

THE DEWS COUNTY SNAPSHOT

SUBSTANCE ABUSE TRENDS IN MONTGOMERY COUNTY

DRUG USE IN MONTGOMERY COUNTY

- ⇒ Juveniles reporting abuse of hallucinogens on admission to treatment decreased from 13 percent in fiscal year 1998 (and 9% in 2001) to 6 percent in 2002.
- ⇒ Overdose death data reveal that 13 adult residents died of drug overdoses in 2002, a decrease of 9 from 2001. Nearly half these deaths were narcotics-related, down from 70 percent in 2001 and 2000.
- ⇒ The substances most frequently mentioned by adults admitted to treatment in fiscal year 2002 were alcohol (78%), cocaine (33%), marijuana (30%), and

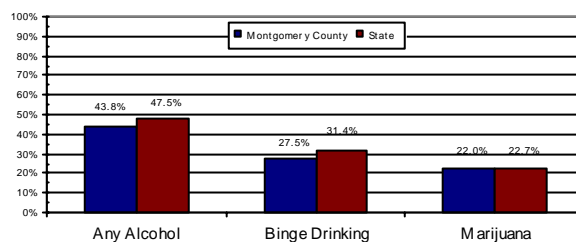
heroin (11%). Seven percent of adults cited other opiates.

- ⇒ More Montgomery County juveniles entering treatment mentioned marijuana (95%) as a substance of abuse than alcohol (74%).
- ⇒ More than one-fourth of Montgomery

County's high school seniors admitted to binge drinking within the past 30 days.

- ⇒ OPUS youths report that OxyContin and Percocet are popular in the county. A juvenile reports that OxyContin is more popular because it is a "cleaner form of heroin."

Percentage of Montgomery County 12th-Grade Students Reporting Current Alcohol Use, Binge Drinking, and Marijuana Use, 2001



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 estimates.

NOTEWORTHY FINDINGS ABOUT HEROIN, OXYCODONE, MUSHROOMS AND LSD

One out of every ten Montgomery County persons admitted to treatment in fiscal year 2002 cited heroin as a substance of abuse. Drug Scan contacts reported that heroin use in the county appears to be stable, and that users tend to be older

black males, and occasionally, white males. One contact thought that most of the heroin in the county was imported from the District of Columbia, Baltimore, and New York City. Additionally, more than 6 percent (302 mentions) of all clients admitted to treat-

ment mentioned "other opiates," a category that may include oxycodone and narcotics like codeine, morphine, methadone, or Percodan.

Opiate abuse was found primarily among adults. (Less than 1 percent of ju-

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. The *Snapshot* is intended to alert readers to current trends in their county. More extensive supporting documentation for this issue is available at www.dewsonline.org.

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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.

OPUS Youths Tell Us Why Kids Use Drugs

“People use drugs to feel good about themselves.” (18-year-old)

“ . . . to get things off their mind.” (15-year-old)

“ . . . to feel happy.” (16-year-old)

“...to have more fun at a party.” (14-year-old)

“People use drugs because they are depressed, because they are trying to have fun, or to chill.” (16-year-old)

“People use marijuana because it clears your head. If you have stress and you don’t want to think about it ...” (15-year-old)

“People use drugs to relieve stress, to get messed up, and to do things that are fun.” (17-year-old)

“ They wanna ‘go hard.’” (15-year-old)

“ . . . because they have low self-esteem.” (15-year-old)

juveniles mentioned heroin, and less than 2 percent mentioned other opiates.) The 2001 MAS revealed that less than 1 percent of the county’s high school seniors had ever tried heroin, although more than 3 percent had tried narcotics at least once in their lifetime. No 12th grade student reported current heroin use, and less than ½ of 1 percent reported current use of narcotics. Similarly, none of the 21 OPUS juveniles who agreed to urinalysis tested positive for opiates of any kind.

However, a Drug Scan professional whose work brings him into contact with heroin addicts reported that he is seeing more youths entering treatment. He stated that typical heroin addicts were previously in their 30s, but that the age of these addicts appeared now to be between 18 and 20. This contact noted that heroin users typically start out “snorting” the drug, but later turn to IV use.

OPUS youths reported that OxyContin has be-

come increasingly popular because it is considered a “cleaner form of heroin.” A Drug Scan contact reported having seen some cases of prescription forging and illegal use of Medicaid cards to obtain OxyContin. Juveniles reported that users were swallowing and snorting the drug as well as burning it on foil and using a straw to inhale the smoke. In addition to OxyContin, Percocet was cited by OPUS youths as a popular prescription drug used illicitly by juveniles.

The number of hallucinogen mentions by juveniles decreased from 13 percent (38) in fiscal year 1998 to 6 percent (27) in fiscal year 2002. Nevertheless, hallucinogens continue to be the third most frequently mentioned substance of abuse among county juveniles, although hardly any 12th graders reported current use of LSD or other hallucinogens (e.g., mescaline, ‘shrooms (excluding PCP)). However, 8 percent of 12th graders reported having tried LSD at least once, and 6 percent reported having experimented with other hallucinogens. Among 6th, 8th, and 10th graders, current use of LSD or other hallucinogens ranged from less than ½ of 1 percent to nearly 3 percent, and lifetime use ranged from less than ½ of 1 percent to nearly 4 percent.

An OPUS youth reported that LSD could be placed on the tongue as a paper strip. Another juvenile described a

practice of placing drops of liquid acid on pieces of Listerine mint gel sheets. According to other reports gathered by OPUS staff, LSD users dip cigarettes or marijuana joints in acid and then smoke the drug.

A Drug Scan contact reported seeing some increase in mushroom use in the county, mainly in the Olney area. According to this contact, users consume it orally, or they make tea from the ‘shrooms.

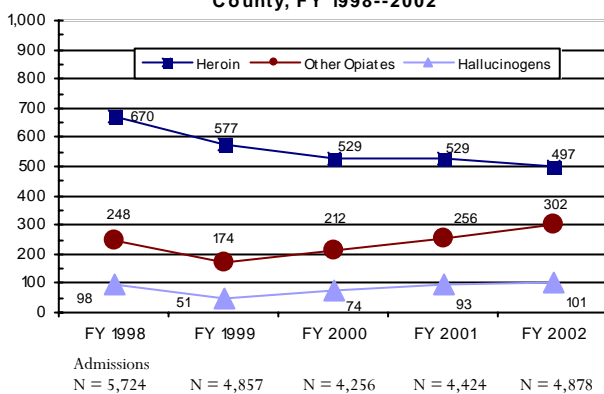
A few OPUS youths reported on the availability and popularity of LSD and ‘shrooms. Interviewed youths agreed that users usually eat ‘shrooms — sometimes putting mushrooms in food before eating it. Others said that users might drink alcohol or smoke marijuana while using LSD or ‘shrooms.

OPUS Youths Describe Marijuana

More so than in other Maryland counties, Montgomery County youths reported on the use and availability of dippers. (Dippers are cigarettes or marijuana joints dipped in embalming fluid before being smoked.)

“Muerte” was purported to be hybrid marijuana mixed with heroin. OPUS youths also reported on a new type of marijuana, “Blueberry,” which they believe has stronger effects than those of other types. Blueberry was also mentioned by OPUS youths in neighboring counties, including Baltimore, Prince George’s, Carroll, Charles, and Harford counties.

Heroin, Other Opiates, and Hallucinogens Mentions at Admission to Treatment, Montgomery County, FY 1998--2002



Source: Adapted by CESAR from SAMIS data.

CONTINUING CHALLENGES: ALCOHOL AND MARIJUANA

Alcohol continues to be the most frequently mentioned substance of abuse by Montgomery County adults admitted to treatment. In fiscal year 2002 more than three out of four adult treatment admissions reported abusing alcohol.

Montgomery school data revealed that more than a quarter of 12th graders reported current binge drinking, and 44 percent reported current use of alcohol in 2001. Alcohol was also the most widely used substance among county 8th (15%) and 10th graders (27%). Additionally, approximately 6 percent of 8th graders—and 17 percent of 10th graders—reported current binge drinking. OPUS juveniles reported that as many as 5 or 10 beers or 40 ounces of alcohol (beer or malt liquor) might be consumed in one night. These youths reported that use tends to begin in 7th or 8th grade.

Alcohol was said to be easy to obtain. One Drug Scan contact reported that kids find it at home or go to friends' homes to drink. Users are often "latch-key" kids whose parents are not at home to supervise them. According to this contact, the attitude is that "it's only alcohol," and many parents are unwilling to remove it, even when their children are caught with it.

Among juveniles entering treatment, marijuana was the most frequently mentioned substance of abuse. In fact, nearly 95 percent of ju-

veniles admitted to treatment mentioned marijuana in fiscal year 2002. Fewer than 30 percent of adults mentioned marijuana.

A review of Montgomery MAS data reveals that current use rates of marijuana are similar to binge-drinking rates. MAS data indicate that in 2001, 22 percent of county 12th graders reported current marijuana use, a percentage that is comparable to both statewide and national data for the same year. Students reporting use of marijuana at least once in their lifetime increases with age: 2 percent of 6th graders, 12 percent of 8th graders, 29 percent of 10th graders, and 43 percent of seniors. Among the 21 OPUS youths who participated in urinalysis, nearly one-third (7) tested positive for marijuana. Drug Scan contacts reported that students tell them that marijuana is "easy to get if you want it."

OPUS juveniles reported that users primarily smoke marijuana using bong, pipes, rolling papers, and blunts. A few indicated that marijuana is also eaten. Age of first use, according to these youths, depends on peers, siblings, and individual backgrounds, but youths can begin as early as ages 8 or 9, they say. One youth reported that marijuana can be laced with PCP (called "Boat") or cocaine. Other drugs used to lace marijuana are heroin and embalming fluid, youths say.

Message From the Director (continued)

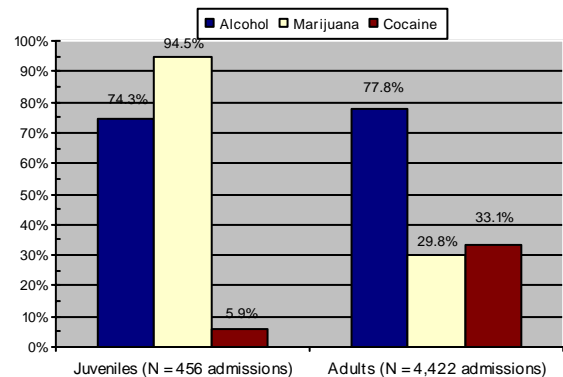
It is important to recognize the limitations of the *Snapshot*. It is neither an exhaustive overview of a county's drug trends nor a review of possible interventions or solutions. Rather, its unique strength comes from combining traditional indicators of drug use with information gathered from recent DEWS interviews with youthful offenders (OPUS) and knowledgeable professionals (Drug Scan).

The combination of the recent DEWS interview results with the more extensive, but typically older, quantitative 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.
Director, CESAR

Percentage of Alcohol, Marijuana and Cocaine Mentions Among Treatment Admissions, By Age Group, FY 2002



Source: Adapted by CESAR from SAMIS data.

Note: Treatment clients are screened at intake to determine their major substances of abuse. Since each admission may have up to three drug mentions associated with it, percentages will not add up to 100%.

TREATMENT & PREVENTION SOURCES

Cocaine-Related Treatment Admissions in Montgomery County

Cocaine was the second (33%) most frequently mentioned drug among abused substances by Montgomery County adults in fiscal year 2002. Nevertheless, this was a decrease from 2001, when 41 percent mentioned it. Juvenile mentions of cocaine ranked third (6%) among abused substances cited by those admitted to treatment.

Drug Early Warning System (DEWS)

877-234-DEWS

www.dewsonline.org

For additional information about the data presented in this report, please visit the Montgomery County Snapshot on the web.

Montgomery County:

The Montgomery County Community Partnership Prevention Center
504 E. Diamond Ave., Suite H
Gaithersburg, MD 20877-5022
301-216-3901
www.mcpartners.org

Substance Abuse Screening
240-777-1430

The Other Way Day Treatment Program 240-777-1475

Second Genesis
8611 Second Ave.
Silver Spring, MD 20910
301-563-6527
www.secondgenesis.org

Maryland:

AIDS Hotline: 800-638-6252

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

Maryland Youth Crisis Hotline
800-422-0009

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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