



2011 Juvenile Arrestee Drug Use in the San Diego Region

June 2012

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2011 JUVENILE ARRESTEE DRUG USE IN THE SAN DIEGO REGION

INTRODUCTION

Between 1987 and 2004, SANDAG completed interviews with local arrestees regarding their drug use histories as part of the federally-funded Arrestee Drug Abuse Monitoring (ADAM) program. In comparison to other interview and survey efforts with households and juveniles across the country (e.g., National Survey on Drug Use and Health, Youth Risk Behavior Survey), the ADAM program was unique in that it included an objective measure of recent drug use (i.e., urinalysis), in addition to collecting self-reported information.

When the juvenile component of the ADAM program was discontinued in 2003 (one year before the entire program ended), local funding was secured, which enabled this important data collection effort to continue in San Diego County as the Substance Abuse Monitoring (SAM) program¹. In 2011, SAM was supported by the California Border Alliance Group (CBAG) and the County of San Diego. Their support, as well as funding from SANDAG member agencies through the Criminal Justice Clearinghouse and the cooperation of the San Diego County Probation Department, which is necessary to conduct these interviews, is gratefully acknowledged.

This CJ Bulletin, "2011 Juvenile Arrestee Drug Use in the San Diego Region," is the first in a series presenting data collected (from both juveniles and adults) in the 2011 calendar year and now includes 12 years of data. As part of this study, a total of 130 youth were interviewed at Juvenile Hall during two separate months in 2011. Ninety-five percent (95%) or 124 of these youth provided a urine sample for drug testing purposes (95 males and 29 females). This research bulletin includes the results of urinalysis trends over time, as well as information pertaining to lifetime and recent self-reported drug use, perceived risk and availability of different drugs, and characteristics of the youth that were interviewed and how these factors may be related to drug use. In addition, all of the data (percentages and raw numbers) captured through the juvenile interviews and urinalyses for the past five years

(2007-2011) are available online at www.sandag.org/cj. For questions regarding the project methodology or data set, please contact SANDAG's Criminal Justice Research Division at (619) 699-1900.

BULLETIN HIGHLIGHTS

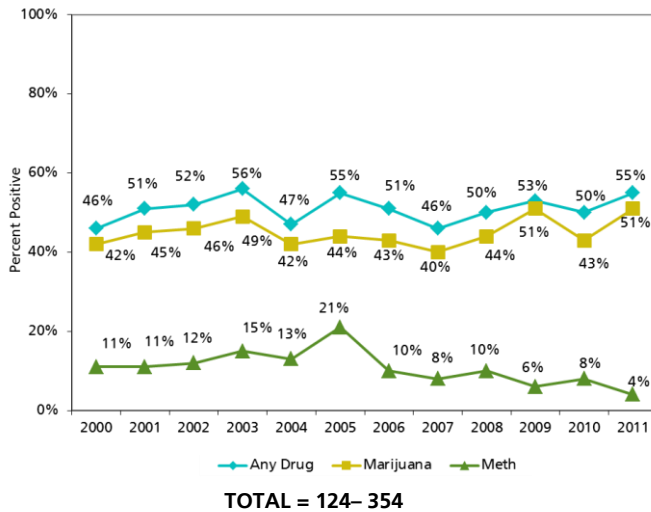
- In 2011, over half (55%) of the juvenile arrestees tested positive for at least one illicit substance. The percent of juveniles who tested positive for marijuana increased from 2010 to 2011 (43% to 51%), but the percent positive for meth (8% to 4%) and opiates (5% to 2%) decreased slightly.
- Half (50%) of youth reported that the first substance they ever tried was marijuana, up from 40 percent in 2010.
- Spice, or synthetic marijuana, was previously used by 52 percent of the youth, more than any other substance other than marijuana, alcohol, or tobacco. Youth reported it was almost as easy to get as tobacco.
- In 2011, around half (51%) of juveniles reported they had ever tried a hallucinogen, including ecstasy, LSD, or mushrooms. One in four had used more than one of these drugs and more than three-quarters (78%) of users reported ecstasy was "very easy" or "easy" to obtain.
- Two-thirds of the youth who had obtained prescription drugs illegally said it was "easy" or "very easy" to do so. Vicodin was the most commonly abused prescription drug and youth who reported abusing prescription drugs were also more likely to have tried other illegal substances.

¹ In 2007, a new scaled-back Arrestee Drug Abuse Monitoring program, ADAM II, was launched by the Office of National Drug Control Policy (ONDCP) in ten sites across the country with adult males, but not juvenile or adult female arrestees. For more information on this effort, please visit www.whitehousedrugpolicy.gov.

RECENT AND PAST DRUG USE

Since 2000, about half of juveniles interviewed as part of SAM have tested positive for at least one drug, with the most commonly used illicit drug being marijuana. As Figure 1 shows, in 2011, 55 percent tested positive for any substance, 51 percent for marijuana, and 4 percent for methamphetamine (meth). Compared to the previous year, the percent positive for marijuana increased, while the percent positive for meth decreased. In addition, two percent of the youth tested positive for cocaine, two percent for opiates (down from 5% in 2010), and four percent tested positive for multiple illicit drugs in 2011 (not shown).

Figure 1
OVER HALF OF JUVENILE ARRESTEES TESTED POSITIVE FOR A DRUG IN 2011

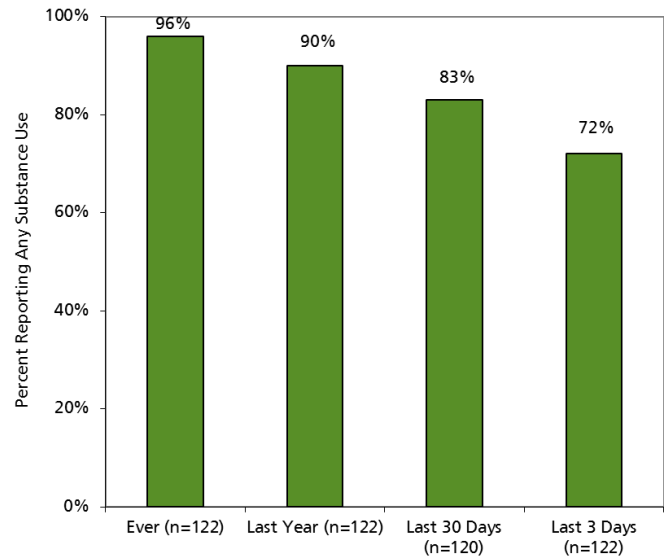


NOTES: Cases with missing information not included. Any drug includes marijuana, cocaine, methamphetamine, opiates, and PCP.

SOURCE: SANDAG SAM Program, 2011

In addition to obtaining a urine sample, youth are asked a series of questions regarding their experiences using alcohol, tobacco, and other substances. As Figure 2 shows, 96 percent of the youth reported that they had tried at least one drug in their lifetime (including tobacco and alcohol), 90 percent in the past year, 83 percent in the past 30 days, and 72 percent in the previous three days. Of the 117 youth who reported ever trying one of the substances listed in Table 1, the average (mean) number tried was 5.5 (range 1 to 14) (not shown).

Figure 2
ALMOST ALL JUVENILES INTERVIEWED REPORT PREVIOUS SUBSTANCE USE



NOTE: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

RECENT AND PAST DRUG USE (CONT'D)

In terms of which substances they had ever and recently used, around four-fifths or more of juveniles in 2011 reported trying alcohol, marijuana, or tobacco previously (starting around the age of 13 years old, on average) and more than half (59% to 63%) had used each of these substances during the past 30 days (Table 1). Between 1 and 52 percent of the youth also reported ever trying other substances, including spice, ecstasy, powder cocaine, inhalants, meth², mushrooms, Oxycontin, LSD, crack, heroin, rohypnol, GHB, and steroids. Youth were also asked about binge drinking (consuming five or more drinks on one occasion), with more than four-fifths (81%) reporting this behavior. Alcohol and marijuana were among the substances used by the greatest proportion of youth recently (within the last month), consistent with information from the National Survey on Drug Use and Health³. Just over half (51%) reported ever having tried a drug known to cause hallucinations (ecstasy, mushrooms, or LSD), with almost one-quarter (23%) saying they had tried more than one (not shown).

Table 1
YOUTH REPORT INITIATING SUBSTANCE USE AT
AROUND AGE FOURTEEN ON AVERAGE

	Ever Used	Avg. Age 1 st Use	Used Last 30 Days
Marijuana	94%	12.6	59%
Alcohol	91%	13.2	61%
Tobacco	82%	13.4	63%
Binge Alcohol	81%	14.1	43%
Spice	52%	15.2	30%
Ecstasy	47%	14.6	15%
Powder Cocaine	26%	14.8	7%
Inhalants	25%	13.7	4%
Meth	24%	14.6	10%
Mushrooms	24%	14.6	2%
Oxycontin	19%	14.7	4%
LSD	13%	14.6	2%
Crack	8%	14.4	0%
Heroin	7%	15.9	2%
Rohypnol	3%	14.0	1%
GHB	2%	15.0	1%
Steroids	1%	14.0	0%
TOTAL	113-124	1-113	124

SOURCE: SANDAG SAM Program, 2011

NOTES: Cases with missing information not included. Binge alcohol defined as five or more drinks on one occasion.

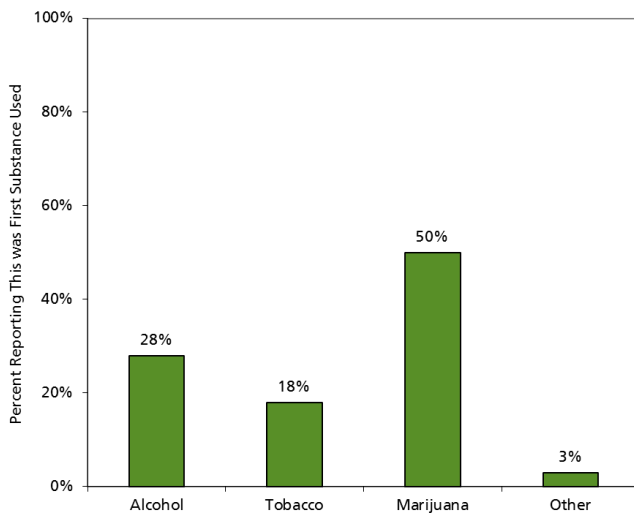
² While there was no gender difference in recent meth use, as measured by a positive urinalysis result, females were significantly more likely to report ever having tried meth (41%), compared to males (19%). This was the only significant gender difference in self-reported drug use.

³ Substance Abuse and Mental Health Services Administration (2011). *Results from the 2010 National Survey on Drug Use and Health*. Rockville, MD: Author.

GATEWAY AND OTHER DRUG USE PATTERNS

“Gateway drug” is a term used to refer to a substance (alcohol, tobacco, marijuana) whose use is thought to precede and possibly lead to the use of and dependence on harder drugs. When asked to describe what substance they had first used, almost all (96%) reported a gateway drug (not shown), including marijuana (50%), alcohol (28%), and tobacco (18%) (Figure 3). The “other” drugs included inhalants (2), meth (1), and ecstasy (1). When asked who they were with when they first used this substance, 61 percent said a friend, 11 percent a sibling, 11 percent another youth relative, 3 percent another adult relative, 1 percent a parent, 1 percent a step-parent, 1 percent someone else, and 17 percent said they were alone (not shown).

Figure 3
MARIJUANA FIRST SUBSTANCE USED BY MOST YOUTH



TOTAL = 119

NOTE: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

Additional analyses regarding patterns of gateway drug use also revealed that most youth had used all three, rather than just one or two of these substances. As Table 2 shows, of the 119 youth who had ever tried a gateway drug, 83 percent had tried all three.

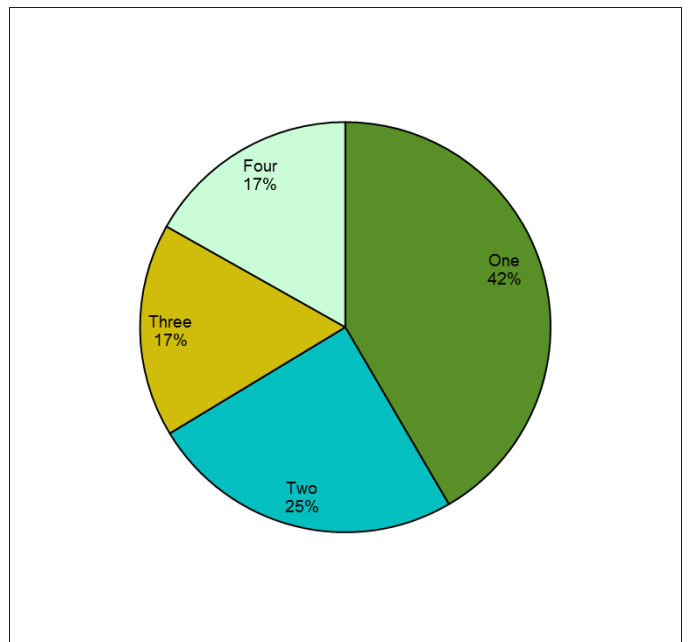
Table 2
MOST JUVENILES HAVE TRIED MORE THAN ONE GATEWAY DRUG

Gateway Drugs Youth Have Ever Tried	
Alcohol, Tobacco, and Marijuana	83%
Alcohol and Marijuana	9%
Marijuana Only	3%
Tobacco and Marijuana	2%
Alcohol and Tobacco	1%
TOTAL	119

SOURCE: SANDAG SAM Program, 2011

Figure 4 shows the proportion of youth who used one or more of the “harder drugs.” As this graph shows, 58 percent reported ever using more than just one of these four substances (meth, cocaine, mushrooms, or ecstasy). This pattern speaks to the severity of addiction for some of these youth and supports the need for effective treatment for this population.

Figure 4
MOST YOUTH WHO HAVE TRIED “HARDER DRUGS” HAVE USED MORE THAN JUST ONE



TOTAL = 72

NOTE: “Harder drugs” include methamphetamine, powder cocaine, mushrooms, and ecstasy.

SOURCE: SANDAG SAM Program, 2011

ILLEGAL PRESCRIPTION DRUG USE

According to the Office of National Drug Control Policy (www.whitehousedrugpolicy.gov), prescription drug abuse ranks second – only behind marijuana – as the nation’s most prevalent illegal drug problem. For this project, in 2011, 40 percent of the youth reported ever using prescription (37%) and/or over-the-counter medication (29%) illegally (not shown). These percentages are considerably higher than those reported for youth between the ages of 12 and 17 in the general population according to the National Household Survey on Drug Use and Health³, where three percent reported any lifetime abuse. Consistent with national data, the most commonly abused prescription drug type was painkillers (which includes Vicodin, codeine, Oxycontin, Percocet, Demerol, Darvon/Darvocet⁴, and fentanyl) (96%) (not shown), followed by tranquilizers (e.g., Xanax, Valium, Rochas) (33%) (Table 3). When these youth were asked how they had obtained these substances without a prescription, the most common response (91%) was that they had received or bought it from someone else, with others reporting they had stolen it from someone (9%), taken it from a pharmacy (2%), or had purchased it on-line (2%). When asked how difficult it was to obtain these substances, 33 percent said “very easy”, 33 percent “easy”, 21 percent “difficult” and 12 percent “very difficult” (not shown). In terms of over-the-counter drugs, 78 percent described abusing liquid cold medicines and 64 percent Coricidin (also referred to as DXM, skittles, or Triple C).

The nine individuals who reported they had ever tried heroin were asked if they were “hooked on prescription-type opiates” before they began using heroin. None of the respondents in 2011 said that they had (not shown).

In addition, those youth who reported abusing prescription or over-the-counter medication were significantly more likely to have tried the gateway drugs, as well as other substances, as Table 4 shows.

Table 3
PRESCRIPTION DRUG ABUSE REPORTED BY MORE THAN ONE IN THREE YOUTH

Prescription Drugs	
Vicodin	65%
Oxycontin	54%
Codeine	41%
Percocet	33%
Tranquilizers	33%
Antidepressants	13%
Other	13%
Soma	11%
Darvon	7%
Fentanyl	2%
TOTAL	46
Over-the-Counter	
Liquid Cold Medicines	78%
Coricidin	64%
Other	8%
TOTAL	36

NOTE: “Other” category includes Ritalin, morphine, Ketamine, Adderall, Concerta, and ibuprofen for prescription drugs and salvia and motion sickness pills for over-the-counter drugs.

SOURCE: SANDAG SAM Program, 2011

Table 4
YOUTH WHO ABUSE PRESCRIPTION OR OVER-THE-COUNTER MEDICATION ALSO USE OTHER SUBSTANCES

	Percent Who Ever Tried That Substance*	
	Prescription or Over-the-Counter Medicine Abuse	No Prescription or Over-the-Counter Medicine Abuse
Alcohol	100%	85%
Tobacco	96%	73%
Ecstasy	82%	23%
Powder Cocaine	48%	11%
Mushrooms	42%	12%
Meth	36%	16%
TOTAL	50	74

*Significant at $p < .05$.

NOTE: Cases with missing information not included.

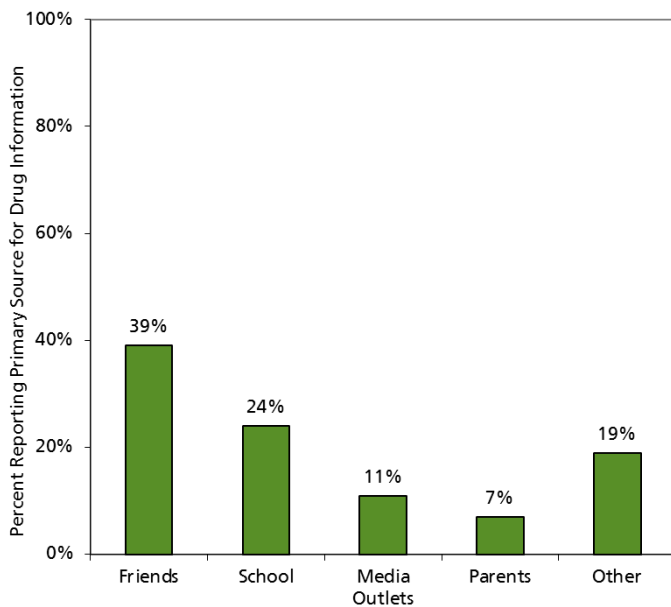
SOURCE: SANDAG SAM Program, 2011

⁴ In late 2010, the manufacturer of Darvon/Darvocet voluntarily agreed to withdraw the medication from the U.S. market at the request of the Food and Drug Administration.

KNOWLEDGE AND PERCEPTION OF DRUGS

For several years, prevention messages have targeted parents about the need to have candid conversations with their children regarding the risks associated with drug use (e.g., www.theantidrug.com). However, when these youth were asked to describe their main source of information regarding drugs, less than one in ten (7%) said parents, with others saying friends (39%), school (24%), media outlets (television, movies, or the Internet) (11%), and other individuals/institutions (19%) (Figure 5).

Figure 5
FEW YOUTH REPORT LEARNING ABOUT DRUGS FROM THEIR PARENTS



TOTAL = 112

NOTES: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

Youth were also asked to rate (on a four-point scale) how bad they think different types of drugs are, regardless of their past use of the drug. As Table 5 shows, those who had used meth, heroin, LSD, inhalants, ecstasy, marijuana, tobacco, and Oxycontin, were significantly less likely to report thinking the drug was “extremely” or “very” bad for them compared to those who had never used the drug.

Table 5
NON-USERS PERCEIVE MORE HARM THAN USERS

	Percent Who Think The Drug Is Extremely Or Very Bad	
	Never Used Drug	Used Drug
Meth*	100%	87%
Heroin*	98%	78%
GHB	98%	67%
Crack	97%	90%
LSD*	96%	38%
Rohypnol	96%	50%
Inhalants*	95%	77%
Powder Cocaine	94%	84%
Ecstasy*	89%	64%
Mushrooms	89%	40%
Marijuana*	88%	24%
Tobacco*	86%	58%
Oxycontin*	85%	52%
Alcohol	64%	46%
TOTAL	8-113	2-115

*Significant at $p < .05$.

NOTE: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

KNOWLEDGE AND PERCEPTION OF DRUGS (CONT'D)

In another series of questions, individuals who had ever used the drug were asked to rate how easy the drug is to obtain, again on a four-point scale. As Table 6 shows, around three-quarters or more of these individuals reported that tobacco, spice, inhalants, marijuana, ecstasy, meth, alcohol, and rohypnol were “very easy” or “easy” to obtain.

Table 6
JUVENILE ARRESTEES REPORT MANY
SUBSTANCES EASY TO OBTAIN

Percent Who Think The Drug Is Very Easy Or Easy To Obtain	
Tobacco	94%
Spice	93%
Inhalants	84%
Marijuana	81%
Ecstasy	78%
Meth	78%
Alcohol	77%
Rohypnol	75%
Powder Cocaine	68%
Crack	60%
Heroin	56%
LSD	56%
Oxycontin	56%
Mushrooms	27%
TOTAL	4-113

NOTE: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

For the first time in 2011, youth were asked questions regarding their use of medical marijuana dispensaries. Current regulations stipulate that an individual has to be 18 years of age or older and have approval from a certified doctor to access clinic services. If an individual is under 18, then the youth must demonstrate s/he has the consent of a parent or designee with the legal authority to make medical decisions. Overall, only 3 percent (4 youth) said that they had ever obtained a medical marijuana identification card – two of whom said it was easy to get and two who said it was difficult. However, 6 percent (7) of the youth said they had purchased marijuana from a clinic, all of whom were males (and 3 of whom also reported having identification cards). When asked how many times they had purchased marijuana from the dispensary in the past month the mean was 7.7 (range 0 to 30) (not shown).

Youth who had tried alcohol were asked how they had obtained it the last time they used it. Just over half said it was given to them (31% by someone over 21 years of age other than a parent/guardian, 21% by someone under 21, and 1% by a parent/guardian), more than one in ten said they had taken it (8% from a store, 4% from their own home, and 3% from someone else’s home), around one-fifth (19%) had someone else buy it for them, and 9 percent bought it themselves. Four percent said they obtained it other ways (not shown).

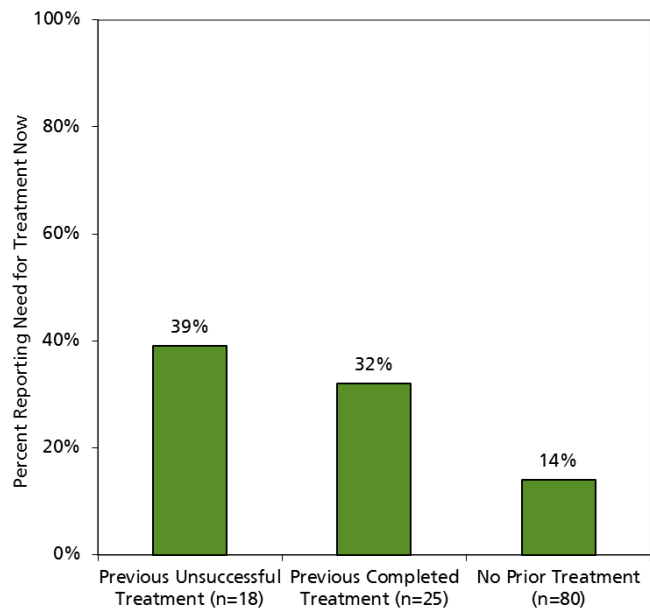
DRUG TREATMENT

Around one in three (35%) juveniles interviewed in 2011 reported that they had previously received some type of drug treatment. When these 43 youth were asked for more details regarding this prior treatment, their responses revealed that:

- 51 percent had been in treatment once, 33 percent twice, and 16 percent three or more times;
- the most recent treatment experience was more likely to be court-ordered (79%) than voluntary (21%);
- most recently (if more than one treatment episode), 27 percent had attended in-patient treatment, 24 percent out-patient treatment, 34 percent Narcotics Anonymous or Alcoholics Anonymous (NA/AA), and 15 percent received treatment while in custody;
- 86 percent had received treatment for marijuana, 60 percent for alcohol, 26 percent each for meth and other substances, 7 percent for cocaine/crack, and 2 percent for heroin; and
- 58 percent reported that they had successfully completed treatment⁵ (not shown).

When asked if they currently need treatment, only 21 percent responded affirmatively. However, this desire varied by prior treatment history, with non-completers most likely to report needing it (39%), followed by those who had completed treatment (32%), and those who had no prior treatment history (14%) (Figure 6). Of the 27 individuals who felt they needed treatment, 56 percent wanted it for their marijuana use, 44 percent alcohol, 26 percent tobacco, 22 percent meth, 7 percent powder cocaine, 7 percent ecstasy, 7 percent Oxycontin, and 4 percent inhalants (not shown).

Figure 6
YOUTH WHO PREVIOUSLY RECEIVED TREATMENT
MORE LIKELY TO REPORT CURRENT NEED AS
WELL



SOURCE: SANDAG SAM Program, 2011

⁵ Some of the reasons for not completing treatment included that they had been kicked out, they had been arrested, they were still in, they wanted to use, and the program was too strict.

CRIMINAL HISTORY AND GANG INVOLVEMENT

Instant Offense

The SAM interview is conducted at Juvenile Hall with youth who were arrested within the previous 48 hours. Two in five youth had an “other” offense (40%) (which includes probation violations), 23 percent a violent offense (23%), and 17 percent a status offense (17%) (such as truancy or a curfew violation) as their most serious arrest charge. The remaining youth were arrested for a highest charge that was a property offense (15%) or a drug offense (4%) (not shown).

Prior Offenses and Arrests

Eighty-one percent (81%) of the youth reported they had been arrested previously (the median number of prior arrests was 2.0 and the range was 1 to 30) and two-thirds (66%) said they had previously been detained at a juvenile facility. In addition, 77 percent said that they had been under probation supervision before, 96 percent of whom said that they still were (not shown).

Seventy-seven percent (77%) of the youth also reported previously committing a property-related offense, whether or not they were arrested for it. When further queried as to the nature of this/these offense(s), 87 percent of the 94 said they had shoplifted, 62 percent committed vandalism, 44 percent burglary, 26 percent motor vehicle theft, and 14 percent forgery (not shown).

According to the municipal code, juveniles’ presence in public places is generally limited, with certain exceptions, between the hours of 10 p.m. and 6 a.m. When asked if they were aware of these curfew laws, almost all (92%) of the youth reported that they were and three in every five (60%) said that they had actually been stopped by law enforcement in the past for violating curfew (not shown).

Drug Distribution

Despite the fact that few (about 1 in 20) youth were arrested for a drug-related offense as the highest

charge, almost one in three (31%) reported that they had some previous involvement in drug distribution – either selling drugs (12%), serving as a middleman (7%), or both (19%). When asked what drug(s) were involved, 96 percent of the 47 youth said marijuana, 38 percent ecstasy, 23 percent powder cocaine, 21 percent meth, 21 percent another drug, 13 percent crack, 9 percent LSD, 6 percent Oxycontin, and 6 percent heroin. When asked how much they made from these activities in the past 30 days, the median was \$220 (range \$30 to \$1,000) (not shown).

Gang Involvement

Twenty-two percent (22%) of the youth interviewed as part of this study reported they had been in a gang and another 40 percent indicated they had hung out with a gang. On average, these individuals said they had hung out with the gang for 3.4 years (range 2 months to 11 years). Youth who reported being gang members were significantly more likely to report bringing a weapon to school in the past (52% versus 15%) and selling drugs (52% versus 24%) (not shown).

Youth who said they were *not* in a gang were asked “do you feel you will ever be in a gang” – almost all (93%) said they would not. When these 84 youth were asked why they would not join a gang, 33 percent said it made it more likely they would get in trouble, 29 percent said it was dangerous, and 10 percent said that their friends would think less of them. In addition, 56 percent gave other reasons not listed as response choices, including it was pointless, it didn’t fit their image, they had other priorities, and they just didn’t want to (not shown).

Additional information about juvenile gang involvement is compiled for this project through a gang addendum. Data from this addendum through 2011 is available on the SANDAG Web site and updated information will be published later this year as part of the SAM CJ Bulletin series.

Teen Prostitution

As part of the interview, juveniles are asked if they have ever been approached by someone offering to pimp or prostitute them and if so where this happened. Six percent responded affirmatively. These six girls and one boy were approached on the street (4), in a park (3), at the mall (2), and at school (1) (not shown).

Four of the youth interviewed (2 boys and 2 girls) reported ever engaging in prostitution, one of whom had done so in the past 30 days (and who said he was interested in stopping). On average, these youth began to engage in this activity at the age of 15.5 (range 13 to 17). Six of the youth also reported engaging in pimping, one of whom had also engaged in prostitution (not shown).

Home Environment

Overall, most of the youth interviewed reported living in a stable environment, but some lived in a group setting or other arrangement without a biological parent. Specifically, prior to arrest, 89 percent reported living in a stable residence, 8 percent said they lived in some type of group setting, and 3 percent said they were homeless. When asked who they lived with, nearly three-fourths (72%) said their mother; 33 percent their father; and 17 percent said they did not live with a parent at all. Other information regarding the youths' lives included:

- when asked to rate the quality of their relationship with their parents, 43 percent said "excellent" or "very good," 41 percent said "good," and 16 percent said "not very good" or "very bad;"
- when asked who they would turn to when they needed someone, 45 percent said a parent, 19 percent a youth relative, 15 percent a friend, 14 percent another adult or someone else, and 8 percent said no one;
- 75 percent reported they lived with at least one sibling;
- 27 percent said that their immediate family had some type of previous Child Protective Services (CPS) involvement;
- 15 percent had been in foster care at some time in their life;

- 9 percent said they were already a parent themselves, 9 percent of the boys said their girlfriend was pregnant, and 4 percent of the girls said they were pregnant; and
- 48 percent of the youth reported a sibling and 52 percent said a parent had been previously arrested and booked into a detention facility (not shown).

Parental Drug Use

When asked whether they knew if their parents had abused alcohol or used other drugs, 11 percent said their parents had abused alcohol, 9 percent used other drugs, and 21 percent both (58% said their parents had not abused either alcohol and/or other drugs)⁶. When asked what (drugs) they used, the most common responses included marijuana (78%), meth (51%), cocaine/crack (30%), and heroin (16%). Youth who reported any parental substance abuse were also significantly more likely to report that they had ever tried ecstasy (61% versus 39%) (not shown).

Runaway Behavior

In addition to youth being exposed to parental substance use and criminal justice system contact, it also appears that many of the youth are running away. Specifically, 44 percent of the youth reported they had previously run away from home. Youth who reported previously running away were also significantly more likely to report their families had previous contact with CPS (64% versus 38%) and to have tried meth (38% versus 13%) (not shown).

⁶ According to the National Survey on Drug Use and Health, 12 percent of children in the general population live with at least one parent who abused or was dependent on alcohol or other drugs in the past year (CESAR Fax [2009, May]. *More Than One in Ten Children in the U.S. Live with a Substance-Abusing or Substance Dependent Parent*, 18, 18. Available: www.cesar.umd.edu).

Drug Use at Home

While only 5 percent of the youth reported that they had ever used illicit drugs with their parents, 46 percent reported that they had used drugs at home previously (with 70% of the 53 youth acknowledging a parent or caregiver was at home when this substance use occurred and 40% that the caregiver was aware of this use). Twenty-nine percent (29%) reported keeping drugs at home (not shown).

Mental Health

Overall, almost one-quarter (23%) reported they had been diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD). Sixty-four percent (64%) of these 28 youth reported they had been prescribed Ritalin or Adderall, two of

whom had also given or sold the drug to someone else (not shown).

One in ten (10%) youth reported they had previously thought about killing themselves and 9 of these 13 individuals had previously made a suicide attempt (not shown).

Table 7

SUMMARY OF OTHER YOUTH RISK FACTORS

Previously ran away from home	44%
Parental alcohol or other drug abuse	42%
Previous CPS involvement	27%
ADHD/ADD diagnosis	23%
Don't live with biological parent	17%
Previously in foster care	15%
Suicidal thoughts	10%

SOURCE: SANDAG SAM Program, 2011

SCHOOL AND EXTRACURRICULAR ACTIVITIES

Overall, 82 percent of the 2011 sample reported they had previously skipped school or been truant⁷ and 30 percent were not currently enrolled in school because of an expulsion, suspension, or dropping out on their own.

Other information related to school included:

- 79 percent reported they do not like school;
- 29 percent have been referred to the School Attendance Review Board (SARB);
- 29 percent have an Individualized Education Program (IEP);
- 23 percent have brought a weapon to school, most often a knife;
- the median GPA was 2.5 (range .0 to 4.0); and
- 15 percent have been bullied at school and/or before or after school while on or near school grounds and 7 percent have been bullied over the Internet or through phone messages (not shown).

Two in five (40%) reported current participation in pro-social extracurricular activities. When these 50 youth were asked to describe the type of activity they were involved in, 30 percent said a sport, 60 percent a church-sponsored activity (including regular attendance), 8 percent an artistic endeavor, and 6 percent a school club. Twelve percent (12%) of the youth also reported having a job (part-time for 60% of these youth, 20% odd jobs, and 20% full-time) (not shown).

⁷ The average (median) number of days truant of those who were truant in the previous month was 7.0 (range 1 to 20).

At the end of the interview, youth were asked if they had participated in any types of specific risky behaviors in the past 12 months. As Table 8 shows, around one-third or more reported they had engaged in a number of these behaviors, with the most common including participating in sex acts⁸, getting in trouble with parents for using alcohol/drugs, getting sick from substance abuse, riding in a car with a driver under the influence, going to school drunk or high, not remembering what happened after using drugs or alcohol, and getting in a physical fight.

Table 8
MANY JUVENILE ARRESTEES PARTICIPATE IN RISKY BEHAVIORS ASSOCIATED WITH DRUG USE

Participate in sex acts after using alcohol/drugs	47%
Get in trouble with parents for using alcohol/drugs	46%
Get sick from alcohol/drugs	45%
Ride in a car with a driver who has used alcohol/drugs	44%
Go to school drunk/high	42%
Not remember what happened after using alcohol/drugs	38%
Get in physical fight after using alcohol/drugs	37%
Feel bad about something done when drunk/high	31%
Miss school because of alcohol/ drugs	28%
Pass out after using alcohol/drugs	26%
Drive a car after drinking/using drugs	19%
Have alcohol-/drug-related health problems	17%
TOTAL	113-124

NOTE: Cases with missing information not included.

SOURCE: SANDAG SAM Program, 2011

Youth are also asked about whether certain traumatic events had happened to them in the past year. One in three (33%) reported that one had occurred and 8 percent that more than one had occurred. These events included being expelled (25% of all respondents), the death of a relative (13%), being involved in an accident (7%), and the divorce of their parents (6%). (not shown).

In another series of questions, youth were asked if they had ever crossed the U.S./Mexico border to obtain alcohol or other drugs. Overall, 9 percent (11) of the youth said they had, with 6 crossing for just alcohol, 3 for just drugs, and 2 for both types of substances. In addition, around one in ten (9%) reported they had previously been approached regarding transporting drugs across the border. The median age of first crossing was 13.0 (range 12 to 16) for alcohol and 16.0 (range 14 to 16) for other drugs and those who crossed for drugs reported obtaining meth (3), powder cocaine (2), crack (1), marijuana (1), and LSD (1) (not shown).

⁸ Thirty-nine percent (39%) of the youth reported they "always" use a condom when engaging in sexual activities, 26 percent said "most of the time," 19 percent "some of the time," and 16 percent said "never."

ADDITIONAL SAMPLE CHARACTERISTICS

Additional descriptive information regarding this sample of 124 youth follows.

- The average age of these youth was 15.9 years (range 12 to 18).
- 58 percent of the youth were Hispanic, 21 percent White, 19 percent Black, and 2 percent other.
- 74 percent of the youth reported they were born in San Diego County, 15 percent somewhere else in California, 7 percent in another state, and 5 percent in another country.
- 24 percent reported currently living in the Central Major Statistical Area (MSA)⁹ of San Diego County, 22 percent in North County East, 20 percent in East Suburban, 14 percent in North County West, 10 percent in South Suburban, 6 percent in North City, 3 percent in East County, and 4 percent outside of San Diego County.

⁹ MSAs are groups of subregional areas (SRAs) which, in turn, are groups of census tracts. The seven MSAs encompass the entire San Diego region, with boundaries remaining static over time. For a map of these areas, please see www.sandag.org/resources/maps_and_gis/gis_downloads/downloads/images/msa90.html.

As the data here describe, youth booked into Juvenile Hall continue to face a number of risk factors that require communities and systems of care to work together. Some of the risks described here include both gateway and other drug use at relatively early ages; poly-drug use; negative peer groups, including gang involvement; challenging home environments with individuals who also use drugs and have had contact with the justice system; and truancy. These data offer program and policy leaders support for continued prevention and targeted intervention services at a time when resources are limited. Specific areas of prevention and intervention focus could include ensuring treatment availability that is family-based; education for parents regarding the importance of prevention; coordination with educational units to address truancy, as well as facilitate prevention messages; and continued support of pro-social activities.