

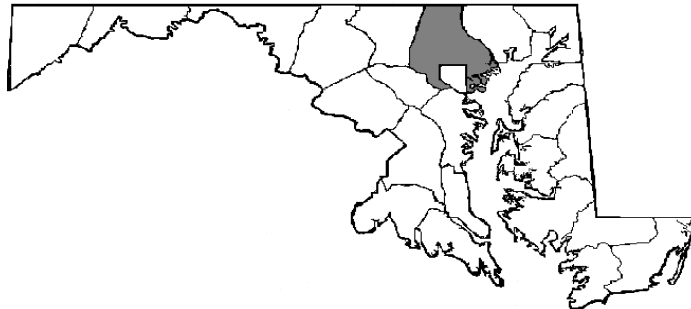
Drug **E**arly **W**arning **S**ystem

Working Together to Identify Emerging Drug Trends in Maryland

Juvenile Offender Population Urinalysis Screening Program (OPUS)

Intake Study

Findings from Baltimore County



September 2002

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ABSTRACT

Forty-one youths processed in the Baltimore County Department of Juvenile Justice (DJJ) Intake Office were interviewed between May and August, 2002, and asked to provide a urine specimen. Fifteen percent of the processed juveniles tested positive for marijuana only (Table 2). Fourteen percent of youths age 14 and under tested positive for any drug, in comparison to 18% of those 15 and over (Figure 1). Among juveniles in Baltimore County there was a consensus that marijuana was the most popular and the most commonly used drug throughout their communities. And, although seemingly popular, the majority of interviewed youths reported being uninformed about ecstasy.

Noteworthy statements made by interviewed youths were:

- “Yos smoke to try and look hard, others smoke because they need it—fiend for (crave) it, and others smoke to have fun—to feel at ease.” (16-year-old male)
- Youths reported that they believed ecstasy to be a “sex drug” (14-year-old male); a drug that “makes you horny” (14-year-old female); a drug that “gets hormones raging” (15-year-old female); and, a drug that “people get addicted to because it affects the pleasure centers of the brain” (17-year-old male).

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)

I. PROJECT OVERVIEW

Juvenile OPUS is one component of Maryland's Drug Early Warning System (DEWS) program, and 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 the DJJ county offices. Once a year the Detention Study obtains urine specimens only from youths newly admitted to the DJJ's five detention facilities.

This report presents results from the Intake Study conducted in Baltimore County between May and August, 2002. Figure 2 offers a comparison of Baltimore County urinalysis test results collected between August and October, 1999 with those collected between May and August, 2002.

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II. 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 schools, neighborhoods, and 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 MDMA.
- A candy bar was offered to respondents as an incentive for participation.

III. FINDINGS

Response Rates

- Forty-one of the 42 juveniles approached (98%) agreed to be interviewed.
- Eighty-one percent (23 males, 10 females) of the interviewed juveniles provided a urine specimen.

Characteristics of Tested Juveniles

- Forty-six percent of the tested juveniles were 13 and under; 9% were 17 and older. The majority of the tested youths were male (70%) (Table 1).
- Sixty-four percent were charged with a property offense, 15% with a personal offense, and 6% with a drug-related offense (Table 1).

Urinalysis Test Results

- The only drug for which any juvenile tested positive in Baltimore County was marijuana. Fifteen percent of the 33 tested youths were positive for marijuana (Table 2).

Table 1. Demographic Characteristics of Interviewed and Tested Respondents

Characteristics	Persons Interviewed (n=41)	Persons Tested (n=33)
<u>Gender</u>	<u>%</u>	<u>%</u>
Male	66	70
<u>Race/Ethnicity</u>		
White	54	49
Black	44	48
Hispanic	2	3
<u>Age</u>		
13 or younger	41	46
14	24	21
15	15	15
16	10	9
17 or older	10	9
<u>Primary Offense*</u>		
Property	56	64
Personal	20	15
Drug-related	7	6
Status	0	0
Miscellaneous	17	15

*Personal offenses include murder, assault, robbery, domestic assault, sexual assault/rape, sex offenses, kidnapping, threat to person, and reckless endangerment. Property offenses include arson, burglary, breaking and entering, larceny/theft, stolen property, stolen vehicle, fraud, and threat to property. Drug-related offenses include drug, tobacco, and alcohol possession and sale, DUI/DWI, under the influence, drug manufacturing, and drug paraphernalia. Status offenses include truancy, CINS, home detention, run away, possession of alcohol (citation), curfew, tobacco violation, failed placement, and school suspension. Miscellaneous offenses include weapons, probation/parole, warrant, resisting arrest, public peace/disorderly, trespassing, prostitution, manufacturing explosives, telephone/computer misuse, and traffic violations.

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

Table 2. Urinalysis Test Results, by Gender

	Males (n=23)		Females (n=10)		Total (n=33)	
<u>Positive For:</u>	<u>F</u>	<u>%</u>	<u>f</u>	<u>%</u>	<u>f</u>	<u>%</u>
Marijuana	2	9	3	30	5	15
Cocaine	0	0	0	0	0	0
Opiates	0	0	0	0	0	0
Amphetamines	0	0	0	0	0	0
Any Drug (of 10)	2	9	3	30	5	15

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 MDMA.

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

IV. INTERVIEWS WITH JUVENILE OFFENDERS

The following section presents juvenile offenders' perceptions of drug use by their peers in schools, neighborhoods, and communities. Drugs are listed in descending order of the number of youths who discussed them.

Marijuana

Among juveniles in Baltimore County there was a consensus that marijuana was the most popular and the most commonly used drug throughout their communities. When asked to estimate the average age individuals began experimenting with marijuana, several respondents stated experimenters may be as young as 10. Most youths, however, reported that their peers began using marijuana around age 12.

Several names for different types of marijuana were reported. Youths identified *Kind Bud*, *Hydro* (which was identified as marijuana grown in water), *Purple Haze*, and *Skunk* as being more potent and more expensive than *Regular* marijuana. One youth explained that, aside from differences in potency, drug prices are also dependent upon whom and where the drugs are obtained.

Youths reported a variety of drugs that could be mixed or laced with marijuana. *Chronic* was identified as marijuana laced with either powder or crack cocaine, while *Boat* was identified as marijuana laced with embalming fluid. Youths reported that marijuana may be mixed or laced with a variety of drugs. A 17-year-old male reported that one boy has dipped marijuana in gasoline.

Ecstasy (MDMA)

The majority of interviewed youths in Baltimore County reported being uninformed regarding information about ecstasy. They reported that they believed ecstasy to be a "sex drug" (14-year-old male); a drug that "makes you horny" (14-year-old female); a drug that "gets hormones raging" (15-year-old female); and a drug that "people get addicted to because it affects the pleasure centers of the brain" (17-year-old male).

Regarding ecstasy's composition, one 15-year-old male stated, "I don't know half the stuff in [ecstasy], some of it is MDMA, heroin, maybe cocaine." This youth also reported that "people who go to raves use it every night, other people only use occasionally." When asked how users take ecstasy, it was reported that one might swallow or sniff the drug.

Heroin

Few youths reported heroin to be a popular drug among the juveniles in Baltimore County. It was believed that use was more common among older members of their communities. A 17-year-old male stated, "Older people start moving to heroin because crack doesn't get 'em high anymore." Reported methods of heroin ingestion included shooting and snorting.

LSD (Acid)/Hallucinogens

Acid was reported to be available in the form of gel tabs, paper, or sugar cubes, which were reported to have 4-5 drops of acid on them. A 15-year-old male reported that a new trend was to “put acid in [one’s] eyes.” Interviewees revealed that alcohol is commonly used with LSD.

A 14-year-old female stated that among her friends psychedelic mushrooms (‘shrooms) are also called “acid.” She stated that this substance “tastes like sunflower seeds...it’s green, looks like [marijuana] all clumped together.” When asked about the difference between this form of acid and the paper form of acid the same girl stated, “Both make you trip, but in different ways.” In contrast, when a 15-year-old male was asked how shrooms were different than acid, he stated that when using psychedelic mushrooms “stuff melts.”

Powder and Crack Cocaine

According to Baltimore County youths, snorting powder cocaine is the most common form of ingestion. It was reported that users of crack cocaine, smoked or laced it with marijuana. None of the interviewed juveniles had any knowledge of other drugs cocaine users may use with it. Respondents also reported that users tended to be older juveniles, those in their late teen years.

Prescription Drugs

Illicit prescription drug use was found to be popular in Baltimore County. Ritalin, Valium, Codeine, Percocet, Xanax, and OxyContin were all mentioned on separate occasions as being available. Most youths believed that prescription pills were easily obtained from friends or older members of their communities who sell their prescriptions.

Some additional information was reported by a 15-year-old male who stated, “You can get THC pills from people with cancer, for \$15 per hit.” This youth also believed that “some users will smoke [marijuana] while taking prescription pills, but don’t drink because it will mess up your liver.” However, other youths reported it is not uncommon to see users drink alcohol while using prescription drugs. Although most youths reported that users swallow prescription pills, a 13-year-old female reported that a new trend among users was to “smush pills and put them in water and drink it.”

Other Drug Trends

A few respondents reported that before smoking a cigarette, some users might dip the cigarette in embalming fluid or PCP. Hash was considered to be available by a few youths. Those who had knowledge of hash reported that users smoke the drug or may eat brownies containing hash. A couple of respondents also reported that ketamine, known as *Special K*, may be available in Baltimore County.

Further Reflections on Substance Abuse

Most Baltimore County youths believed that drugs, particularly marijuana, heroin, and crack cocaine, posed problems in their communities. There was a consensus among juveniles that drugs were available to those who desire them, and that anywhere you go one can see drugs or users on the street. Some youths suggested that increasing law enforcement, treatment programs, and after school programs may help to remedy some of the problems related to substance abuse.

Juveniles had mixed opinions about how acceptable they believed drugs to be. However, the general feeling among respondents who claimed to use drugs was that marijuana and alcohol use were more acceptable than heroin or crack cocaine. Youths who felt that no drugs were acceptable, maintained the ideas that drugs are unhealthy, uncool, or make users stupid.

There was agreement among interviewed juveniles regarding the presence of drugs in schools. Youths reported that marijuana, ecstasy, and acid were available for sale at school, and were also used at school. Marijuana was reportedly smoked in the school's bathroom, or in the parking lot. A 15-year-old female stated, "Nobody snitches, and teachers don't know because it already smells like smoke."

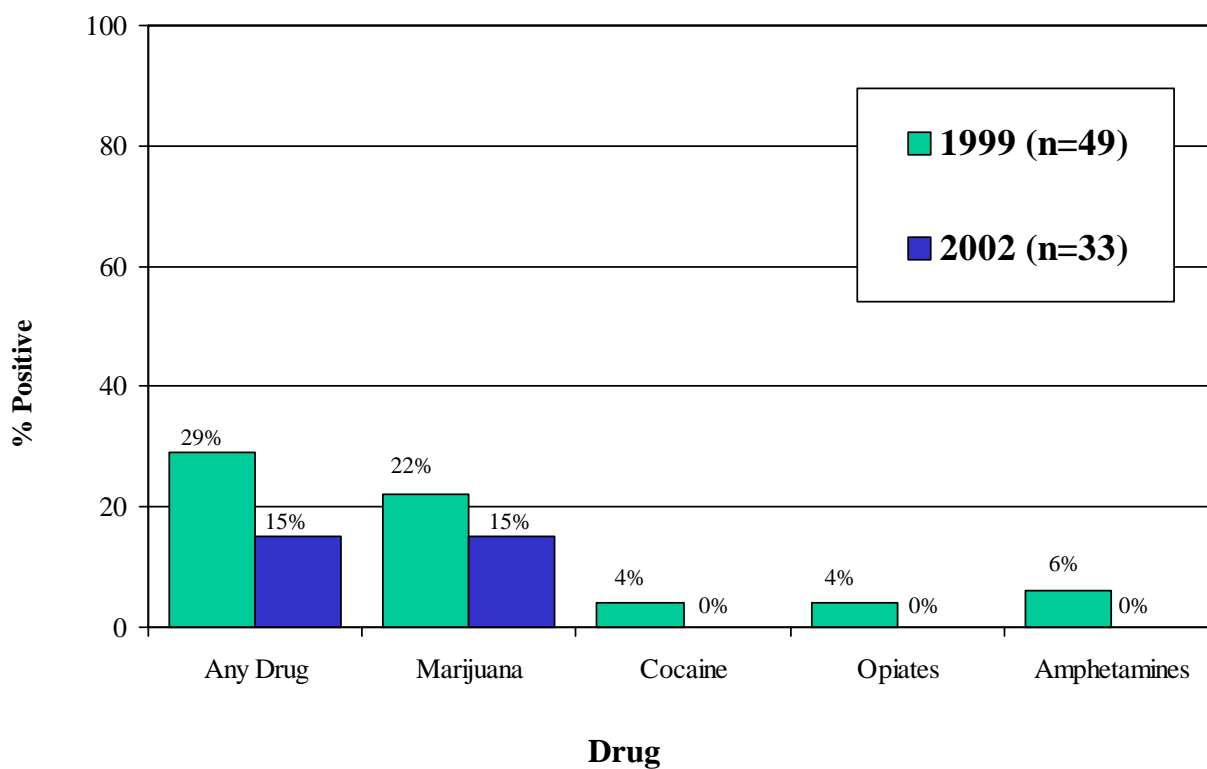
Youths reported a variety of factors contributing to drug use. A 16-year-old male stated, "Yos smoke to try and look hard, others smoke because they need it—fiend (crave) for it, and others smoke to have fun—to feel at ease." A 15-year-old female stated, "People take drugs to feel in a certain mood. To feel antsy they will take ecstasy, to laugh they will take acid." A 17-year-old male stated, "People take drugs because they have a genetic inclination and because of environmental factors...misguided people from areas where it's readily available."

V. COMPARISONS OF URINALYSIS RESULTS FOR MALES AND FEMALES ACROSS TWO DATA COLLECTION PERIODS IN BALTIMORE COUNTY (Figure 1)

Figure 1 presents comparisons of the urinalysis results across two OPUS Intake data collection periods in Baltimore County, August to October, 1999 (Baltimore County 1999), and May to August, 2002 (Baltimore County 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, in Baltimore County, decreased almost half from 29% in 1999, to 15% in 2002.
- Youths rarely tested positive for cocaine and opiates.
- Marijuana is the most prevalent drug. Twenty-two percent of the youths assessed tested positive in 1999, while 15% tested positive in 2002.

Figure 1. Percentage Positive for Drugs in Baltimore County Data in 1999 and 2002



Note: Urine specimens were analyzed 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 MDMA.

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