THE MISSING SOLDIER
IN THE DRUG WAR

By

Commander C. S. Gordon
United States Coast Guard

28 April 2000

Submitted in Partial Fulfillment
of the Requirements for the
Marine Corps War College
Marine Corps University
Marine Corps Combat Development Command
Quantico, VA 22134-5067
# The Missing Soldier in the Drug War

**Report Date:** 28 APR 2000  
**Report Type:**  
**Dates Covered:** 00-00-2000 to 00-00-2000  
**Title and Subtitle:** The Missing Soldier in the Drug War  
**Performing Organization:** Marine Corps War College, Marine Corps University, Marine Corps Combat Development Command, Quantico, VA, 22134-5067  
**Distribution/Availability Statement:** Approved for public release; distribution unlimited  
**Security Classification:** Unclassified  

## Subject Terms

- **Abstract:** Unclassified  
- **Report:** Unclassified  
- **Abstract:** Unclassified  
- **This Page:** Unclassified  

**Number of Pages:** 43
The views expressed in this paper are those of the author and do not reflect
The official policy or position of the United States Government,
Department of Transportation, United States Coast Guard
Department of Defense, United States Marine Corps,
Marine Corps University, or the Marine Corps War College.
ABSTRACT

“The Missing Soldier in the Drug War” addresses the need to have parents perform a central role in the conflict against drug abuse. A holistic approach is needed to win the battle against drug abuse; both supply and demand reduction are necessary. In order to reduce the demand for illegal drugs the conflict must be shaped to fully engage parents, for they are the foot soldiers who will ultimately win the conflict. As such, the scope of this paper is limited to looking at the drug conflict from the viewpoint of demand reduction and the involvement of parents as well as families, teachers, pastors, businessmen and other community members.

Drug prevention and drug treatment/rehabilitation are the two primary elements of demand reduction. To be successful in either area, parents must be actively involved through community coalitions in every manner possible to shape the attitudes of our youth against drug abuse and condemn the tolerance of illegal drugs in society. Parents, whose children’s health and safety are at risk, are the ones who have the biggest stakes in the battle and are the most concerned about protecting their children from the evils of drug abuse. Parents have the energy and the desire to fight drug abuse; they just need solid national leadership to show the way.

In the 1980’s significant gains were made against drug abuse primarily as a result of highly organized and engaged parents working in community coalitions. In the 1990’s the fight has shifted more and more to government agencies with less than satisfactory results. Now is the time to reshape the battle to win back the hearts and minds of the American people and have them defeat drug abuse in every community across the country.
# TABLE OF CONTENTS

Disclaimer .................................................. ii  
Abstract ................................................... iii  
Table of Contents ........................................ iv  

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Introduction .........................................</td>
<td>1</td>
</tr>
<tr>
<td>2. Recognizing Parents as the Key to Success ................</td>
<td>4</td>
</tr>
<tr>
<td>3. Mobilizing Parents: Leadership Shaping the Conflict .........</td>
<td>9</td>
</tr>
<tr>
<td>The Drug Legalization Movement. ................................</td>
<td>9</td>
</tr>
<tr>
<td>National Leadership ........................................</td>
<td>14</td>
</tr>
<tr>
<td>4. Organizing Parents: Community Coalitions and Prevention ......</td>
<td>17</td>
</tr>
<tr>
<td>Community Coalitions .......................................</td>
<td>17</td>
</tr>
<tr>
<td>Schools and the Education System ............................</td>
<td>19</td>
</tr>
<tr>
<td>The Media ................................................</td>
<td>20</td>
</tr>
<tr>
<td>The Workplace. ...........................................</td>
<td>20</td>
</tr>
<tr>
<td>Drug Law Enforcement ....................................</td>
<td>23</td>
</tr>
<tr>
<td>5. Organizing Parents: Community Coalitions and Drug Treatment</td>
<td>25</td>
</tr>
<tr>
<td>The Need for Treatment ....................................</td>
<td>25</td>
</tr>
<tr>
<td>Validating Treatment Effectiveness ..........................</td>
<td>27</td>
</tr>
<tr>
<td>Faith Based Treatment Programs .............................</td>
<td>28</td>
</tr>
<tr>
<td>6. An Alternative Paradigm ..................................</td>
<td>30</td>
</tr>
<tr>
<td>Notes ......................................................</td>
<td>32</td>
</tr>
<tr>
<td>Bibliography .............................................</td>
<td>37</td>
</tr>
</tbody>
</table>
THE MISSING SOLDIER
IN THE DRUG WAR

CHAPTER ONE
INTRODUCTION

Drug abuse is a strategic national problem that demands the full attention of the United States leadership and every American. Drug abuse negatively impacts the national economy, law and order, national security and the health of American citizens. Statistics demonstrate that the use of illegal drugs causes a direct annual loss of $150 billion to the United States economy by theft, reduced performance, production mistakes and lost time as a result of accidents and absenteeism.¹ The vast majority of criminals arrested in the United States were under the influence of illegal drugs when they committed their crimes and the drug-crime costs to federal and local law enforcement agencies is over $40 billion per year. Our national borders are compromised as drug runners penetrate our land and maritime borders, carrying illegal drugs and other contraband. Drug related medical emergencies are at a historic high of over 500,000 episodes per year.² The most tragic statistic, however, is that nearly 16,000 people died from drug induced causes in 1997, the last year for which data is available.³ That is an average of 44 people a day dying from drug related causes. Certainly a problem of this dimension should concern every citizen and draw attention to the country’s plan to battle drug abuse.

In the 1999 National Drug Control Strategy, the primary goal “to educate and enable our youth to reject substance abuse”⁴ is generally on target, but needs to reach deeper and impact a
greater audience. The strategy proclaims, “If we can bring the almost seventy million American children to adulthood free of substance abuse, the vast majority will avoid drug dependency for the rest of their lives.” The National Drug Control Strategy recognizes the chronic nature of this nation’s drug problem and the critical need for a comprehensive solution to win the hearts and minds of the people to fight against drug abuse.

One major shortcoming of the National Drug Control Strategy is that it barely recognizes the preeminent role that parents must play in order to win the fight against drug abuse. Parents are only passively cited in a few of the 31 National Drug Control Strategy objectives; they are not highlighted to any significant degree, nor are they integrated to their full potential. Instead, the primary burden of the strategy is placed on federal, state and local government agencies to win the battle against drug abuse. This is a further gathering of control within government, is the most costly method of reducing drug abuse, and is one of the least effective means to achieve results. This oversight of the essential nature that parents play in raising America’s youth, and the actions they can take to protect their children, severely deteriorates the efficacy of the National Drug Control Strategy. Absent a strong, dominant role in the fight against drug abuse, parents will continue to be the missing soldier in the drug war.

The emphasis of this paper is to demonstrate the vital importance of parents in the battle against drug abuse and to show how the drug conflict must be shaped to restore, protect and fully engage the moral and physical strengths of parents. In the fight against drug abuse, it is parents who have the most at stake in the battle; the health and safety of their children is on the line. The family is the primary building block of society and is the foundation of the local community. The responsibility and accountability to abstain from drug abuse is the duty of each individual, and parents are in the ideal position of authority and responsibility to train their children accordingly.
Reviewing the history of successes and failures in America’s drug war provided the insights for this paper.Analyzing historical articles and national data reveals that committed parents following strong national leadership led to previous successes against drug abuse in this country. In the absence of vocal presidential leadership, the campaign against drug abuse floundered and the rates of drug use shot up dramatically. Herein lies the key to understanding how to plan for future success in the campaign against drug abuse. An aggressive national drug control strategy and outspoken Presidential leadership, combined with a broad network of dedicated parents working in their communities, is a proven formula for reducing the levels of drug abuse.

In the following chapters three essential issues will be addressed to demonstrate the absolutely essential nature of parents fighting the battle against drug abuse as well as how to make them the crucial force in the drug war. First, there is the need to recognize parents as the critical ground troops necessary for an effective, broad-scale drug war in the United States. Second, forceful Presidential leadership is required to mobilize parents and shape the battle against illegal drug use. Third, community coalitions can provide the necessary structure to organize parents as a powerful fighting force against drug abuse.
The first step towards true success in the battle against drug abuse is to recognize the vital characteristics parents possess and fully engage them in the conflict. The will of American parents, and their desire to battle drug abuse, is the center of gravity that will determine the ultimate outcome of the drug war. Political leadership, law enforcement and interdiction agencies will not be able to successfully battle against drug abuse over the long haul if parents are ambivalent or not supportive of the effort. The moral strength of parents is a critical and primary center of gravity for the United States in the drug conflict. A “center of gravity” is defined as a primary source of moral or physical strength, involving people, which provide resistance in a conflict. As a center of gravity, the critical capability of parents is their ability to unite and provide the moral/physical will power to defeat drug abuse. Parents are a vulnerable force if they: 1) receive deficient information about drug abuse, 2) believe false or inaccurate information about drug abuse (which is readily provided by legalization proponents), 3) lack a communication network, or, 4) are rendered ineffective by being made a nonparticipant in the conflict. The danger of de-emphasizing parents in the drug conflict is to run the risk of losing the national will power to fight drug abuse.

As the very foundation of our society, the family, and particularly the leadership of parents, plays the most profound role in the fight against drug abuse. Government in general, and specifically political leaders and law enforcement agencies, have limited power and conviction in shaping the attitudes of individual Americans. Their capacity to coerce the public to fight against
drug abuse is limited both legally and socially by their lack of legitimacy in teaching values. Parents, on the other hand, have the greatest stakes in the conflict, as they are concerned about protecting their children from drug addiction, related violence and the effects of drug abuse on society. Parents are also the ones who must live with the very real and personal consequences of drug abuse every day if their children choose to go down that road. Bob Dupont, former director of the National Institute of Drug Abuse (NIDA), believed that “if parents were organized [against drug abuse] they are going to have far more energy for the fight than all the graybeards in Washington, D.C.” It is parents, working within their families, who must instill, develop and maintain in their children the attitude of intolerance towards drug abuse. Parents are ultimately the ones who must train their children and hold them responsible as well as accountable for abstaining from the use of illegal drugs.

Some lost ground must be reclaimed, however, in order to get parents back on the team to fight against drug abuse. Many of today’s parents, and even those holding public office, have their own history of drug abuse that they must deal with before being able to help their children. “Gary Fields, school superintendent in Zion, Illinois, believes today’s teens are being raised by ‘drugged parents’ who struggle with their own abuse history and often enable their children. He says parents must stop denying the problem and give their children a strong anti-drug message.” The risk factors that contribute to adolescent drug abuse are drug availability; family and community mobility; lack of community safety, parental drug use or attitude toward drugs; and diminished levels of supervision.

The battle against drug abuse in the United States will ultimately fail unless parents are actively involved in training their children to abstain from drug abuse. Former Drug Czar William Bennett noted, “success in the drug war depends above all on the efforts of parents and schools and
churches and police chiefs and judges and community leaders.”¹¹ The National Longitudinal Study on Adolescent Health finds characteristics that protect adolescents from drug use to be: high levels of family connectivity; greater frequency of parental presence in the home; high levels of school connectivity; personal importance placed on religion and prayer; and high levels of self esteem.¹² Professor Robert Hampson of Southern Methodist University says parental involvement is critical to the success of drug-abuse prevention and helping children stay drug free.¹³ Robert Maginnis concurs as he states,

“The drug crisis of the 1970s was reversed by the parents of the 1980s who took charge. They became involved in their children’s lives, forced schools and community organizations to join the fight, and supported efforts by President and Mrs. Reagan, who promised to make drug fighting a national priority.”¹⁴

Current statistics show the extent of the problem as, 47 percent of teen students have used marijuana in their lives, and one in ten are current users.¹⁵ The key aspects of parental involvement in the fight against this level of drug abuse are logical and straightforward. The central theme for a sound defense against drug abuse is for parents to develop strong emotional bonds and open communication with their children, especially their teens. Supporting this philosophy Robert Maginnis writes, “If our objective is to reduce long-term social problems such as drug use, then promoting effective parenting is key: two parent families are our most important social resource; government should seek to support parents rather than replace them; and no legislation should be passed without considering the impact on families.”¹⁶

To facilitate a strong trend of parents against drug abuse, Congressman Grassley sponsored The Drug Free Families Act of 1999. The funds available from this legislation would support established groups that promote the ‘no use message’, meaning no use of any illegal drug or substance for children. The legislation builds upon the understanding that it was parent groups that successfully turned the tide on the drug legalization movement of the 60’s and 70’s. From 1979 to
1992 these parent prevention groups achieved a continued reversal in drug use trends nationwide. Unfortunately, as drug use declined many of the 4,000 volunteer parent groups disbanded. During the 90’s, legalization proponents re-emerged to promote drug maintenance programs, medical use of marijuana, needle exchange programs and responsible use classes for schools. As a result, the reductions in drug use that occurred over 13 years reversed in 1992, and adolescent drug use has more than doubled. “Motivating parents and parent groups to coordinate with local community anti-drug coalitions is a key goal of the Parent Collaboration, as well as coordinating parent and family drug prevention efforts with Federal, State, and local governmental and private agencies and political, business, medical and scientific, educational, criminal justice, religious, and media and entertainment industry leaders.”

Legislation such as the Drug Free Families Act recognizes the key role that parents and the family play, and the essential nature of mobilizing them to turn the tide in the campaign against drug abuse. Parents and their healthy families actively involved in their local community and working with educators, businessmen, the media, church leaders and police will be the ones to suppress and finally defeat America’s drug culture. If parents and community groups are allowed, or encouraged to sit passively by while government agencies attempt to fight the battle against drug abuse ‘for them’, their resistance against drug use will be neutralized and their tolerance of drug users possibly raised.

Additional drug prevention policies are being considered to assist parents in keeping their families’ drug free. The Drug-Free Teenage Drivers Act will direct the Secretary of Transportation to establish a model program for states to drug test all teenage applicants for a driver’s license. Drug test information is to be provided to insurance companies. Applicants who fail the drug test will not be issued a license and will be required to complete a state approved
treatment program. In the Family Research Council’s 1999 Annual Voter Survey on Drug Policy, 69 percent of the survey voters supported the concept of tying drug testing to driving privileges for teenagers to reduce adolescent drug use.
Once parents are recognized as the essential force necessary to win the drug war, then the decision to mobilize them follows naturally. Currently the most significant battle in the drug war is being fought to shape the will of the American people. Will they be motivated and encouraged to fully engage in the conflict, thereby once again turning the tide against drug abuse? The President of the United States is in a powerful position to motivate the public against drug abuse. Unfortunately, President Clinton has been largely missing in action for the past seven years of the drug war. Drug prevention must be maintained as the critical component of our national drug policy if there are to be any long-lasting and significant gains in the campaign against drug abuse. The prevention efforts of the national drug policy are paramount then in shaping and maintaining the consistent will of Americans against drug abuse.

In opposition, the proponents of drug legalization are working diligently to promote their agenda for the acceptance and legalization of drugs. The absence of organized resistance is a boon to their cause. If the public is not effectively mobilized against drug abuse, then a greater level of tolerance is foreseeable, which by default is a victory for the drug legalization crowd.

The Drug Legalization Movement

The United States’ drug control strategy is being aggressively challenged by the crippling influence of the surreptitious drug legalization movement. Parents instinctively know illegal drugs
are a risk to their children’s health and safety. However, parents and Americans in general are slowly being drowned by the incoming tide of legalization propaganda. The parties that promote the legalization of marijuana and other illegal drugs are shaping the battlefield to their advantage by manipulatively subverting the will of the American people to continue the fight against drug abuse. The legalization of illicit drugs is promoted as a silver bullet that will end the drug war immediately and return peace to the land – no harm, no foul. Every American would be magically absolved of any sense of responsibility or accountability for abstaining from the use of illegal drugs. The proponents of drug legalization use the deception that legalization would reduce crime and prison populations. These proponents further argue that the harm of illegal drugs could be managed and reduced so society at large would be relatively unaffected. The victims of drug abuse could be taken care of and not traumatized further. Others tout, through ballot initiatives and the public arena, that there are beneficial medical uses for marijuana and so, legalization at least for medical use, should occur. The fallacy of these approaches needs to be bared and publicized for the disarming lies they are.

The volume of crime committed by people under the influence of drugs is enormous and places a huge burden on overtaxed law enforcement personnel. In Los Angeles County, a Superior Court Judge states that of the 30 cases per day his court handles, 75 percent are drug related; twelve other metropolitan cities surveyed showed that 60 to 80 percent of all are arrestees tested positive for drug use at the time they were arrested.\(^{20}\) In similar fashion, the Center for Addiction and Substance Abuse reports as many as 60 percent of federal prisoners and 80 percent of state prisoners were incarcerated for drug related crimes.\(^{21}\)

The flooding of our courts and prisons with drug abusers fuels the passion of drug legalization proponents. They reason, ‘why tie up law enforcement and court officials so heavily
with harmless drug abusers?’ They continue with the logic that, ‘surely there are more important crimes to solve and criminals to prosecute!’ Ethan Nadelmann, a marijuana legalization advocate typifies their arguments as he states:

“In a legal market, there would be much easier availability, probably lower prices and no legal sanctions for using the drugs so long as no harm resulted to others.” He continues, “drug laws can best be understood as a policy of depriving everyone of the right to use certain substances in order to protect a minority of potential drug abusers from their own weaknesses.”

22 “If drugs were dramatically cheaper…. The numbers of crimes committed by drug addicts to pay for their habits would obviously decline dramatically.”

Would drug legalization really be the panacea for an overtaxed law enforcement and criminal justice system? No! Instead, it would most assuredly lead to disaster by way of proliferating teen drug use, crime and addiction. Robert Charles writes in the Harvard Journal on Legislation,

“The empirical reasons for dismissing the legalization argument beyond health damage resulting form narcotics are:
1. the close proven correlation between high street availability, high purity, low price and increased casual drug use, particularly use by children ages twelve to seventeen,
2. the proven link between violent crime and drug use, in particular user-crime, rather than dealer- or internecine gang-crime,
3. the clear relationship between casual drug use and addiction, including the percentage of casual users who will, by virtue of regular or continuing use, become addicted.”

Other countries have gone the drug legalization route and reveal some key insights as to the type of results the United States could expect to see if drugs were legalized. A 1997 Trimbos Institute (Holland) study states, “drug use is considered to be the primary motivation behind crimes against property”, this occurring 23 years after Dutch policy was supposed to stop drug related crimes.25 Holland’s liberal drug policies, including the legalization of marijuana, have made it the synthetic drug source of Western Europe just as Colombia is the source for cocaine.26 The easy access to drugs and 23 years of legalization has also tripled the number of drug addicts in the country.27 To further exacerbate the drug problem, Dr. Wallenberg of the Jellinek Clinic notes
that under careful legalized cultivation, the marijuana THC content rises as high as 35 percent (a
tenfold increase) and the result is “more people are getting in trouble with cannabis”\textsuperscript{28}. More
crime, more addicts, and more potent drugs are not the results that drug legalization proponents
choose to expound; instead they highlight a different scenario.

Ignoring the hard evidence, drug legalization proponents continue to try to sway public
opinion toward believing that legalization would allow drug users to pursue their interests with
only minor, if any, affect on the rest of society. “The concept that ‘one can have a normal life and
take drugs’ is gaining more acceptance in parts of Europe. While the United States continues to
wage war on drugs, some Europeans are trying to obtain a truce by loosening up prosecutions and
legalizing certain drugs.”\textsuperscript{29} The reasoning is that once drugs are legalized the resources previously
used for interdiction and law enforcement could now be used to reduce the harm of drug abuse.
Needle exchanges and safe drug give away programs are a couple of practices of the harm
reduction approach. The philosophy claims “drug use cannot be eliminated, so society should try
to ‘reduce the harm’ it causes.”\textsuperscript{30}

Using the victim approach, legalizers will also argue that drug abusers are not criminals
and should not be prosecuted, as their addiction is a disease and not a crime.\textsuperscript{31} Many Europeans
take this pragmatic approach of tolerating drugs and managing the social and medical problems of
drug abuse rather than maintaining or increasing interdiction and law enforcement efforts to
eliminate drug use.\textsuperscript{32} In Arizona, Governor Johnson agrees drugs are a bad choice, but he doesn’t
believe users should have a felony record either; instead he believes drugs should be regulated and
taxed likes alcohol and cigarettes.\textsuperscript{33} Developing a safe drug culture that would not affect society at
large might appear to offer promise, but in reality the practice of these ideas offers a different and
radically gloomier picture.
Instead of arriving at the optimistic and rosy conclusion that drug legalization will allow families and their surrounding communities to live and let live, the hard facts suggest that the volume of crime, drug use and the numbers of drug deaths all will increase. Legalization signals a change in attitudes, suggesting tolerance rather than disapproval of drug use. Experts on both sides of the issue have to agree the legalization of drugs will lead to more drug use, crime and addiction.\textsuperscript{34} The Arizona assistant attorney general Andrew Peyton Thomas writes, “There is … an undeniable relationship between crime and drugs. Drug addiction can both lower inhibitions among offenders and spur them on to other crimes to finance their dependency.”\textsuperscript{35} In the city of Zurich, the 1989 creation of a “zone of tolerance” in Platzpitz Park was supposed to allow abusers a safe drug use area by providing clean needles, medical care and social services. Instead the park attracted addicts from throughout Europe and the park was quickly reduced to a “wasteland of crime, violence, and human degradation” that had to be closed in 1992.\textsuperscript{36} Going further, Robert Maginnis of the Family Research Council states,

> “Giving heroin to addicts is unethical and can result in euthanasia. Instead of embracing the tough-love drug court approach of coercing addicts into life-saving treatment, “harm reductionists” want to keep judgement-impaired addicts in their deadly lifestyle until they die or quit by chance. ("More Swiss addicts died while in the program {a 3 year Swiss study} than became drug free") America should focus anti-drug efforts on a balanced model of enforcement, abstinence-based treatment and prevention.”\textsuperscript{37}

Ignoring the facts, legalization proponents continue to pursue their inanity with ballot initiatives to legalize marijuana for medical use. Just the action of putting a medical use marijuana initiative on the ballot leads to negative consequences in our society and undermines the will of the people to resist drug abuse. Surveys reveal states that host pro-drug ballot initiatives, such as Arizona and California, tend to encourage additional teen drug abuse.\textsuperscript{38} Former Presidents Bush,
Carter and Ford all view medical marijuana referenda as “hoaxes that seek to cloak drug legalization under the guise of compassion for the ill or strengthening drug laws.”

The public opinion of American voters further condemns the drug legalization movement. Surveys demonstrate that more than 85 percent of voters believe that heroin, cocaine, and marijuana should be illegal. Clearly the majority of parents and their communities are currently against the use of illegal drugs. The national leadership of the United States must work to unify and build upon this foundational belief and counter any attempt to neutralize the national will through manipulative drug legalization efforts.

National Leadership

A strong stance against drug abuse by America’s leadership is essential to shaping a healthy, successful drug prevention campaign. Yet currently, there is not a single National Drug Control Strategy objective to promote the use of President’s “bully pulpit” to speak out against drug abuse. The position our national leader takes can either mobilize parents throughout the country to action against drug abuse or allow them to sit idly by in enforced apathy. Robert Charles writes, “Between 1981 and 1992, overall drug use fell precipitously, as coordinated federal, state, community, and parental counter-narcotics activity intensified and Presidents Reagan and Bush, as well as First Lady Nancy Reagan, provided outspoken leadership on the issue.” The Reagan administrations “Just say no” policy was a simple persuasion tool that narrowed the drug debate down to the individual. Individual responsibility and accountability was paramount. President and Mrs. Reagan made a joint address to the nation from the White House in 1986 urging all Americans to adopt “outspoken intolerance” of illegal drugs, and they
stated “There’s no moral middle ground, indifference is not an option.”43 In 1981 President Reagan stated,

“In the end, the war on crime will only be won when an attitude of mind and a change of heart takes place in America, when certain truths take hold again and plant roots deep in our national consciousness, truths like: right and wrong matter; individuals are responsible for their actions; retribution should be swift and sure for those who prey on the innocent.”44

Unapologetic statements against drug abuse like these from our President and other national leaders helped to embolden America against the scourge of illegal drugs. Promoting drug intolerance worked. Under President Reagan, the Drug Czar sat in on cabinet meetings to coordinate an overarching drug agenda to include action by every cabinet secretary.45 The administration responded and helped to rein in the insidious cultural influences of drugs while the pressure on drug traffickers increased. From 1979 to 1992, steady success was made as a result of these no-nonsense policies and a public attitude that was shaped against drug abuse. James Burke, head of the Partnership for a Drug Free America affirmed the message of intolerance by stating, “We know what works in terms of prevention; as perception of risk and social disapproval go up, usage goes down across every ethnic and age group.”46 National leaders taking a firm stance against illegal drug use was effective and was a key element of a successful prevention program that shaped American attitudes against drug abuse.

The absence of national leadership taking a firm stance against drug abuse has had the expected opposite effect of an increase in drug abuse. Without strong leadership the fight against drug abuse became irresolute. In 1993, presidential leadership became anemic as President Clinton made seven national addresses, never once mentioning illegal drugs.47 Congressman Grassley noted, “Despite what some of my colleagues have argued on this floor, this [Clinton] administration simply has not taken the drug issue seriously. In fact, its policy where one can be
disconcerned, has downplayed the issue and distanced the President from any involvement.\textsuperscript{48} In addition, the Clinton Administration substantially reduced important supply reduction program resources and de-emphasized prevention efforts.\textsuperscript{49} As expected, drug abuse rose. From 1992 to 1998 marijuana use was up over 100 percent and overall drug use rose 78 percent.\textsuperscript{50} Clearly these results demonstrate that America’s national leadership must exercise its role as a spokesman against drug abuse; anything less is a disgrace and a threat to national security. Testifying before congress in 1995, former First Lady Nancy Reagan confirmed what is now obvious,

“If there’s a clear and forceful no use message coming from strong, outspoken leadership, it is potent…. Half hearted commitment doesn’t work. This drift, this complacency, is what led me to accept your invitation to be in Washington today…we have lost a sense of priority on this problem, we have lost all sense of national urgency and leadership.”\textsuperscript{51}
A successful drug prevention campaign must have national direction but decentralized execution in order to be successful. The United States is simply too broad, diverse and populated for any one government agency or institution to execute a winning drug prevention campaign utilizing centralized command and control. Shirley Higgins of the anti-drug organization ‘In Touch’, recently told the Speaker of the House, “While the federal government has a vital role to play, we have got to stop engaging in the fantasy that the federal government can rescue us from our addictions, our community apathy where it exists, our lack of self-responsibility and our lack of a vision of a future that goes beyond the next five years.”

The Drug Free Communities Act, implemented in 1997, directs the Office of National Drug Control Policy (ONDCP) to establish a program to support community coalitions of parents, youth reps, businesses, media, schools, youth organizations, law enforcement, religious organizations, civic groups and health organizations to prevent and treat substance abuse among teens.

Community Coalitions

Community coalitions offer the means by which a decentralized drug prevention campaign can be effectively executed, and properly set up. They have the resources to reach out to all components of the local area. Ethan Nadelmann writes, “The most effective constraints upon irresponsible use of psychoactive substances are imposed not by states but by non-political environments such as families, peer groups, social organizations and communities.” Successful
prevention programs require parental involvement, a supportive community environment, positive role models, planned social events, knowledge of the danger of drugs, and a supportive network of social service, health and educational systems. The primary point of emphasis needs to be a team of dedicated adults in every community organized and bringing their resources together to fight the drug insurgency. Relying on a government agency or a police force to rescue a neighborhood will not get the job done. Residents, especially parents, have to get involved. If they don’t the prognosis is ominous. Miami’s T. Willard Fair states drug dealing is a particular problem in the black community,

“This is the most formidable foe we’ve faced since slavery. Someone is selling death to us, and we’re letting it happen. The only reason drugs are sold on the streets of my community and not in the fancy suburbs is that we accept dealing as a legitimate business.”

Successful community coalition campaigns against drug abuse have occurred throughout the country and can act as models for others. The Wrice Process is an anti-crime program developed in Texas to confront drug dealers and gang members. The program trains and mobilizes neighbors, law enforcement, and community members to work together to combat crime and drug trafficking by nonviolent confrontations. “The city of Taylor, Texas, implemented the Wrice Process in 1993. In less than one year, violent crime in Taylor decreased 80 percent while overall crime declined 32 percent. During that same time, juvenile arrests decreased by 60 percent.” In Boise and San Diego, the anti-drug model developed by Congressman Rob Portman of Cincinnati is being implement after being successful in several other communities. The unique aspect of Portman’s model is the notoriety achieved by having the local congressman take the lead in drawing together local, state and federal resources to assist the community anti-drug coalition.
Schools and the Education System

Schools are a highly important factor in the equation involving drug abuse prevention, especially when they team up with parents as part of a joint strategy. Family Research Council’s 1999 Voter Survey reported that 93 percent of survey voters believed public schools should be involved in drug abuse prevention. Mathea Falco, an anti-drug program proponent and writer, states, “The most effective classroom drug-prevention programs are stronger if their lessons are amplified at every level of influence – in the family, the media, the community – and if booster lessons are given as children move through adolescence.” The synergy achieved by the parent-school-family combination is powerful and can achieve impressive gains in the campaign against drug abuse. A mighty transformation occurs when parents and teachers realize that the drug problem affects everyone and yes, they can do something about it. If parents, with the help of teachers, can deter children from drug use through the teen years to allow for maturational growth then there is a very strong chance that they will remain drug free.

As schools plan to implement one of the many classroom drug-prevention-training programs they need to focus on obtaining an educational program with proven effectiveness. According to Bridget Ryan, Executive Director of the BEST Foundation for a Drug Free Tomorrow, “prevention can and does work, but our educators and policy makers must be selective in funding and implementing validated programs.” Ryan noted that “an estimated 2,000 non-validated programs are in use.” On the national level the Department of Education should perform the essential role of assuring that anti-drug funds are appropriately spent by validating the effectiveness of drug abuse prevention programs. Holding schools accountable for using effective no-use drug prevention programs in order to obtain federal educational funds would quickly weed out programs that were unable to measure up to standards.
The Media

The media can also play either a strong support role to parents and families in their efforts to develop their children’s values and attitudes against drug abuse or can undermine those efforts by portraying a permissive social attitude toward drugs. Television programs, MTV, movies, music groups and other public persona all play a part, positive or negative, in shaping our national attitude toward drug abuse. Unfortunately, programs that blatantly promote illegal drug use and disrespect for authority like the present day MTV pose particular difficulties for parents, teachers and law enforcement and their drug prevention message. Although parents are telling their kids it is wrong to use drugs, a plethora of media activities encourage kids to go right ahead.

In a holistic drug-prevention program there must be strong support from the whole range of media expressing the no-use message. “The main emphasis of demand reduction should be on persuasion rather than coercion. Education and ‘Just Say No’ programs and media campaigns featuring prominent celebrities can at least alert people to the dangers of drug use.”62 Fortunately, ONDCP in following recent legislation is implementing a strong anti-drug media campaign with frequent educational spots airing nationwide. In addition, ONDCP has begun to work with the television industry to correct the problem of shows that promote permissive attitudes toward drug use. More needs to be done in this arena, including having the president use his bully pulpit to hold all media accountable for actively joining in with the drug prevention campaign.

The Workplace

Small and large businesses, America’s entire workplace, must also be encouraged to join actively in the fight against drug abuse, and it is to their advantage to do so. It simply makes good business sense to develop strong policies against drug abuse for both nationalistic and economic
reasons. “The losses resulting from the “drug problem” are staggering … the $140 to $150 billion total direct loss each year to the U.S. economy is more than American consumers spend each year for gasoline and motor oil and more than three times the amount spent on tobacco products.”

Current estimates by the National Institute of Drug Abuse are that 10 percent of the work force is drug addicted or alcoholic. These statistics readily demonstrate the incredible drain drug abuse is on the United State’s Gross Domestic Product, America’s prosperity, and more importantly on the profitability of individual companies.

It is no secret to business and industrial leaders that drug abuse significantly reduces profits through lost efficiency and diminished productivity, accidents, medical costs, absenteeism, and theft by employees to support their addictions. Past studies show drug users are 3 ½ times as likely to be involved in a plant accident, are 5 times as likely to file worker’s compensation claims, receive 3 times the average level of sick benefits, and function at only 67 percent of their work potential. On the positive side, the U.S. Postal Service estimates that drug screening applicants for their 180,000 person work force saves $105 million in turnover/absentee costs during their employment tenure. An IBM executive points out that “identifying drug users in the applicant pool saves a lot of expense and grief and more than pays for the costs of drug testing.”

Clearly the results are apparent in the bottom line for business. Just as important is that the no tolerance for drug-use attitude goes home with the employee, back to their families and the local community where the battle will ultimately be won. Charles Keller at Capital Cities/ABC states, “By announcing that if you want to come to work you can’t use, we’re taking an important stand against this problem. People fear the loss of their jobs, which gives them a big incentive to get treatment if they need it. The workplace is the ‘hot button’ for change.”
The most common form of workplace anti-drug policy is urinalysis, which was readily accepted by over half the Fortune 500 companies by the late 1980’s.69 Two thirds of U.S. companies over 5,000 employees conduct drug testing for their employees and in the federal government over 2 million employees are subject to drug testing. The Department of Transportation requires drug testing for over 4 million transportation workers and the Department of Defense requires all defense contractors to establish comprehensive drug programs with testing.70

In response to Department of Defense regulations requiring contractors to adopt anti-drug policies, including testing, Texas Instruments decided to test all their employees. The employees didn’t object as long as management was being tested also. Texas Instruments’ program was very high profile and made it crystal clear that drugs would not be tolerated in the workplace. Now less than 1 percent of the employees test positive, drug investigations have ceased, and the occasional employee who tests positive is referred to treatment through an employee assistance program. A large majority of employees believe the program is fair because it applies equally to everyone and is administered by a “universal random testing” program.71

To promote a drug free workplace Congressman Rob Portman has sponsored the Drug Demand Reduction Act.72 When passed and implemented this act will educate small businesses about the benefits of a drug-free workplace and provide financial incentives (reductions in workers compensation premiums) to enable small businesses to create a drug-free workplace. The program requires employee drug testing and the availability of employee assistance, including treatment.
Drug Law Enforcement

Local law enforcement agencies can make a small impact on drug supply reduction, but to ultimately succeed in eliminating drug abuse, local law enforcement agencies must be directly involved with building and supporting the anti-drug community coalitions providing information, whenever possible, without usurping the influence of the coalitions. Local law enforcement is an essential member of the community coalition, but it must play a supporting role and not the role of primary leadership. If the law enforcement agency assumes a position of command or dominance, then the danger is that community members reduce or withdraw their efforts and the coalition will lose its strength and effectiveness. To achieve success against drug abuse, parents and other local community members must stay actively in the forefront of the conflict – anything less defeats the cause.

In local communities, federal agencies must play a secondary and supporting role. Federal law enforcement agencies should network with local law enforcement agencies to provide intelligence on drug trafficking organizations, personnel and methodologies as well as on new drug products hitting the streets. Federal social service agencies should be providing detailed clearinghouse information about the success rates of the different drug prevention and treatment programs. Small grants of seed money are needed to help community coalitions jumpstart new programs and get them running, but the funding of ongoing programs should be the pooled responsibility of the parents, community coalitions and local government.

Whereas law enforcement agencies alone will not be successful against eliminating drug markets, they have a valuable role to perform beyond arresting drug dealers and abusers, and there are creative ways in which their services can be employed. Some law enforcement agencies have increased the risks for drug dealers and buyers by seizing the vehicles of suburban drive-through
customers, and because the seizure is a civil proceeding, a lesser standard of proof is required to uphold the case in court.\textsuperscript{73} Seizing their cars without a formal arrest punishes drug buyers, and no additional burdens are placed on the criminal justice system. Another drug prevention tactic is to station police officers in neighborhoods where drug markets flourish to increase the hassle factors those dealers and customers must face.\textsuperscript{74} Dealers move to find safer areas and are forced to set up a new customer base. Customers who have to search too long for dealers become discouraged which can also reduce drug use.
CHAPTER FIVE

ORGANIZING PARENTS:

COMMUNITY COALITIONS AND DRUG TREATMENT

The treatment and rehabilitation of drug-abusers support prevention efforts to reduce the demand for drugs in the United States, but treatment must be kept in an appropriate balance. Any national policy favoring treatment over effective prevention will not achieve a reduction in the number of drug abusers. There is a wide diversity of opinions about the effectiveness of drug treatment programs, who should fund the programs, and whether or not treatment should be required in prison for people arrested in drug related crimes. There is even controversy about whether drug addiction is a disease that should be treated only by medical professionals or whether it is the moral choice of an individual. One thing is clear, however, and that is much like prevention programs, parents and community coalitions need to be engaged and involved in drug treatment programs. The funding of treatment programs without the ability to hold a rehabilitated individual accountable and responsible for their behavior is an irresponsible use of taxpayer funds.

The Need for Treatment

Given a national population of drug abusers that reaches into the millions the need for treatment programs seems readily evident. If drug abusers are not treated and deterred from further use, then the demand for illegal drugs is not reduced. Drug Czar Barry McCaffrey, an advocate of treatment says, “we can’t arrest our way out of the [drug] problem”. “More than half of all American prisoners are nonviolent offenders – usually small-time drug dealers who need
help with their own addictions.”

Touting the success of treatment programs, a Bureau of Prisons study claims that inmates who have received treatment are 73 percent less likely to be re-arrested in the first six months after release than those who have not.

At the other end of the spectrum there are strong arguments and statistics to support the belief that many treatment programs are ineffective and are wasting large amounts of public funds. Claims exist that drug addiction is not a disease; it is something you choose to do to yourself; it is a conscious decision and action you take. During the Vietnam War the U.S. Army was having surprising success in getting and keeping soldiers off heroin, but the underlying reason for their success was that those who had been addicts in Vietnam simply stopped using when they got home. Speaking against high cost treatment programs, a Victory Outreach worker states,

“The more money that is there, the more harm. I call them the dogs of war – the people who put together these drug-treatment programs. They’ll see the money, they’ll start a program and find some addicts, and then you have five doctors and three lawyers getting the government to pay them. It costs them nothing [emotionally] because they have no love for the addicts, and because they have no love they have no success.”

Accepting the broad range of opinions on drug treatment programs, there are some fundamental principles that need to be applied to any treatment method. First, do not insulate drug users from the consequences of their behavior, but let them experience some degree of suffering so they will want to change. Pastor Gary Potter states, “Unless the pain of staying the same exceeds the pain of change you’ll never change.”

Second, charity can help promote independence from drugs if recipients have to give something in return (e.g. conducting work for a treatment organization to help offset treatment costs). Third, don’t give away anything for free. Welfare type programs are the antithesis of charity and are incompatible with a free society. Attempting to rescue a drug addict from the consequences of his behavior at no cost to the addict will only promote the continuance of the behavior.
Validating Treatment Effectiveness

An important role for the federal government in drug treatment is to implement a strong accountability system for treatment programs in order to prevent fraud, mismanagement, waste and ineffectiveness. Just as with prevention, holding program providers accountable for providing effective treatment in order to obtain any federal funds would quickly weed out programs that were not successfully rehabilitating drug abusers. The Drug Addiction Treatment Act of 1999, sponsored by Senator Orin Hatch, is a step in the right direction as it tightens up the requirements on drug treatment programs by requiring them to validate their effectiveness before being granted waivers for dispensing narcotic drugs for maintenance or detoxification programs.82 Specifically it requires the Attorney General to determine the effectiveness of maintenance and treatment programs, the successful growth of such treatments, and the public health consequences of such waivers.

The role of the federal government should be quite limited in funding and managing drug treatment programs. To be effective these programs must be managed at the local community level and the bulk of funds should come from local resources. The result of this approach is that parents, families and communities get involved and provide the impetus to hold the drug abuser responsible and accountable to the treatment program requirements. Centralized, or federal funding cannot achieve the same results. Robert Charles states, “Significant doubt remains about the effectiveness of drug treatment generall, and about the accountability of federal drug treatment programs in particular.”83 “Failure of the current strategy to generate even a small reduction in hardcore addiction is partly attributable to the ‘government’s treatment bureaucracy’, which some experts see as ‘manifestly ineffective’.”84 Federal efforts should focus on supply reduction while
delegating prevention and treatment efforts to the local community where programs can be fit to local needs.\textsuperscript{85} Volunteers from the ranks of parents, community leaders, medical professionals and private volunteer organizations offer the dedication, desire and people resources necessary for successful drug treatment.

\textbf{Faith Based Treatment Programs}

Many national, state and local politicians avoid the idea of using faith based drug treatment programs. Some politicians medicalize the moral failings of drug abusers and therefore tend to rely on medical professionals.\textsuperscript{86} Still others fear a breach in separation of church and state. Robert Maginnis states, “The local faith community will play a vital role in prevention and treatment. After all, the church gives people faith and hope that there are ultimate meaning and purpose of life. It gives man answers to great questions of life. It establishes a system of moral duties which have worked.”\textsuperscript{87} Throughout our nation’s history the church has always been there to help those in need. The church assists the homeless, the hungry and the orphans; it built hospitals and was prominent in the civil-rights movement.\textsuperscript{88} More importantly, the federal government spends over $5 billion dollars a year on treatment but reaches less than two million of the more than seven million who need treatment. Churches will step in and help just as they did with welfare reform if only our political leaders will allow them to. Again Maginnis states,

“The Texas Commission of Alcohol and Drug Abuse tried to shut down faith-based Victory Outreach, which is a rehabilitation program run by former addicts. Outreach founder Freddie Garcia claims a 70 percent success rate for his privately funded program which doesn’t use any narcotics or psychiatrists, only Bible study, and it is very approachable by people on the street…Inspite of high success rates and zero cost to taxpayers, the government has often stiff-armed these programs.”\textsuperscript{89}
Faith based drug treatment programs are a prime example of the success that can be achieved by getting parents and the local community involved and managing treatment programs. “It is no accident that secular drug treatment agencies boast success rates only in the single digits, while the Christian ministry 'Teen Challenge' cures 70 to 86 percent of the addicts it serves. Other Christian groups and churches are meeting with similar success.” An *American Journal of Drug and Alcohol Abuse* study reported on the superiority of faith based over non-faith based treatment programs by showing their patients were as much as 50 percent more inclined to stay drug free one year after the program. Clearly the data supports the logic for making faith based programs a full partner in all community coalitions fighting against drug abuse.
In concluding, perhaps the best method to demonstrate the primary importance of making parents the center of emphasis in the fight against drug abuse is to review the key points of a successful war against communist insurgents. British leaders in Malaya faced with a communist insurgency from 1948-1960 had the foresight to realize that communism would only be defeated by winning the hearts and minds of the people. Sir Robert Thompson and others realized massed force and brut military power would not win the war against communism. Instead, they believed “the three indispensable qualities in the counter-insurgency are patience, determination and offensive spirit, the last should be tempered with discretion…”92 They further believed the authority for leading the war belonged to the civil government and police; the military was only there to help. Sir Robert Thompson realized the decisive battle had to be won by the defeat of communist ideals, not by the killing of all communist soldiers.

The relational parallel to be drawn from this war stories is this; the battle against drug abuse will not be won by massing greater and greater forces of law enforcement officers, counting the number of drug offenders imprisoned, weighing the volume of illegal drugs seized, and growing the federal counter-drug budget. The United States leadership must step out of the paradigm that they can use massed force and a mighty budget to defeat the insurgency of drug abuse.

Following in the steps of the British in Malaya, the new paradigm must be to win the hearts and minds of the American people. Parents must be recognized, mobilized and organized to teach their children that the freedoms Americans enjoy are dependent upon their belief in, and respect
for the law and individual responsibility. A free person must have no part in drug abuse, for if
does he will slowly give up all his freedoms.

Parents, working with community coalitions of teachers, pastors, businessmen, the media
and other volunteers to prevent and treat drug abuse, are the foot soldiers who will win this battle.
Law enforcement and other government agencies must assume a supportive role to parents and
community coalitions across the nation to defeat the subversive mindset that the use of illegal
drugs is all right. The battle against drug-runners, dealers and drug abusers is secondary. The
focus must be on winning the hearts and minds of American parents using strong presidential
leadership and organizing those parents into supportive community coalitions.

Notes

1 William Mendel, Strategic Planning and the Drug Threat. Carlisle, PA: U.S. Army War College
Publication and Production Office, 1997. 67

2 Office of National Drug Control Policy, 1999 National Drug Control Strategy. URL
Strategy.

3 Toby Harnden, “Drugs ‘kill 44 Americans a day”, UTL,
http://www.telegraph.co.uk/et?ac=000449487455054&rtmo=aNJshNHL&atm…/wdrug23.htm accessed
3/23/00.

Office of National Drug Control Policy, 1999 National Drug Control Strategy. URL
Strategy.

5 Office of National Drug Control Policy, 1999 National Drug Control Strategy. URL
Strategy.

6 Dr. Joe Strange, Capital “W” War: A Case for Strategic Principle of War, Defense Automated Printing
Service Center; Quantico Virginia. 1998. 12.

Strange, 12-13. For a definition and explanation of critical capabilities, critical requirements, and critical
vulnerabilities.

8 Baum, Smoke and Mirrors: The War on Drugs and the Politics of Failure, New York, NY: Little, Brown
and Company, 1996, 100.

Maginnis, Drug Abuse Prevention, 4.


Maginnis, Drug Abuse Prevention, 4.

Maginnis, Drug Abuse Prevention, 4.

Maginnis, Drug Abuse Prevention, 3.

Maginnis, Parents/community best defense, p.4


Maginnis, 1999 Annual Voter Survey on Drug Policy, 2.


Mendel, 10.


Nadelmann, 23.

Charles, p. 349.


Collins, 2.

Collins, 2.

Collins, 87.


31 Power, 53.

32 Power, 53.


36 Falco, 187.

37 Maginnis, “Treat Addicts with Drug Maintenance?”


39 Maginnis, 1999 Annual Voter Survey on Drug Policy, 5.

40 Falco, 183.

41 Charles, 356.

42 Baum, 200.

43 Baum, 232.

44 Baum, 150.

45 Baum, 166.


47 Charles, 58.


49 Charles, 358.


51 Charles, 384-385.

52 Maginnis, Drug Abuse Prevention, 9.


54 Nadelmann, 6.
55 Maginnis, Drug Abuse Prevention, 9.

56 Falco, 75.


58 Maginnis, Parents and Community Remain Best defense, 14.

59 Maginnis, 1999 Annual Voter Survey on Drug Policy, 2

60 Falco, 198.

61 Charles, 383.


63 Mendel, 8.

64 Falco, 91.

65 Mendel, 9.

66 Falco, 97.

67 Falco, 97.

68 Falco, 93.

69 Baum, 207.

70 Falco, 96.

71 Falco, 101.

72 Drug Demand Reduction Bill, H.R.4550, 2.

73 Falco, 85.

74 Falco, 86.

75 Charles, 393.

76 Alter, 25-27.

77 Alter, 25-27.

78 Alter, 25-27.

79 Baum, 62.

81 Pastor Gary Potter, Sunday Morning Sermon, Eagles Landing Church, Woodbridge, VA, 10 January 2000.


83 Charles, 389.

84 Charles, 390.


87 Maginnis, Federal Drug War Ignoring Great Ally, 10.


89 Maginnis, Federal Drug War Ignoring Great Ally, 1.

90 Veith, 7.

91 Maginnis, Federal Drug War Ignoring Great Ally, 8.

BIBLIOGRAPHY


Gordon, Hugo. “Clinton hits Bush with drug denial”

Gordon, Marcy. “Citibank, Discreet World of Private Banking Under Scrutiny”


Maginnis, Robert L. “Church and State can Work Together”. Dallas Morning News. Dallas, Texas. 15 September 1996.


