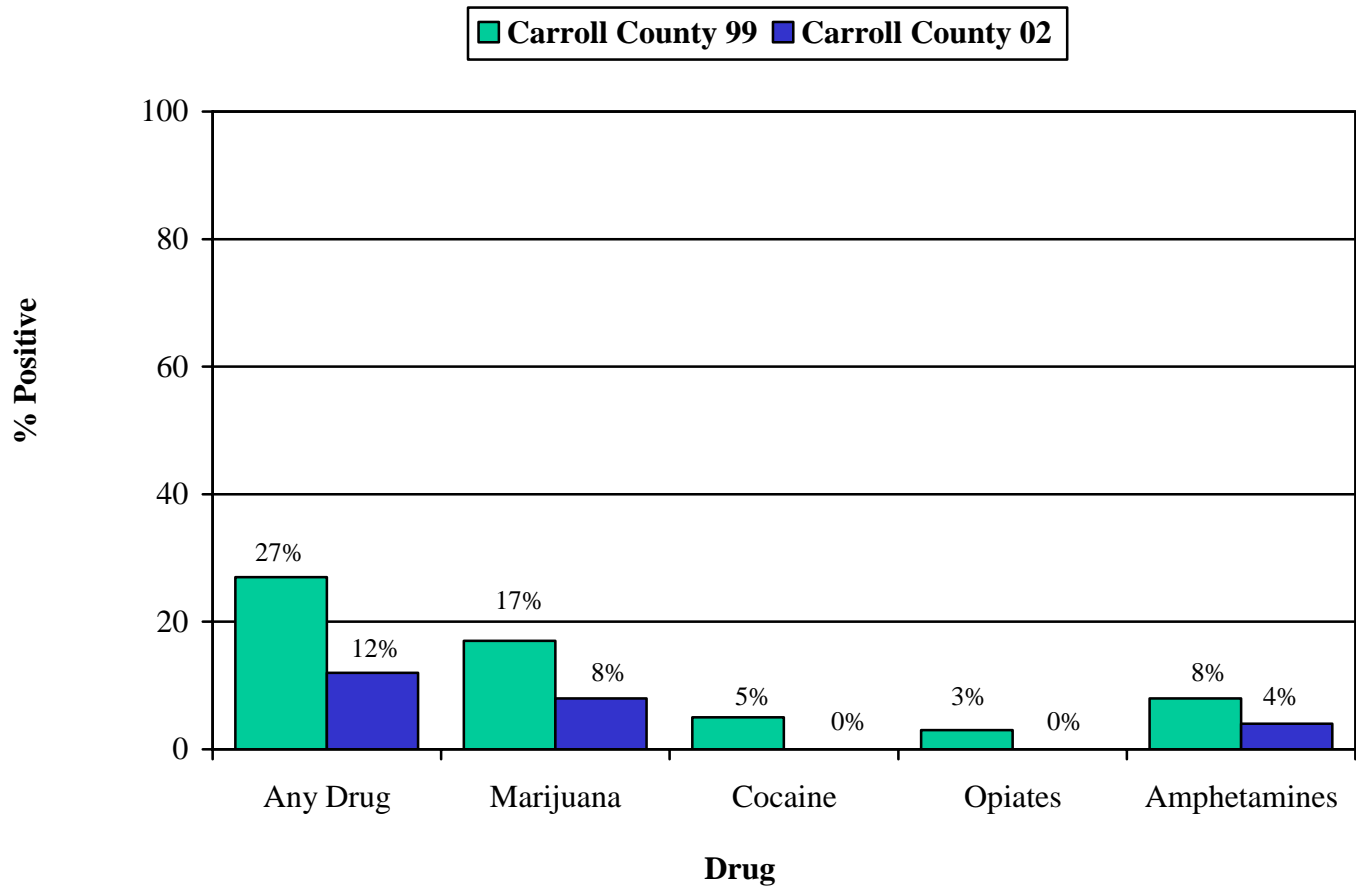
According to youths, juveniles use drugs to feel good physically and because fun experiences are perceived to follow drug use. Youth also cite being able to forget about stress and problems in their lives through using drugs. An 18-year-old male stated, "If nothing is going right for someone and they use drugs, nothing will still be going right, but at least they think they feel better." Youths often use drugs to fit in, or because they "think it's cool" (16-year-old female). Curiosity, dependency, and boredom were also cited as reasons for why juveniles use drugs.

Comparisons Of Urinalysis Results For Males and Females Across Intake Sites and Two Data Collection Periods in Carroll County

Figure 2 presents comparisons of the urinalysis results across two OPUS Intake data collection periods in Carroll County, May 1999 (Carroll County 99) and February 2002 (Carroll County 02). Figure 3 presents comparisons of the urinalysis results for marijuana across OPUS Intake sites studied between May 1999 and February 2002. The complete Intake Study reports for all OPUS counties are available from CESAR on the web at www.cesar.umd.edu.

- The percentage of youths testing positive for any drug decreased from 27% to 12% from Carroll County 99 to Carroll County 02 (Figure 2).
- Youths rarely tested positive for cocaine and opiates in Carroll County 99, and there were no positive test results for cocaine or opiates in Carroll County 02 (Figure 2).
- Marijuana was the most prevalent drug, 17% positive in 99 and 8% in 02 (Figure 2).
- Marijuana positives for all county collection periods ranged from 8% in Carroll County 02 to 44% in Baltimore City (Figure 3).

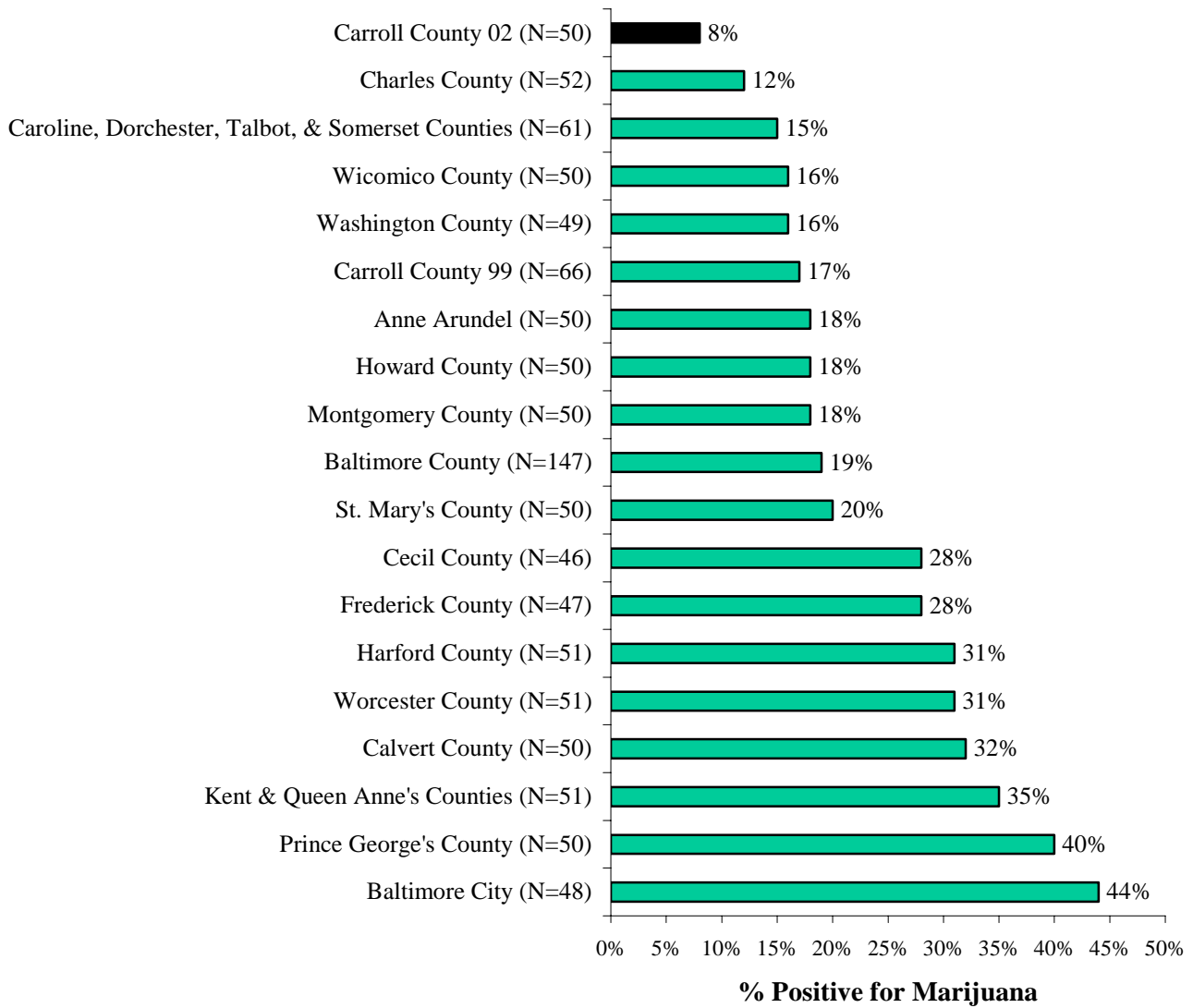
Figure 2
Percentage Positive for Drug, by Carroll County Data Collection Period



Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, opiates, phencyclidine(PCP), propoxyphene, and MDMA. The amphetamine-positive tests were confirmed for amphetamines, methamphetamines, phenylpropanolamine, and MDMA. MDMA has been substituted for methaqualone in the any drug (of 10) positive category as no positives for methaqualone were ever detected.

SOURCE: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, April 2002.

Figure 3
Percentage of Juveniles Testing Positive for Marijuana,
by County Intake Site Collection



Source: Center for Substance Abuse Research (CESAR), University of Maryland, College Park, Juvenile OPUS Intake Study Report, April 2002.