


19. "Several studies have shown a correlation between sustained involvement in structured peer activities (such as extracurricular programs) and low levels of drug use (Buckhalt, Halpin, Noel, & Meadows, 1992; Richardson, et al., 1989; Selnow & Crano, 1986; Voydanoff & Donnelly, 1999). From CSAP's 2000 annual summary of effective prevention programs and guidelines.


Recent research on the relationship between illicit drug use and convictions. Public Health Reports, 89:944-948.


See endnote 13 for additional references on this topic.

19. It is important to recognize that these numbers represent incidents, and not necessarily single individuals. For instance, one child could be suspended for two incidents, one involving tobacco and one for alcohol.


37. Treatment data adapted by CESAR from data from the Alcohol and Drug Abuse Administration, Substance Abuse Management Information System. Data is collected and analyzed through the Drug Early Warning System (DEWS).


40. There have been several major national studies of drug treatment outcomes. These include SROS, DATOS, NTIES and the TOPPS projects. Local studies have included the DCI project and TOPPS I and II. Many studies have examined factors that influence treatment entry, engagement, and retention. Recent examples of these types of studies include:


59. Baltimore Believe is a community-centered advertising campaign aimed at reducing drug trafficking, drug violence, and drug use in the city. The major themes of the campaign are predicated on the following: (1) saving the children of Baltimore and rebuilding the future of the city; (2) believing that it can be done, must be done, and will be done; and (3) recognizing that everyone has a job to do and should be enlisted in the crusade against drug trafficking. Complete information on Baltimore Believe is available at www.baltimorebelieve.com.


For additional information, see www.buprenorphine.samhsa.gov

72. Treatment capacity expansion in Baltimore City has been primarily in outpatient and methadone programs. However, several residential programs opened in 2002, alleviating a long-standing shortfall. Treatment capacity expansion is also continuing on a county level as a result of Cigarette Restitution Fund allocations. For example, Prince George's County began a methadone maintenance program this year using these funds.


The TOPPS Interstate Cooperative Study Group. [In preparation.] Drug treatment completion and post-discharge arrest in the Interstate Cooperative Study.


This site contains information about promising and effective programs currently on the list as well as directions for how to nominate new programs.

77. Information about the University of Maryland’s Maryland Blueprints programs will be available online in the near future. Hard copies of the Maryland Blueprints publication are available through the Department of Criminology and Criminal Justice at the University of Maryland, College Park.

78. The State Incentive Grant is awarded to Maryland by the Federal Center for Substance Abuse Prevention. It is currently managed by the Office of Crime Control and Prevention. Results of the year one systems change evaluation are available. [Online.] Available: http://www.cesar.umd.edu/cesar/projects/sig_report.asp
79. Each of Maryland's 24 jurisdictions has a Safe and Drug Free Schools coordinator and office. Activities of these offices are supported by the State Department of Education's Pupil Services Division.

80. The Center for Substance Abuse Research completed a pilot evaluation of the Maryland Student Assistance Programs in Montgomery and Baltimore Counties. Nearly three quarters of the parents interviewed felt that an intervention was necessary for their child. Nearly two-thirds found the program helpful and felt that there were positive changes in their child's behavior, attitude, attendance or grades.


81. Maryland's Faith Partnership Initiative works with partners across the state to provide training to faith-based organizations to guide them in activities such as developing a board of directors, preparing and filing incorporation papers, and writing grant proposals. A web site, www.faithinmaryland.org, is currently in development to provide opportunities for sharing information and advice and increasing access to training information and other resources.

82. See endnote 77.


87. The Jessup Drug Free Prison Program involves a variety of initiatives designed to curb the availability of drugs in prison and provide treatment to offenders who are drug abusers. These efforts were evaluated by the Center for Substance Abuse Research.

88. The Ecstasy in Maryland report and Ecstasy Action Plan provide additional information about the level of use in Maryland and Maryland's response to the problem. As mentioned in Problem #1, ecstasy continues to be a problem in Maryland. Maryland produced the first TV ecstasy PSA. In addition, an ecstasy slide ran in movie theatres across the state. A video, Stolen Dreams: The Reality of Ecstasy, was produced and directed by the University of Maryland.

89. As described in the Maryland Drug Treatment Task Force Report, Blueprint for change: Expanding Access to and Increasing the Effectiveness of Maryland's Drug and Alcohol Treatment System (February 2001), the Maryland Drug and Alcohol Council was officially established by Executive Order in December 2001. The Council plans for the further development and expansion of Maryland's alcohol and drug treatment system. Council activities include: reviewing drug and alcohol treatment system budget items, reviewing state agency policies related to drug and alcohol treatment, and working with various stakeholders, including state and local governments, consumers, and providers to develop and implement drug and alcohol treatment system initiatives for the expansion and improvement of treatment services.

90. See endnote 78.

91. DEWS Drug Action Plan

92. Maryland's Results for Child Well-Being are published annually by the Maryland Partnership for Children, Youth, and Families. The eight results currently monitored are babies born healthy, healthy children, children enter school ready to learn, children successful in school, children completing school, children safe in their families and communities, stable and economically independent families, and communities that support family life. The data indicators monitored within each result are used to assess and understand the current status of children and families, to select priority areas and set goals for improvement, and to monitor progress toward goals and evaluate resource investments.

Generally, fellow teens run these courts serving as prosecutors, defense attorneys, bailiffs, clerks, and jurors. Adult judges oversee the proceedings. Sentences usually include community service and service on at least one teen jury. Failure to complete a teen court disposition results in the case being returned to a traditional court.

The Choice Program currently operates in seven jurisdictions. It provides community-based services to recently released juvenile offenders and other youths ages 9 to 17 who are at risk for offending. The program incorporates intensive supervision, family visits, tutoring, parent support groups, and other programs.

The Bureau of Governmental Research is working with the Department of Juvenile Justice to develop and pilot a risk/needs assessment instrument.

87. DEWS links data collection, analysis, and dissemination to the treatment and prevention of substance abuse and policy development. Its mission is to help communities identify, understand, prevent, and respond to drug use in Maryland by encouraging a multidisciplinary approach for identifying emerging drugs; empowering Marylanders with understandable, accessible drug information; and supporting coordinated state and local efforts aimed at reducing drug use. Complete descriptions of DEWS and the DEWS studies listed are available. [Online]. Available: www.dewsonline.org.