

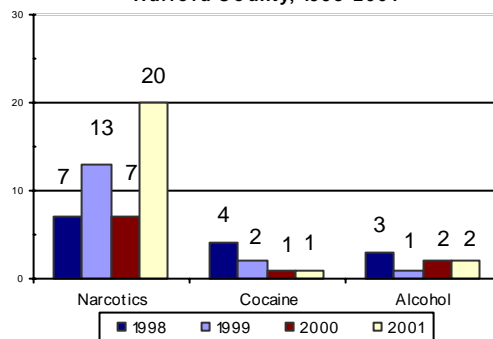
THE DEWS COUNTY SNAPSHOT

SUBSTANCE ABUSE TRENDS IN HARFORD COUNTY

DRUG USE IN HARFORD COUNTY: OVERVIEW

- ⇒ The most persistent problems in the county continue to be alcohol and marijuana, but use of heroin and other opiates has increased.
- ⇒ Nearly seven out of ten adult and juvenile Harford County treatment admissions identified alcohol as a drug of abuse in fiscal year 2002, while 37 percent identified marijuana.
- ⇒ Over half of high school seniors reported current use of alcohol, and over a quarter reported current use of marijuana in 2001.
- ⇒ More 10th graders admitted current and past-year use of marijuana than cigarettes; 12th graders admitted about equal lifetime use of marijuana and cigarettes.
- ⇒ Overdose deaths in the county were at a four-year high in 2001. Most (20) of the deaths were narcotics-related, including two deaths related to methadone and one to oxycodone.
- ⇒ Reportedly, ecstasy is used to increase self-esteem and social status. A new method of use described by a Drug Scan contact is crushing ecstasy pills and putting the powder on lollipops.

Number of Narcotics-, Cocaine-, and/or Alcohol-Related Overdose Deaths in Harford County, 1998-2001



Source: Adapted by CESAR from data from the Office of the Chief Medical Examiner.

NOTEWORTHY FINDINGS: ECSTASY, LSD, HEROIN AND OXYCODONE

Nearly 7 percent of county 12th graders reported current use of designer drugs (e.g., ecstasy, MDMA), and more than 10 percent reported current use of other amphetamines. Less than 6 percent of high school seniors across the

state—as well as across the country—reported current amphetamine use. By comparison, current amphetamine use among Harford 6th, 8th, and 10th graders ranged from 1 percent to 8 percent.

One Drug Scan contact reported that ecstasy users

were younger than in previous years and another stated that use had increased in the past 12 months. The typical user was white, under 25, and as likely to be male as female. Ecstasy use was reported to be a source of pride among some students, used to increase self-esteem

MESSAGE FROM THE DIRECTOR

The *DEWS County Snapshot* is our attempt to make available the latest evidence on county drug trends. Every six to eight weeks, Drug Early Warning System (DEWS) staff will publish a Snapshot of a different Maryland county. Snapshots for Baltimore, Prince George's, and Montgomery counties are planned for the months ahead. The *Snapshot* is intended to alert readers to current trends in their county.

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KEY TERMS

OPUS (Offender Population Urinalysis Screening)—Staff conduct interviews with juvenile offenders at county intake centers.

Drug Scan—Staff conduct interviews with professionals in education, criminal justice, prevention, and public health.

MAS (Maryland Adolescent Survey)—A bi-annual survey of drug use by 6th, 8th, 10th, and 12th graders.

“Current use” is the use of a drug at least once in the past 30 days.

Drug Mentions—The Substance Abuse Management Information System (SAMIS) is maintained by the Alcohol and Drug Abuse Administration to monitor treatment admissions. Up to three drugs of abuse are noted.

Juvenile Offenders Talk about Heroin

"There is lots of heroin. The people I knew were anal about sharing needles. Everyone had their own. If they let someone borrow it, they would wash it out with bleach. They also went to get tested for AIDS once a month. Even preppy people are using heroin now. People look for heroin when they can't get Oxy." (18-year-old)

"They start around age 13, definitely in middle school. . . Everyone is on heroin in north Harford. They get it from the Strip in Baltimore City on Baltimore Street." (15-year-old)

"[Heroin users] will mix heroin with any drug . . . pot, anything . . . People out here are loaded and give their kids whatever they want." (18-year-old)

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and social status or to "look cool."

Juvenile offenders interviewed by OPUS staff reported that ecstasy was popular among their peers and was considered to be a "love drug" and a "happy pill." One youth stated, "I know straight-A kids who take it and broke people who take it." These juveniles reported that ecstasy was consumed by swallowing a pill, or by sniffing a pill that had been crushed. Youth also reported that users might dissolve an ecstasy pill in a beverage and drink it. A Drug Scan contact described a new method of use: crushing ecstasy pills and putting the powder on lollipops.

Data concerning the use of hallucinogens were mixed. Among Harford 12th graders, current use of LSD decreased from 11 percent in 1998 to just over 6 percent in 2001. Current use by 8th and 10th graders also decreased during this time. These findings were confirmed by juvenile offenders who reported that LSD was neither preva-

lent nor popular.

Approximately 8 percent of Harford County high school seniors reported current use of other hallucinogens (e.g., 'shrooms, mescaline), compared to less than 4 percent of 12th graders statewide. Lifetime use of other hallucinogens was also higher than in neighboring counties in 2001. Fifteen percent of Harford juveniles admitted to treatment in fiscal year 2002 mentioned hallucinogens as a problem. These findings were bolstered by a report by a Drug Scan contact who estimated that "7 to 10 percent" of her school population had tried or used psychedelic mushrooms. She also described observing more doodling of "shrooms" on notebooks. A youth interviewed by OPUS staff referred to one type of mushroom, "Rainbow," that allegedly produced particularly strong hallucinations.

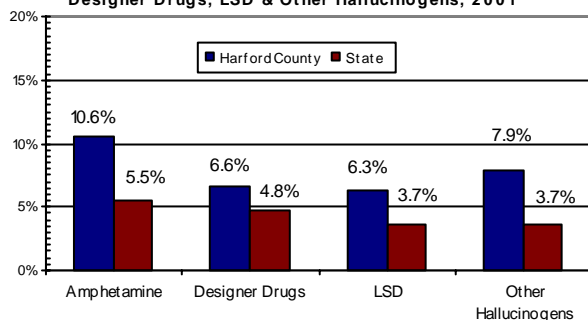
Treatment admissions data for the county revealed that heroin mentions by adults admitted to treatment increased by 69 percent between fiscal years 1998 and 2002 (from 297 to 501), while adult "other opiates" mentions increased by more than three-quarters (from 66 to 116) during the same period. However, juvenile mentions of heroin as a problem on admission to treatment varied from 32 mentions in fiscal year 1998 to 18 mentions in fiscal year 2002. The number of juveniles who mentioned "other opiates" as a

problem at admission increased from 2 in 1998 to 13 in 2002.

Nearly 6 percent of county high school seniors reported current use of narcotics (i.e. codeine, morphine, methadone, oxycodone or Percodan). Current narcotics use by 6th, 8th, and 10th graders in 2001 ranged from 1 percent to 5 percent.

Although only one OPUS urine test was positive for opiates, several juvenile offenders interviewed by OPUS staff claimed that heroin was especially popular in the more affluent areas of Harford County, particularly among "preps." One juvenile stated that "the big time heroin heads are the jocks and rich white kids, not the freaky ravers and punks." When asked why youths would use heroin, one juvenile replied, "I got into it because I knew someone who was using—my best friend—so I thought it would be okay." The OPUS statements appeared to support a Drug Scan report from a treatment provider who said that heroin use was starting at an earlier age and that those entering treatment were between 18 and 24. Two juveniles interviewed by OPUS staff reported that when heroin was unavailable, kids used OxyContin or Percocet as substitutes. One youth commented, "There's nothing to do up here, and parents don't watch their kids."

Percentage of Harford County & Statewide 12th Grade Students Reporting Current Use of Amphetamines, Designer Drugs, LSD & Other Hallucinogens, 2001



Harford, N = 326; State, N = 6,078

Source: Adapted by CESAR from the Maryland Adolescent Survey 2001. The MAS Report does not provide the standard errors around these observations; therefore, caution should be exercised in interpreting any differences between county and state estimates.

CONTINUING CHALLENGES: ALCOHOL & MARIJUANA

Nearly 70 percent of all adult and juvenile clients (1,995) admitted to treatment in Harford County mentioned alcohol as a substance of abuse in 2002. This included 66 percent of juveniles and 70 percent of adults. However, adult alcohol mentions decreased by 13 percent (from 1,410 to 1,228) between fiscal years 1998 and 2002.

More than half of all Harford County 12th graders and 41 percent of 10th graders reported current use of alcohol in 2001. Four out of ten 12th graders and more than a quarter of 10th graders admitted current binge drinking (slightly more than the statewide levels). A Drug Scan contact stated that “at least 80 percent” of her high school seniors had tried or used alcohol, a claim that was supported by MAS findings that 82 percent of 12th graders reported having used alcohol at least once.

OPUS offenders reported that alcohol was easily obtained from parents, older friends, or siblings, or even by “shoulder tapping” strangers in front of liquor stores. A Drug Scan contact stated that athletes and upper-classmen were particularly apt to drink alcohol, that they did not perceive alcohol as a drug, and that they viewed it as socially acceptable. This contact also confirmed OPUS claims that youths who could not obtain alcohol any other way often stole it from their parents or obtained it from older students and siblings.

More than a quarter of 10th and 12th grade students in Harford County reported current use of marijuana in 2001. Lifetime levels of use were even higher: 57 percent of 12th graders and 41 percent of 10th graders. In fact, 10th graders reported both more past-month and past-year use of marijuana than cigarettes. Twelfth graders reported about equal lifetime use of marijuana and cigarettes.

More than 82 percent of the 246 juveniles entering treatment in fiscal year 2002 cited marijuana as a substance of abuse. Since 1998, juveniles have most frequently mentioned marijuana as a drug of abuse, but mentions seem to be decreasing. In comparison, slightly more than 30 percent of adults admitted to treatment in the county listed marijuana as a substance of abuse in 2002.

Both OPUS juveniles and Drug Scan contacts described marijuana as the most popular illicit drug in the county. Reportedly, there was no single stereotypical user; rather, all types of people use marijuana. Paraphernalia often used includes bongs, pipes, rolling papers, and “blunts” (marijuana cigars). A Drug Scan contact said that blunts were especially prevalent. Juveniles reported that marijuana could be laced with cocaine (chronic), ketamine, crystal meth, PCP, and embalming fluid. One youth said that users “suck in the smoke someone else breathes out” in order to get “higher.”

Message From the Director (continued)...

More extensive supporting documentation for each issue can be found on the DEWS website (www.dewsonline.org).

It is important to recognize the limitations of the *Snapshot*. It is neither an exhaustive overview of a county's drug trends nor a review of possible interventions or solutions. Rather, its unique strength is that it provides readers with a current picture of a county's drug trends after reviewing recent DEWS interviews with youthful arrestees (OPUS) and knowledgeable professionals (Drug Scan), in conjunction with more traditional indicators of drug use.

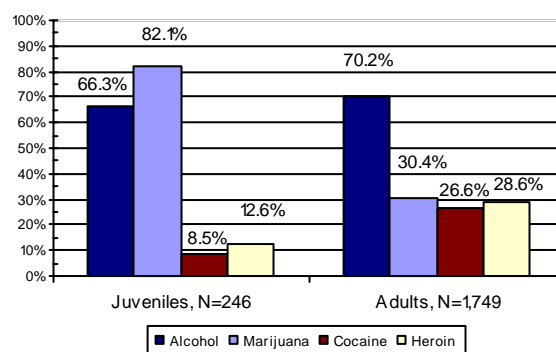
The combination of the recent DEWS interview results with the more extensive quantitative, but typically older, indicator data provides a rare opportunity to detect emerging drug trends. Our goal is to alert readers to changes in drug use that, if substantiated, can form the basis for developing effective interventions and public policies.

You, our readers, play an important role in this new process. After reviewing the *Snapshot*, please determine if you have additional information regarding the trends presented. Let us know if you agree with our assessments or think we have missed an important topic. E-mail us at dews@cesar.umd.edu, or call the DEWS tip line (877-234-DEWS) with your comments. With your help, we can ensure that Maryland has the most current information available with which to monitor county drug trends and inform policy.

Eric D. Wish, Ph.D.

CESAR Director

Alcohol, Marijuana, Cocaine, and Heroin Mentions at Treatment Admission in Harford County, Juveniles & Adults, FY 2002



Source: Adapted by CESAR from SAMIS data.

Cocaine Treatment in Harford County

Nearly one-quarter of all adult and juvenile Harford admissions to treatment reported cocaine/crack as a substance of abuse.

Juvenile Offenders Talk About Heroin

(continued from page 2)

"It's [heroin] really big around Fallston and Bel Air—probably because this area has a lot of money to spend on it . . . [Users are] mostly white students who are doing really good in school. You wouldn't think they are the ones." (16-year-old)

"Heroin comes in a vial. I guess a few shoot it, [but] a lot snort it. Kids will do oxy or Percocet if they can't get heroin. 'Scramble' [a type of heroin] is white with brown specks. It comes in capsules and is made to shoot but kids snort it. Use starts around age 13-14. The boys and girls that use are all thugged out." (14-year-old)

"There's lots of heroin. I don't know anything about (it), I just know people do it. . . . It's all preps." (16-year-old)

TREATMENT & PREVENTION SOURCES

Harford County:

Adolescent Substance Abuse Services, Harford County Health Department
410-893-4181 or 410-638-3080

Drug Abuse Program, Harford County Health Department 410-638-3081

Drug & Alcohol Impact Program
410-638-3333

Maryland:

AIDS Hotline 800-638-6252

Alcohol & Drug Abuse Administration
410-402-8600, www.maryland-adaa.org

Maryland Youth Crisis Hotline
800-422-0009

Drug Early Warning System (DEWS)
877-234-DEWS, www.dewsonline.org
For additional information about the data presented in this report, please visit the Harford Snapshot on the web.

National:

Justice Statistics Clearinghouse
800-732-3277

National Clearinghouse for Alcohol & Drug Information (NCADI) 301-468-2600 or
800-729-6686, www.health.org

Office of National Drug Control Policy (ONDCP) Drugs & Crime Clearinghouse
800-666-3332
www.whitehousedrugpolicy.gov

National Criminal Justice Reference Service (NCJRS) 800-851-3420, www.ncjrs.org

Center for Substance Abuse Research (CESAR)
301-403-8329, www.cesar.umd.edu

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