

Drug Early Warning System

Working together to Identify and Respond to Emerging Drug Trends In Maryland

Juvenile Offender Population Urinalysis Screening Program (OPUS)

Annual Report, October 2002

Prepared by:

Jill D. Choyka, Sarah Canham, Erin Artigiani, and Eric D. Wish

“If you go to school, you only do weed. The other drugs are too powerful—you can’t go to school. Smoke weed to get a buzz.”

(15-year-old male, Prince George’s County)

“If [MDMA] didn’t put holes in your head, it would be the best drug in the world.” (17-year-old male, Worcester County)

Center for Substance Abuse Research (CESAR)

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 through the DEWS Fax, 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, or www.dewsonline.org.

This project was supported by VOIT 1996-1002, awarded by the U.S. Department of Justice through the Governor's Office of Crime Control and Prevention. The Assistant Attorney General, Office of Justice Programs, coordinates the activities of the program offices and bureaus. Points of view or opinions contained within this document are those of the authors and do not necessarily represent the official position or policies of USDOJ.

2002 OPUS ANNUAL REPORT

I.	INTRODUCTION	1
OPUS INTAKE STUDY		
II.	OPUS INTAKE STUDY HIGHLIGHTS	3
III.	INTAKE STUDY METHODS	4
IV.	INTAKE STUDY FINDINGS.....	5
	Allegany and Garrett Counties.....	6
	Anne Arundel County	7
	Baltimore City	8
	Baltimore County 2002.....	9
	Calvert County	10
	Caroline, Dorchester, Somerset, and Talbot Counties	11
	Carroll County 2002.....	12
	Cecil County	13
	Charles County.....	14
	Frederick County.....	15
	Harford County 2002	16
	Howard County	17
	Kent and Queen Anne’s Counties	18
	Montgomery County	19
	Prince George’s County	20
	St. Mary’s County	21
	Washington County.....	22
	Wicomico County	23
	Worcester County	24
OPUS DETENTION STUDY		
V.	DETENTION STUDY METHODS	26
VI.	DETENTION STUDY FINDINGS	
	OPUS Detention Study Results Over Six Data Collection Periods	27
	Table 1. Urinalysis Test Results over Six Data Collection Periods.....	28
	Figure 1. Percentage Testing Positive for Marijuana, by Age.....	29
	APPENDIX: COMPARISONS ACROSS INTAKE SITES	30
	Table A. Percentage of Parents and Juveniles Who Agreed to Participate.....	31
	Table B. Percentage of Tested Juveniles, by Offense.....	32
	Table C. Percentage of Urine Specimens that Tested Positive, by Substance.....	33

Juvenile Offender Population Urinalysis Screening (OPUS)

I. INTRODUCTION

Juvenile OPUS is one component of Maryland's Drug Early Warning System (DEWS), which is supported by a grant from the Governor's Office of Crime Control and 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. The Detention Study obtains urine specimens only, once a year, from youths newly admitted to the DJJ's five detention facilities (Alfred D. Noyes Children's Center, Charles H. Hickey Jr. School, Cheltenham Youth Facility, J. DeWeese Carter Youth Facility, and Thomas J. Waxter Children's Facility).

Over a four-year period, the OPUS Intake Study has collected interviews and urine specimens from more than 1,000 youths across Maryland. This report presents major findings from May 1999 and August 2002 for all 23 counties and Baltimore City.

Over a four-year period, the OPUS Detention Study has collected interviews and urine specimens from more than 3,000 youths across Maryland. This report presents major findings from February 1999 to June 2002 for the five participating detention facilities.

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

OPUS INTAKE STUDY

II. OPUS INTAKE STUDY HIGHLIGHTS

- Juveniles throughout Maryland reported that marijuana was the most popular and most accessible drug in their neighborhoods and communities.
- These reports of marijuana use are verified by urinalysis results, which showed that juveniles tested positive for marijuana more frequently than any other drug. This finding was consistent across all 23 counties and Baltimore City.
- Many youths reported that Ecstasy was increasing in popularity. Its use has shifted from the “rave scene” environment to use throughout their communities.
- A large portion of the interviewed juveniles claimed that heroin and/or cocaine was/were primarily used by older teens and adults. These claims appear to be consistent with urinalysis results, which rarely detected opiates or cocaine.

III. INTAKE STUDY METHODS

- Interviewers requested informed consent from youths (intake referrals and probationers) and their parents at the Department of Juvenile Justice intake facilities in all 23 counties and Baltimore City.
- Interviewers administered a 10-15 minute, semi-structured interview. The interview provided youths with 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 sent to a laboratory¹ to be 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.

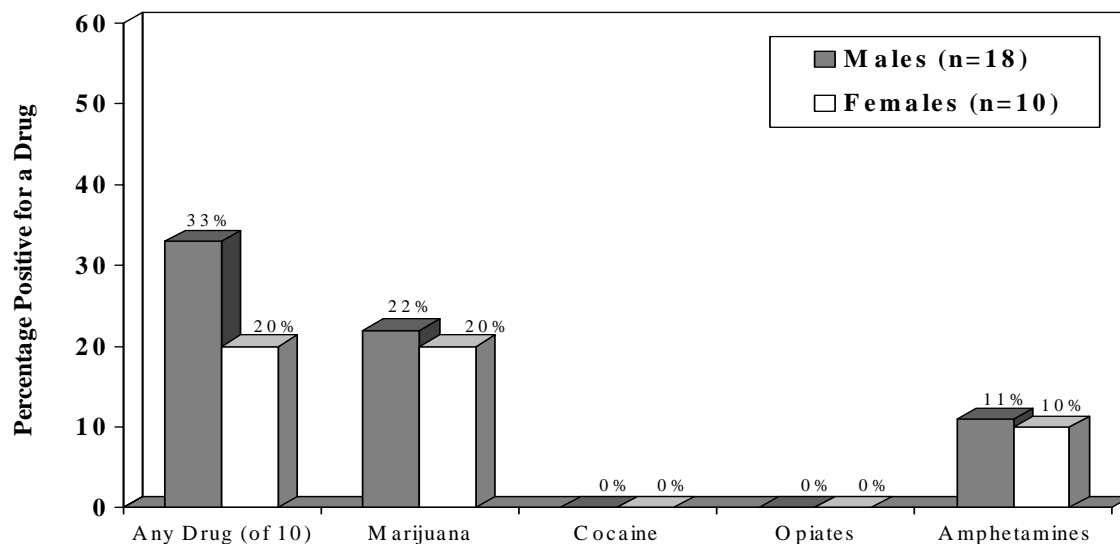
¹ American Medical Laboratories, Chantilly, VA

IV. INTAKE STUDY FINDINGS

- The initial OPUS Annual Report, released in February 2002, covered 13 Maryland counties and Baltimore City. The current report for October 2002 includes the data from the February 2002 report in addition to data from the remaining 10 counties, and updated results for three counties we revisited for a second round of data collection (Baltimore County, Carroll County, and Harford County).
- Findings for each county are presented in alphabetical order. Comparisons across intake sites are presented in the Appendix as Tables A, B, and C. Table A presents the percentage of parents and juveniles who agreed to participate, and of juveniles who agreed to provide a urine specimen. Table B presents the percentage of juveniles who provided a urine specimen, by type of offense they were charged with. Table C presents the percentage of urine specimens collected from juveniles who tested positive for specific drugs.
- Eighty-four percent or more of parents and juveniles agreed to be interviewed, while 70% or more of the youths agreed to provide a urine specimen (see Appendix, Table A).
- Combined reports were prepared for Allegany and Garrett Counties; Caroline, Dorchester, Somerset, and Talbot Counties; and Kent and Queen Anne's Counties because they had fewer monthly intakes than other Maryland counties.
- The full Intake Study Findings are available through CESAR's website at www.dewsonline.org, or by contacting CESAR directly (301-403-8329).

**Allegany and Garrett Counties
Intake Study Findings
March-May, 2002**

Urinalysis Test Results by Gender



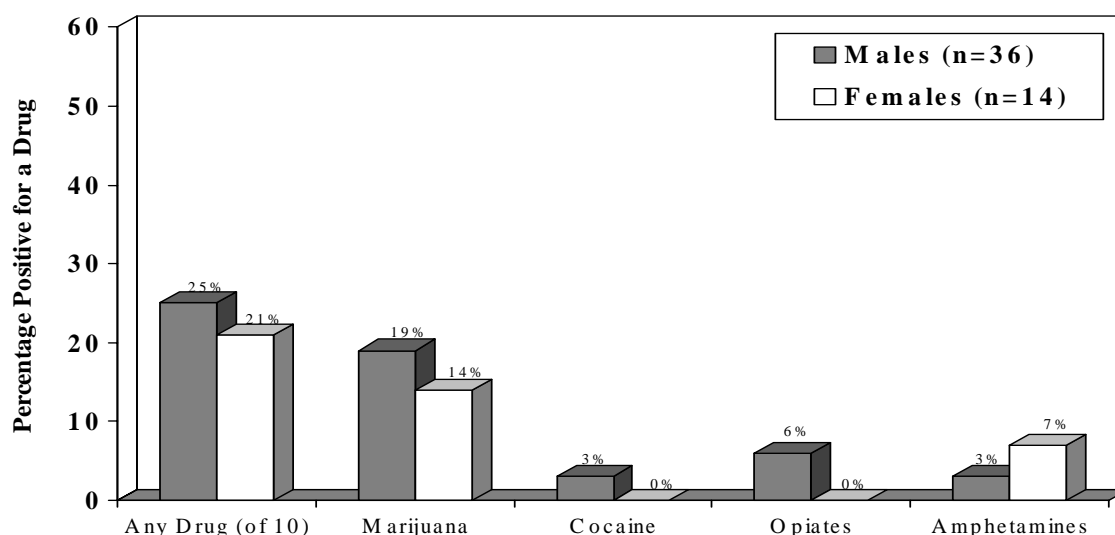
County Highlights

- Marijuana was reported to be the most popular, and the most commonly used, drug among juveniles in Allegany and Garrett Counties.
- Youths considered Ecstasy to be relatively new in the area yet gaining in popularity. The majority of interviewed youths were unsure of its composition.
- A 17-year-old female from Allegany County reported that the use of a combination of Ecstasy, LSD, and mushrooms is referred to as “trolling.”
- A 14-year-old female from Allegany County said, “Yeah, it’s gotten to the point that everywhere you look someone is doing [drugs] or has them. It’s gotten to the point where middle school kids can buy Ecstasy or cocaine on the Internet.”
- Typically, cocaine users are older juveniles, yet interviewed youths are aware of powder cocaine users as young as 13 or 14. Few interviewees were knowledgeable about crack cocaine, claiming it was a drug used mostly by the adult population.
- A 14-year-old male from Allegany County reported that one’s peer group is more influential than age in the decision to experiment with or use heroin.
- Most youths believed that prescription pills were obtained from friends, family members, or handicapped persons who were legally prescribed the drugs.
- A 16-year-old male from Allegany County said, "Once into marijuana, people want a better buzz. First, it’s alcohol, second marijuana, then it goes on–acid, Ecstasy, PCP, heroin.”
- All of the three youths who tested positive for amphetamines indicated they were on prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Allegany and Garrett Counties, July 2002.

**Anne Arundel County
Intake Study Findings
November-December, 2000**

Urinalysis Test Results by Gender



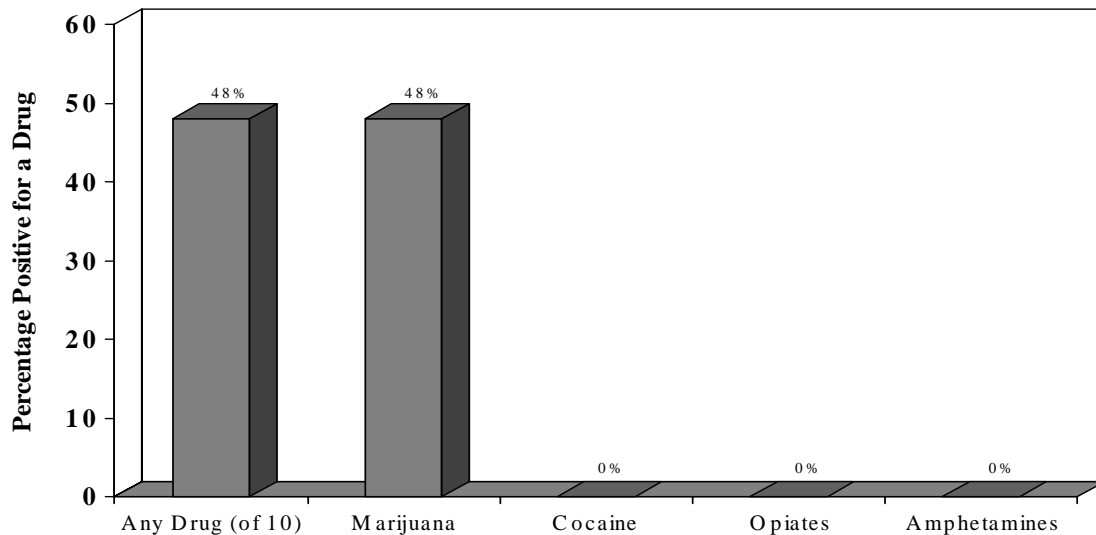
County Highlights

- Some youths claimed that marijuana is not considered a drug. An 18-year-old male said, “It comes from earth, no problem.” A 15-year old male said, “It’s not really a drug—it’s a brain enhancer that makes you see things.”
- There was a perception that everybody uses Ecstasy. A 16-year-old female said, “[Ecstasy] makes everything beautiful.”
- Few youths reported on powder or crack cocaine use. One 17-year-old male reported that teens aged 16-18 are using powder cocaine. A 17-year-old female stated that there are a lot of crackheads who will do anything to obtain the drug.
- Few youths reported familiarity with heroin use. Those who did report it being available perceived it as a harder drug than marijuana, and it was believed that users would have to travel to Baltimore to obtain it.
- Youths reported that prescription pills such as Percocet, hydrocodeine, Ritalin, and Valium are taken with beer to enhance the effects.
- A 16-year-old male explained that LSD is available in “liquid, paper, or gel tabs. Paper is the most common. Liquid’s the best—you can put it onto sugar cubes, gum, or Altoids.”
- One 16-year-old female reported that youths “make [GHB] and hand it out at parties.” She further explained that people disregard the danger and mix it with other drugs.
- Both youths who tested positive for amphetamines said they were taking prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Anne Arundel County, March 2001 – Revised.

**Baltimore City
Intake Study Findings
November-December, 1999**

Urinalysis Test Results for Males (n=40)*



County Highlights

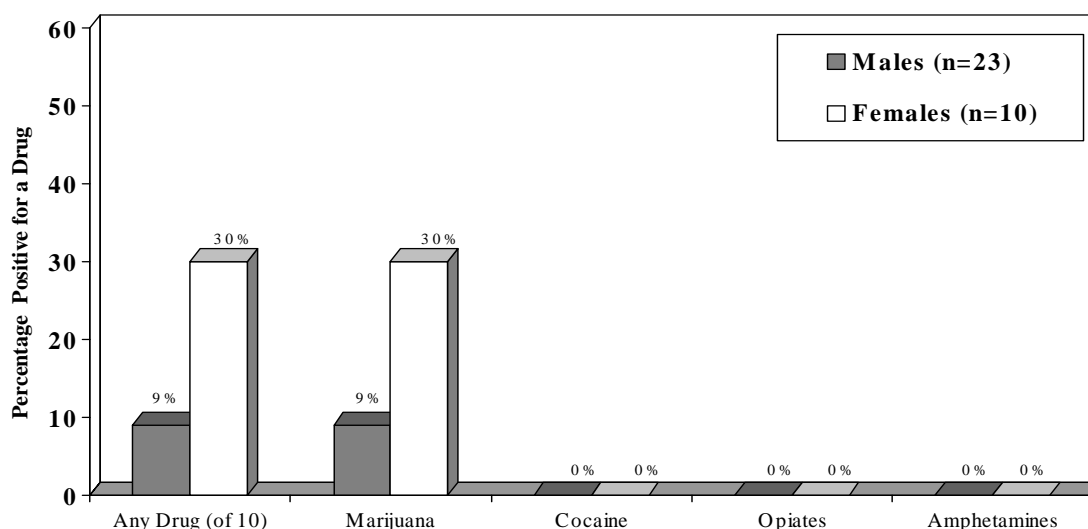
- Marijuana was reportedly the most popular drug among young people. Marijuana “is an everyday thing,” and was seen by many youths to be “the same as cigarettes.”
- A 15-year-old male reported that homegrown marijuana was frequently laced with other substances because of its lower potency.
- Juvenile offenders interviewed in Baltimore City had not heard of Ecstasy as much as those in other Maryland counties.
- A few youths reported that some youths use cocaine and crack, while many respondents said that youths have no respect for cocaine and crack users. Derogatory identifiers such as “junkies” were used for older cocaine and heroin users. Another popular sentiment was that while peers did not respect users, it was acceptable to *sell* crack.
- A 15-year-old male said, “There are some 17-year-olds buying heroin, but it’s more of an adult thing.” Several respondents mentioned that older users present a haunting image of heroin addiction that has a powerful affect on youths.
- The prescription drug Clonidine, prescribed by doctors to treat high blood pressure and ADHD, was mentioned (by a 17-year-old male) as a drug that is “supposed to bring you down off a high. It calms users down and soothes the high instead of being hyper.”

*Because urine specimens were collected from only eight females, no statistics were calculated.

Source: CESAR, University of Maryland, College Park. Findings from Baltimore City, June 2000-Revised.

**Baltimore County 2002
Intake Study Findings
May-August, 2002**

Urinalysis Test Results by Gender



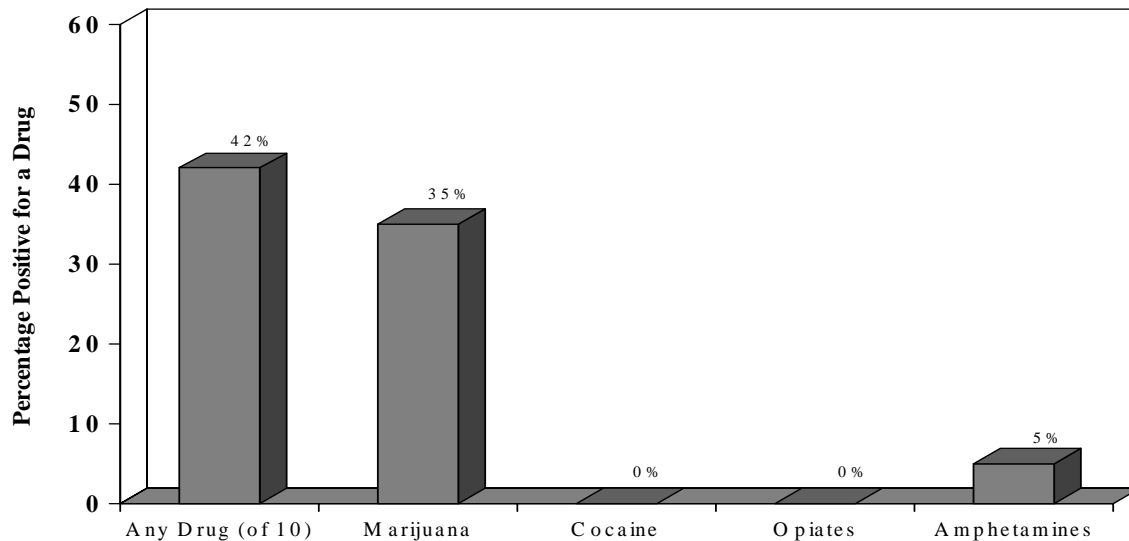
County Highlights

- Marijuana is reportedly smoked at school, in the bathroom, or in the parking lot. A 15-year-old female claimed, “Nobody snitches, and teachers don’t know because it already smells like smoke.”
- Youths reported that marijuana is sometimes mixed or laced with a variety of substances, such as powder or crack cocaine, or embalming fluid. A 17-year-old male reported that one boy has dipped marijuana in gasoline.
- The majority of youths interviewed in Baltimore County reported being uninformed regarding information about Ecstasy. They said 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).
- Respondents reported youths who used cocaine tended to be “older” juveniles (those in their late teens).
- Few youths reported heroin as a popular drug among juveniles in Baltimore County. It was believed that use was more common among older members of their communities.
- Hash was considered to be available by a few youths. Those who had knowledge of hash reported that users smoke the drug or may sometimes eat brownies containing hash.
- A 15-year-old male reported that a new trend was to “put acid in [one’s] eyes.”
- There was a consensus among juveniles that drugs were available to those who desire them, and that anywhere they went they could see drugs or users on the street.

Source: CESAR, University of Maryland, College Park. Findings from Baltimore County 02, September 2002.

**Calvert County
Intake Study Findings
September, 2000-May, 2001**

Urinalysis Test Results for Males (n=43)*



County Highlights

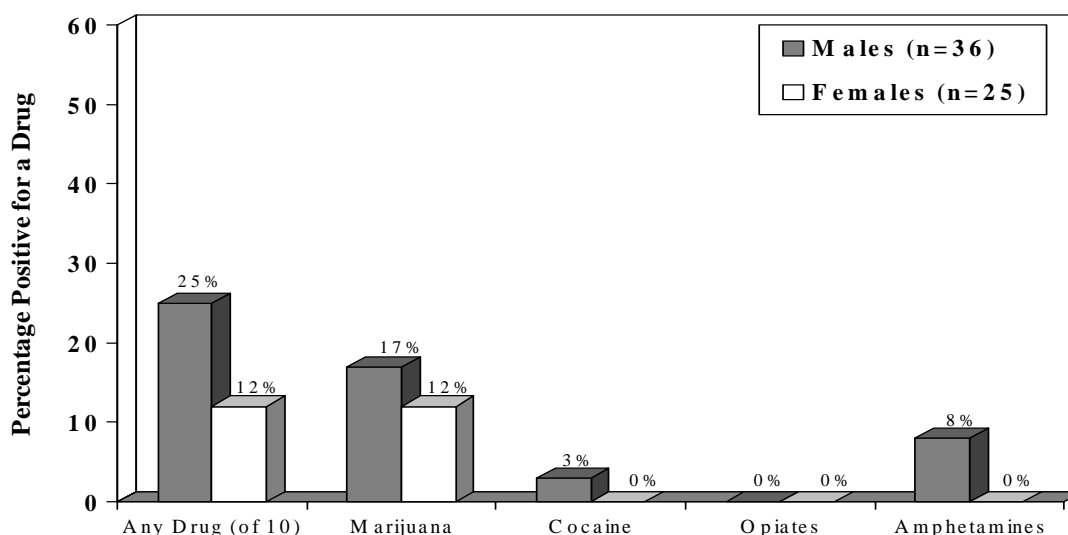
- Marijuana was reported to be the most popular drug in Calvert County. A 17-year-old male claimed, “Marijuana is always involved. Even when you are doing other drugs, it’s there.”
- Ecstasy was also reported to be available and fairly easy to obtain. A 17-year-old male reported, “Ecstasy is often taken alongside Ketamine, marijuana, LSD (known as “candy flipping”), and psychedelic mushrooms (known as “hippy flipping”), but not with alcohol.”
- A 16-year-old male said, “There was a time when Ecstasy first came out where people were rolling in clubs, and then it changed and came into neighborhood parties.”
- According to one respondent, cocaine use was not as widespread as marijuana and Ecstasy in Calvert County. A 17-year-old male described powder cocaine users as “the rich kids, ages 17 and older.”
- Though most interviewees had not heard of heroin use in the county, a handful of respondents knew at least one peer who used heroin. A 16-year-old male claimed, “It’s stronger than it’s ever been.”
- While most respondents had heard of LSD, there was little indication that it is currently popular. One youth stated that psychedelic mushrooms are available but no more popular than LSD.
- Inhalants were mentioned as a drug of the past. A 17-year-old male said, “Nobody huffs anymore.”
- Both of the youths who tested positive for amphetamines reported taking prescription medications. The one youth who tested positive for benzodiazepines did not report taking any prescription medications.

*Because urine test results were collected from only seven females, no statistics were calculated.

Source: CESAR, University of Maryland, College Park. Findings from Calvert County, December 2001.

**Caroline, Dorchester, Somerset, and Talbot Counties
Intake Study Findings
June-December, 2001**

Urinalysis Test Results by Gender



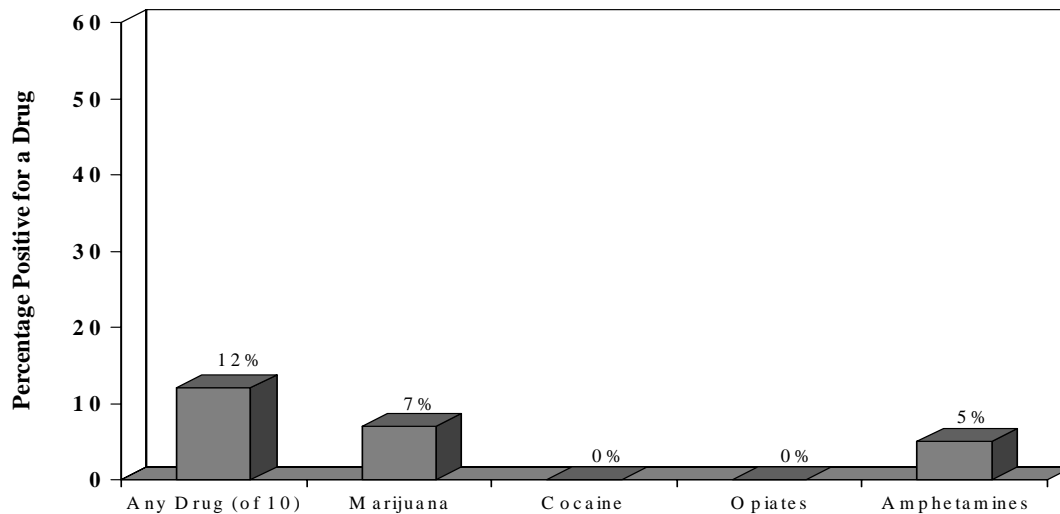
County Highlights

- While many youths believed that marijuana could be bought or used at school, the appearance of police officers and search dogs reportedly serves as an effective deterrent to those who would bring drugs into schools.
- A 17-year-old male from Caroline County said of marijuana additives, “Cocaine, angel dust, and heroin every now and then. You name it, people will stick it in there. You don’t know until you’ve smoked it.”
- Ecstasy was reported to be available and prevalent throughout all of these counties. Most youths were uncertain of the exact chemical components of Ecstasy but were aware of myriad forms of the drug. A 17-year-old male from Dorchester County said that Ecstasy is “cut with coke, heroin, LSD, [and] MDMA. [MDMA is] the actual drug that makes you feel good. The other drugs make you keep wanting it.”
- Powder cocaine was frequently mentioned as a drug that is easy to obtain in Caroline, Dorchester, and Talbot Counties. One 17-year-old male from Caroline County claimed that cocaine “is just as popular as marijuana.”
- Few youths in these counties mentioned heroin as a frequently used drug. A 17-year-old male from Caroline County reported, “[Heroin] has a reputation as dangerous, so it’s not very popular, but users do inject it.”
- The three youths who tested positive for amphetamines reported they were taking prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Caroline, Dorchester, Talbot and Somerset Counties, February 2002.

**Carroll County 2002
Intake Study Findings
January-February, 2002**

Urinalysis Test Results for Males (n=42)*



County Highlights

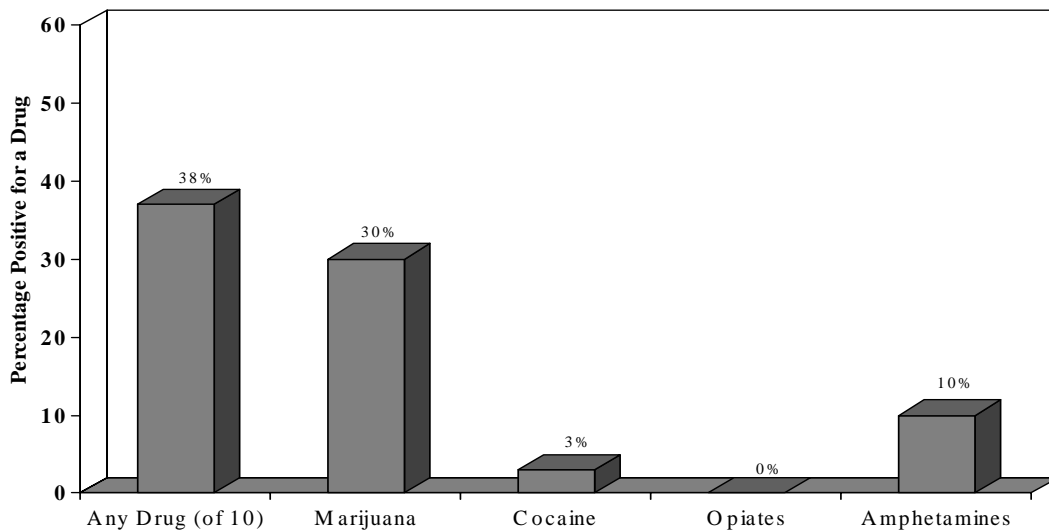
- A 15-year-old female reported, “Everybody drinks alcohol, mostly everybody smokes weed, cocaine is starting to be okay. Everybody hates heroin.”
- Youths reported that in addition to powder or crack cocaine, marijuana may also be laced with LSD, PCP, heroin, and Ecstasy.
- It was reported that users often use Ketamine, LSD, or marijuana with Ecstasy. An 18-year-old male said, “Users smoke marijuana at the beginning of their ‘roll’ to stop grinding their teeth—to relax.”
- A 17-year-old male referring to powder cocaine said, “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.
- Most interviewed youths believed that Carroll County continues to have a problem with heroin use, and 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.”
- 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 17-year-old male reported that it was more popular to “parachute” (swallow a tissue containing the powder of prescription pills) because snorting “burns the nose.”
- Both youths who tested positive for amphetamines stated they were taking prescription medications. One youth who tested positive for propoxyphene did not report taking any prescription medications.

*Because urine test results were collected from only eight females, no statistics were calculated.

Source: CESAR, University of Maryland, College Park. Findings from Carroll County 02, April 2002.

**Cecil County
Intake Study Findings
February-August, 2000**

Urinalysis Test Results for Males (n=40)*



County Highlights

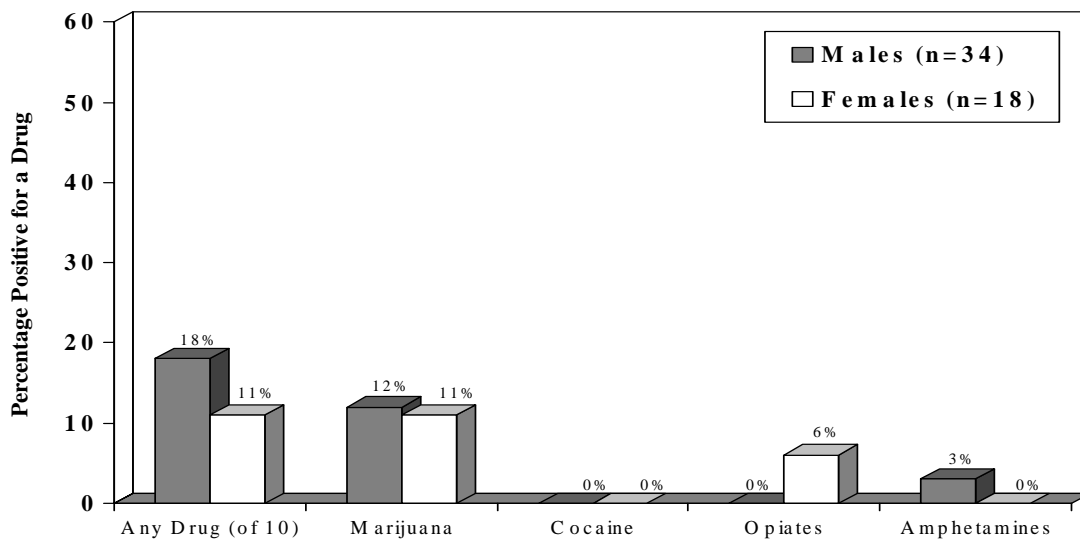
- Marijuana is the most popular drug used by youths in Cecil County. One 12-year-old male said, “Marijuana doesn’t hurt you. You see people doing it and nothing happens to them.”
- When asked about new trends, youths reported marijuana being dipped in embalming fluid. A 15-year-old male said, “[It] is like PCP. It makes you feel strong, but high.”
- Several youths in Cecil County reported that Ecstasy has grown increasingly popular. According to one 17-year-old male, “Ecstasy is coming around more often than it use to and it’s staying longer each time.” A 16-year-old female claimed, “Ecstasy is easier to get than marijuana.”
- Powder and crack cocaine were reported by only a few respondents in Cecil County. Powder cocaine was reported to be available at parties while crack cocaine was reported to be hard to obtain.
- Youths reported that heroin is easy to obtain in Cecil County. A 17-year-old male categorized users as belonging to a specific social group with the following characteristics: “They’re loners, quiet, they keep to themselves, skip school, and don’t try to accomplish anything.”
- Prescription pills were discussed with higher frequency by youths in Cecil County than by youths in most other counties. The youths believe that prescription drugs are used as a “fallback” when other drugs are not accessible.
- Three of the four youths who tested positive for amphetamines reported they were taking prescription medications.

*Because urine test results were collected from only six females, no statistics were calculated.

Source: CESAR, University of Maryland, College Park. Findings from Cecil County, December 2000 - Revised.

**Charles County
Intake Study Findings
November, 2000-January, 2001**

Urinalysis Test Results by Gender



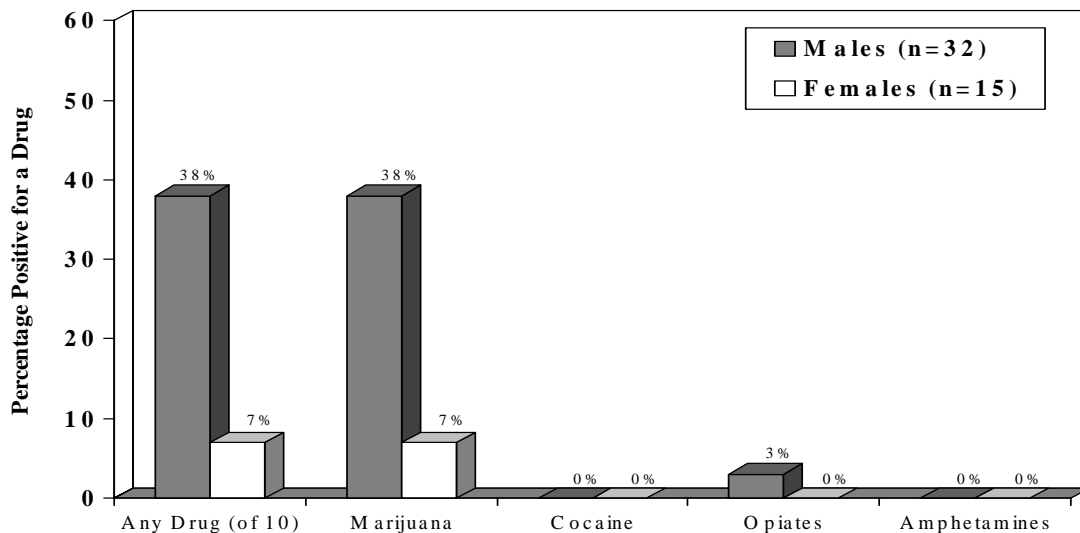
County Highlights

- Youths indicated that marijuana was the most popular illicit drug in Charles County. One 17-year-old female said, “Weed is the biggest problem because it’s in school. I’m around too many people that do it.”
- Despite the dangers of Ecstasy reported by many interviewed youths, use appeared to be on the rise. A 17-year-old male claimed, “It’s starting to be bigger than even marijuana.”
- While Ecstasy pills are generally swallowed, a 16-year-old male reported that some youths “parachute it—put a pill in a napkin, crush it, and then swallow it. The body doesn’t have to metabolize the pill that way and it hits you faster.”
- Cocaine was reported to be easily accessible and increasing in popularity. According to one 17-year-old female, “Cocaine is the hardest drug I have ever been offered.”
- In general, youths believed that heroin was not available within Charles County. Most respondents frowned upon its use.
- Some youths identified LSD as a popular drug within their community. One 15-year-old male claimed, “Acid is as popular as E.”
- One youth reported that some youths use morning glory seeds to produce LSD-like hallucinations.
- Youths stated that illegal prescription pill use is popular among their peers. Such misuse frequently involved mixing the drug with alcohol.
- One youth tested positive for amphetamines and reported taking prescription medications. One male tested positive for benzodiazepines.
- One female tested positive for Ecstasy and opiates and did not report taking any prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Charles County,
June 2001 - Revised.

**Frederick County
Intake Study Findings
April-June, 2000**

Urinalysis Test Results by Gender



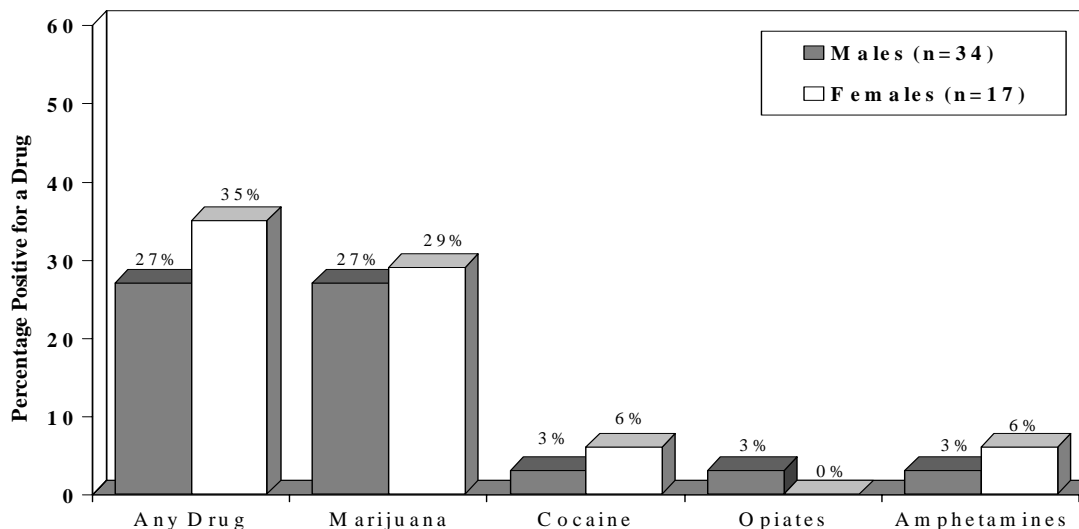
County Highlights

- Marijuana is reported to be the most popular drug used by Frederick County youths. It can be obtained easily, and respondents believe it is becoming increasingly prevalent in schools. A 17-year-old male claimed, “Marijuana’s everywhere on the street. You can just pack it in a cigarette and no one knows.”
- There was a consensus among several youths in Frederick County that Ecstasy has grown increasingly popular over the past few months. A 17-year-old male said, “It’s pure MDMA if you’re lucky, but (otherwise) it’s cut with everything—coke, heroin—it all depends on the dealer, and it could be coming from anywhere.”
- Powder and crack cocaine were reported to be available. A 17-year-old male claimed, “Crack cocaine is easier to get than marijuana. You can buy crack in school and people are doing it in school.”
- 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.”
- Youths reported that the use of LSD is not limited to the party scene. A 15-year-old male claimed, “A lot of people do it at school. Take it in the morning right in front of everybody or whatever.”
- Several youths mentioned that Ketamine, an animal tranquilizer, was new to the county, but knew little about it beyond, “It’s supposed to make you feel good.”
- A few respondents mentioned nitrous oxide, an inhalant, was becoming increasingly popular.

Source: CESAR, University of Maryland, College Park. Findings from Frederick County, October 2000 - Revised.

**Harford County 2002
Intake Study Findings
June-July, 2002**

Urinalysis Test Results by Gender

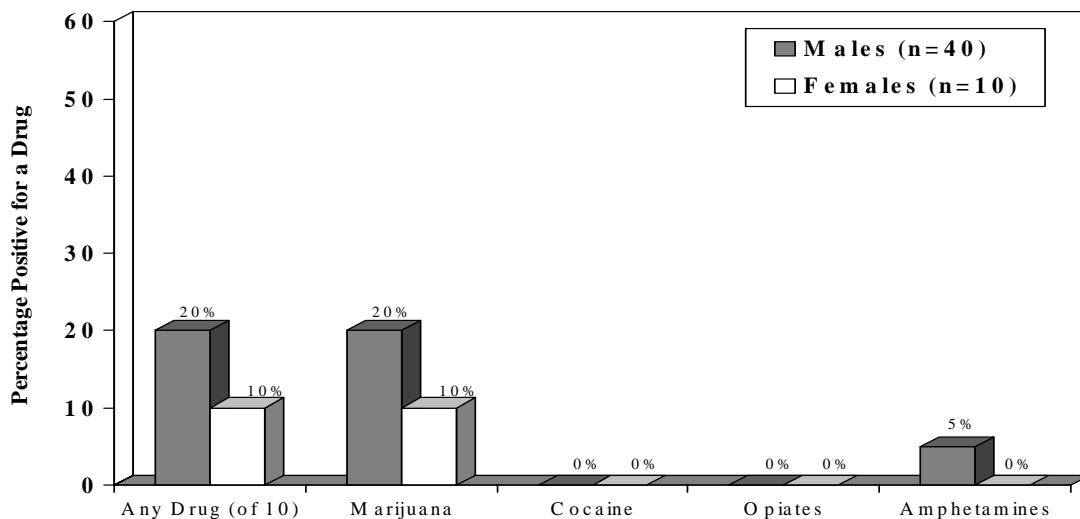


County Highlights

- Marijuana was reported to be the most popular and the most commonly used drug among juveniles in Harford County. A 15-year-old male said, “What would you rather trust, something made from God (marijuana) or something made from man (alcohol)?”
- According to youths in Harford County, the most common forms of ingestion of marijuana were sprinkling powder cocaine on top of marijuana and smoking or snorting it.
- One 17-year-old male claimed, “Any pills with stamps are junk. Ecstasy is just a designer drug. People will just take drugs without knowing what they are taking. I’ve read about all this on the Internet, so I know what I’m getting into. Pure MDMA is a powder in a capsule that can’t be pressed into a pill.”
- The few youths who reported knowledge of heroin believed it to be a popular drug. A 17-year-old male said, “Heroin is booming, there are a bunch of kids doing it now. Last year coke was big, and the year before it was acid, but heroin is huge in Harford County now. There are so many kids using it.”
- Illicit prescription drug use was found to be popular among juveniles in Harford County. An 18-year-old male said, “People who don’t know what to do with [OxyContin] will swallow it. If they do know what they’re doing, they will snort it or even shoot it.”
- A 17-year-old male described Salvia “... as a leaf that can be legally obtained from Mexico over the Internet.” Users smoke Salvia to produce an effect similar to a marijuana high. When asked how its effects were different than that of marijuana, the youth stated, “You have visuals, but don’t get hungry. It doesn’t make you slow or tired. It’s not addictive, but if you smoke too much you go insane.”
- Both of the youths who tested positive for amphetamines reported taking prescription medications. One youth tested positive for benzodiazepines, cocaine, opiates and marijuana, and did not report taking any prescription medications.

**Howard County
Intake Study Findings
June-August, 2000**

Urinalysis Test Results by Gender



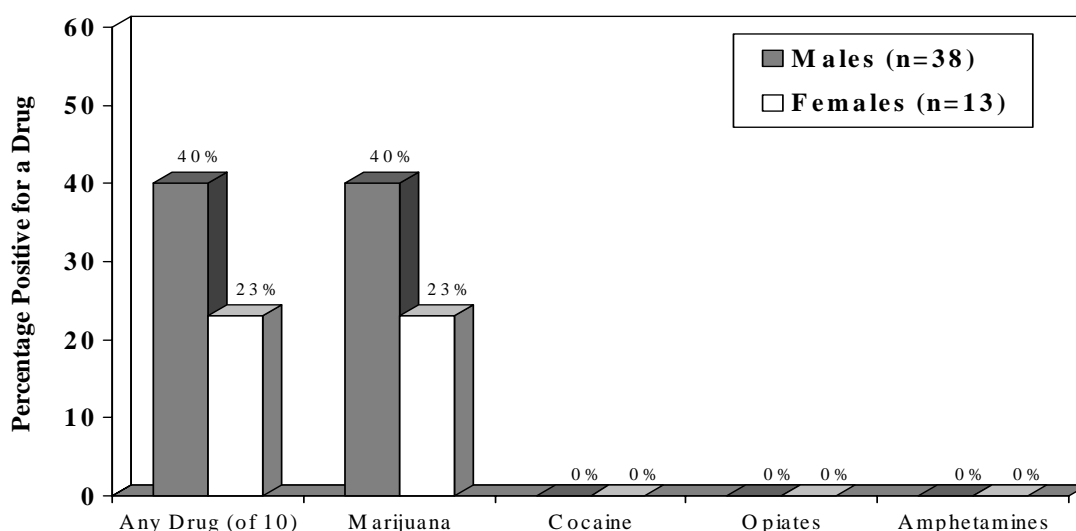
County Highlights

- Most of the interviewed youths stated that marijuana is not harmful, with several youths noting that marijuana use in school has increased. Youths frequently come to school high, get high in school, and obtain marijuana at school.
- Most youths in Howard County had heard of Ecstasy. In reference to its composition, an 18-year-old male stated, “It’s not always cut with the same thing, but it’s usually cut with heroin. I’ve heard of people having ‘itches’—episodes where someone may have taken some bad stuff, and they start scratching violently and uncontrollably.” Youths appear more engaged than fearful about the different mixtures that make up Ecstasy.
- An 18-year-old male reported that powder cocaine is more accepted than crack cocaine or heroin, while others reported that their peers do not really use cocaine or crack. One 13-year-old female said, “Kids around my age start with marijuana. Then, when they are around 17 or 18, they start using crack.”
- There does not seem to be a lot of heroin use in Howard County, though many youths know of people who use it. One 15-year-old male said, “I haven’t seen it much, but I know you have to go to Baltimore to get it.”
- Some Howard County youths believed that LSD and psychedelic mushrooms are increasing in popularity. Youths believe that “shrooms” are safer to use than LSD because they are organic.
- Also known as “liquid ecstasy,” GHB was reported as a date rape drug. “It’s new around here...I heard you get really messed up when you take it,” stated a 15-year-old male.
- The two youths who tested positive for amphetamines reported taking prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Howard County, February 2001 - Revised.

**Kent and Queen Anne's Counties
Intake Study Findings
December, 2000-December, 2001**

Urinalysis Test Results by Gender



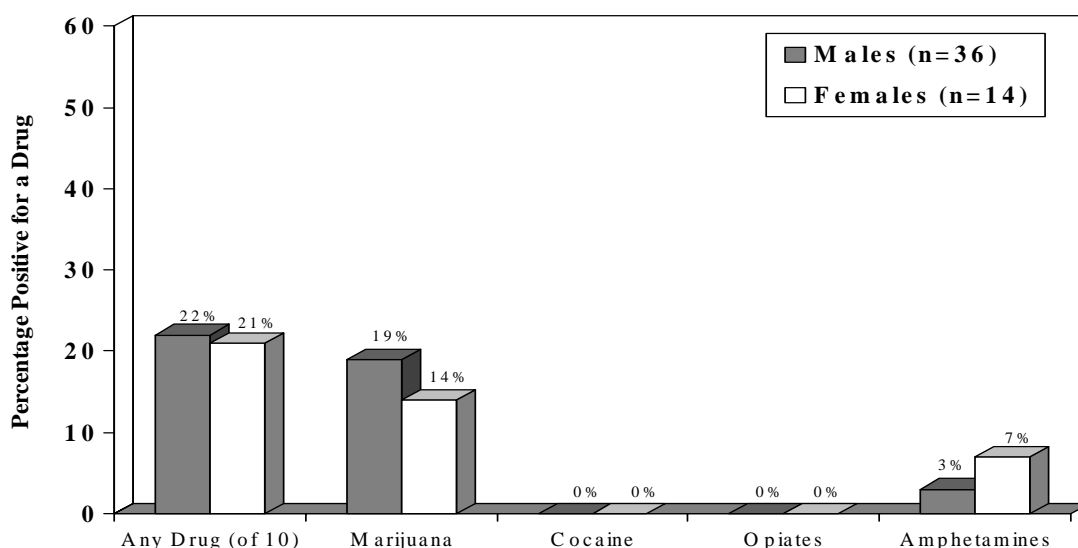
County Highlights

- Youths in both Kent and Queen Anne's Counties reported that marijuana is the most popular drug. A 17-year-old male from Kent County reported that marijuana mixed with powder or crack cocaine is called "lacies."
- Youths in both counties reported that Ecstasy is laced with a variety of substances, ranging from heroin, cocaine, and LSD to "dangerous chemicals." According to a 16-year-old male from Kent County, "[It is] dangerous because you never know what you'll get." Respondents indicated that the age of first Ecstasy use ranges from 13 to 15.
- With regard to powder cocaine, a 17-year-old female from Kent County said, "I just know a lot of people who have done it, a lot of people. A lot of juniors and seniors, every group, smart kids, too. It's a party thing."
- When asked about the availability of heroin in Queen Anne's County, a 16-year-old female said, "Ecstasy laced with heroin is the only form of the drug seen by the majority of youths." Otherwise, many youths stated that older people use heroin.
- According to youths in both Kent and Queen Anne's counties, LSD has decreased in popularity.
- Youths in both counties indicated that prescription drugs are obtained from friends who had prescriptions, by "raiding medicine cabinets of family members" (17-year-old female-Kent County), or by stealing from physicians' offices.
- Few youths in Kent or Queen Anne's Counties mentioned Ketamine (also known as Special K). Of those who did, a 16-year-old female from Queen Anne's County claimed that it is popular and "... pretty easy to get. You snort it—it looks like coke."

Source: CESAR, University of Maryland, College Park. Findings from Kent and Queen Anne's Counties, February 2002.

**Montgomery County
Intake Study Findings
January-March, 2000**

Urinalysis Test Results by Gender



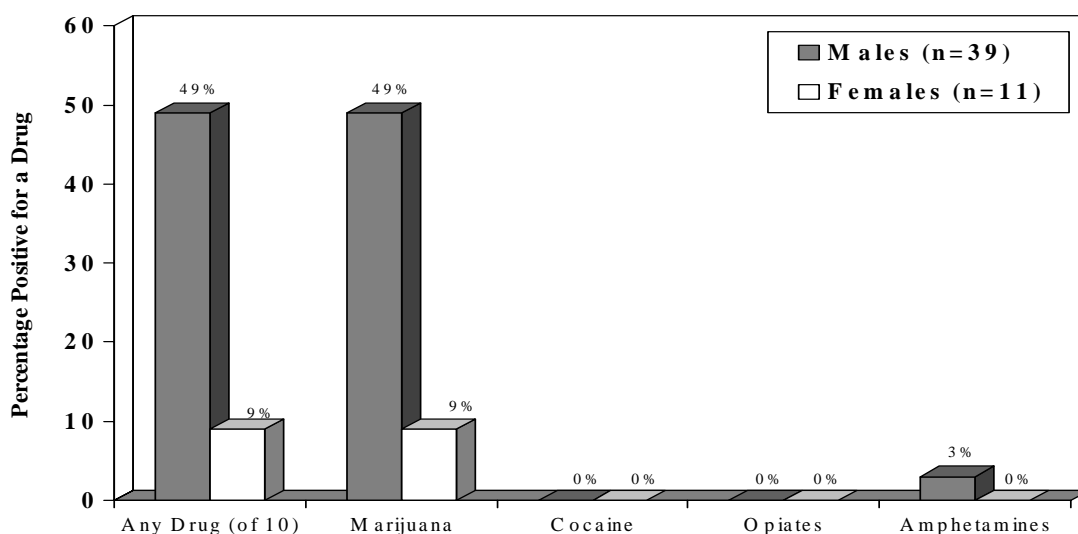
County Highlights

- Marijuana was the most widely reported and used drug in Montgomery County. Youths often cited boredom as a reason for drug use, explaining that it is better to be high than to be idle or playing video games. Many respondents compared marijuana to cigarettes.
- Montgomery County youths seemed to be more familiar with Ecstasy than youths interviewed in other counties. The drug has a reputation as both a “sex drug” and a “fun drug” with no negative effects.
- Although few youths mentioned crack cocaine as a popular drug, many cited it as the worst drug problem. A 16-year-old male said, “Cocaine or crack, don’t know the difference, is the worst drug problem, biggest addiction.”
- Respondents in Montgomery County reported heroin to be a “junkie” drug. A 16-year-old male explained that “No one really messes with it.” This youth felt that it may be because of a “needle phobia” or because it is “too pricey.”
- Psychedelic mushrooms were mentioned as preferable to LSD. Some youths suggested that when they are available, they are more popular than LSD. Because psychedelic mushrooms are a more natural drug, they are feared less by youths.
- A small number of respondents mentioned speed as an available drug. While atypical at this time, it is noteworthy that Montgomery County youths mentioned speed with higher frequency than youths in other counties.
- Both youths who tested positive for amphetamines reported taking prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Montgomery County, September 2000 - Revised.

**Prince George's County
Intake Study Findings
March-May, 2000**

Urinalysis Test Results by Gender



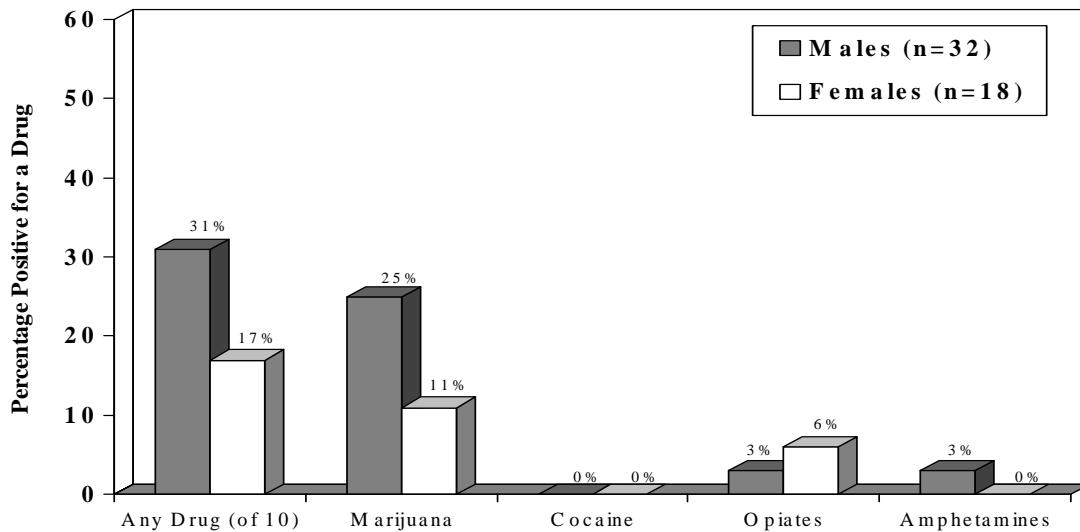
County Highlights

- Marijuana use seems to be an accepted part of this youth culture. A 16-year-old male reported, “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.” According to a 14-year-old girl, “You could get marijuana at school. Not smoking in school. But better believe it that people come to school high– there’s at least one person in every class. Sometimes the teachers know, and depending on how high they [the students] are, they [the teachers] don’t say anything and let it slide.”
- A 15-year-old male summed up his view with the following: “If you go to school, you only do weed, the other drugs are too powerful–you can’t go to school. Smoke weed to get a buzz.”
- One 15-year-old male said, “Two years ago it was acid; now it’s X.” Many interviewees noted the danger associated with impure Ecstasy pills. As one 17-year-old male reported, “Sometimes they mix in heroin, coke, mescaline, or speed. But there’s always some MDMA in the pills.”
- Though several interviewees were aware of the existence of crack in their neighborhoods, they concurred that users are older and that youths in school don’t use it. “Cocaine isn’t really popular with high school kids– [it’s] mostly weed and alcohol. But I know it’s around ... couple of crack houses in my neighborhood,” said a 16-year-old male.
- Few youths in Prince George’s County mentioned heroin.
- The one youth who tested positive for amphetamines reported taking it by prescription. He also tested positive for PCP and marijuana.

Source: CESAR, University of Maryland, College Park. Findings from Prince George’s County, January 2001 - Revised.

**St. Mary's County
Intake Study Findings
November, 2000-May, 2001**

Urinalysis Test Results by Gender



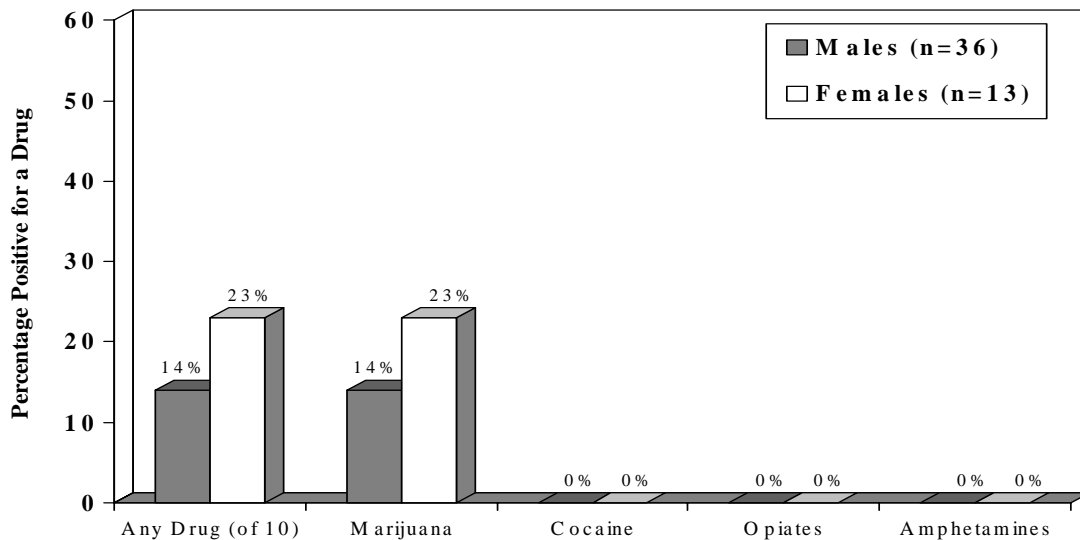
County Highlights

- Youths in St. Mary's County expressed ambivalence about marijuana use. Most interviewed youths thought it was "no big deal," and many reported using it. When asked if there was a drug problem in their school or community, however, most youths reported that marijuana was the major problem because of the numbers and frequency of people using it. A 15-year-old female summed up the conflicted feelings as follows: "If you're going to school, and there's kids smoking weed in the bathrooms, and you can smell it in the hall, that's kind of bad."
- Most youths were uncertain of the exact chemical components of Ecstasy. One 16-year-old male stated, "There's different stuff every week. Ecstasy comes in hundreds upon hundreds of prints, you don't know what you're getting."
- Youths reported "candy-flipping" or "trolling" (tripping and rolling) as the practice of combining Ecstasy with LSD or PCP. Youths indicated that Ecstasy and LSD go hand in hand, both in terms of availability and popularity.
- Powder and crack cocaine were frequently mentioned as drugs that were easy to obtain. Crack cocaine was not generally considered to be a drug used by juveniles, but rather by older people. However, youths reported peers snorting powder cocaine and using marijuana laced with powder cocaine.
- Few youths mentioned heroin as a frequently used drug, although some report having seen select social groups use it.
- One youth tested positive for amphetamines and did not report taking any prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from St. Mary's County, November 2001.

**Washington County
Intake Study Findings
August-November, 2001**

Urinalysis Test Results by Gender



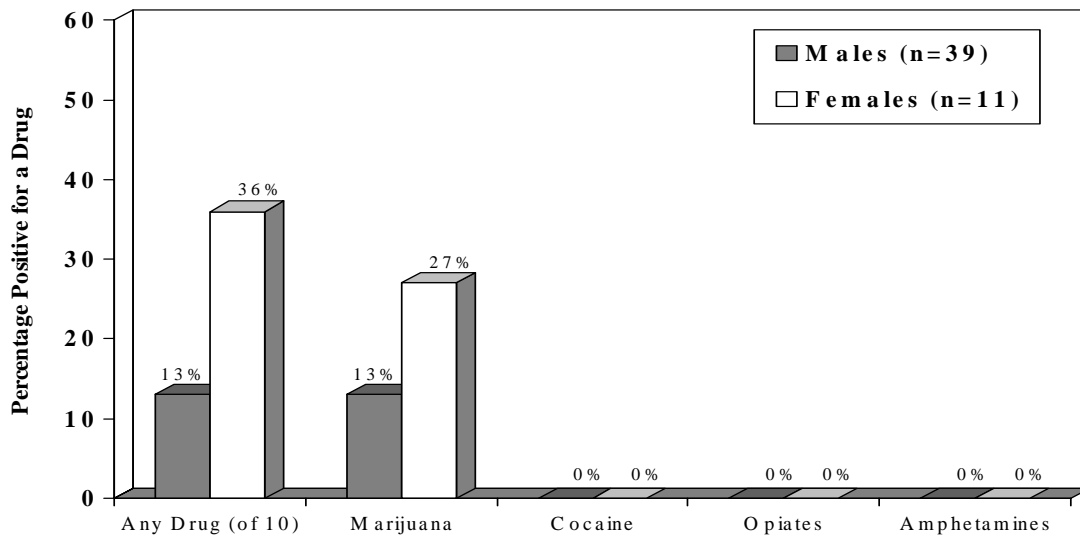
County Highlights

- Marijuana was reported to be the most popular drug in Washington County. Several youths characterized users as age 12 and older.
- Youths reported that marijuana can be laced with a variety of drugs, including powder and crack cocaine, LSD, psychedelic mushrooms, Ecstasy, PCP, and embalming fluid.
- Ecstasy was reported to be a popular drug, but opinions about its composition and availability varied widely. Several respondents mentioned that pills contain Ecstasy as well as other drugs, including cocaine and heroin. “Some of them are different from each other, have different combinations of drugs in them— *i.e.*, more heroin, less crack, etc,” claimed a 17-year-old male.
- Opinions about the popularity of powder and crack cocaine varied among juveniles. One 17-year-old male reported, “Downtown there’s a lot of crack—you got some young [users], but basically old construction workers, mid-30s and up.” Many youths said that the drug was unpopular with their peers and known to ruin lives.
- Most respondents reported that it is not common for youths to use heroin. Those who knew about the drug stated that it is a liquid that can be injected by users, or a powder (or pill) that can be snorted, eaten, or smoked (on top of marijuana).
- Ketamine (also known as Special K) was also reported by several youths to be popular. It was reported that users either snort it or shoot it up.
- Youths reported on the popularity of inhalants. A 14-year-old male said, “Duster—what you spray on your computer to clean it—you can huff it.”

Source: CESAR, University of Maryland, College Park. Findings from Washington County, February 2002.

**Wicomico County
Intake Study Findings
May-October, 2001**

Urinalysis Test Results by Gender



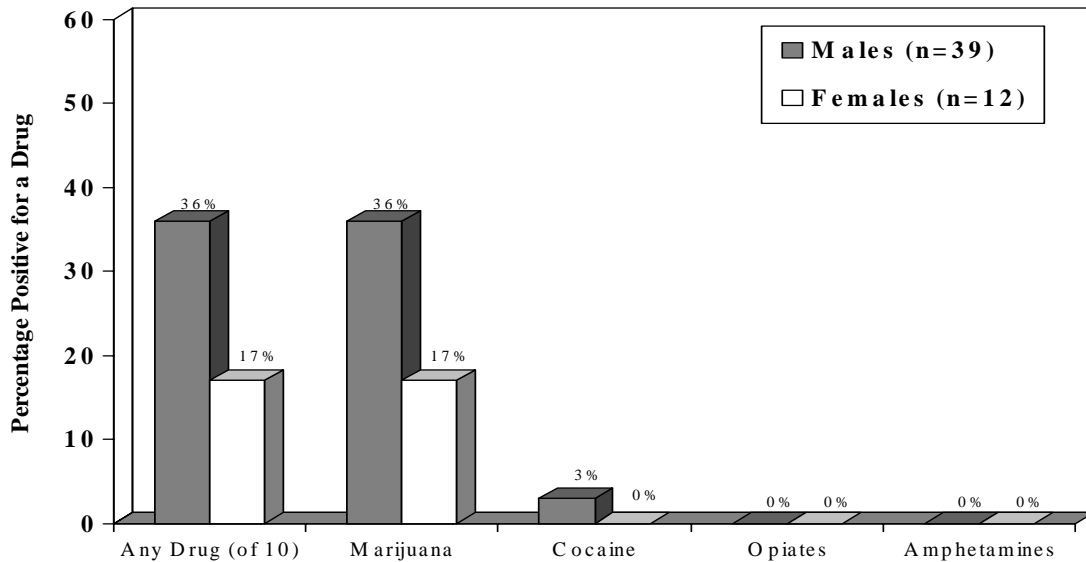
County Highlights

- Marijuana was reported to be the most popular drug in Wicomico County. Several youths characterized users as ages 11 or 12 and older.
- Ecstasy was also reported to be an increasingly popular drug, but opinions varied widely. One 17-year-old male said, “It’s the most popular drug ... it’s a rave drug, period!” Ecstasy “intensifies everything 20 times!”
- Several youths said that powder cocaine is popular among older teens and adults, while a few respondents claimed that use is widespread. Most respondents stated that powder cocaine is used at parties and bars but not at school. One 17-year-old male said, “Popular? Yeah. Easy to get? Yeah. You can just walk down the street. People are snorting it, and every now and then, they are putting it in a blunt.”
- Most respondents reported that heroin is unpopular with youths. Those who knew about the drug stated that it is a yellow liquid or powder that could be smoked, snorted, or injected. Other youths believed that it is deadly.
- Youths stated that psychedelic mushrooms (also known as shrooms) are difficult to acquire and more expensive than LSD, but still popular.
- According to youths, a variety of prescription drugs are available. A 16-year-old male reported, “People lie to doctors to get the pills. Or take them from parents and sell [them] for \$5 or give them to people in school.”
- When asked about new drugs, several youths mentioned Matrix, but there were varied reports about its composition.
- One youth tested positive for barbiturates and reported taking prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Wicomico County, February 2002.

**Worcester County
Intake Study Findings
July, 2000-June, 2001**

Urinalysis Test Results by Gender



County Highlights

- The most popular drug in Worcester County was reported to be marijuana. With youths reporting a variety of types of marijuana that were being smoked and ingested. A 17-year-old male claimed, “You can come to school high easier than you can come to school drunk—some people do it, not everybody.”
- A 17-year-old male said, “If [MDMA] didn’t put holes in your head, it would be the best drug in the world.”
- Although only a small number of youths mentioned powder cocaine, a 17-year-old male believed powder cocaine was easier to find than marijuana. A 15-year-old female agreed, saying that powder cocaine was “easy to get.”
- Few youths mentioned heroin in the interviews. Among those who had some knowledge of heroin, it was believed that the drug was not especially popular and that users were usually 20 or older. A 17-year-old female said, “Crazy ravers use it when they are tired of Ecstasy.”
- Many of the respondents who mentioned prescription drug use believed these drugs to be popular and used at parties as well as before, during, and after school. A 17-year-old female reported that prescription drugs were “used a lot in school because it’s not easily detected.”
- Ketamine has reportedly increased in popularity. “One guy who sells it says he can make a fortune because nobody knows how much to buy or how much to pay for it,” said a 17-year-old male.
- One youth tested positive for PCP and did not report taking any prescription medications. One youth tested positive for benzodiazepines but did not report taking any prescription medications.

Source: CESAR, University of Maryland, College Park. Findings from Wicomico County, December 2001.

OPUS DETENTION STUDY

V. DETENTION STUDY METHODS

- Nurses or substance abuse counselors obtained voluntary and anonymous urine specimens from youths detained in Maryland's five² detention facilities (Carter, Cheltenham, Hickey, Noyes, and Waxter).
- Only youths who had been admitted to the facility during the last 72 hours and who were not being transferred from another secure facility were included.
- The urine specimens were sent to a laboratory³ to be 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.

² In the data collection period for September-November, 2000, only four detention facilities participated in this study—Carter, Cheltenham, Noyes, and Waxter.

³ American Medical Laboratories, Chantilly, VA

VI. DETENTION STUDY FINDINGS

OPUS Detention Study Results Over Six Data Collection Periods

This section presents comparisons of the urinalysis results of Detention Studies across six data collection periods. Full OPUS reports may be accessed at www.dewsonline.org or by contacting CESAR directly (301-403-8329).

- The percentage of youths that provided urine specimens from all facilities in the most recent data collection (March-June 2002) ranged from 83% to 98% (data not shown).
- In the most recent data collection (March-June 2002), urine specimens were collected from 426 juveniles. Across the six data collection periods, 3,198 juveniles provided a urine specimen (Table 1).
- In all time periods, youths were most likely to test positive for marijuana. Marijuana-positive urinalysis results ranged from 39% to 45% across the six data collection periods (Table 1).
- Urinalysis test results show little Ecstasy use. One juvenile tested positive for MDMA in the most recent March-June 2002 Detention Study (Table 1).
- The percentage of youths who tested positive for marijuana increased with age. By age 16, almost one-half of youths tested positive for marijuana (Figure 1).

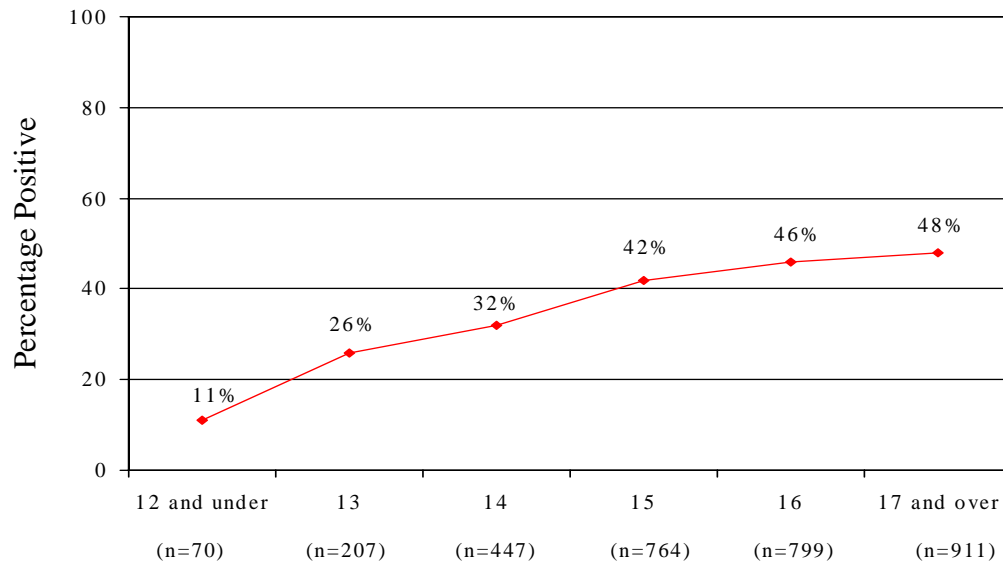
Table 1. Urinalysis Test Results Over Six Data Collection Periods

	February- May, 1999 (n=545)	January- May, 2000 (n=802)	September- November, 2000 (n=555)	March- June, 2001 (n=409)	September- November, 2001 (n=483)	March- June, 2002 (n=426)
<u>Positive For:</u>						
	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>
Marijuana	39	42	43	41	41	45
Cocaine	2	1	3	3	3	5
Opiates	2	1	2	2	1	2
Amphetamines	1	1	4	4	1	1
PCP	**	**	2	2	1	2
Benzodiazepines	1	**	1	1	**	**
Propoxyphene	**	**	**	1	**	**
MDMA	**	**	**	2	**	**
Any Drug (of 10)	42%	43%	48%	46%	43%	47%

Note: Urine specimens were analyzed for 10 drugs: amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, methaqualone, opiates, PCP, and propoxyphene.

**Occurred in zero or less than one percent. Barbiturate and methadone positives occurred in zero percent or less than one percent across all data collection periods and have been omitted from the table.

Figure 1. Percentage Testing Positive for Marijuana, by Age⁴
(n=3,198 Male and Female Juvenile Detainees, 1999-2002)



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 MDMA.

⁴ Age information for 22 juveniles was missing.

APPENDIX: COMPARISONS ACROSS INTAKE SITES

Table A. Percentage of Parents and Juveniles Who Agreed to Participate

Table B. Percentage of Tested Juveniles, by Offense

Table C. Percentage of Urine Specimens that Tested Positive, by Substance

**Table A. Percentage of Parents and Juveniles Who Agreed to Participate
(Males and Females combined)**

Intake Site, in alphabetical order	Parents	Juveniles	
	(n) % Agreed	(n) % Agreed to interview	(n) % Agreed to urinalysis
Allegany & Garrett Counties*	(38) 92%	(35) 94%	(29) 88%
Anne Arundel County	(70) 91%	(64) 100%	(50) 78%
Baltimore City*	(68) 99%	(67) 93%	(51) 82%
Baltimore County 2002	(44) 95%	(42) 98%	(33) 81%
Calvert County	(54) 98%	(54) 100%	(50) 94%
Caroline, Dorchester, Somerset, & Talbot Counties*	(75) 96%	(72) 100%	(64) 89%
Carroll County 2002*	(59) 92%	(54) 98%	(51) 96%
Cecil County	(49) 98%	(48) 100%	(46) 96%
Charles County	(62) 95%	(59) 95%	(52) 93%
Frederick County*	(71) 92%	(65) 99%	(50) 78%
Harford County 2002	(65) 91%	(59) 95%	(51) 91%
Howard County	(79) 91%	(72) 97%	(50) 71%
Kent & Queen Anne's Counties	(69) 93%	(64) 97%	(51) 82%
Montgomery County	(62) 98%	(61) 97%	(50) 85%
Prince George's County	(64) 97%	(62) 98%	(50) 82%
St. Mary's County	(70) 84%	(59) 97%	(50) 88%
Washington County*	(68) 87%	(59) 97%	(50) 88%
Worcester County	(59) 100%	(59) 100%	(50) 91%
Wicomico County	(60) 92%	(55) 100%	(51) 86%

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.

*Twenty-nine juveniles provided urine specimens in Allegany and Garrett Counties; data is missing for one youth whose specimen appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Baltimore City; three of these specimens were lost due to laboratory error. Sixty-four juveniles provided urine specimens in Caroline, Dorchester, Somerset, and Talbot Counties; data is missing for three youths whose specimens appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Carroll County; one specimen was not tested due to insufficient quantity. Fifty juveniles provided urine specimens in Frederick County; three of these specimens were lost due to laboratory error. In Washington County, urinalysis data was missing for one youth whose specimen appeared to have been intentionally altered, so data are based on 49 specimens.

Table B. Percentage of Tested Juveniles, by Offense⁵
(Males and Females combined)

Intake Site, in alphabetical order	Offenses					
	Drug	Personal	Property	Status	Miscellaneous	Total
Allegany & Garrett Counties (n=28)*	17%	21%	28%	31%	3%	100%
Anne Arundel County (n=50)	10%	32%	46%	4%	8%	100%
Baltimore City (n=48)*	37%	21%	23%	4%	15%	100%
Baltimore County 2002 (n=33)	6%	15%	64%	--	15%	100%
Calvert County (n=50)	24%	28%	28%	10%	10%	100%
Caroline, Dorchester, Somerset, & Talbot Counties (n=61)*	5%	30%	25%	32%	8%	100%
Carroll County 2002 (n=50)*	18%	12%	39%	8%	23%	100%
Cecil County (n=46)	11%	37%	41%	7%	4%	100%
Charles County (n=52)	14%	18%	37%	10%	21%	100%
Frederick County (n=47)*	26%	17%	30%	21%	6%	100%
Harford County 2002 (n=51)	8%	39%	35%	10%	8%	100%
Howard County (n=50)	22%	12%	40%	20%	6%	100%
Kent & Queen Anne's Counties (n=51)	33%	16%	26%	17%	8%	100%
Montgomery County (n=50)	14%	20%	42%	10%	14%	100%
Prince George's County (n=50)	28%	10%	26%	12%	24%	100%
St. Mary's County (n=50)	22%	30%	12%	30%	6%	100%
Washington County (n=49)*	12%	19%	37%	20%	12%	100%
Wicomico County (n=50)	14%	34%	28%	14%	10%	100%
Worcester County (n=51)	22%	4%	28%	29%	17%	100%

Note: 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 offenses include drug 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 violation, warrant, resisting arrest, public peace/disorderly conduct, trespassing, prostitution, manufacturing explosives, telephone/computer misuse, and traffic violations.

*Twenty-nine juveniles provided urine specimens in Allegany and Garrett Counties; data is missing for one youth whose specimen appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Baltimore City; three of these specimens were lost due to laboratory error. Sixty-four juveniles provided urine specimens in Caroline, Dorchester, Somerset, and Talbot Counties; data is missing for three youths whose specimens appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Carroll County; one specimen was not tested due to insufficient quantity. Fifty juveniles provided urine specimens in Frederick County; three of these specimens were lost due to laboratory error. In Washington County, urinalysis data was missing for one youth whose specimen appeared to have been intentionally altered, so data are based on 49 specimens.

⁵ Offense coding may vary between the 2002 OPUS Annual Report and individual county reports; to compare charges across intake sites, offenses were recoded for consistency.

**Table C. Percentage of Urine Specimens that Tested Positive, by Substance
(Males and females combined)**

Intake Site, in alphabetical order	Positive For:				
	Marijuana	Cocaine	Opiates	Amphetamines	Any Drug (of 10)
Allegany & Garrett Counties (n=28)*	21%	0%	0%	11%	29%
Anne Arundel County (n=50)	18%	2%	4%	4%	24%
Baltimore City (n=48)*	44%	0%	0%	0%	44%
Baltimore County 2002 (n=33)	15%	0%	0%	0%	15%
Calvert County (n=50)	32%	0%	0%	4%	38%
Caroline, Dorchester, Somerset, & Talbot Counties (n=61)*	15%	2%	0%	5%	20%
Carroll County 2002 (n=50)*	8%	0%	0%	4%	12%
Cecil County (n=46)	28%	2%	0%	9%	35%
Charles County (n=52)	12%	0%	2%	2%	15%
Frederick County (n=47)*	28%	0%	2%	0%	28%
Harford County 2002 (n=51)	28%	4%	2%	4%	29%
Howard County (n=50)	18%	0%	0%	4%	18%
Kent & Queen Anne's Counties (n=51)	35%	0%	0%	0%	35%
Montgomery County (n=50)	18%	0%	0%	4%	22%
Prince George's County (n=50)	40%	0%	0%	2%	40%
St. Mary's County (n=50)	20%	0%	4%	2%	26%
Washington County (n=49)*	16%	0%	0%	0%	16%
Wicomico County (n=50)	16%	0%	0%	0%	18%
Worcester County (n=51)	31%	2%	0%	0%	31%

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.

*Twenty-nine juveniles provided urine specimens in Allegany and Garrett Counties; data is missing for one youth whose specimen appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Baltimore City; three of these specimens were lost due to laboratory error. Sixty-four juveniles provided urine specimens in Caroline, Dorchester, Somerset, and Talbot Counties; data is missing for three youths whose specimens appeared to have been intentionally altered. Fifty-one juveniles provided urine specimens in Carroll County; one specimen was not tested due to insufficient quantity. Fifty juveniles provided urine specimens in Frederick County; three of these specimens were lost due to laboratory error. In Washington County, urinalysis data was missing for one youth whose specimen appeared to have been intentionally altered, so data are based on 49 specimens.