

Synthetic drug use in baltimore city research paper example

[Technology](#), [Development](#)



There have been a huge number of cases of synthetic drug use in Baltimore. The names that are commonly used to refer to the drugs are Bath Salts, K2 and Spice. The youths are the most vulnerable group. The number of youths using synthetic drugs has exhibited an increasing trend. In 2010, there were less than ten teens involved in the use of synthetic drugs. This increased to over 20 youths in 2011. Among the 20 cases that were reported to the Maryland Poison Center, an institution that is run by the Maryland School of Pharmacy, one of the youths died from the effects of the drugs. In 2012, the centre reported approximately 300 cases of synthetic drug use in the city. The implication for prevention is that efforts to prevent the onset of most synthetic drug use should concentrate on the age group just entering adolescence, if not those younger.

As aforementioned, there are different names used to refer to the synthetic drugs commonly used by the youths. They Baths Salts have a variety of names, which include Ivory Wave, Plant Food, Cosmic Blast, Scarface, Cloud 9, Hurricane Charlie, White Lightening and Blue Silk among others. They contain a chemical that is referred to as methylenedioxy pyrovalerone (MDPV) or mephedrone. They are usually in powder form and are white in color. They are sold in small packets/containers that are often marked as “Not for Human Consumption’. Pharmacists assert that the drugs mimic cocaine and have the same effects as those of cocaine. They can be taken using different methods i. e. through injections, smoking, ingestion and snorting. They cause severe symptoms among which are paranoia, hyperawareness, tightening of blood vessels and high blood pressure. In extreme cases, bath salts cause heart attack as well as psychosis and stroke.

The second type of synthetic drugs that are commonly used by youths in Baltimore city as well as in other parts of the nation is the 'synthetic pot'. Synthetic Pot has a variety of names: Ocean Breeze, Pep Spice, Black Mamba, Bombay Blue, K2 and Dragon. It comprises of many chemicals, which include JWH18, JWH250 and HU210. The initial form of the drug was designed for cancer patients for boosting their appetite. The drug was then modified to its current form that has entered the market as an illicit drug (Mieczkowski, 1996, p. 401). The drug is sold in small packets or rather packs that are usually labeled as "herbal incense". In rare cases, the packs are labeled as "aromatic potpourri". It is usually smoked after being rolled into a cigarette. The drug causes nausea, paranoia, as well as anxiety. These effects are short-lived an aspect that causes the youths to take the drug in rather high amounts as well as frequency to achieve a high level of satisfaction. Most of the youths especially teenage girls prefer Synthetic Pot to Bath Salts due to its spicy scent.

The specific synthetic drugs that the youths as well as other members of the society are using (whether the Bath Salts or Synthetic Pot) can become clinically problematic to the user. In extreme cases, some of the drug users use a number of drugs at the same time. After nearly a century of study and massive documentation of poly-drug sequences and patterns, researchers have concluded that, the use of many psychoactive substances can yield disorders of drug dependence. The particular psychological properties and psychological effects of specific drugs are not viewed as relevant but rather as one in a series of important factors. The dose taken, the route of

administration (smoking, snuffing, ingestion and injecting), and the social environment can attenuate or exaggerate many of the behavioral differences that the chemicals induces.

The most vulnerable group in the society is the youths. The continued availability of the drugs on the street poses a threat to the well-being of the society. Research has shown that most experimentation with illicit drugs begin at the adolescence stag (Dembo, et al., 1992, p. 250). In the extreme cases, the use of illicit drugs might begin as early as before the teenage years. This applies not only for the synthetic drugs but also for other substances/drugs that are commonly abused in the society. For instance, among 12-17-year-old respondents who were involved in a research about drug/substance abuse by the National Household Survey on Drug Abuse, the mean age of first use of alcohol was 12. 8 while for cigarettes was 11. 5 (Gerstein & Green, 2008, p. 56). This shows that many children in the neighborhood are highly vulnerable.

Populations of young people in the United States and other industrialized nations show remarkable degree of uniformity, dating back to surveys in the early 1980s, in sequence of drug involvement (Hornik et al., 2008, p. 2235). Research findings reveal that young people who have multiple drugs appear to do so by progressing systematically through a sequence of stages. Drug abuse also develops through a specific sequence of increasing drug involvement.

The consequences of drug consumption vary in severity, type and how rapidly they manifest. The occurrence and severity of most consequences are correlated with either the level of current consumption or the cumulative

level of consumption for many years beyond onset (Hornik et al., 2008, p. 2231). The Most well known consequences include acute health crises such as overdose death or traumatic injuries while intoxicated; chronic or cumulative damages such as tissue deterioration, scarring and oncogenesis (in smoker's throats and lungs, sniffer's nasal membranes, intravenous injector's veins). They result in a variety of endocrine, neurological, and central nervous system degradation-some reversible and other irreversible. Perhaps the most critical feature of youthful synthetic drug use is the potential for interfering with an individual's normal psychological, social and biological development. The young people who become involved in synthetic drug use beyond experimental use are at greater risk of failing to accomplish necessary educational and developmental tasks in their life. This is not generally or rather necessarily an objective for the youngsters who use drugs. They use drugs variously as a way to experience pleasure or risk, gain acceptance by a certain peer group, assert authority and independence, reject conventional institutions of the society, assert important characteristics of their identity or mark their transition into adulthood. These motivations for indulgence in synthetic drug use are characteristic of normal psychosocial development and do not differ from the goals associated with behaviors not related to drug use.

Despite the normalizing aspects discussed above, drug use jeopardizes the normal processes of development. The use of one or more classes of drugs between adolescence and young adulthood has been found to interfere with the normal development by compromising physical and psychological health, the performance of traditional work and family roles. The level of education

achieved in young adulthood tends to be a condition that is difficult to correct or compensate for adequately in one's life.

The prevention strategy covers the three general concepts namely predisposing, enabling and reinforcing elements. The initial step would be the identification of the predisposing elements both at the individual level and at the societal level. Potential disposing elements might be genetically transmitted characteristics; developmental deficits, such as failures in early socialization or a lack of self-esteem. This implies that interaction within the family is an important locus of concern. Others include knowledge and beliefs concerning the hazards on synthetic drugs, the individual's own perception of a drug's ability to cause harm to them, moral beliefs and attitudes about drug consumption; or the individuals' social circumstances and prospects irrespective of the family/societal interactions.

The second step would be to device or rather tailor the enabling elements. These include the decision-making or other aspects that relate directly to the behavior in a given neighborhood in the situation of opportunity to consume the drug. The major enablers in this case are two. First is the availability and accessibility of drugs and prevention or treatment resources in the community. Secondly, the individual's skills to not only define but also to respond autonomously and effectively to problem situations such as the one's drugs availability presents. I would urge public institutions to ensure that the necessary facilities are provided among which are trained psychologists whose work is to help the victims overcome the use of the drug by assisting in the development of skills for problem solving. I would use the mass media to educate the youth about the dangers of the drugs

while offering the alternatives for a health yet enjoyable lifestyle (Hornik et al., 2008, p. 2236). This would also help in reinforcing good behavior. I would also urge the community leaders as well as the legal officers to ensure that the sale of illegal drugs is banned in the city. Strict measures have to be taken to punish the traders who supply the drugs to the youths in the community.

References

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