

REPORT FROM THE FRONT LINE: THE DRUG BATTLE IN CENTRAL FLORIDA

HEARING

BEFORE THE

SUBCOMMITTEE ON NATIONAL SECURITY,
INTERNATIONAL AFFAIRS, AND CRIMINAL JUSTICE
OF THE

COMMITTEE ON GOVERNMENT
REFORM AND OVERSIGHT
HOUSE OF REPRESENTATIVES

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REPORT FROM THE FRONT LINE: THE DRUG BATTLE IN CENTRAL FLORIDA

MONDAY, OCTOBER 14, 1996

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON NATIONAL SECURITY,
INTERNATIONAL AFFAIRS, AND CRIMINAL JUSTICE,
COMMITTEE ON GOVERNMENT REFORM AND OVERSIGHT,
Lake Mary, FL.

The subcommittee met, pursuant to notice, at 9:11 a.m., in the Lake Mary City Hall Hearing Chamber, Lake Mary, FL, Hon. William H. Zelif, Jr. (chairman of the subcommittee) presiding.

Present: Representatives Zelif, Mica, Souder, Sanford, and McCollum.

Staff present: Michele Lang, special counsel; Chris Marston, legislative assistant; and Dan Hernandez, minority professional staff member.

Mr. ZELIFF. The Subcommittee on National Security, International Affairs, and Criminal Justice will now come to order.

First, I would like to thank you all for participating in what I consider to be—we all consider to be probably the most serious issue facing our country, and that is the effort of our Nation's drug war, particularly as combined with crime.

I am very pleased to be down here at the request of our good friend John Mica. He has been a tremendous leader in this issue and been a tremendous leader on the subcommittee. This hearing is being held at his request and we are very happy also to have Bill McCollum, the chairman of the Crime Subcommittee, who has done such great work here, and you should be very proud of both of these gentlemen, as they are both from this great State of Florida.

To my right, far right, Mark Sanford from South Carolina and Mark Souder from Indiana. We are very pleased that you all could make it as well.

I would like to say that John Mica has been a leader in this drug war effort back in the days in 1983 and 1984, when he was a member of the U.S. Senate staff when they wrote the Federal law that denies foreign and U.S. financial aid to countries that fail to stop drug production and trafficking; and he has been a tremendous leader in this effort.

I just would like to—before I turn it over to my colleagues, just say to you about 2 years ago, I took over the chairmanship of this subcommittee. At that point, no one was talking about the war on drugs. We had some very courageous law enforcement people that were talking about it and living it every day, but it just seemed

like our efforts in terms of national leadership had fallen flat. So we got very much interested in this as a subcommittee priority and got involved with the Coast Guard, went down to source countries; we have been to Panama where we talked about money laundering; Mexico where we have gotten tremendously involved with—70 percent of the cocaine that comes up from South America comes up through Mexico; got involved with Colombia, flew into Colombia the day after 11 people were killed, that was an interesting country. But very serious issues in terms of—and the courageous people, they have lost 3,500 law enforcement people who are courageously fighting the cartels in Colombia. Went to Bolivia, went to the jungles of Bolivia where we had a chance to see and blow up some cocaine labs, but see firsthand how it is produced and made before it is shipped, and went into Peru as well. Met with President Fuzmori and discussed the shoot down policy that was working very well there.

What happens here as we get into source country programs, if we can somehow stop the growing of the coca leaf and forcing it to be withheld from the market, because if they cannot get it out of the market, like in Peru, what happened there is the coca leaf starts to pile up, farmers have to convert to other crops such as bananas and products like that.

So, you know, as one small piece, that is a very effective part of the war as well. And then you get into the transit zone and trying to stop it from coming across the border. We had a meeting with law enforcement this morning and we talked about the problems of product coming up from Mexico, and we are working on a program called Operation Gateway. We are looking at a five-legged stool frankly, where you have programs that have to be balanced, they have to be education, prevention, treatment, transit zone programs and source country programs. So—and somehow, all of this as it comes together, and you hear about your kids going to D.A.R.E. programs, there are other programs out there, and your law enforcement working their hearts out at a great risk to their lives and their families. But eventually the parents have to come in and take a place and the community has to get involved. Eleven percent of the parents today in this country are talking to the kids about drugs. That means that 89 percent are not. And until we connect and cross that bridge, there is no way your law enforcement community can do it all on their own. And all the resources in the world, from the national level, will not make that happen either.

Our effort here, as we moved forward 2 years ago to try to get recognition and media attention on the war on drugs to get us to basically declare war on drugs. I would hope that we will see a day that everybody that gets a Government paycheck has to be randomly drug tested, including Members of Congress. And I hope that day comes. My son is in the Marine Corps, they have a zero tolerance policy. Back in the 1980's and the 1970's, they did not and there is a big difference. And somehow we need to get to a point where we are willing to address that and have a zero tolerance policy as well.

So I just thank again our two great leaders here from Florida that represent you so well, and my other two colleagues that came here today on such an important issue.

War on drugs needs to be declared and crime and drugs has to be treated as an issue and combined. And I do not know of another issue that is more important facing our country today. And somehow, we are just going to have to declare war and pull out all the stops, to the point where we can raise our hand and say we won the war. We can put a man on the Moon as John F. Kennedy said in 1960, certainly we can win the war on drugs.

With that, I would like to turn it over to our good colleague from Florida, John Mica, for an opening statement.

Mr. MICA. Thank you, Mr. Chairman, and thank you for yielding for an opening statement.

First of all, I want to take a moment to welcome you to central Florida, to my district, a really beautiful area in Florida and in our country, and thank Mark Souder from Indiana for coming and spending his time with our community on this important issue, and Mark Sanford from South Carolina, another leader in the Congress, both leaders on this issue, and active in our committee and subcommittee. And I certainly want to acknowledge and thank Bill McCollum for his leadership for this area. He has been here long before me and provided tremendous leadership in the Congress as the Chair of the Criminal Justice Subcommittee in the Judiciary Committee, and we have conducted joint hearings together.

This is, as I said a beautiful area, which unfortunately has been the victim, like other parts of the United States, of increasing drug abuse by our youth in the past few years. Our area has been particularly hard hit by heroin dust, with seven of our young people recently falling victim to its fatal lure.

I brought these headlines and I have brought these to the House floor and I have brought them to the hearing and I bring them to your attention. It shows not only Detroit, MI, Los Angeles, New York, and other cities can be affected by this drug epidemic with our young people, but you can see here also that our community has fallen victim to this problem. It is sad to say that much of the problem was to be predicted. In fact, I went numerous times to the House floor and to our committee in the last Congress, to demand both action and attention in the last Congress. Unfortunately, my pleas fell on deaf ears and I want to thank the chairman, who has held nearly two dozen hearings and taken these hearings across—the field hearings across the country. This is one of a series of hearings.

But I think some of the results are predictable. When you fire two thirds of the drug czar's office staff, when you hire someone as a chief health officer for the country that sends a mixed message to our children, when you dismantle the interdiction and source country programs, and when you fail to provide leadership from the White House on this important issue, and send a mixed message to our youth, I think the results are somewhat predictable.

As a result of these policies, illegal drugs are pouring into our country and into our community in unprecedented amounts. I have with me this morning, a GAO report which talks about U.S. interdiction efforts in the Caribbean declined, is the title of it. Let me just read from one page, if I may. "Cocaine seizures in the transit zone declined from a peak of 70,336 kilograms in 1992 to 37,181 kilograms in 1995." Additionally, Federal prosecutions in the drug

area are down 9 percent. And fortunately, this failure in leadership, I think has been reversed because Bill Zeliff and this subcommittee have taken very active roles in the new Congress to restore some of the cuts that were made by the past Congress in these various programs.

I might say that Chairman Zeliff, through his leadership and this subcommittee have restarted the interdiction and source country programs. They fully funded almost every drug interdiction and again education and also treatment programs, many of which again were cut in the last administration, to some of the highest levels that we have ever had.

However, today, I think that one of the things that I would advocate, Mr. Chairman and members of my community, is that we adopt a zero tolerance policy relating to drugs. We heard talking to a few of the police chiefs this morning and other law enforcement officials that they think also that is the answer. And I am convinced that a zero tolerance policy with drugs and crime is one of our solutions, in addition to what we will hear today as to how local, State and private groups can work together. We can recommit vast Federal resources to aid our military, Coast Guard, law enforcement, education and treatment programs, but it is really important that we find out the emphasis and the effectiveness of how we properly direct those resources and those commitments from the Federal level.

It is my hope that today we can learn how we all can do a better job in tackling what really is one of the most serious challenges and problems to face this country.

I thank you, Mr. Chairman, again, I thank the members of the subcommittee and my colleague for coming and being part of this hearing today.

Mr. ZELIFF. John, thank you very much.

Chairman McCollum, I have enjoyed working with you and we have had a couple of projects that we have worked through.

Mr. MCCOLLUM. We sure have.

Mr. ZELIFF. You are a great leader in the Congress and again, we appreciate you stopping in. Would you like to—

Mr. MCCOLLUM. Yes, if I could, Bill. I want to thank you and welcome you for coming here today. You and I chaired a long series of hearings and we are going to miss that opportunity in the next Congress. Bill Zeliff is not going to be back with us, and I know I am going to miss him. The Waco hearings, if some of you watched, went on for a lot of hours and he and I spent time passing the gavel back and forth.

Some of you may wonder about the differences in these committees. As John Mica was saying, there is a difference. I am not as a member of this subcommittee, I am not a member of the Oversight Committee that is the broad committee that is the big committee over this subcommittee. But we work together a lot. Their job is to do the type of thing they are doing here today, which is to come in and to hear and to listen and to criticize and to try to make the Federal Government's executive branch do the type of thing that it is supposed to do. Their particular emphasis on drugs—and Bill, you are turning your attention to that—you, John, doing that as well—has been a great service to our Nation.

My Subcommittee on Crime over on Judiciary, on the other hand, main role is to look at the legislation itself, the criminal laws of this Nation. It has direct oversight of the FBI and the DEA for their funding and their manpower and so on. So we overlap in concern, but we have distinctly separate roles.

So we are just really pleased that you are down here today. John Mica, particularly, has provided leadership nationally that I do not know if this community is fully appreciative of, but John, you have done a tremendous job in this drug issue, not only in Florida, but all over the country, and today is a good example of that.

I would only make a couple of quick comments, Mr. Chairman. One of the things that I have observed because of working very closely with the Drug Enforcement Administration in the past few weeks is a real change. They have changed their estimates from 70 percent of all the cocaine coming across the Mexican border into the United States, to now saying that more than 40 percent of all the cocaine entering the United States is coming in through the eastern Caribbean and Puerto Rico. That is a very significant change, and I think it reflects what your earlier studies show, and the GAO report that John Mica brought up, and that is that the interdiction efforts of this Government, this administration, in the Caribbean, were reduced dramatically over the last 3 years. And as a result of that, it is only natural that Colombians who are trafficking all of this stuff are going to look for the weakest spot, the weakest spot is now the Caribbean.

The studies that I have done show that back in 1993, when all the major interdiction was at its height in that region, we had by the measurements of the Department of Defense and Customs and Coast Guard about 3,000 flight hours a month looking for drugs in that region of the leeward islands and Puerto Rico, and drug drops. We are down, as of August of this year, to only 1,100 of those flight hours every month—a dramatic drop. And the steaming days or the ship days for the Coast Guard and for the Navy are equally down from about 371 or so in 1993 to this August somewhere around 175–190, something like that, days in the way they measure it per month. That is a reflection of this administration, the Clinton administration's failure to understand the importance of interdiction, the very thing you mentioned in your opening statement. And we are suffering the direct consequences in Orlando and central Florida of that fact, because we have a larger quantity of narcotics on our streets today and we have them here at a lower price. And the same Colombians who are trafficking in the cocaine are also trafficking in heroin, with 62 percent of all heroin coming into the United States being Colombian heroin, and a heck of a lot of it coming into our State, some of it through the Caribbean and a lot of it on direct flights from Bogota.

So I am very, very pleased that you are here today and this subcommittee is here today to listen to our community discuss the problems that it sees as a result of these factors which are there, and to listen to the problems that we face as we try to meet those challenges that are brought about, in large measure in my judgment, because of this.

I would like to make one last closing observation, and that is because of the great deal of attention in the last few weeks on this

subject in Orlando, some are misinterpreting the remarks that I have made about the problem with the interdiction in Puerto Rico. I have never intended, nor do I now imply that this drug trafficking is a problem of Puerto Rico or the Puerto Rican community, represented very heavily in central Florida. The fact of the matter is that Puerto Rico itself is suffering enormously under this drug trafficking problem. The truth is that the island needs to be cordoned off with all of the Air Force, the Army, the Navy, whatever it takes to do that, to stop the drugs from getting into Puerto Rico, which is a part of the United States, and stop the drugs from coming here. The traffickers, the Colombians and the folks who are in the area around the Dominican Republic primarily, that is what I am being told by the DEA and the FBI. And our Puerto Rican community here in Orlando and central Florida suffers along with the rest of us as a result of this fact.

My primary concern again is how do we stop this and what do we do working together as a community with our committees to do that.

So I am pleased you are here. I will not be able to stay the whole day with your subcommittee, but I will be here for awhile and I thank you for letting me come by this morning, and welcome.

Mr. ZELIFF. Thank you, Chairman McCollum, and we appreciate your being able to stop by.

I would just like to say relative to your comments on Puerto Rico, we met with Governor Risseo on several occasions. We were down—most recently I went down with General McCaffrey and spoke to the national Governors down there. Basically we need to get in a partnership and that is what this thing is all about and we need to—and he has been a great Governor in terms of his commitment to the war on drugs. So it was—I would just like to mention that that partnership is going to work and I think we will start seeing some effects of it shortly.

Mr. MCCOLLUM. If the chairman would yield, I have also been in recent contact with them. Their government is wonderful to work with on this subject, you are absolutely right, and we are going to hold a Crime Subcommittee hearing on the witness protection program question that is controversial, with their cooperation, because they really want to be able to explain that. And I think they should be allowed to explain what they are doing with it, and let the American public and local folks understand it better.

Mr. ZELIFF. I understand that is an issue that popped out in the recent few days.

Mr. MCCOLLUM. Yes, it did. And we are not at all sure the scope of it or maybe the dramatics of it may be a little overstated.

Mr. ZELIFF. But I think the key here is it is a partnership, we need to work together. We are finding this in Mexico as well. Now that there is an interest in Mexico, I think we can start really making some progress there. So I think working with all these countries together as a joint effort, making them aware and we become aware of how important this is to our future for all our countries, and frankly for the world. So thank you.

I just would like to say that it is interesting, you all have a problem here in south Florida and in this community on drugs. We have a problem in Jackson, NH, in the mountains of New Hamp-

shire, very rural. I represent a little town of 642 people and we have got our problems. So it is not just rural, it is not just city, it is everywhere.

A guy that has been very much working hard on this, Indiana, Fort Wayne and some of the problems that you have been dealing with—Mark Souder, thank you very much for being here.

Mr. SOUDER. Thank you very much. I too want to congratulate both our chairman for his persistent leadership on this in really bringing it to the attention of Bob Dole over a year ago, bringing it to the attention of our Speaker when he visited and went moose hunting with Chairman Zeliff. And partly because of those two things we brought it front and center, not just in our committee, but in the national level. Congressman Mica, back when nobody wanted to talk about it, often would grab me or grab Bill or others and say let us go down to the floor and pound on this a little bit again and try to get somebody's attention with it, because the cut-backs we saw in this past—basically in 1993 and 1994, in not only the drug czar's office but in interdiction resulted in such an in-flow of drugs into this country, that there is very little that treatment programs or education programs or local police forces can do when you see the supply go up, the purity go up, the price drop down and in northeast Indiana, we were absolutely flooded. Often you hear that it is a victimless crime, as though the victims did not matter, who often die, but it supposedly does not reach other people. But just last week—well, first off, as we will probably hear today, the relationship to all crime is overwhelming, whether it is the theft or the actual influence of drugs on the individual.

But when we were in Phoenix, AZ last Thursday and then went down to the Mexican border at Nogales, which is—in Fort Wayne, we do not have an international border, it comes up through Florida or our biggest case just recently was \$1 million of crack taken down that had come up through Nogales and in through St. Louis into Fort Wayne. But as we looked at that and heard a number of testimonies, we had one lady who was in a shelter who said that she had basically a decent marriage, had some problems but her husband started abusing drugs and then out of the blue started to try to kill her and had her down and basically had her choked and her little girl started screaming. She maneuvered away, they escaped, they are in a shelter. And she said they fear every day for their lives, whether they are going to be killed or whether the addiction will kill him first. And the terror in her voice and the shakiness and worrying about her little daughter being killed should send a message that it is not just an individual taking their life into their hand, they are often threatening others.

We also heard from a teacher who had not really focused on it much, but started to talk with her class in a very affluent area just north of Phoenix, and she said that one of the kids said that the mother would set up lines of cocaine on the dining room table for that daughter and her friends when they would come home.

I mean, it is a nightmare all over this country and it is not something that is just impacting one person at a time. We are in a war, we have to be prepared to be in a war. We are all in this together and I came down today because I know John has been a leader and

I want to know about the battles that you are having here in Florida that have had recent national attention as well.

Mr. ZELIFF. Thank you. Mark Sanford, you have been a leader in the war on drugs in South Carolina as well, and again, I think what we will do is end up getting a little different perspective, but again, we have a problem that we need to deal with nationally. Mark.

Mr. SANFORD. I came here because John asked me to come, and he really is—I am a freshman and he has been someone who has, sort of, guided me through a number of hoops as a freshman, and so I would just like to thank him publicly for his leadership.

I would like to say it is good to be home. I grew up close to Delray Beach and ran track over at Showalter Field.

I would like to say how much I admire you, sheriff, and you, chief, for what you do on a daily basis. We were talking at breakfast about the time that I rode with the Charleston police force a couple of months back, and we were going down a dark alley—these guys got out of the car. Not only was I afraid to get out of the car, but I was sort of slumped down in the back keeping my head down. These guys do that on a daily basis. So I really admire what you all do because you all are there on the forefront.

And last, I would just make the observation that as real as their efforts are and as significant as the national commitment is—we will spend, what, about \$15 billion on this effort—as real as those efforts are, Chairman Zeliff talked about a five-legged stool and I think that is where it comes back to the difference each of us can make on this war on drugs. That is, as a parent—I mean, I did not use drugs because I was loved in the family unit I came from, and because I knew if I did use them, I would experience something so far from love that I might not ever forget. And so I cannot emphasize how much of a difference we can make, whether it is as a parent or whether it is as a grandparent or whether it is as an aunt, or an uncle. You think about the number of young folks whose lives we can touch in a positive way that will make a real difference in the war on drugs.

Anyway, chairman, I thank you for letting me be here.

Mr. ZELIFF. Thank you very much.

At this point, I would like to welcome our first panel. Start out with my left, your right, Conrad Santiago, former president of the Chamber of Commerce of central Florida; Don Eslinger is the sheriff of Seminole County; Richard Beary is the chief of Lake Mary Police Department; Richard Vose is here from the State attorney's office; and Judge Joseph Will sits on the seventh judicial circuit. We are honored to have you here, sir, as well.

We thank you all. What we will do is we will have a 5-minute rule and we will time you, but we will try to be lenient a little bit either way, but if you would, try to condense and give us kind of a verbal copy of your full report and your full report will be accepted for the record in full.

I just got reminded by my good friend, Mark, it is customary for our subcommittee to have all witnesses sworn in. If you would please stand up and raise your right hands.

[Witnesses sworn.]

Mr. ZELIFF. Please be seated and proceed.

STATEMENTS OF CONRAD SANTIAGO, FORMER PRESIDENT OF HISPANIC CHAMBER OF COMMERCE; DON ESLINGER, SHERIFF, SEMINOLE COUNTY; RICHARD BEARY, LAKE MARY POLICE DEPARTMENT; WILLIAM C. VOSE, STATE ATTORNEY'S OFFICE; AND JOSEPH WILL, JUDGE, SEVENTH JUDICIAL CIRCUIT

Mr. SANTIAGO. Thank you, Chairman.

Honorable Chairman William Zeliff, U.S. Representatives Bill McCollum, John Mica, Mark Souder, Mark Sanford and all the distinguished people here today.

It has been about 8½ years since I decided to relocate to central Florida. And I still remember the day when my wife and I made the decision to relocate to this area. Both my wife and I were born and raised in Puerto Rico, which made it very difficult because it meant leaving behind a family, our families, friends, my business, and our island. But even after considering all those factors, we decided to make central Florida our permanent home, because we wanted to raise our children in a better and safer environment that would provide more opportunities to help them develop into constructive citizens, and one that has less crime and drugs.

What I just described to you is the typical scenario that most Puerto Ricans go through when they consider leaving the island. That is precisely the reason why we are very sensitive to the drug and crime crisis of central Florida. We want to be part of the solution. We are ready to roll our sleeves and work together as a community in order to ensure that the very same reasons that attracted us to the central Florida area continue to be what make us proud of it.

At the same time, I must say the Puerto Rico's drug and crime problems are this Nation's crisis as well—for two main reasons. First, as you very well mentioned before, a considerable percentage of the drugs that infiltrate Puerto Rico flow to the U.S. mainland, which not only damages the island's quality of life, but also ours. Second and more important, the United States Government has great control of resources allocated to Puerto Rico and the Caribbean to combat drug trafficking. The Federal interdiction program has suffered considerably during the last 3 years. Funding has been reduced by about 40 percent. Crucial assets have been removed without replacing them and staff has been diminished. Lack of a regional plan also hampers interdiction efforts in Puerto Rico and the Caribbean.

At the same time, drug traffickers are better organized and are using improved technology to evade seizures. All of these factors have caused drug seizures to decrease by about 40 percent in that area. This situation leads me to believe that Puerto Rico has been more the victim than the villain.

As a Hispanic and a member of this community, I am willing to do my part, as most Puerto Ricans do, and I ask you to do yours by revamping the interdiction program of the Caribbean. In order to effectively deal with this evil that corrupts our communities, you need to increase funding, provide the necessary equipment and staff and develop a coordinated regional plan.

I can assure you that if you do that, you will see less students dropping out of school, lower juvenile drug use and crime, more

role models and a significantly better community, both in central Florida and Puerto Rico.

I commend you for taking the time to conduct these hearings and I thank you for the opportunity to address you this morning.

Mr. ZELIFF. Thank you, sir. Don.

Mr. ESLINGER. Good morning, Mr. Chairman, Congressmen. I too would like to welcome you to Seminole County.

As each of you know, the number of fatalities related to the drug crisis in recent months within the central Florida area can be counted by the dozens. Family and friends of those victims are shattered by the loss of loved ones. However, the problems associated with drug abuse in our community are far-reaching.

We are all affected and victimized by the presence of illegal drugs in our community, even though we may not have a direct relationship to the abuse. I estimate that 80 to 90 percent of all reported crime in Seminole County are directly related to drug and alcohol abuse. We are also victimized by increased health care costs, decreased human productivity, increased government expense for law enforcement, and clearly an overburdened criminal justice system. This crisis is adversely affecting the safety and the quality of life within our community.

Law enforcement administrators are struggling to seek innovative and progressive methods to deal with this problem. It should be clear that this crisis is not just an enforcement related problem, but rather should be our Nation's top social priority. All of us must realize that criminal behavior, including drug and alcohol abuse, are symptoms of a greater, more complex problem that we are experiencing in our society.

Many of us do not want to admit this, but kids do not refrain from the use of drugs because it is illegal. They abstain because they have made smart choices based on proper values and positive family influences. It is a moral choice. There is a dilemma in that our Government cannot legislate, regulate, nor mandate proper parental involvement, guidance or even effective parenting skills. We must concentrate our efforts to work both sides of the equation, the supply and the demand side of drug trafficking.

It would be a wise investment and certainly appropriate to increase the presence of U.S. military along our borders. During peacetime, our Armed Forces should apply their personnel, their technology, and sophisticated hardware to aggressively interdict the importation of illegal drugs into our country. We should also do a better job of utilizing our existing resources to aggressively seek out the trafficker, dealer, and those responsible for distributing illegal drugs in our community. Punitive sanctions for those who choose to engage in this activity must be more severe. We should send a clear message of zero tolerance. In addition we should do everything we can possibly do to prevent people from ever becoming involved in the use of illicit drugs. Our demand reduction strategies should include and continue to be all-inclusive. The family, church, school, business, and the community, as well as neighborhoods, and the criminal justice system must become more of a positive influence in the lives of our children.

Human behavior is influenced at virtually every age by peer pressure. It is imperative that we instill positive values and sound

ethics in our children, to enable them to withstand negative peer pressure. In the final analysis, drug prevention begins at home.

However, we need to enhance our efforts to assist families in this process without being intrusive. Initiatives like D.A.R.E., the Police Athletic League, the Red Ribbon Campaign, drug awareness programs for parents through local PTA's certainly attempt to achieve this objective. Somehow, we must do more to facilitate this change. Demand reduction is a shared responsibility between all segments of our society.

In spite of this great challenge, I remain optimistic. You see, we have allowed this environment to develop in which illicit drugs have flourished in our community. One might say that we have done this to ourselves. What we have done, we certainly can undo. What is also clear is what we do about the drug crisis today will determine our future and our success for this generation and generations to come.

I want to thank this committee, Mr. Chairman and Congressmen, for your time and effort and your interest in addressing this serious problem that we are facing here in Seminole County and throughout the State of Florida.

Mr. ZELIFF. Thank you very much. [Applause.]

Well said. Chief Beary.

Mr. BEARY. Good morning and welcome to Lake Mary, FL. As you are aware, my name is Richard Beary and I am the chief of police here.

First, let me give you a little background about myself. I have been a police officer for over 19 years, I worked undercover and supervised the narcotics enforcement unit for 6½ years. I currently serve as a member of the Narcotics and Dangerous Drugs Committee for the International Association of Chiefs of Police. Additionally, I am a father of three school-age children. I am a mentor in the public school system as well. So I feel qualified to talk about this issue with you.

Congressman Mica talked about mixed messages and that is kind of where I would like to go. Let us talk honestly and candidly about drug abuse. First, let me make one point clear. There is no war on drugs; in fact, in my estimation, there never has been. [Applause.]

If a true war existed, resources, expertise, and funding would not be a problem. We would take all necessary actions to win. Clearly we are not in this arena when we talk about drug enforcement, as we deal in very finite resources on a daily basis. Why is this distinction important? Well, the public believes the war rhetoric and is wondering when we are going to win. The Persian Gulf war only took 100 hours to win—why is the drug war taking so long?

The problem of substance abuse in this country is not going to go away. Some individuals, despite our best efforts, are going to abuse drugs. Our goal must be to keep that number of individuals who choose to use drugs to a minimum. This is a realistic goal that we have to focus on. The sad news is that during the 1980's and the early 1990's, we made a major impact against drug abuse in the United States. The National Household Survey on Drug Abuse in 1992—excuse me, from the period of 1979 to 1992, illegal, illicit drug users plummeted from 24.8 million in 1979 to 11.4 million in 1992. That is a decrease of over 50 percent of people abusing drugs.

During this same period, drug arrests and incarcerations doubled in this country. We were truly making a societal change in the 1980's and early 1990's.

Unfortunately, no one noticed. Why? Well due to the constant barrage of war on drugs, the White House, the media, Congress, and the public failed to recognize our success because their focus was on a total win strategy. This is an unachievable goal. There has been no other modern social problem in this country such as teen pregnancy, homelessness, welfare, or high school test scores that has shown the success of our drug policy of the 1980's. I feel certain that if SAT scores were raised by 50 percent, this success would have been loudly applauded. Instead, a 50-percent reduction in number of drug users was considered a failure. It was not a failure—we gave up.

During the last 3 years, drug abuse has increased. Public apathy has undermined law enforcement's ability to arrest drug peddlers and seize illegal assets. Several court decisions have severely hampered our ability to forfeit illegal drug proceeds. Our country is clearly at a crossroads with drug abuse.

Our Government's action during the next few years will determine if we can gain control of this epidemic or be consumed by it. We need a solid plan, policy, and focus. This policy must address three key issues—education during elementary, middle, and high school; enforcement, including incarceration and effective asset forfeiture programs and treatment, effective programs to help those who choose to change their lives.

In addition, the focus must be on drug demand reduction. Demand reduction must be a visible public campaign starting from the White House. Former Presidents Reagan and Bush were personally active in their antidrug efforts. Our children and the general public got actively behind these efforts and hence, the 50-percent reduction in drugs in the early 1980's—excuse me in the 1980's and early 1990's.

In closing, we must focus on drug demand reduction and forget about the war on drugs rhetoric. We must also realize that drug abuse will never disappear or be totally eradicated. Reducing the demand for drugs will require a long-term commitment from our Government and the public. Utilizing education, strong enforcement, and effective treatment, we can gain control of the drug abuse epidemic.

I also would like to thank Congressman Mica, Mr. Zeliff, members of the panel for taking the time to come to Lake Mary, FL.

Thank you. [Applause.]

Mr. ZELIFF. Well deserved applause. Mr. Vose.

Mr. VOSE. Thank you, Mr. Chairman, gentlemen. My name is Bill Vose. I am the chief assistant State attorney in the Orange and Osceola Circuit, which is the Ninth Circuit of Florida. We are a little to the south of here. We are the third largest, maybe fourth largest circuit in the State and are feeling the pinches and the problems that are occurring because of the importation of a variety of narcotics.

Let me start off by saying what the Federal Government can do for us, or for my office as prosecutor. We are funded by the State of Florida, by our legislative branch and they have developed fairly

efficient ways of funding our office and that is basically as far as I believe we need to talk about money for our office because we really do not want Federal money for our office. There are too many strings, it is too hard to use. It is a pain in the neck to us. [Laughter.]

So you say well why are you here, what do we want you to do with your money? We would like you to use your money to do what I believe, as a lawyer, the Constitution endows certain powers upon the legislature and the Federal Government. I heard General McCaffrey the other night say or he made a pledge that he would fulfill that one obligation to protect our borders from enemies. That is where I think the Federal money should be going right now. We have got all those troops in Bosnia protecting the Bosnians from each other. We have got troops all over the Caribbean, not over there on the drug-keep task force, and we have got them in a variety of other places in the world. I am a retired military officer. I went to a few of those places. I was in that last police action that we had in Vietnam, and perhaps that is where we got this attitude toward the war on drugs. [Applause.]

The troops that are stationed all around the world and the troops that are at Fort Bragg—I was just there a few weeks ago and saw them, they are all there, they are training. We have got the largest Navy in the world with ships—where are they? They are all around the world, but where are they in the Caribbean, stopping this heroin and a variety of other drugs coming into our borders. We would like you to spend your money—do not worry about giving—

Mr. ZELIFF. Can I interrupt you for a second?

Mr. VOSE. Yes, sir.

Mr. ZELIFF. Our money—yours, mine, the chief's, the sheriff's, everybody in the audience.

Mr. VOSE. I agree with you completely.

Mr. ZELIFF. Thank you.

Mr. VOSE. I agree with you completely. I also believe that the Government is us and we are all the Government. We would like you to spend that money to keep it out of here.

Blockades work. They have worked in a variety of situations. Perhaps they have not worked too effectively for the Kurds, I guess in northern Iraq, but they generally do work. And that is where we would like you to spend that money.

That, however, is not going to stop the drug problem. I have been a prosecutor for 23 years now. The statistics change, they go up and they go down, but as the sheriff said, the majority of crime is linked to drugs and narcotics and alcohol. We are not going to stop it unless the family assists. How do we help the family? Please do not let people delude you in saying it is because there are single families or single parent families out there, that is the problem. My mother raised me as a waitress in Miami, sent me off to the Army and I eventually went to college and law school. She made 25 cents an hour, she was not rich, she could not put cocaine on the table I guess like that family in Arizona. But there are millions of single men and women around this country that raise kids and they turn out to be great kids. [Applause.]

There is going to be a percentage of our youth that are going to use drugs. We cannot stop them from doing it. We can try to edu-

cate them, there is a certain percentage of them that we are going to have. And when they do get the drugs, then they end up in the court system where myself and the judge have to take care of it.

Now in the last 3 years in central Florida, we have had an increase in heroin cases—that were presented to our office. Now this is somewhat misleading because the majority of large heroin traffickers or large heroin cases go to the Federal courts. So before I even mention our statistics, I would ask you to fund your Federal court system, fund the Department of Justice and give them strict instructions, as best you can, to prosecute drug traffickers. And they do—do not get me wrong, they do. We have a great relationship with them. But that is where the majority of the traffickers go. We get the possessions and the minor deliveries. We went in 1994 from 125 to we will probably have about 180 this year.

In juvenile court, it is some astounding statistics. There are not many of them—you would think there would be but generally we do not prosecute juveniles as juveniles when they are into heroin, we make them adults. But we had one in 1994, one heroin charge in Orange and Osceola County. We expect eight this year. Now eight is not many, but in 2 years to go from one to eight, that is an enormous jump. I am not even going to try to do the math.

This is a drastic problem and drastic problems need drastic solutions. I do not know how many of you gentlemen saw the movie "Clear and Present Danger." Millions of Americans did and I think most of them agreed with the tactics in that movie. I think most of them agreed with the tactics in the book. Shooting down drug traffickers coming into this country I do not think fazed many people at all. There were other problems in that movie—the President lying to people. That was not the issue that I saw in that movie. I saw that most Americans in this country want you to get nasty with drug traffickers, they want you to shoot them down. I do not think they will shed a tear as long as we, inside this country, when we capture them, handle them with due process—that is fine. But please use your resources to keep them out of this country.

And I have talked long enough. Thank you again, gentlemen, for coming here and we wish you the best.

Mr. ZELIFF. Thank you very much. [Applause.]

The Honorable Joseph Will, judge, seventh judicial circuit. Your Honor, thank you.

Judge WILL. Mr. Chairman, Congressmen, ladies and gentlemen, my name is Joe Will, I am a judge in the seventh judicial circuit, as you have heard. That is Volusia, Flagler, St. Johns, and Putnam County. I do most of my work in Daytona Beach and in Deland, where I have been a juvenile judge for just about 5 years now.

On the way over in the car this morning, I was trying to add up the numbers. We do not stop every day and try to add them up, but just trying to add them up, I am going to estimate that in the last 5 years, I have seen 8,000 delinquent children and probably in the neighborhood of 4,000 or 5,000 dependent children. And in the course of those cases, probably 13,000 cases, I would estimate that drugs or alcohol, primarily drugs, have been involved in 80 or 90 percent of those cases in a meaningful way that has seriously disrupted the lives of children. In the dependency forum, we see mostly crack families. We do not talk a lot about crack, for some reason,

but crack seems to be about the most insidious thing that I have seen in my lifetime, for disrupting families, neighborhoods, communities, but more than anything else, just absolutely destroying the lives of unborn children.

As we are dealing in our delinquency courts, we are dealing now with the children who are the children who have been affected while in the womb by mothers who are addicted to crack. I have never seen anything like this in my life. I do not have a background in law enforcement and so it was new to me 5 years ago to see mothers who would want crack so badly that they would take it, knowing that it was going to give their child a brain like jello. But we have those people and we have them in all of our communities. That, however, is not the drug of choice for children. The drug of choice for children seems to be marijuana, for the greatest part.

And in Volusia County, we have kind of a rich mix, we have urban and rural areas, we have a pretty good ethnic mix in our county, and we see people from all over the country as people are coming in and out of Florida in a state-of-flux. If you do not mind—I do not know much about interdiction and the Coast Guard and those kinds of things—what I would like to talk to you about are the kids that I see and what it is that I think might affect them in some way. Also, I would like, before I even say anything, tell you that I speak in generalizations. You know, people have thin skin when it comes to talking about some subjects, and I want you to know that I know that there are good and bad people in every category that I am about to mention, and some people who are trapped in their circumstances can still do an excellent job, as we just heard testimony regarding the single mother. So I do not mean to offend anybody in saying these things.

I deal mostly with system kids. I coach a Little League team and have for 10 years, but those are different kids than the kids that we see in our system, kids that have violated the law or who have been abused, abandoned and neglected. And these are not kids that you are used to seeing on the news. When we hear the political rhetoric that surrounds the juvenile situation and what we need to do to bring the juvenile situation under control, we seem to be talking about a different group of kids than the kids I see every day in court. You would get the impression that these are a bunch of thugs with one eye in the middle of their forehead and slobber running down one cheek—and they are not. They are regular kids just like live in your neighborhoods and everybody else's neighborhoods, and they are lacking tremendously in an ability to exercise good judgment.

If we really want them to quit, then we are probably talking too late. What we really want them to do is not start. In this effort, the people that I deal with most often are the people who are involved in the social services in our communities, and not just the social service, but State departments and agencies, which are given the responsibility of dealing with children and children-related problems. And to give it to you in a nutshell, they are grossly understaffed, they are grossly underfunded, they are grossly under-supervised, and they might as well not be in place for all the difference that they are making.

When we have case managers—we have adopted in Florida a case management system to deal with children who are in our system—and when we have case managers who are handling case-loads of 80 to 120, then you have to stop and think for a minute. A little bit of quick math will tell you that they are going to spend about 20 minutes per week per family. If that is supposed to make a difference, I think we might as well just trash the whole thing and go away. Twenty minutes per week per family is not going to make any difference at all.

And as long as we keep treating the problem as though it is one that is created by the children, so that we have this mental set, this mindset that tells us if we take the children out of the community for awhile like an old beat up car, spit shine, and wax them up and then return them to the community, that they are somehow going to be OK, then we might as well not do that either. The children are products of communities and families. They do not spring from the womb with this notion that they are going to use drugs and get into crime and get into trouble all across the board. They spring from the womb just like you and I did. Their community and their family have directed them to behave the way that they do—again, speaking in generalities.

Our goal has to be, from the very beginning, if we expect kids not to use drugs, to help them make better decisions about it. And while we have some programs in place that do that, they obviously are not making that difference, or the statistics would not be all over the board behind you like they are and 80 to 90 percent of the kids that I see in court would not be involved with drugs.

If we are going to take our kids away from families, move them to places like boot camps, commitment programs, treatment programs, that is a wonderful thing, it takes a tremendous amount of dedication and resource to do that, and we have to keep doing that. But we have to remember, like that car that I was talking about, you know, if mamma wrecks the car, then we are going to take it over to the body shop, we are going to get it fixed up, we are going to paint it and we are going to bring it back to mamma. We did not teach mamma how to drive, so mamma is going to wreck the car again next week, guys, it is just not working. That approach will not make a difference. We have to dedicate ourselves to doing something far earlier and far stronger.

Another very unpopular observation is that right now our courts are flooded with parents who do not know how to parent. I wish I could give you a nicer explanation of that, but we have people who do not have a clue as to what it is that they might ought to be doing with their children to guide them in the direction that they want them to go. These children are not taught early on, they are raised by television and day care and babysitters, by families that are out there trying to make a living, fighting to stay alive, and the children are being raised by their peers and by television. Television does not teach us how to make good decisions, it does not teach us judgment, it does not teach us anything that we need to know to make that decision when we are 12 or 13 years old in middle school and we are approached by somebody that wants to offer us a little bit of dope. We have a lot of people who should not have children that have children. They have them because they can

and once they have them, they do not have a damned clue what it is that they might do to make those children have a better lot in life than they have. That is the problem that we see in our courts. Now I do not know if it the problem that we see across our society in general, that is something you would know more about. But the children that we see in these courts are children who never had a chance because nobody ever taught them to make good decisions.

And that is not to say that every—you know 80 percent of the children in America are not going to experiment with marijuana at some point in their lives. In some of our neighborhoods, the mothers are glad that their kids are smoking marijuana instead of doing crack. They are glad marijuana is there, because it keeps their kids alive. So maybe under their circumstances and their particular lot in life, maybe that is a good decision for them.

What we need to do is the same thing that the social services people have probably been telling us for 30 years now, and that is that we need to approach this as a family problem and we need to assist families that do not know what they are doing, early on, in making good decisions to make things work out for those kids. We have got to hit these kids early, at 5 or 6 or earlier, and we have to give the courts the authority to deal with those families that are already manifesting problems.

We have some things on the board here in Florida I am proud to say that Senator Burt will be taking forward in the State legislature this year, to work with children in need of services and families in need of services legislation, to give us some help in that area. But in the meantime, what we need from the Federal Government is real hard to figure. The kinds of things that we need, we need locally, we need from our State and we need from our local governments, where we know the children and the families and we work with them. Very often when mandates come from Washington, they have funding tied so closely to them, that the States feel limited in what they can do—this new federalism that ties the ability to gain money back into your State, to gain your own tax money back to your State, being tied to meeting some condition that may work well in Indiana or Montana, is a very difficult thing to deal with in the State of Florida. We have suffered with that my entire life. And we need to have the latitude here to make decisions for our people that we know will work for them.

What we really need for our kids, if we really want to make them make a good decision when they turn into teenagers, is adequate facilities to work with them when they are young or with families that are desperately in need. We need adequate personnel that are adequately paid to work in those facilities. We need salaries, we need incentives to hold valuable people within State government to work on those things, and we need continuity in our services. If you look in any of your communities at the service agencies that are in place to assist children and families, you cannot find very many that have been here 5 years. They are here today and they are gone tomorrow because of the sporadic funding that is available to them. And what we need also is adequate room from the Federal Government to experiment in our own communities to determine what it is that can help those families.

Gentlemen, thank you for coming to Florida, thank you for coming home for those of you that have done that, and thank you for your interest in our children and our problems. [Applause.]

Mr. ZELIFF. Judge, I was very impressed—actually I was very impressed with everybody's testimony. You talked about being involved with a Little League team, and I think—I have a feel of this community, if this is representative of the community, the people that are here. Obviously, I think America is beginning to wake up, this community obviously is aroused and is concerned, or you would not be here today.

You talk about a family problem—it is a community problem too, is it not?

Judge WILL. Yes, sir.

Mr. ZELIFF. I am a father of three boys, I am lucky, I have very successful sons; a veterinarian, a marine and a business partner. And I have three grandchildren, and those are the kids that I worry about now at 2½, 3, 4 years old. Somehow we got through all that.

But I did not know anything about drugs, and one of the first things I had to do—it was kind of crazy, I had to call Tom Constantine at DEA and have him come into my office and bring all the stuff over and bring me up to date on what it looks like, what was involved, and I have been doing this for 2 years. But I did not have any knowledge, and it is hard to talk about drugs, it is like talking to your kids about sex. Where do you start and how do you do it when you cross the line on trust and how do you deal with if you have evidence and what do you look for. The whole experience of learning to be a better parent maybe needs to be a much higher priority. But I thought your testimony was terrific.

And just moving over, chief, your comment on mixed messages, there is no war on drugs, there never has been. We talked about this at breakfast and you put it right on the line. Tom Constantine, head of the DEA, said it is a time bomb ticking ready to blow up in our faces at any time. And we did fail to recognize the success of the 1980's. It stopped as of somewhere around 1992 and we just gutted all the policies and the programs, and this is what we have been trying to fight. You may have read last week or 2 weeks ago, we have subpoenaed a letter that was hand delivered by Louis Freeh and Tom Constantine to the President 18 months ago, critical of the Nation's drug policy, critical of the dependence on treatment and critical of cutting back on interdiction. We subpoenaed that letter, we are trying to pull that out. And the IDA report, which was recently a subject of our 20th hearing on this issue of criticism of those same policies.

But we are gaining, because at least now the media is starting to cover this issue. We could have had this hearing 2 years ago and I do not know whether we would fill this room like we have today. And I think that is a good start.

Sheriff, I think you somehow crystalized—it is symptoms of a greater, much more complex moral problem in this country. I do not know where we start, and Government is not going to solve that one. I mean, I think we all have to wake up before it is too late.

Do you want to expound on that any?

Mr. ESLINGER. Yes, I think it was as a result of an environment. You know, if you look back to the 1960's and 1970's, drugs were considered to be mildly risqué. You saw in all the movies, sheik parties, sporting events. I mean there was an atmosphere of tolerance, and as a result of that, I think we have sent mixed signals and I think that we can work together to eradicate or at least facilitate a change in our attitudes. And I think that is what it really boils down to, is getting families more involved.

I do not know, and I do not think the judge or anyone else here knows exactly—there is not one silver bullet, but rather it is a myriad of different approaches that get back to empower people to share responsibility with them.

And clearly, I want your money, Mr. Chairman—[laughter.]

Not speaking for Mr. Vose.

Mr. ZELIFF. Straightforward.

Mr. ESLINGER. We need all the help we can get here in Seminole County.

Mr. ZELIFF. I appreciate that. And one of the responsibilities that we have is we do not have unlimited resources and we are trying to put resources where they work best, and that is why we are doing this hearing here today. But once they get out into the field, you know—let me ask you a quick question. You described the level of cooperation among all the agencies that are involved with the use of that money. Do you feel that we have gotten over turf battles and all that kind of stuff?

Mr. ESLINGER. Without question, here in the middle district of Florida, the Federal circuit, it is great cooperation with DEA, FBI. However, I think we can better utilize our existing resources. The administration of DOJ itself can be re-engineered or streamlined and save millions upon millions of dollars, and put more agents on the street. Again, stepped up enforcement is not the only answer; however, I think we can do a better job of it. We have a great relationship with all the Federal agencies within the middle district, we truly do.

Mr. ZELIFF. I would like to just add one quick thing and then I will turn it over to John Mica. But Mr. Vose's comments on too many strings, too hard to use, you know, that kind of thing—what we have tried to do with recent crime bills is put block grants back to the State so that in New Hampshire, for example, the attorney general's task force on drugs, for example, can pull together the Federal, State, and local groups. We have done things in Manchester, NH, and we have done that kind of thing where you can take some resources, put together a grant request that involves all of this and you can tailor make it to your individual city, because sometimes what works in New Hampshire does not work here and vice versa.

I see the red light is on. Mr. Mica.

Mr. MICA. Thank you, Mr. Chairman.

My fellow Members from out of town, you see how fortunate I am to have leaders like this in our community.

Mr. ZELIFF. Sure.

Mr. MICA. The testimony, the great testimony they provided today. There is some good news and some bad news. The good news is that we have in fact funded some of the programs that were dis-

mantled in 1992, 1993, 1994, up to 1995. I am sorry that the representative from the Hispanic Chamber has left, because I did want to also say that I believe we have fully funded the Coast Guard effort around Puerto Rico, and the Coast Guard has that responsibility, plus now getting the military back involved, again through the leadership of this subcommittee, Chairman Zeliff and others.

The question I have is, we are throwing a great deal of money, you are at \$15 billion. That is a sizable amount of money. We are trying to make certain that that money is going into programs that are effective. I have two questions, one for Judge Will. You said you see 8,000 kids and you see 4,000 to 5,000, over half of that, involved in a drug problem of some sort. What kind of social background are they coming from? Is it—you always have the perception that it is just coming out of the poor neighborhoods. What are you seeing as the mix?

Judge WILL. Our mix is pretty much across the board with teenagers. Now again remember, we are talking about system affected children, people who are in the delinquency or the dependency system already.

Obviously we see more poor people than we do rich people. I mean, it is that simply stated. But we are seeing tremendous numbers of people right up the middle. The great middle is occupying our court right now.

Mr. MICA. You asked also, I think, for flexibility in the programs, because if we get the funds here, you think you and local officials can do a better job of assigning priorities and dealing with the issues.

Judge WILL. Yes, I am absolutely positive of that. There is just no question that the people in the individual communities will have a better feel for what it is that is going on in their community than someone from out of town. I mean, we all know that. The problem is that the Federal Government has to be concerned somehow that there will be a deviation from the policy if the money gets too far removed from the control. And I understand that, but maybe pumping it through the State somehow and exercising that control at that level is probably a preferable method. I just think—my general observation across the board is that we are failing in every effort that we are making as far as dealing with delinquency, dependency, and the like. We seem to know what to do, but we just cannot get to the point where we do it early enough and seriously enough. And if we could make that transition to do that, I think that we could. We need to experiment as we get there too, because the tried and true methods are not—you know, they are tried, but they are not true and we need to experiment until we find the ones that do work and we need that kind of latitude in each of our communities.

As we recognize different personalities and different abilities in our communities, we need to work with that, I am positive of that.

Mr. MICA. Two last questions, one to Mr. Vose. You indicated that Federal prosecution you were fairly pleased with, but some of the statistics we had is that drug prosecutions have been down nationally somewhere between 9 and 12 percent the last few years. What is the record in central Florida, what are you seeing?

Mr. VOSE. Well, I know that our local U.S. attorney's office is very cooperative with us. We have a Metropolitan Bureau of Investigation which is a combined organized crime task force that is in our building and I give two lawyers—or we give two lawyers as their advisers. And they make a lot of bigger cases that are referred to the Federal Government for prosecution, and are very pleased with the level of prosecution in this area. They have more of the heroin dealers than we do. They just recently had a rather large central Florida arrest.

Personally, from our standpoint, we will give them any case they want, there is no turf war between us and we just have a good relationship with them and have never had them decline to prosecute narcotics cases. Sometimes I know they say it is too small and we do it because they have a limit—but a very good relationship.

Mr. MICA. But you want us to make certain that we direct DOJ that the funds be spent on tough prosecution and going after that.

Mr. VOSE. Well, as Chief Beary said, we have got to quit sending the mixed message. We have to—it is either going to be a war on drugs or it is not going to be a war on drugs. The trend over the years, both in State, local, and Federal courts, has been to treat narcotics as if they are a little social evil that is not doing any harm and it is a victimless crime, and we all know, anybody that has been involved in the system for any length of time knows that most violent and burglary, nonviolent type crimes are all linked to drugs or alcohol use. So yes, I think you need to make sure the Department of Justice knows their marching orders are to prosecute drug offenders whenever—within their purview.

Mr. MICA. This quick last question to Chief Beary. You said some court decisions have hampered some of your efforts. Is there anything that we need to do as far as Federal legislation to address some of these decisions?

Mr. BEARY. Well, one of the things, like I said, we have lost our focus, and I can tell you that back in the 1980's, we were doing some tremendous asset forfeiture, some good programs. And then all of a sudden we started with public apathy and we started feeling sorry for the drug peddlers and oh, goodness, you only arrested him with \$2,000 worth of drugs, but his car is worth \$30,000 so you should not be able to keep it, that is double jeopardy, you are punishing him twice. If the guy is a drug dealer, he is a drug dealer, we just happened to catch him with a small amount that day. [Laughter.]

And that is the reality. OK? So we feel sorry for the guy, let us give him back the car. Well, the bottom line is, if he is a drug dealer, let us play hardball. OK? And that is where we have had a problem. One of those cases just recently came out and we came out OK; however, there are more lined up. The California, the district court out there for California has come out with some off-the-walls, and unfortunately our local judges buy into this stuff because they say well that is what the Federal judges are saying, so now our local judges are doing the same thing. Well, that car is worth \$30,000, you only had \$800 worth of crack with him that day, it is unfair. Well, as far as I am concerned, peddling drugs is unfair to the rest of society and we have got to stand up and say—[applause.]

Mr. MICA. My time has expired, but maybe Mr. Vose wanted to respond.

Mr. VOSE. Well, we did just get an opinion out of the U.S. Supreme Court that basically threw out most of the bad case law coming up and saved forfeitures, so to speak, even though there is an effort in our society to do away with forfeitures. It is not a judicial problem, I am afraid it is a societal problem because some of the members of the judiciary are out of the community and they perhaps are products of the 1960's and 1970's and do have a lighter view of drugs. And I think that even though the judiciary is a separate and independent branch, the legislative branch funds the judiciary, and there certainly must be some way to give them their marching orders in light of the restraints of the Constitution.

Mr. ZELIFF. There is, and we need to utilize that.

Mr. MICA. Thank you, Mr. Chairman.

Mr. ZELIFF. You have just seen an example of how your Representative does so well in Washington. He has milked out two or three extra questions—did you notice the finesse that he does it and the level of professionalism?

Mark Souder.

Mr. SOUDER. We can get this information from DEA, but I wanted to get your—make sure I understood where each of you at the local level, your experience. Do you believe that the drugs that are coming into this particular area, all the different counties, are predominantly coming at this point from Puerto Rico as opposed to up through Miami and Tampa?

Mr. ESLINGER. No, I do not. I believe it is anywhere from Los Angeles, Detroit, Chicago.

Mr. SOUDER. So if it would come from that direction, does it come by air, do you think it comes—

Mr. ESLINGER. I do not know. The local DEA, I think our representatives are here, they can maybe answer that question, but obviously south Florida has a significant impact, Puerto Rico, the South American countries. But we have had drug traffickers that I have arrested personally that have gone to New York to obtain the 20 kilos of cocaine, because of Vice President Bush's task force at the time in the mid-1980's. I mean, it was at its pinnacle.

Interdiction work is like putting your thumb on mercury, it is just going to go elsewhere. So that is why I think we should do a better job in the totality of circumstances.

Mr. SOUDER. So you think it is coming, trying to get—do you think it is moving in different traffic patterns than it was previously or it has always been this mix?

Mr. ESLINGER. I think in south Florida, I think in central Florida, I think that Tampa has been a source city at some point in time and I think we see Mexican marijuana, Texas. We have interdicted and seized large shipments of marijuana from Texas. Los Angeles, we know has played a role and obviously a significant amount of heroin is in fact, unfortunately, coming through Puerto Rico.

Mr. SOUDER. So—and the others can comment as well—you do not see a shift in patterns in the last 2 to 3 years as to where it is coming from?

Mr. BEARY. It all depends on the drug. Different drugs come in different ways. You name the drug and there is—

Mr. SOUDER. OK, cocaine.

Mr. ESLINGER. Cocaine, south Florida.

Mr. SOUDER. And heroin, because most of the origin is Asian or Colombian, it would come in probably from New York more or from the West?

Mr. ESLINGER. Brown heroin is Chicago, Mexico, Texas, Los Angeles. We are seeing south Florida as well as Puerto Rico.

Mr. SOUDER. And marijuana mostly you are saying is coming from the West through Mexico and Texas?

Mr. ESLINGER. The cases that we work in the north end of Seminole County are coming—it is coming from Mexico via Texas.

Mr. SOUDER. And are you seeing the more potent marijuana? In California in our recent hearing there, DEA said that it was, the average marijuana was 28 percent THC as opposed to the previous high in the late 1960's and early 1970's being 6.7, an average of 2.5, being that the marijuana is more like the potency that harder drugs used to be?

Mr. ESLINGER. FDLE, our State lab, cannot do that analysis or has not done that analysis.

Mr. SOUDER. Because it would put a whole different perspective on marijuana if marijuana is that much more potent; not that it was not devastating to many of my friends in the late 1960's and early 1970's as well.

I wanted to ask Judge Will a couple of questions—make a couple of comments and get a reaction to it.

I do not think there is a probation officer anywhere in the United States who is not completely overwhelmed—grant that right up front. I also think this whole funding question of how much flexibility we give, we have accountability to the taxpayers, they are holding us accountable. We want to give as much flexibility as possible, we need to give some guidance because we are held accountable for having raised the tax money. If you get that too disconnected, there are problems too. Yet we realize the local flexibility question. We are also concerned about—there was allusion to some wayward judges in California, that law enforcement were increasingly getting people who experiment not with what the people intend with the money.

But I spent a number of years as Republican staff director in the Children and Family Committee in the House before I moved over to the Senate staff and then got elected to Congress. I am also vice chairman of the Children and Family Subcommittee in the Education Committee where we are reworking the Juvenile Justice Act along with what Chairman McCollum is doing over in his committee as well. His staff has been helping us because primary jurisdiction lies in the Education Committee.

One of the problems that—a number of years I sat through some seminars that were extremely depressing. Bob Waller, research writer at the University of Tennessee had tracked for 20 years different juveniles and had worked with them. First they tried a little heavier, intensive probation effects, then they tried moving the family service people into the home for up to 3 hours, then they tried putting them there for 72 hours. They tried paying mothers,

particularly single mothers, but also intact families to attend seminars. Then they made the seminars mandatory or they were going to get their funds cut off. And what they found net was that behavior changed zero. That even with the intensive 72 hour in-home, partly because many of these were already isolated, we have seen it in city after city, where a family has moved from one city to another, the kids are a problem so when they hit the next school system, they have the same problems. The mother because she is often moved, is embarrassed to go to church because the kids are a problem, she is isolated in the neighborhood because they immediately turn on her if the kids become a problem in the harder cases. That is one element.

Otherwise, we had the Perry pre-school people there who have high scope, which is the Head Start studies. They have tailing off of the Head Start impact by fourth grade, they did have some reduction in juvenile delinquency. Oregon Learning School experiment did not have a follow-through. In other words, there is no evidence that we can find that the intervention programs are in fact working. So how do we, as governmental officials, knowing that you cannot give up and you still try it, on what grounds would we up that much funding, and do you have anything that—I mean you are looking at being overburdened, but would that actually work if you got more money for that? Not that anything else is particularly working either.

Judge WILL. A lot of what we do, we do by the gut and by the seat of the pants, as opposed to taking statistics in from other programs that we do not know about. Just anecdotally here real quick, I love that word, that is the new warm and fuzzy word.

Mr. SOUDER. It means you have no complete scientific evidence but you have a good case.

Judge WILL. It means I do not have a clue, but I am going to tell you anyway. [Laughter.]

Paying these moms—here is the problem. Tracking the kids after they have already become system kids is going to be depressing. Once they are into the system, we are not making very much difference with them and paying mothers to go to the programs is probably not going to help, because all of the psychologists tell us that children formulate their ability to make judgmental decisions early on, many of them before they are even 5. And so dealing with a child who is 15, or our most common child, the 16 year old ninth grader that is turning our system inside out right now is almost a total waste of time. The statistics tell you that you will make very little difference.

Maybe if we were going to pay somebody to do something, honestly what I am trying to say is maybe we should have paid that particular mom not to have any children to begin with. And if we were able to identify those people, we could do a good job. But since we cannot do that, then maybe if we were able to use our school systems to identify for us those children who are having problems early on and address the family there. We have some legislation in Florida that allows us to do that and I would like to—you know, we are mounting an initiative to try to do that and see if it will make a difference. The problem is that you cannot tell in a year or 2 years or 3 years. If we adopt a program in Florida that works

with 5-year-olds, then we are going to have to wait 12 years to see if it made any difference. That is a long time, nobody is ever around 12 years to see. But that is what we have to do.

You cannot use the studies that tracked old system that did not work to say that we should not try a new system. I think there are a lot of new ideas out there with people that can work with 5 year olds and the families of 5 year olds to make a difference. More importantly, I have to wonder, honest to God, what does it say about us if we do not try. You have to come to court sometime and meet all these kids and see them floundering, take a look at them and know that their lives will never be any better than they are right now and then say, because it did not work before we do not want to try now. That is a terribly heartless way to look at these children.

Mr. ZELIFF. Thank you, Mr. Souder. Mr. Sanford.

Mr. SANFORD. Judge, I would like to follow up with you for one more second on this issue of how you hit potential users earlier and harder. On the hard front, what would you recommend, what have you heard about, what have you seen that might work or has worked?

Judge WILL. Something I would like to see tried here real badly is not something that you all can do, so I will do this real fast for you. What I would like to see here is a child in need of services action that could be filed by a variety of people in the community. It could be filed by law enforcement, by our HRS people, our juvenile justice people, our school district people, people that identify a young child who is in trouble. We can see them, you know, Johnny is grabbing Jimmy on the rear end in school or he is beating up Susie.

Mr. SANFORD. That was pretty normal stuff when I was growing up.

Judge WILL. I do not mean the playful stuff, I mean the stuff that is obvious. Any kindergarten teacher you ever meet will tell you that they know which of those children is going to be in prison after they have been in that class for 6 weeks. And if we could identify those children and if we could bring those families into the school districts to try to provide them some of the help that they need in parenting that child—identify the problem. Maybe we have a family full of physical abusers, sexual abuse, substance abuse, and we do not know that when all we see is Johnny, but when we get that family in and if that family does not want to cooperate with the services that are voluntarily offered, then bring that family into the dependency system and order them to. That is a system that I would like to see tried with the younger children, to see if it matters on the other end. That is the kind of experiment I would like to see us have a chance to work with.

Mr. SANFORD. Mr. Vose, have you heard of similar tactics that either could work or have worked?

Mr. VOSE. Well, I will tell you one thing, this is not the really young end of the spectrum, this is the 15-year-olds and 16-year-olds, we have in Orange County—well, it is in Orange and Osceola Counties, and some of the other counties have done it, it is called teen court. This gets kids their first bite in the system and it catches them for minor crimes—possession of marijuana is one of

them, battery, punching somebody out in school, petty theft, a variety of things like this. And it allows them to come into the court system with a jury of their peers, other teenagers, to sentence them. I was not too impressed with the system when I got involved with it and now I do it about once every 3 weeks, and go over and either be a judge or an advisor. And I have been amazed at—you know, teen pressure is what causes a lot of kids to use drugs and do a variety of things. And I was amazed at the teen jury that is all teen defendants, the way they—when they had the opportunity, the peer pressure that they placed on the defendant. It was amazing that these same kids that had been prosecuted a couple of weeks before, were now in there saying no, the right thing to do is this, the right thing to do is this. As an advisor, you stand in there and listen to this and I am always amazed that they are tougher on the kids than we are.

And I think that is the problem. We are not tough enough on our kids. And I am not saying beating them or hitting them, I am just talking what do kids need, they need rules, they need guidelines, they need regulations—we all need that as we are growing up and we are not—well, I should not say we—a lot of us are not doing that for our children.

We have a booklet here that I brought that we give out in our office, it is called "There is no place like home to learn right from wrong." And it was put on—the Turner Corp. assisted us and we used the Wizard of Oz, but it has got a whole bunch of things in there at pretty easy understanding level for parents, both in English and Spanish to help them how to deal with their young kids and teach them how to do the right thing.

We are not going to solve this in Government. Government—you know, I have been in Government for 30 years now and we are very inept, all of us are, at trying to solve social problems. We just cannot do it. All we can do is try to hit the symptoms. The people have got to solve this problem for themselves. Hopefully we can find an effective way to use the money that they give us or that we take from them, I guess we should say, to help—

Mr. SANFORD. Do you, therefore, believe that legalization is one of the ways we might—I read an interesting article by Buckley, who said that this problem has got to be solved within the family. Until you change societal norms, you will never be able to eliminate supply. Is that a dumb idea?

Mr. VOSE. Well, I do not know if that is the solution. I hear that debated a lot, there are a lot of intellectuals that feel that legalization of drugs would be a good thing. But what message are we then sending? The message we are sending is go ahead and destroy yourselves no matter what. That is like me telling my son when he went out this weekend, oh, come in whenever you want, drink whatever you want, use drugs, get a couple of girls pregnant, it is fine, you know, you can make that decision. That is not what we should be telling our kids. We should be saying no, you cannot do this. Well, why? Well, because I am your father and when you get old enough to leave, you can make your own rules. And hopefully, once they get the rules early enough in life, they remember them.

The kids that I see in the system and that the judge sees, no one has ever given them any rules, no one has ever told them what the

right thing to do is. And I feel very sorry for them. I have to put them away in prison. Well, actually the judges put them away in prison, we just present the evidence to them. I put a young 17-year-old in prison for 30 years a couple of months ago for shooting a police officer and shooting someone else. And this was an interesting case because he had a great support group with him. He had his mother, father, a whole big family saying what a great kid he was. And yet here he was, shooting at least two people, probably more.

Now who failed him? I do not know. But I know that we have got to, as adults, give kids rules very early in life. Now they may choose not to follow them, but if no one ever tells them what they are, how can we blame them? We can put them away in jail, but we cannot blame them really.

Mr. SANFORD. On that front, could I ask one more question, Mr. Chairman?

Mr. ZELIFF. A tiny one.

Mr. SANFORD. A tiny one. That is, as I understand it, based on what I hear from court folks, people tied within the court system back home, that is we have failed some of the people—in other words, we have not been an effective parent, if you want to call it that. In other words, you say you are going to get 3 years, but you are out in 18 months; you say you are going to get 5 years, you get out in whatever time. With the exception of the Federal guidelines where it is pretty strong; at least at the State level, there is a lot of sliding on the amount of time you actually serve. As I understand it with a lot of younger drug dealers back home, they will go into the system, but they know they get out in a whole lot shorter stay and therefore, it is not an effective deterrent. What do you think would be the ideal time or punishment that in fact would make for an effective deterrent?

Mr. VOSE. Well, I really cannot answer that question. I am in the executive branch, we enforce the laws, legislatures make laws and I know you are asking for advice, but I think the statutes we have on the books in Florida are fine. The problem is that some years ago we had an administration and a legislature that decided they were spending too much money on prisons and did not want to spend any more, so we got sentencing guidelines. We got sentencing guidelines, I guess it was in 1982, and basically no one went to prison. And when they did go to prison, they did not stay long. We have tightened those sentencing guidelines up and we saved billions of dollars on building prisons but society suffered. We are now building prisons and putting people away.

But I have an example here, this happened last week. This is an e-mail from one of my prosecutors and it says, "This defendant who is on probation for delivery of heroin, committed eight new offenses, four deliveries of heroin, two possessions of heroin and one possession with intent to sell." So I went to the sentencing. This person, we asked for 15 years for this person in prison, he is on probation for delivering heroin. We asked for the judge to depart, because the sentencing guidelines only call for about 6 years in prison for selling heroin while you are on probation for selling heroin. And the judge did, I think what he thought was a pretty tough sentence, and we did not think it was tough at all. He gave him

10 years for selling these new drugs, and then sentenced him on the case that he was on probation for and gave him 10 years concurrent. Now what message did that send? You have got free delivery of heroin there. In other words, it does not really matter if you violate your probation, because we are not going to do anything to you.

But that is not a judge problem or a law enforcement problem, that is a societal problem. Society thinks that it is not that bad of a thing. If we are going to have the war on drugs, we have got to really decide, is it going to be a war on drugs or is it not going to be a war on drugs. Because if we are not going to do it, I agree with you, why not legalize it, because we are wasting a lot of money here.

Mr. SANFORD. I am not suggesting that.

Mr. ZELIFF. Could I just jump in and add, I think the problem with legalization—everybody has their opinion, but when you get to addictive drugs like crack cocaine and everybody is just trying a little experiment and they get addicted—I mean I feel very strong that legalization—just so everybody knows, everybody can weigh in individually on this, but I think most people in the room probably do not think, and I know you do not think that is the solution.

Mr. SANFORD. Right.

Mr. ZELIFF. But we at least have a good discussion.

I would like to thank this panel very much, very articulate, right on the mark and very interesting testimony, some stuff that we will take back with us as we try to formulate hopefully declaring the war on drugs.

What I feel you have here in this community, just by listening to this panel, is that you have the core—and you may already be doing it, but you have got the core elements of a very effective community program. You have got a judge, you have got prosecutors, you have got a sheriff and chief and you have got a lot of interested community people here. If you have not already done it, what we are trying to do is now take this thing—you know, we have got resources and we are moving those together, we are trying to get back to the interdiction challenge that we had with very effective programs. If I had a chart here—I was looking for it and I cannot find it—but we have a chart that shows what happened when we gutted the interdiction program in 1992. And we also know that right now, teenage drug use is up across the board. We have an epidemic.

So if this community feels that they would like to help declare war on drugs and we are going to need to do this nationally, but locally you can do it, you certainly have the elements and I do not know where the leadership will come, it cannot all be law enforcement, but it should be a core of law enforcement, parents, judges, prosecutors, everybody together. And I think you have probably one great opportunity here, if you have not already done it, to sit down after this hearing and see who is going to pick up the ball and pull people together. If you have this much interest, see if you can be a model for the rest of the country.

Anyway, I thank you all very, very much for your testimony and being here today, we really sincerely appreciate it. Thank you. [Applause.]

I would like to now welcome our second panel, as the first panel starts to leave. I would like to get one of those little pamphlets as well.

While the second panel is taking their seats, I would like to introduce them. They are the concerned citizens of central Florida. Mr. Richard Kozak is from Winter Park and I believe he is here with his daughter Jaime; Commissioner George Duryea is from the city of Lake Mary and his son Carey is with him; Barbara St. Clair is here representing the House of Hope; Toni Goodwin is here from Orlando and Bethany Long is a Valencia Community College student. We thank you all for being here today, and if you would please stand and raise your right hand, we do swear people in.

[Witnesses sworn.]

Mr. ZELIFF. Please be seated. Who would like to start? Mr. Duryea.

STATEMENTS OF GEORGE DURYEY, COMMISSIONER, CITY OF LAKE MARY, FL; CAREY DURYEY; TONI GOODWIN; BETHANY LONG, VALENCIA COMMUNITY COLLEGE STUDENT; AND BARBARA ST. CLAIR, HOUSE OF HOPE

Mr. G. DURYEY. I want to thank the committee, Mr. Zelif and all the people who got me on this panel.

I just want to say as an introduction, one person knows me as a husband, a lot of people know me as a CPA, a lot of people know me as an elected official, I am a Sunday School teacher, part time coach. But few people know me as the father of a drug addict and I went through a long period of denial in the beginning.

My son started using at about 14 years old, in middle school. I had no idea, he led a dual lifestyle for most of 2 years, went to school, got decent grades, went to a college prep school. His drug use was not in any way visible to me. I had some gut feelings about the strange phone calls that I got, but I had no idea what was going on.

As his drug use progressed, the types of drugs he used increased, the types of—from marijuana and alcohol to cocaine and other things—I will let him talk about that—our family just went to pieces. I have an older son who began to use also. His life was going down the tubes, slowly getting eaten up with apathy and his concern with having a good time. My youngest son was 10, 11, and 12 years old during this period of time. He was constantly getting suspended from school, acting out and his behavior was all but satisfactory, all because of this creeping disease that I have learned to call it, called substance abuse.

Before we got into treatment, I spent a lot of nights doing very irrational things, not being able to sleep, getting in the car and driving around, trying to find my son, who was never at the place he was supposed to be at. He was a good con artist in that he would always have a decent excuse. One night he said he got stopped by the police, that is why he was late. There was a lot of irrational behavior going on in our family, four letter words were used tremendously. We could not seem to communicate without getting into arguments.

As things progressed, violence and abuse became everyday—an everyday existence—verbal abuse, sometimes physical abuse. As I

said, my whole family seemed to be going down the tubes. My relationship with my wife became nonexistent, we would blame each other, try to find reasons why my son was sneaking out windows and doors and not paying attention to me. His common remark was, "you just do not understand" and he would just disappear.

My wife and I would go to different rooms and try to do different things to cope with what was going on in our lives. We took up role models—not models, but roles. I was a hero, I was eaten up with guilt about what was going on and I could not figure out what the reasons were. I tried to fix everything.

Carey got arrested and I tried to find a way, a legal way, to show that he could be protected from the consequences of his actions. I did not know that that was the wrong thing to do at the time. I was in denial basically because my son had an I.Q. of 140, and I thought that he was entirely too intelligent to be caught up in drugs. This went on until one fateful night when he got in a fight in the daytime, a fight with five or six other people. He was high, as I have learned since then, got beat up pretty badly, had to be taken to the hospital. When he came home, it did not mean anything to him, he wanted to go out again. Tried to keep him home. That night was the culmination of the craziness in my house, I had to call the police on my son because I found drugs on him, enough drugs that it made me realize that—at one time I thought that my son was hanging around with the wrong crowd—my son was the wrong crowd. So I had to make a terrible decision, for me. I called the police on my son because my life had become so crazy, I could not sleep, my work suffered, I had no relationship with any of my family.

We got into treatment and I learned a lot of things. I learned that we are dealing with a disease—that is primary. It is the first thing in his life, and will be forever the first thing in his life. It is chronic, it is never going away. It is progressive, it gets worse. And the most devastating thing of all, it is terminal. If he did not die in a car wreck, he was going to die from an overdose of cocaine, heroin, whatever he could get his hands on at the time.

I am overdue, so I want to close with saying that this is the single-most, in my mind, threat to national security that this country faces. Our kids are not being eat up by conservatism and liberalism, Clintonism, Doleism, whatever isms. It is drugs that are eating our kids up and our future is dependent upon these children. And it does not matter whether they are black, white, green, what kind of parents they have or do not have. And I implore the powers that be and whatever you guys can do to help the situation, and I give you a lot of credit for trying.

Thank you.

Mr. ZELIFF. We give—[applause.]

I just want to thank you for the courage of both you and Carey for being here and sharing it with us. I think that message is critical and for you to be willing to step up and share with your community your experiences is very helpful. And frankly, I hope we will end up—you know, our challenge as we move forward here nationally is to get America to wake up, but it has got to start in each individual community.

Carey, anything you would like to add to your dad's comments?

Mr. C. DURYEA. Sure.

I am Carey, I am an alcoholic and addict. I used for about 4 years and I started out using, you know, just pot. I did not think it was such a big deal. Just about everybody in the high school that I thought was cool was using it. I started out in middle school and I did not use very much, it was not a problem and no one knew, you know what I mean? And that is how it started and eventually I got tired of smoking pot, it did not do what it used to for me.

I used acid, I started moving up, started using different drugs. It became harder for me to cover it up from my parents, stay away from the cops, and support my habit that I had already started and did not know. I did not know that I was becoming dependent on the drugs.

After awhile the consequences started coming up. I got arrested and one time I was out at a party and some of my friends—they were not close friends, but they were friends. I walked out and I said what is the problem because I thought they had stole one of my—this girl's beeper and, you know, they just broke my jaw, just because they wanted to start a fight, no better reason.

My life became like miserable, and I knew nothing different. You know, what was my life without using drugs and stuff, I was a dork. I thought I was stupid. I was a smart kid, I was very smart, but I used all my mental energy into conning my parents, saving up money to buy drugs, getting drugs fronted. I spent my life, you know, my whole life was centered around drugs.

Eventually I was smoking crack, sitting on the ground, looking for crack for hours because I did not have any money. My drug dealers were after me, I had dug myself a large hole with debt, and I still did not see a problem with it. The only problem was my parents, they were bothering me and the cops were in my way, you know. And the only problem I had was I could not get enough drugs to support my habit. That is what I thought the problem was.

I was completely oblivious to a drug problem, alcoholism. My friends and I used to laugh about being an alcoholic or an addict and stuff. I do not think there would be anything that would have stopped me from doing it except being in treatment.

Now I have my life back together, now I am in treatment.

Something also I heard before, you know, my parents were good parents, you know what I mean, they were brought up good. My parents were not—they are just normal parents and when they first found out I was using drugs, they did not think it was a big deal. You know, they felt inadequate as parents, they felt like they did the wrong thing with me. And they did not, they just did not know any better. Their awareness was not as good as it should have been. Most parents do not know about how many kids out there use drugs and the peer pressure. All the people in my high school, you know, looked up to me because I was a drug dealer. I was a person who did not care if I got hit, you know. I did not care—I did not care, I had no cares at all. I was the bad butt around school and stuff.

Eventually it came to a point to where I had to like slow down at least. I slowed down for a week and I justified using more drugs. I said well I just cut down a little bit, just use Rohynol every once

in awhile and then I just went full blown right back into drug use. And I got arrested again and luckily I got stuck in treatment.

I do not think any other treatment center would have done me any good because a lot of my friends are in treatment, the influence is there. All the other treatment centers, I do not think they would have work, because of the intensity of this treatment center. A lot of parents do not want to put their kids in an intensive treatment center like this. Because, you know, it takes—my dad goes to treatment, you know, and he gets treatment with being a parent. You know, because he lost his ability to cope with my drug problem and being a parent, because of all his feelings about the situations.

I guess I am really grateful for my treatment center and the people in it. That is my life, I live as an alcoholic, I go to AA and that is my life.

Mr. ZELIFF. Carey, how old are you now?

Mr. C. DURYEA. I am 18.

Mr. ZELIFF. You are 18 and you have an I.Q. of about 140 did you say?

Mr. C. DURYEA. I do not know about that any more, but—[laughter.]

Mr. ZELIFF. Well, let me ask you this, whatever it is, it is even higher in terms of what your ability is. Do you realize just your story here today, how much that can help people in getting the message out, your willingness to have the courage to get up and talk about it? And I thank you for that.

Let me ask you some advice, because there are people like you out there, you at some point will have your own family and you will have your own kids. Picture your son now, 10 years from now, 7, 8, 9 years old. What would you do as a parent, knowing what you now know as someone who has done drugs and been addicted to drugs, and the family situation. What have you learned in terms of being able to discuss it with your son or daughter?

Mr. C. DURYEA. Accountability. My parents in my past had so many feelings about the things I did. I conned them every day into doing things that they did not really want to do because—I manipulated my dad into letting me go out nights and stuff. I would be strong with them, I would not let them con me into going out later and I would not let them con me into—I am a con. That is how my treatment centers work, I am a con, so I do not let people con me. I know all the tricks, I pulled them. So I just do not let people take advantage of me and I would not let my son take advantage of me because I know that is how I got the best of my dad. It was my disease talking the whole time. I was a good kid but it got a hold of me.

Mr. ZELIFF. Did you ever turn to crime at all?

Mr. C. DURYEA. Yes, I robbed one of my good friend's house, just cleaned out his whole house full of guns. I went in cars, stole everything that I could find.

Mr. ZELIFF. You had to do that because you had to support the habit, right?

Mr. C. DURYEA. Yes, I had to support my habit and that is all I cared about, was using drugs. If I had more drugs, people looked up to me even more.

Mr. ZELIFF. Well, I just again thank you and your dad for your testimony today, and I encourage you. It is not easy, but boy, you talk about a hero and a role model, you could be in terms of helping us focus this Nation and this community on the war on drugs and try to do something meaningful. You are in a position to be able to do an awful lot for your country and your community.

I thank you very much for being here and your testimony. Mr. Mica.

Mr. MICA. Well, Mr. Chairman, it sort of leaves you speechless to see this problem in our community. But there are so many fine young people, and this is not just a problem of, you know, the inner city. This is a problem that you have experienced, I have friends, people on this council. This morning, we met with some of the local police chiefs and sheriffs, some of their children have had problems. So this is something that really is devastating at every level of our society and community.

Is there anything else you think we can do at the Federal level to help, from what you have seen? Carey or your dad?

Mr. C. DURYEYEA. Put out the fullest effort, that is what I do every day. Part of my recovery is helping other people out, you know, getting in recovery and stuff. If I do my part, I know I will stay sober and I know I will help the rest of the community stay sober. And I think by getting other people sober, you know, there is more of a positive influence. I get more people sober, I have got more people to hang out with, it just spreads. I came into treatment, I brought a lot of Lake Mary into it with me and that is the good thing. I would say fund more programs that really do something, that really make a difference. Because when I was younger, I had all of the awareness of drugs that you get and stuff, and it just did not matter to me, with all the kids out there using. Like I could not go to a party and not be accepted without using drugs and stuff.

So I would say put the fullest effort out, that is what I would say—do not half put it. That is what I would say.

Mr. MICA. Commissioner.

Mr. G. DURYEYEA. One of the things I can add is that I had kind of a spiritual awakening when I was doing somewhat the same thing to a police group and a policeman said the same question, what can we do to facilitate this. And one of the boys came up with the answer, he said do you know how many times you let me off? Do you know how many times people stopped me and let me off, when they should have held his feet to the fire. My son was stopped I do not know how many times by police and they let him off. That is the biggest message I could come for. Accountability and if it causes us to create that family crisis that gets those people out of denial so that they can see that they have a problem, that is something we need to do.

Mr. C. DURYEYEA. I think when I was using drugs, when a police officer let me off and did not search my car very much or let me off with some pot or something like that, I was like well, you know, no big deal, not a problem, no big deal. And it was like I can take advantage of that, that is something—you know, it was socially acceptable and that is how I perceived it. So I think not making it socially acceptable, not having a socially acceptable drink and not

making it so socially acceptable. That is what I thought that pressured me into it so much, because all this paraphernalia, there are so many head shops, so many things like that. I was like, they tell me not to do this, and then I go to this store and I can buy pipes, I can buy bong, I can buy shirts that have big marijuana leaves on them and stuff. So what are you trying to tell me. It feels good and everybody is telling me to do it, so I will just do it.

Mr. MICA. Sounds like the mixed message that we heard some of the law enforcement people talk about.

I would like to yield to my colleague. I have assumed the Chair. Did you have any questions, Mr. Souder?

Mr. SOUDER. Yes, I have a 19-year-old daughter, a 17-year old son as well as an 8-year-old son. And first off, let me commend you two for coming forth, both Mr. Duryea and Carey.

I want to ask you a couple of other questions, first to Carey. It is easier now afterwards to explain this, but looking at the time you were on drugs and dealing them, did you feel it was wrong? Down deep did you know it was wrong or did you not?

Mr. C. DURYEA. Yes, I had a lot of feelings about it. The whole thing of the disease is that I have feelings that I push down by using drugs and it makes me feel numb when I use drugs and stuff. So the more guilt and stuff I felt, the more drugs I had to use.

Mr. SOUDER. Had you been told by your parents that and did you ever go through a D.A.R.E. course or any of the antidrug programs at school? In other words, it was not when you started using them that you did not know it was wrong when you first started.

Mr. C. DURYEA. Oh, I knew it was wrong, it was just the influence of my friends and it just slowly creeped in. It did not start out like, it is all right to use crack, you know what I mean. It slowly came upon me. My behavior was up here, you know what I mean. When I first—you know, when I was in school, I might have had some slip ups but when my behavior started falling back because of the crowd and stuff, I pulled my morals down because I felt guilty and stuff. So eventually it kept going down like this to where I was using crack, so it was a slow progression.

My dad said it was a progressive disease and that is why I slowly progressed and stuff. I did not start out thinking that having sex with girls any time promiscuously was all right, you know, using crack and all that. I did not think that was—I thought that was wrong at the beginning. I never thought I would be doing that, you know, until I came to that point where it was necessary for me to go on to the next day.

Mr. SOUDER. When you—before you tackled your disease, did you—you said that you felt that other kids looked up to you. Did you really feel that they looked up to you or did you feel like you were kind of deceiving yourself? In other words, in retrospect, other kids were not looking up, you were kind of trapped in a group of kids. But you said the more you sold, the more power it gave. But did you really inside feel that way at that time? And if so, which may be the case, that it was helping your self-esteem, which was low; what other things could have been done to try to counter that? In other words, one of our biggest problems in our drug education program is that they are very good at reaching kids before they are

tempted, but once they get into the temptation. What I see is that my daughter, for example, who is not into rock music and who does not particularly go to parties where there are drugs, it is easy for her to get all enthused about the antidrug programs. My son thinks they are a little stupid.

It is hard to reach particularly kids who are hanging around and have peers who are involved in that. What would we do as parents, as teachers, as antidrug programs, to try to get to somebody like you who actually thinks that your self-esteem is coming from resisting authorities. Looking back now, if you were in that situation, how would you have reached yourself? I mean, you had good comments about the parent.

Mr. C. DURYEYEA. Treatment. I do not think I would have stopped at that point unless I had treatment. I was thinking about like all the movies and stuff that I watched in my past, all the gangster stuff and all that. That was great to me, I thought all that power thing was so good. I did not even look at the adverse effects of it and stuff. And I never thought twice, you know, about things that I did until after they happened.

It is hard to say like what actually I can do, you know, or you can do. Because there are so many kids out there and it is such a disease, a cunning, baffling, and powerful disease, that you know, it is hard to say.

But you know, for me, I can make a difference with one person and they can make a difference with another person and it spreads out like that. If I encourage parents to get in treatment and I encourage kids and stop using and I practice spiritual principles in my life, I am doing as much as I can. So I would encourage like public awareness on the parents, you know. Parents do not know what is going on, they have so many feelings about it, they try to avoid it, shove it under the table, you know. And it does not go away when you shove it under the table.

Mr. SOUDER. As a dad who, when parents are busy, you said you hope you will change, but you know, when you love your kids and you do not have much time with them, you hate to have an argument with them every time you are with them. It is very easy to try to avoid those kind of arguments. It is very easy to say you are going to do that, but it is not easy as a dad to actually confront your children in the limited time off that you have with them and teenage boys often communicate in about four words max at a time, "yeah, uh-huh." It is hard then to want to crack down.

But let me ask you this question, you said you were great at conning. If your dad had told you you could not go out for another hour, if your dad had told you and actually disciplined you, do you think it would have really had any difference?

Mr. C. DURYEYEA. In the beginning, yes, but when my disease progressed, it would not have mattered, I would have found a different way.

Mr. SOUDER. So you are saying it has got to be early, because later on it will not really—

Mr. C. DURYEYEA. Yeah, that way or I have to be like totally taken out of the situation, like I was put in treatment, and then slowly, you know, put back into society.

So that is where I am now, I am slowly getting back out into society and stuff.

Mr. SOUDER. You said you had friends who went through treatment programs and you alluded a minute ago, you used the word spiritual in that. How important a component do you believe that is and have you seen your friends who do not have a spiritual component be able to pull out?

Mr. C. DURYEA. I am in AA and it is a spiritual program and that is what it is based on, that is its base. Without that, I would not be alive today, you know. If it was not for God putting the treatment center—you know, I could have been in five other treatment centers and I would not have gotten sober, staying in there 30 days and coming out, I would have met more friends.

Mr. SOUDER. Well, I thank you both for coming forth. We cannot say that enough, but it is really helpful, not only to us, but to everybody else who is doing it. It takes courage to do that.

Mr. C. DURYEA. Thanks.

Mr. ZELIFF. Carey, I just want to ask a quick question. You know, one of the things that surprises me in this war on drugs, no churches, no sermons—I go to church every Sunday and we try to go to different churches in my district, and it does not seem to be a subject for churches and sermons in terms of an issue. Do you think that that is something that we need to look at?

Mr. C. DURYEA. Hmmm.

Mr. ZELIFF. Relative to your own spiritual message that you are getting through AA. I mean, it certainly could not hurt, could it?

Mr. C. DURYEA. I would say more treatment centers and stuff like that. You know, or something—more Government funded treatment centers, because kids do not want to go to church, I did not want to go to church. Most of the kids in Lake Mary High School or anywhere, that is the last thing we want to do, is go to church. If the influence was there, if everyone was going to church, I would be going to church. But that is not what everybody is doing, everybody is using drugs.

Mr. ZELIFF. Well, we have a challenge, do we not?

Mr. C. DURYEA. Yeah. And I think like a lot of people are not very aware of it just because they do not want to be aware of it. You know, it may be a subconscious thing, but they do not want to see all their kids, all their friends' kids are using drugs, it hurts. That is what I did for a long time, I did not want to see a problem and then I stopped using.

Mr. ZELIFF. Thank you very, very much for your testimony.

Toni Goodwin.

Ms. GOODWIN. Hi. My name is Toni Goodwin. I am here addressing this hearing on behalf of myself, friends, family, and my son, Jonathan, as well as the other teens, young adults and families whose lives have been destroyed or lost because of the epidemic of drugs, especially heroin and Rohypnol now present in central Florida.

I am here because our 16-year-old son, Jonathan, was with friends at a party one night and died there. Blondee was the youngest victim yet of an overdose of heroin and Rohypnol.

At the time of his death, his so-called friends lied about the location and the circumstances surrounding this tragic incident. Or-

lando Police Department Detective R. Campbell rudely asked only one question of Jonathan's father, "How long has your son been doing drugs?" His father replied, "He was not." After that, only a cursory investigation was made. The results were misstatements in reports, no examination of Jonathan's personal belongings or the car which brought him to the hospital 4 hours after his death. Even when one of the few witnesses questioned, the resident of the apartment where the party occurred, stated that there was alcohol and marijuana in the apartment, the detective did not take the time to search that.

Where was all that lost physical evidence? What was the reason no effective action was taken against these so-called friends? Was it because when a person takes drugs, whether mistakenly or not, and dies, it is their own fault and not the persons who provide the lethal substances? No. It is murder to give, sell, or otherwise provide drugs that result in death to any person. Where are the arrests and convictions in 27 heroin deaths that are already a part of this tragedy? In the last year only 7 have died, but before that, there have been at least 27, not counting the suicides.

Jonathan was a special person. He was bright, happy, popular, and full of love for life. He excelled in sports, soccer, baseball, karate, skateboarding, and surfing—his favorite. I feel it is just these same good kids that the drug dealers are after, get those kids and the rest will follow.

Jonathan did well in school, but it was in his freshman year in Boone High School that he began to experience the changes and obstacles which face all teens. There are new friends, parties, raves, peer pressure, and experimentation. They try to find out where and how they fit into a world which is increasingly more chaotic and dangerous. Parents must face the fact that their perfect child is becoming an adult who will make decisions for themselves, good or bad, and ultimately must be responsible for them. The challenges are tremendous for both parents and teens, even when provided with a loving, stable, and healthy home environment.

We tried to talk to Jonathan about drugs. He knew better, he took a life management course in school, he knew about taking Rohypnol and heroin together. He went to drug counseling, he was going to get his license in a few days and he promised to pass a drug test before he would even be allowed to get his license. That did not stop anything.

We need action now. There must be immediate investigations, arrests, and convictions in all drug-related deaths; better legislation to protect America from drugs and those who deal them; more widely available rehab and family counseling and drug-free schools.

We cannot afford to lose America's future. It is too late to save Blondie, but not too late for justice. I pray that we here today may be able to spare others the heartache and loss that I have suffered, and our efforts will help to protect all of God's children.

I would like to read a little bit from Jonathan's autobiography, so maybe you can know better what happens when we lose someone like this.

I have enjoyed life so far. It has had a few ups and downs, I have learned quite a bit so far, but I am still in for a whole lot more. I love to be with my friends and I love having fun.

In my life ahead, I do not wish to be anyone famous, rich or even make a lot of money. I would rather be happy than rich. I plan to become well-educated, to go to a good university. I believe education is very important. I am too much of a thinker, I wonder about all different types of ideas. The world we live in is one of my favorite to ponder. My opinion is that our world is turning to a darker side with each passing moment.

Politicians are destroying the environment in our country, destroying everything good in this world. Everyone is corrupt. Money is everything. This must be what is supposed to happen. I believe everything happens in a cycle. This is a part of the cycle of life.

I have many hopes and dreams. As long as I put my mind to it, I can accomplish the impossible. The point I am trying to make is life should be taken seriously, take every opportunity as if it was your last.

Those were his own thoughts, hopes, and dreams, shattered and lost in one high moment of ruffies and tecca—Rohypnol and heroin. Jonathan never intended to lose his life, but you can and will if you do drugs.

Thank you.

Mr. ZELIFF. Thank you very much.

Bethany Long.

[The prepared statement of Ms. Goodwin follows:]

October 14, 1996

To Congressman Mica, Congressman Zeliff, and other members of the panel:

My name is Toni Goodwin. I reside at 5256 Lake Margaret Dr. #201 Orlando, Fl. I am addressing this hearing on behalf of myself, friends, family, and my son, Jonathan "Blondee" Goodwin, as well as all the other teens, young adults, and families whose lives have been destroyed or lost because of the epidemic of drugs (Heroin) now prevalent in central Florida and elsewhere.

I am here because our 16 year old son, Jonathan, was with friends at a party one night and died there. Blondee was the youngest victim yet of an overdose of Heroin and Rohynol.

At the time of his death, his "so called" friends lied about the location and circumstances surrounding this tragic incident. O.P.D. Det. R. Campbell rudely asked only one question of Jonathan's father, David Goodwin. "How long has your son been doing drugs?" His father replied, "He wasn't." After that only a cursory investigation was made. The results were misstatements in reports, no examination of Jonathan's personal belongings or the car which brought him to the hospital four hours after his death. Even when one of the few witnesses questioned, the resident of the apartment where the party occurred, stated that there was alcohol and marijuana in the apartment the detective did not take the time to search that.

What was the reason no effective action was taken against these "so called" friends? Was it because when a person takes drugs, whether mistakenly or not, and dies it is their own fault and not the persons who provide the lethal substances? No! It is murder to give, sell or otherwise provide drugs that result in death to any person. Where are the arrests and convictions in the 27 Heroin deaths that are already part of this tragedy?

Jonathan was a special person. He was bright, happy, popular, and full of love for life. He excelled in sports; soccer, baseball, karate, skateboarding and surfing (his favorite). I feel it is just these same "good" teens that the drug deals are after, get those and the rest will follow.

Jonathan did well in school but it was in his freshman year in Boone High School that he began to experience the changes and obstacles which face all teens. There are new friends, parties, raves, peer-pressure and experimentation. They try to find out where and how they fit into a world which is increasingly more chaotic and dangerous. Parents must face the fact that their "perfect child" is becoming an adult who will make decisions for themselves, good or bad, and ultimately must be responsible for them. The challenges are tremendous for both parents and teens even when provided with a loving stable and healthy home environment. Drugs effect all families. They know no social, economic, ethnic, religious or regional boundaries.

We need action NOW! There must be immediate investigations, arrests and convictions in all drug related deaths; better legislation to protect America from drugs and those who deal them; more widely available rehab and family counseling; and DRUG FREE SCHOOLS!

We cannot afford to lose America's future! It's too late to save Blondee but not too late for justice. I pray that we here today may be able to spare others the heartache and loss that I have suffered and our efforts will help to protect all God's children.

Thank you.

Ms. LONG. Hi. I am Bethany. I am a recovering alcoholic and addict.

I started using drugs when I was 12, it was in the back of the schoolroom like in geography class or whatever, and I was doing this inhalant that they had in the back of the room. Nobody had any idea what it was that I was doing.

Eventually I ended up getting into alcohol and over-the-counters because those are OK, and prescriptions and a couple of things that I knew that would not show up on drug tests. If I smoked marijuana or did any other drug like that, that means that I was going to be using drugs. But if I used, you know, over-the-counters that you can get at the drugstore on the corner or prescriptions from the medicine cabinet or drank because drinking was OK—that is what I thought—then I was not a drug addict.

Eventually I did not have any family, my schooling was bad. I used to play the violin when I was real little and did really well, and eventually I did not do that anymore. I lost many friends, some that I will never be able to get back. I lost my self-respect, I lost opportunities that I could have had, you know, to have a very successful life. I came from a middle class family. My parents did get divorced when I was like 10 years old, I have two sisters who did good in school. My mom was supporting us and doing well, but I still ended up using drugs. And I even went to school and they told me that I had a problem, but they could not tell my parents because of this confidentiality stuff. So I would go and tell them and my parents had absolutely no idea that I was stealing their alcohol, that I was stealing, you know, pills that were supposed to help you when you were sick, to try and get high off them. I used to do them at school and people knew, but they did not say anything.

Mr. ZELIFF. So as a result of all this discussion at school, nobody talked to your parents or your parents were not even brought into the loop.

Ms. LONG. No. I went to see—there was a drug counselor there and I went to go see her because somebody had put in a concern that, you know, one of my friends is drinking and stuff like that, but they could not contact my parents and tell them this is what your kid is doing, but they could contact them and say she is having behavior problems. So my parents put me in a behavior center and I ended up doing drugs in that center. And they told me it was my parents that were my problem, and not me using drugs and everything—it was them. And of course, I used that to my advantage and said OK, it is my parents, so I moved out away from my mom and moved with my dad, and I started getting into marijuana, LSD and doing a lot of pills and doing a lot of drinking.

Mr. ZELIFF. And this was at age 11?

Ms. LONG. It started at age 12, this was about age 14 to 15. I was always good in church, I went to church and I went and did certain things, but it did not matter.

And eventually I came into treatment, I came into the SAFE program, substance abuse, family education. It was long-term. It took me awhile to get through it, but now it is totally different and I think that what a lot of people miss is that this disease is going

to kill people. It is not the heroin that is the problem, because that is the end of the problem, it is the marijuana that kids are——

Mr. ZELIFF. That gets you started.

Ms. LONG. Yes, that is what—and like you hear about, like the inhalants. People are like, well they are just experimenting because those are just little things and they will get out of it. Well, I did not get out of it and a lot of people started off doing inhalants, doing—you know, smoking marijuana a couple of times, drinking. And it is so easy to get that stuff with all the nightclubs and everything, it is so easy, you can just walk in there and go up to anybody. I used to go to school just for the fact that I knew certain people were drug dealers and I knew that they were going to have the party. So I would go there, you know, to school just to find out where the party was that weekend, how much alcohol they were going to have and all that stuff. And you know, me being a girl, I used the little cutesy thing, and so I never had to pay for my drugs because I was just a tiny, innocent little girl. It was really easy, and I could go down like to the school lockers and say, you know, this is what is in there, that is what is in there and the teachers did not do anything. People could not tell parents.

Mr. ZELIFF. Did the teachers know as much as you knew in terms of who was into drugs, who was not, what was in which locker and all that?

Ms. LONG. Some of them, yes.

Mr. ZELIFF. And what did they do about it?

Ms. LONG. Nothing, because they did not want to get brought into it. They did not want to be a part of it because it would be bad for them or it would make the school look bad or, you know, stuff like that. And so a lot of it was the confidentiality law that they had that they could not tell parents. But they could not send a kid to treatment if they really needed it, they could not tell somebody that they are a harm. You have to wait until you are suicidal or homicidal in order to tell somebody that there is a problem, which I think is ridiculous because I was suicidal but it does not mean I am going to tell somebody. If I am really suicidal, I am not going to tell somebody I am going to kill myself, so they can stop me.

It was all a result of my drug use and I think that a lot of times people focus on like the heroin or the crack cocaine, and it is the other drugs that people are allowing to get by. Little kids smoking cigarettes thinking it is cool, get accepted by the older kids who are drinking and partying and it is not illegal to run away. So you know. I ran away once and hid in a closet and the police officer came in and said is she here and the lady said no and so he left, he did not even bother searching. I was just standing there. Because it is not illegal to run away, for kids.

That is kind of how I got started into drugs and how I started doing my stuff. Now I am almost 3 years sober, I will be 3 years sober next month, which is wonderful. I go to school now. [Applause.]

Go to school, I play my violin now, do stuff at church. I even work at the treatment center that I was in, that I actually hated for so long, because I did not have a problem. But now I owe everything to that place and to God, to my family who stuck by me the

whole way. They could have given up on me, that was really easy. And some of the friends that I did lose because of my drug use, I gained back and they are with me now and they are supporting me.

Mr. ZELIFF. That is great. I guess the same things that we said to Carey apply to you as well. You could be—thank you for sharing your message with us. And as you heard the applause, you have got a great support group within the community, and thank you for helping us deal with a major issue.

But you can provide so much in terms of leadership, in terms of your peers, in terms of a future for your peers. You are regaining the future that you could have lost and you have become an example of someone who provides leadership. You know, in a much more healthy way and that is what we really vitally need.

We need at the very top, all of us, to recognize the importance of role models. What we do as parents and what we learn as parents and for many of us now as grandparents. We do not realize that every single little thing that we do sets an example for someone to follow. And not that—I mean I come from a divorced family and you came from a divorced family. How much that had an effect on your life, you know, because of your parents having a divorce. Maybe that had something to do with it, who knows. But now you can help a lot of others and you can provide a great leadership role model—role. So thank you.

Ms. LONG. Thank you.

Mr. ZELIFF. I should not get carried away here and let everybody testify first. Barbara St. Clair.

Ms. ST. CLAIR. My name is Barbara St. Clair.

Eleven years ago, I came to Orlando, FL, from South Carolina and entered the House of Hope program. I was raised in a dysfunctional family with an alcoholic father and other family members on drugs. My family was falling apart and I began running away at the age of 11 years old. I was snatched into a lifestyle of doom and despair and disease and all kind of things. At the age of 13, I did overdose on drugs and almost lost my life.

My mom tried everything. I was in and out of many secular programs without receiving any help, and it was not until she found the House of Hope that the nightmares and hurts in my past were healed. It was through the counseling, education and love of God shown through the dedicated staff at House of Hope that my heart was restored and my family was reconciled. Today, 11 years later, I am on staff at House of Hope with my husband and we are serving in the capacity that once helped my life.

I am here today to represent Sara Trollinger, founder and president of House of Hope, who is now in North Carolina speaking at an opening of a House of Hope there in Raleigh. Sara said, and I quote, "The problems of drugs affecting and destroying our teenagers will not go away by themselves . . . they will not go away by more rules and laws; neither will they go away by governmental control. Making more money available to fund more government controlled, secular programs is not the answer."

When President Reagan visited House of Hope in 1990, he said, and I quote, "Secular programs are not the answer. There needs to be more Houses of Hope in every city across our Nation. The real

answers come as a result of heart changes . . . not in creating villages, but in educating parents with values and skills, to show the love of God to their children.”

House of Hope has a 95-percent success rate of getting young people off drugs and reconciled with their parents. Family reconciliation and restoration is our goal. We are teaching parents to assume personal responsibility for raising their children, and teaching them character principles based on God’s word. Our young people are our most precious natural resources and America’s future.

The solution to the drug problem and family problems that are facing our young people today cannot be solved by governmental control, but by getting the message to parents and educating them that they need to be responsible.

Thank you.

[The prepared statement of Ms. St. Clair follows:]

Congressman Mica, elected officials, and interested citizens:

My name is Barbara Hill-St. Clair. You are here today because we are deeply concerned about the drug problems that are drastically taking a toll on young lives. We are desperately searching for answers.

Eleven years ago I came to House of Hope because of family and drug-related problems. I was raised in a dysfunctional family, with an alcoholic father, and other family members with drug problems. My family was falling apart. I began running away from home. I was snatched into a lifestyle of doom, disease, destruction and almost death ... overdosing on drugs at the age of 13 years old.

The deep emotional scars of teenagers involved in drugs do not heal overnight. I was in and out of many secular programs (hospitals and detention centers), without receiving any lasting help. It wasn't until coming to House of Hope that the nightmares and hurts of my past were healed. It was through the counseling, education and love of God shown through the dedicated staff at House of Hope that my wounded heart was restored and I was reconciled with my family. Today, 11 years later, I am happily married and my husband and I are both on staff at the House of Hope.

I am here today to represent Sara Trollinger, Founder & President of House of Hope. Sara is now in North Carolina speaking at the opening of the House of Hope in Raleigh. Sara said, and I quote: "The problems of drugs affecting and destroying our teenagers will not go away by themselves ... they will not go away by more rules and laws; neither will they go away by governmental control. Making more money available to fund more government controlled, secular programs is not the solution.

When President Reagan visited House of Hope in 1990, he said: "Secular programs are not the answer. There needs to be more Houses of Hope in every city across our nation." The real answers come as a result of heart changes ... not in creating "villages", but in educating parents with values and skills, to show the love of God to their children.

House of Hope has a 95% success rate of getting young people off drugs and restored with their families. Family reconciliation and restoration is our goal. We are teaching parents to assume personal responsibility for raising their children and teaching them character principles, based on God's Word. Our young people are our most precious natural resource ... and America's future.

The solution to family problems cannot be solved by governmental control, but by getting the message to parents that they need to be responsible. Only God's Word works."

Mr. ZELIFF. Thank you very much.

I think I have taken probably at least 5 minutes in asking questions as we went along, so I think at this point, I will start with you, Mr. Mica.

Mr. MICA. Well, thank you.

Again, you really see what this does to our community and I know some of the families personally. And you wonder, maybe we do not have all the answers in Washington. I just heard Ms. St. Clair talk about her situation and I remember going to the House of Hope annual dinners and hearing the testimonies of the young people and how their program—just for your information, I do not think you have any Government money at all, do you?

Ms. ST. CLAIR. No.

Mr. MICA. And they do an incredible job with an incredible success rate.

One of the things you said is you did not need Government money, but there are programs that have helped folks. Maybe you could share with us, Ms. Goodwin and Ms. Long, your observations about the secular programs or other programs and what your observation is and maybe Carey even could comment. What do you see—we will go with Ms. Goodwin first.

Ms. GOODWIN. I think that probably it is true that losing—a lot of people have lost their faith in God, have lost faith in themselves, and that does make a difference. If you do not respect yourself and you do not love yourself, then these things like drugs, they can come into your life. And we need to instill in the younger generation that it starts from within, you have to have the power within to live in this world and to be strong and to be brave and it is very hard, because they do not get that.

In music, drugs are in, violence is in, it is in music, it is in TV, it is in schools, it is in their homes in a lot of cases. And so in order to combat that, we need to try and help them, let them know there is beauty and love out there. You know, there is another side to life other than just escape through drugs like Carey said.

Mr. MICA. Was your son in a private program?

Ms. GOODWIN. He was just going to counseling, you know, because he had had—like any teenager, he had experimented, he had had a few problems. He tried to shoplift something and he went through court and they put him in a counseling system. You know, made him—he was going to have to do community service for what he took, you know, to pay that back. And so with doing that, his counselor said he was doing great, was talking, everything seemed to be fine. So, you know, as much as I loved Jonathan and I am so sorry about what happened, and yet I realize that people do not understand. Like with Rohypnol, the kids take a couple of ruffies, it is the date rape pill. You do not remember what you do. You do not have any comprehension of what you are going to do, so it is easy once something like that comes into you, to turn around and try some heroin. The combination of the two is just lethal, it is unbelievable. It is not like kids are just smoking pot any more. They are doing ecstasy, they are doing acid, they are doing ruffies, they are doing heroin, they are doing coke, they are doing crack. These are violent, destructive drugs that are out there.

Mr. MICA. Ms. Long, what about the public versus the private program?

Ms. LONG. The program that I went through and that I am in the after-care section, is privately owned. I do not know like the legal side of things or whatever, but I do know because of it being a private organization, it was more like a family thing, like everyone knew each other and SAFE. What I went through, and it was long term and I can really tell that the people were there because they wanted to be. Just like I am there because I want to be, not because just for the money or whatever. It is to give back what I had because the counselors there were extremely, extremely cooperative and very patient with me, especially when I did not want to do anything. I received a lot of help there. Because of that, I do not know if there would be a huge difference. I do not know like the financial stuff, but because I think knowing that it was private, I felt more cared for because somebody was taking time out to do it. Someone was spending money to do this and helping people out. The SAFE program was really quite an experience and I would never hope that I would have to do it again, but if I had a choice, I would—the outcome of things, I would do it.

Mr. MICA. Carey, did you see any difference?

Mr. C. DURYEA. In my past, a lot of my friends had probation counselors and stuff and they are just—the probation counselors were really weak. You know, they let them get by with, “oh, I will come by and get that essay you are supposed to write for me next week, or you cannot take that, you are in tests right now, OK.” You know, everything was so just like weak, there was no accountability, there was no honesty, there was no anything. It was just a bunch of kids, drug addicts, feeding a bunch of probation officers a bunch of crap. That is what it was.

My dad did not want that to happen, so I did not get on that thing. But I do not know exactly what you are talking about, what programs you are talking about.

Mr. MICA. The private versus public. Ms. St. Clair is with a non-governmental program, it is privately funded and probably more Christian church religious faith versus the public, secular programs. You are talking about the system and your experience with that would be the secular side. Did you have any private treatment experiences?

Mr. C. DURYEA. Yeah, I am in the same treatment center that Bethany was in, SAFE. She is on after-care, I am on fifth days now and there are phases and stuff. To be honest with you, those secular programs do not work. I went through the JAS program and my dad got it all set up for me so I would get my charges dropped and stuff. I went out one night and got arrested with my friend's wallet because I stole it from him, \$360. I had to pay my drug dealer off, you know. I was all wrapped up in it, it did not matter to me. If I could get away with it, I would. But in SAFE my friends hold me accountable, you know. I get in trouble, if I do something wrong, my friends stand me up and I get in trouble, you know. So it is based on like strength and strong love, not just weak love like OK, you can do that, you know, enabling someone to do something to get their acceptance. It is not like that, it is strength. I do not al-

ways like it when it comes but eventually I see the benefit because I am not out using any more and stuff.

Mr. MICA. Thank you. We spend an awful lot of money on these programs from the Federal level, so we are trying to find out where we can best get those funds directed. Thank you.

Mr. ZELIFF. Thank you, Mr. Mica. Mr. Souder.

Mr. SOUDER. One of the things I think is important to put on the record is that I too feel there is a difference between the results in the public and private, because there is a substantive character component. Where we use Government funds, you cannot preach Christianity, which would be in most cases, or Muslim, for that matter, which has been effective in the African-American community, Islam. And we do not really want the Government into that. It is not a case, quite frankly, of the school people not wanting to do more or counselors not wanting to do more in the other places. To some degree, there are restrictions on what they can and cannot do. You are looking at it from your perspective that some people who have been trying to help you may have gotten inadvertently something in the Congressional Record that is a broader sweeping statement that even you meant to intend.

I think their intentions are correct, but we have got to look at the fact that we have an 85-percent recidivism rate in treatment programs around the country, 90 percent in some, meaning people fall back. I have talked to drug addicts and alcoholics all over the country who have said that they have been through 7 to 10 programs, they learn how to scam them, they know how to get in for awhile. And we have got to look at that as a Government to avoid that. So I think it is important, in addition to what you said, I wanted to add that to the record.

Is there a—let me ask you, Ms. Long, was there a particular point in your life where you said this is where I am going to cross over? You present an unusual problem, you described yourself, and we can all kind of see your enthusiasm and your ability to in effect charm and really through guile, trick any of us. For all I know, you could be tricking us right now, you are good at it. [Laughter.]

Was there some point in your life where you crossed and you just said I am going to change—internally? And what caused you to do that?

Ms. LONG. Are you talking changing from—

Mr. SOUDER. Being an alcoholic—I mean, you will always be—

Ms. LONG. Right.

Mr. SOUDER [continuing]. An alcoholic, but a recovering alcoholic as opposed to an alcoholic, and a recovering addict.

Ms. LONG. Well, I was presented with a possible scholarship to a university that I really wanted to go, but I knew that I would not be able to get there unless I was sober. There was a lot of things that built up, there was a lot of like those feelings because of drugs and other stuff. They all started to come up and as soon as I was sick and tired of being sick and tired, I started to change and decided I wanted to be with my family. It got to a point where I felt so bad about who I was and what I was doing that like one morning I woke up and I physically just could not move because I was so tired. You know, it was because I got to a certain point

and said I cannot take this any more, and they are offering me another way.

Mr. SOUDER. Were you already in treatment at that point?

Ms. LONG. Uh-huh, right. And I refused their help for awhile and then I said, you know, they are offering me this chance to live again.

Mr. SOUDER. Were you partly separated from the negative influences during that period you were on the treatment?

Ms. LONG. Uh-huh.

Mr. SOUDER. And so that enabled them to in effect have a shot at influencing you and you then came to realization.

Ms. LONG. Right.

Mr. SOUDER. Did you smoke cigarettes as well, early on?

Ms. LONG. Yes, in my past.

Mr. SOUDER. You know, not every kid gets involved in marijuana, in fact. I mean, that is something we have to be very careful with, because it is not everybody. There is a statistic out, they studied a lot of high school kids over a lot of years, monthly if you do not smoke cigarettes, there is only a 6-percent chance you will smoke marijuana that month, 70 percent if you do smoke. In your lifetime, if you do not smoke cigarettes, there is only a 17-percent chance you will ever touch marijuana but a 93 percent chance if you touch cigarettes.

Interestingly, adults do not have the same impression. But it appears with kids that that is a gateway drug and we have to deal with that. Even those of us who disagree with Federal policy for adults, cigarettes and alcohol for kids are the direct gateway. And that is why I wanted to ask.

Did you smoke cigarettes also, Carey?

Mr. C. DURYEA. In my past, I did. I am not allowed to in treatment now. [Laughter.]

Mr. SOUDER. Yes. Another question that I would like to plunge into is the question of testing. Bethany, you talked about at the school, and this may be something we would have to legally change because of the courts, but in those kids who if there was reasonable suspicion and there was regular testing, do you believe the kids behavior would have changed if they thought it would be—the teachers would know who they are, their parents would know who they are, and there would be some accountability?

Ms. LONG. I think early on, yes, like in the very beginning. I think it would have to be a combination of testing. That is only like—it is not even really proof any more because you can, you know, think of like a thousand different ways. Kids are coming up with a thousand different ways to pass urine tests. It is not that hard any more.

Mr. SOUDER. But the hair test is pretty straight-forward.

Ms. LONG. Right.

Mr. SOUDER. You cannot change—we got drug tested, 40 of us Members of Congress, and they just do a little clip of your hair. We can get a report back on everything and it is pretty foolproof.

Ms. LONG. Yes.

Mr. ZELIFF. A lot of completely shaved kids will be going around. [Laughter.]

Mr. SOUDER. I suppose that could be true.

Ms. LONG. The thing is that people just cannot give random drug tests to people. If they do, the parents cannot—the school people cannot tell the parents, you know, your kid was tested for drugs.

Mr. SOUDER. For the record, that is not legally true. There have been some circuits where they can and some circuits where they cannot, and they have to have some probable cause, but we have got to be careful we do not speak misstatements. Some schools claim they do not want to because they are worried they are going to get sued and they do not want to go to court. That is a little bit different than saying they cannot do it.

They certainly can for athletics, they certainly can if there is probable cause, and more schools need to do that. But if we need to pass more laws to protect the school boards, then we ought to look at that too. You are right, most schools do not and they say that reason.

Ms. LONG. Right.

Mr. ZELIFF. I know we have to move on to Mark Sanford, but it is interesting, in Keene, NH, there was a story 1 day on a major increase in drug use at school, an epidemic, going crazy. And then we had some parents upset because the football team was going to be drug tested, in the same school. So somewhere along the line, we have got to get real and say do we have a problem and do we want to do something about it. And maybe some of these laws have to change.

Mr. SOUDER. I want to mention one other thing in the drug testing, and that is that we put into law in 1989, that Drug Free Schools money can be used for drug testing athletes, so it is not only allowed, it is in the Drug Free Schools money, because we did that when I worked for Senator Coates.

Mr. ZELIFF. Good point. Mark Sanford.

Mr. SANFORD. Three quick questions for you all. First, for those of you—I guess Carey, Ms. St. Clair and Ms. Long—that have been in and out of I guess different phases of treatment centers, my question is I guess, in your mind, what do you think would work. In other words, what you have said is that probation/counseling is of limited benefit in some cases. Would it therefore be—which would have the greater bang for the buck, to make it less socially acceptable. Let us say you put Michael Jordan on 30 second TV spots around the country saying you should not be using drugs. In other words, you do things like that. Or we have got a place called Parris Island up close to where I am up in Charleston. Apparently there is not a lot of drug use at Parris Island, and it is a fairly intense place. Would that be a better way of getting young folks off drugs? Do you send them into like a boot camp setting or do you try and go socially acceptable, go the Michael Jordan route? What do you do, what do you all think?

Ms. LONG. I would think that just finding a good long-term, very structured treatment facility. Boot camp just does—you know, I know people that went like to military school, they did all that stuff and got put away in places. But I think what people need is an alternative to using drugs.

Mr. SANFORD. OK.

Ms. LONG. You know, I am given certain tools in my recovery to use instead of using drugs. And I do not think that just teaching them that it is bad is going to work, they need an alternative.

Mr. SANFORD. Ms. St. Clair, what is your thought?

Ms. ST. CLAIR. I know that in my life prior to coming to House of Hope, with different programs and with counseling and so on and so forth, they mostly dealt with—and I was involved with the courts as well. I went to Rand E. there in Columbia where I had a 40-day evaluation. They mostly dealt with my behavior that I was doing and never really dealt with why I was doing the things that I was. I know that in my life drugs were just an outward of what was going on with me inside. And I think the difference is that if we have more programs—I think that anything really can work if the counseling was geared more toward why are you doing the things you are doing. Yes, it is important to get off the drugs, it is important to have treatment centers to help you to do that, but it is also involved in knowing why you are doing it and I think that was the difference with me, and possibly educating the parents. I know that was the big thing with my mom, she tried everything, she went to different counselors and different programs, put me in drug rehab and different things like that. But she was never educated and was never involved in my life or required to be, and I think that is the big difference.

Mr. SANFORD. Carey, do you think that a master sergeant could scare you out of drug use or once you are in that, it is not going to happen?

Mr. C. DURYEA. Well, it is a vicious cycle that I got in and I do not think anything was going to stop me. I would have been dead before I realized it and then I would not have realized it. But I think like availability is just too great. Every kid can get anything he wants at any time and I did it all the time. I never had a problem getting drugs. That would be one thing, you know, get the availability out of the way. If all the kids do not have all the drugs, you know, there is going to be less kids, you know, using the drugs. So I think the last panel was talking about that makes a big difference. And also more positive influences, I do not think just one, you know, Michael Jordan getting up stating that drugs are bad is going to help anybody.

There is too much negative influence and stuff, and I think like I do not know exactly how to say this, but I think like Government-funded treatment centers that do not work are worthless. [Laughter and applause.]

Mr. SANFORD. I only have about a minute and probably less than a minute now.

Mr. ZELIFF. I think that is a point well taken.

Mr. SANFORD. Ms. St. Clair, what are some particular things that you learned about through House of Hope, in terms of—that you pass on to parents, that are particularly effective in trying to keep kids from ever going on drugs in the first place?

Ms. ST. CLAIR. That we pass on to the parents?

Mr. SANFORD. Yes. You say you deal with both the parents side and the youth.

Ms. ST. CLAIR. Yes. The biggest thing is that first of all when a girl does come into the program, that the parents have to know

they are involved the whole time that their daughter is in the program. Normally the program is 8 months to a year and a half, so that is a long-term program. The biggest thing first of all is dealing with the parents. As this gentleman stated earlier the things that he was going through and he did not know that his son was doing it. It is educating them, first of all, basing everything we do on God's word and that is why we take a strong stand about Government-funded money, because if we did, we could not do that.

Just, like I said, educating the parents, having them involved, not just to bring their daughter to a program and leave them, they have to be involved. We have sleep overs, different things like that, and the counseling, we have an education part of the program. That is really where we are seeing the effects.

Mr. SANFORD. Thank you, Mr. Chairman.

Mr. ZELIFF. Thank you all very, very much for your testimony. It was very, very helpful. And I wish we could have you be able to give this same message to every community in America, I think it is very helpful to what we are trying to accomplish. Thank you very much. [Applause.]

We will hear from this panel and then we are going to open it up to community questions. I will start the introductions. Dr. Ernest Cantley is president and CEO of Stewart-Marchman Center, Ms. Marge LaBarge is from the Orange County School System; Mr. Jim Dawson is program supervisor of the Drug Free Schools Program for Sanford; Mr. Wolfgang Halbig is director of security for Seminole County Schools.

Thank you folks for being here, and if you would please stand and raise your right hands.

[Witnesses sworn.]

Mr. ZELIFF. Thank you. Dr. Cantley, if you would like to start. If you would, just in the interest of time, kind of condense as much as you can into about 5 minutes and then we obviously will take all your testimony for the record. Thank you.

STATEMENTS OF DR. ERNEST CANTLEY, PRESIDENT AND CEO, THE STEWART-MARCHMAN CENTER; MARGE LABARGE, ORANGE COUNTY SCHOOL SYSTEM; JIM DAWSON, PROGRAM SUPERVISOR, DRUG FREE SCHOOLS PROGRAM, SANFORD, FL; AND WOLFGANG HALBIG, DIRECTOR OF SECURITY, SEMINOLE COUNTY SCHOOL BOARD

Dr. CANTLEY. Thank you, Mr. Chairman, members of the Committee. I too would like to thank Congressman Mica for arranging to have this subcommittee here. If nothing else, it certainly has proved to be extremely beneficial to the audience to see the cooperation that we have amongst the various elements involved here in this drug abuse effort.

I have had the chance to review on C-SPAN many of the meetings of this committee and have been somewhat encouraged to see General McCaffrey and other individuals talk about the need to look for better solutions, a more effective balance, if you will, between demand and supply side activities. And that is a little bit about the gist of what I want to talk about.

I have been working in the field of addiction since 1970. I had the pleasure of being with one of NIAAA's original staffing grant

proposals that was designed to demonstrate whether or not individuals could be treated effectively in general hospital settings. They had others in other community based settings.

So throughout the years since 1970, I have seen a proliferation of different type of drugs, stronger drugs, different types of reactions of our citizens to those drugs. And certainly I agree with everyone that we need to have a little bit better solutions to those elements we are searching for.

Congress has been searching diligently for a solution to these problems for many, many years. As its primary vehicle, ONDCP, and now has been operating the funding sources for the efforts for many, many years.

Starting in 1981—I have got a little chart in here that basically goes through the separation of demand and supply side funding, and it shows basically in 1981, there was a pretty good balance between them with 55 percent of those funds allocated to supply side and 45 percent to demand side. However, shortly after that, the percentages began to change and we have been operating roughly a 2 to 1 split between supply side and demand side activities. And many of us feel like this is a partial element of the problems we are talking about.

I have got three real specific issues. One of them is does treatment work, and I know there is a lot of controversy going on around that. I know ONDCP published a report in March 1996, "Treatment Protocol Effectiveness Study," which actually talked about three or four of the major national efforts that are going on. The biggest one, I think in my opinion, is the California CALDATA study, which pretty much evaluated the effects of treating 150,000 people in the California system, and some of the results of that is pretty clear that treatment does work, it is effective and I think it is something that we need to do.

The second point that I wanted to touch on is a term that I call the criminalization of treatment. And this is where we have many of our treatment systems for voluntary people and people that are civilly committed, not criminally committed, civilly committed. We are finding it increasingly more difficult to find treatment beds. Since the importation or the development of crack cocaine in the mid-1980's, our treatment slots have continued to increase, but nowhere near in the numbers as the demand for the services out there. So our waiting lists have grown more and more and more and as a result of that, you know, most of the people that enter these treatment programs are entering through the court system and that I think is really hurting it.

The third issue that I will talk about and hopefully quickly, is our service to the adolescent population. That is what I am here for. Clearly, we have got some real serious problems with our adolescent population. Adolescent problems that call for some very serious type solutions to it. I do not think we should be surprised if we start looking at what our children face today.

They are more than likely to be born of a single woman who in many cases does not know where the father is.

When both parents are there, chances are they are going to be divorced before the kid gets to his teenage years.

Chances are they may very well be born into a family of active addiction within that family, the parents, the brother, sister. They live that life.

The mother today is likely to be an active substance abuser herself.

We have a music industry out there that glorifies the use of drugs. We have got to have a more effective solution to that. To me, I think that solution will be a lot on the demand side. As long as we have people on the street that are demanding drugs in this capitalistic system that we live in today, someone is going to provide those drugs if there is a profit motive there.

We have got to have effective treatment, we have got to have effective education.

I have delineated in the last section here—and I see my time is up—what I think some of the key elements of this demand side needs to be, ranging from education through treatment through prevention.

With that, I would like to thank you for coming and wait for questions.

Mr. ZELIFF. Dr. Cantley, thank you very much. Marge LaBarge. [The prepared statement of Dr. Cantley follows:]

Testimony of: Dr. Ernest D. Cantley, President and C.E.O.
Leon F. Stewart-Hal S. Marchman Center, Inc.
3875 Tiger Bay Road
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Subcommittee on National Security, International Affairs and Criminal Justice

Chairman Zeff, members of the Subcommittee, and honored guests, I would like to express my thanks and appreciation to Congressman Mica for arranging to have this committee meeting in Central and East Central Florida. I feel that conducting hearings, like this one, in local communities is good for educating our citizens as well as being educational for the members.

I believe I am here because I am an addiction professional. This profession is only twenty-five (25) years old. It started around 1970 with the creation of the National Institute of Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA).

My career in addictions started in 1970 when I went to work for one of NIAAA's original demonstration programs. These programs were designed to determine if individuals could be treated within various treatment environments. My program was a hospital based program, located in Beckley, West Virginia. Our charge was to establish a comprehensive treatment program in order to determine if alcoholics could be effectively treated in general hospital settings. Other demonstration programs were established in other community based settings, including correctional institutions.

I have worked through the developmental stages of the treatment and prevention experimentation and am proud of the accomplishments made in responding to the individual needs of our citizens.

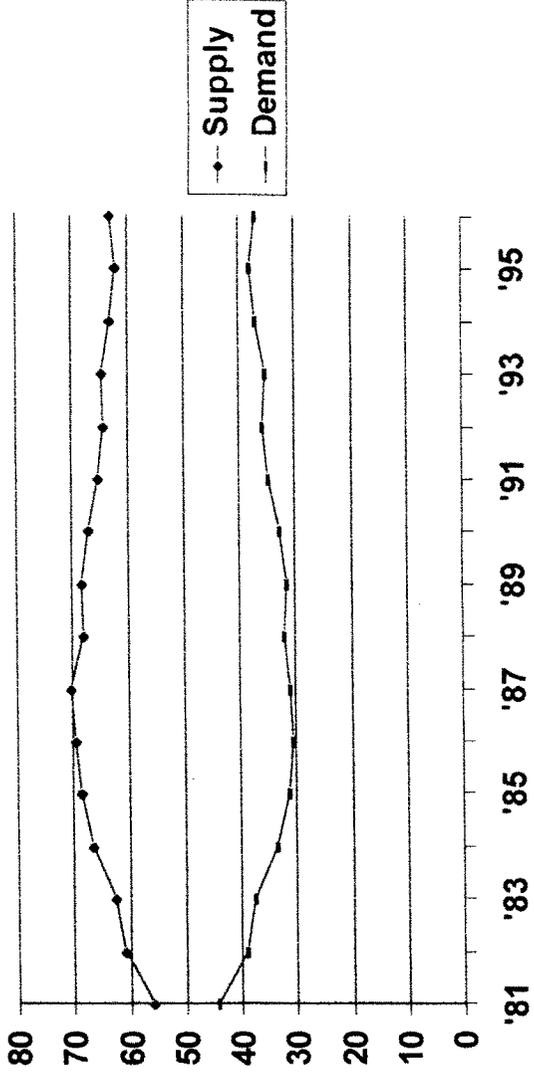
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I have also experienced the ever changing types of drugs available to users, and their effects upon individuals in our society. Our society has been significantly altered as a result of illicit drug consumption. The major societal changes occurred with the introduction of "Crack Cocaine" in late 1984 and early 1985. I do not believe there has ever been a more significant set of circumstances to effect our everyday living as the cocaine epidemic, that was caused by the development of "Crack". Within two years after Crack's introduction, we began to experience its devastating effects, including: increases in criminal activities; constant overcrowding of our detoxification and emergency centers; substance exposed infants; ever expanding waiting lists for individuals to get into treatment programs; massive increases in expenditures necessary to house a larger number of our citizens in jails and prisons; and, more expenditures on interdiction and source country efforts.

Congress, has been searching for solutions to this nation's drug and alcohol problems for over twenty-five years. The Presidents Office of National Drug Control Strategy (ONDCP) has been the vehicle for developing the national strategy since the early 1980's. I have had the opportunity to view some of this Subcommittee's hearings and am encouraged by statements made by General McCafferty, Admiral Robert Kramek of the US Coast Guard, and others who were advocating for the position that this nation's drug efforts needs to achieve a more appropriate balance between supply and demand side activities. The Legal Action Center published their analysis of the percentages of ONDCP's expenditures for supply and demand reduction. These figures are depicted on the following chart.

ONDCP Supply vs. Demand Funding Percentages - FY 81-96

Source: Legal Action Center



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This analysis reveals that the ratio between supply and demand activities was roughly equal in 1981 (45% for demand and 55% for supply activities). This balance started being altered with more funds being provided for supply side efforts in 1982 and has held roughly a 2:1 ratio ever since. The funds allocated to ONDCP has increased steadily since 1981, however the ratio between supply and demand has remained constant at roughly 2:1. There are many professionals in the field that feel the basic reason we have not been successful in the "drug war" is vested in this analysis.

I do not appear before this subcommittee today claiming to be an expert in interdiction or source country diplomacy. While I have a basic understanding of current world economics, I do not consider myself as sufficiently informed to say that I understand the full ramifications of altering the illicit drug activities in Bolivia, Peru, Costa Rica, and other South America and Southeast Asia countries. However, I do appear before you today as an individual who has spent over twenty-five years on the demand side of the drug problem and am pleased to offer the following comments or suggestions.

Issue Number One: Effectiveness of Treatment

Virtually every major study on the effectiveness of drug treatment reaches the conclusion that treatment is effective. Regardless of this fact, I continue to have to respond to questions like, "Does Treatment Really Work?" and "Can Individuals Recover From Heroin or Cocaine Addiction"? In a continuing effort to answer these questions, ONDCP published a paper titled, "Treatment Protocol Effectiveness Study," (March, 1996). This paper described three

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comprehensive studies on treatment effectiveness and outcomes. Results from these three studies and one evaluation of prevention services are summarized below as being indicative of current research:

1. Drug Abuse Reporting Program (DARP) The Treatment Protocol Effectiveness Study described these results as follows, "DARP was conducted between 1969 and 1973 with individuals admitted into publicly funded drug treatment and for the first time provided a nationwide comprehensive assessment of treatment and effectiveness with a large client sample. It was the first national follow-up study to assess treatment effectiveness based on clients' outcomes 1 year after treatment. Major findings from the DARP study include the following: (1) the three major modalities -- outpatient drug-free, methadone maintenance and therapeutic communities -- produced an equal level of positive outcomes and (2) clients in detoxification (i.e. inpatient) programs or those who dropped out of treatment within 3 months did not demonstrate positive outcomes."

2. Treatment Outcome Prospective Study (TOPS) This study was conducted between 1979 and 1981 examined client characteristics, treatment, and outcome for more than 11,000 clients. These clients were from 41 different programs and centered on outpatient drug-free, methadone maintenance and therapeutic communities programs around the nation. The TOPS study that used criminal behavior in its major analysis found, "95 percent of individuals in residential treatment and 80 percent of individuals in methadone programs reported more than minimal drug before entering treatment and a substantial reduction in the use after 3 months of treatment. Of

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those reporting illegal activity before drug treatment, 97 percent reported cessation of that activity during treatment. Furthermore, more than one-third of clients (across all programs) reported total abstinence from their primary drug during the follow-up period. Finally, a 50 to 57 percent decrease in indicators of depression was found in clients across all treatment modalities.”

3. California Drug and Alcohol Treatment Assessment (CALDATA) This study was conducted by the California Department of Alcohol and Drug Programs (1992) The CADDATA study was undertaken to assess the effectiveness, benefits and cost of addiction treatment in California. Some of the key results of this study follows:
 - Costs of treating 150,000 individuals cost a total of \$209 million, while the benefits received during treatment and the first year after treatment was worth \$1.5 billion in savings to the taxpayers. This cost was determined mostly by decrease in criminal activity.
 - Treatment for individuals addicted to Crack Cocaine was as effective as treatment for alcohol problems and somewhat more effective than treatment of individual with heroin problems.
 - The level of criminal activity declined by two-thirds. The greater the time in treatment, the greater is the percentage of crime reduction.
 - The use of substances declined by approximately two-fifths after treatment.
 - Hospitalizations were reduced by approximately one-third.

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In addition, a 1994 study of 6,000 New York students found a 40 percent reduction on drinking, smoking, or using marijuana. This decline was the result of the students receiving substance abuse education and prevention services. The participants in this study were 7th, 8th, and 9th graders.

These studies clearly indicate the effectiveness of substance abuse prevention and treatment services.

Issue Number Two: The Criminalization of Substance Abuse Treatment

There have been significant increases in the number of treatment slots available throughout the United States since 1980, however these increases have not come close to meeting the demand for services. Waiting lists for treatment (mainly residential) has continued to escalate since the 1985 introduction of crack cocaine. A significant portion of these capacity increases are for "specialty services", designed to service a sub-segment of the population, for example, corrections, adolescents, pregnant and post partum women, federal probationers, etc.

One of the major elements of pre 1985 substance abuse programs was "case finding". Case finding activities were targeted at groups of individuals who were in the early phases of addiction. The goal of this component was to get individuals into treatment before their addiction progressed to more chronic phases. These activities have been eliminated in most of the public programs today as a result of expanding waiting lists for treatment.

All of these circumstances result in drug abuse treatment services not being available to a large segment of society. Voluntary and civil committed individuals are the largest segment of society

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having difficulty obtaining drug treatment. This fact is particularly discouraging since we know that individuals who enter treatment earlier have a better chance of obtaining a better treatment outcome. I personally have had conversations with individuals who state they committed crimes with the intent of being caught in order obtain treatment for their addiction. Activities such as this will occur as long as treatment capacity is insufficient to meet the needs of our law bidding citizens. If they cannot obtain treatment, they are most likely to be involved in illegal activities, resulting in more expenditures of public funds.

Issue Number Three: Services For Our Adolescent Population

Clearly the problems associated with substance abuse in our adolescent population are many and will be resolved only by major commitments by everyone, especially our policy makers and elected officials. The use of Illicit drugs is chief among these many problems. Recent trends in illicit drug use show a marked increase in use by our youth since 1992, after over ten years of steady decline. This fact calls for a review of our strategy for this nations "war on drugs."

Regrettably, the children of today are faced with more uncertainty than the children of any other era or our history. Some of these uncertainties are depicted below:

- A child is more likely to be born to a single woman, who does not have contact with the father of the child;
- When both parents are present at birth, the likelihood of the parents divorcing before the child reaches the adolescent stage is higher today than ever before;

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- It is likely that the child will be born into a family who has suffered from the ramifications of substance abuse, either by one or both of the parents, or by other members of the family;
- The mother of today's child is much more likely to be an active substance abuser than any other time in American history;
- The child of today receives significant direction from television, therefore Bevis and Butthead are assisting today's families in their children's maturation;
- Today's children, from an early age, are bombarded by music which glorifies the use of illicit drugs;
- The sports heroes of today are likely to be a user of illicit drugs. In addition, penalties for detection are minimal, i.e., a recent football player received a five game suspension for being caught in a hotel room with a prostitute and in possession of marijuana and cocaine;
- Today's minority child is taught from the beginning that the rest of society continues to discriminate against them. Criminal justice statistics tend to bear out this allegation;
- African-Americans of today appear to have lost their positive role models, with children idolizing drug dealers who drive the finest automobiles, wear the nicest clothes, and most expensive jewelry;
- Children of today are likely to have been physically or sexually abused, usually by a member of their own family.

Given the preceding facts, it should not be surprising to anyone that our youths of today are experimenting more with drugs than their previous generations. These multifaceted problems

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require bold and innovative solutions. I believe the State of Florida is developing a set of services for delinquent adolescents that could become a model for the nation. Namely, these services are being developed by the Florida Department of Juvenile Justice, under the direction of Secretary Calvin Ross. The Department of Juvenile Justice has created a continuum of residential, outpatient, and prevention services that appears to be having a significant impact upon juvenile crime and consequently drug abuse within the State. Centering around public safety, every child entering the juvenile justice system is evaluated to determine the most appropriate level of care and placed in that system of supervision and treatment. Continual monitoring of the child occurs throughout his/her commitment.

I have the pleasure of operating some of these services at Stewart-Marchman Center for the Department of Juvenile Justice. These services continue to receive positive outcome with an average of twenty-two percent recidivism. Statewide, the Department reported a thirty-six (36%) rate of recidivism for Fiscal Year 1994-1995. I believe ONDCP and Congress would benefit from reviewing Florida's Juvenile Justice System as it is impossible to dissociate drug abuse from delinquent and criminal behavior in our adolescent population.

Summary and Recommendations

Clearly, we are not winning the war on drugs. Recent trends indicate that we may be losing the war for our adolescent (12-17 year old) and young adults (18-25) populations. I believe we are losing the battle because of a major flaw in our national strategy. This flaw is the percentage of funds being spent on interdiction and source country initiatives to the detriment of prevention, education and treatment.

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It is my opinion that a review of the American form of capitalism will indicate that the current approach is misdirected. The demand side of our capitalistic system stipulates that as long as a sufficient number of individuals are willing to pay for any product, someone will provide that product for a profit. Regrettably, not all enterprising individuals have the benefit of our youth and society as a goal. The American drug problem will not be solved by guards on our borders, ships sailing in the Caribbean Sea, or by paying farmers in Bolivia or Thailand not to grow source plants for the processing of illicit drugs. While I fully understand we need these efforts, American policy makers need to realize that some form of drugs will be delivered, if the number of individuals requesting them are sufficient for profits to be made.

Supply side activities in the drug war will result in users switching drugs when prices escalate as a result of dwindling supplies. If we are to ever win the war on drugs, more of the battle is going to have to be fought on the demand side of the unbalanced equation.

An effective demand side strategy would contain the following elements:

- Primary prevention activities that present a consistent message and are provided in all grades as children progress from kindergarten to graduation. This strategy would build on the DARE strategy, except that is provided for every child in every grade level.
- The current treatment system should be expanded to entice individuals to enter treatment before their illness progresses to the point that it requires legal intervention.

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- The current treatment system should be expanded upon to accommodate the individuals in the criminal justice system.
- A system needs to be undertaken to which will obtain the cooperation of the movie and music industries to alter the messages they are providing to our young population.
- A massive community educational campaign needs to be undertaken at all levels of government for the purpose of altering society's permissive views of licit and illicit drugs
- Interdiction efforts need to continue, however they should not outweigh demand side alternatives.
- ONDCP, or another agency, needs to expand its evaluation and research capability in an effort to determine effective prevention strategies, treatment modalities, and interdiction efforts. Continued and expanded funding should be provided for those elements that prove to be cost effective.
- ONDCP should continue its tradition regional conferences to elicit assistance from the field in developing and updating its national strategy.

Chairman Zeff, Congressman Mica, and other members, again let me thank you for allowing me to appear before you today. I have submitted my statements in writing and will be happy to respond to any questions you may have at this time.

Ms. LABARGE. My name is Marge LaBarge and I work as the student assistance coordinator, drug free school coordinator, for the Orange County Public Schools.

I have worked in this field for the last 30 years, 28 years in Orange County. In that time, I have worked in the area of curriculum development, training law enforcement officers, emergency room staff, teaching college and high school drug prevention awareness programs, starting a drug prevention intervention and treatment program located in Orlando, which is called—was called The Door, now the Center for Drug Free Living, and serving as the drug prevention coordinator for the State of Florida. My present position is in the area of prevention, education, and intervention.

First, I want to thank you for the funding that has allowed school districts to set up prevention and intervention and educational programs under the drug free school funds. I also want to thank you for being here and listening to all sides of the issue, keeping in mind the saying that it takes different strokes for different folks.

As we look at the whole problem of drug abuse, in the late 1980's and early 1990's, when Nancy Reagan went on record as saying "Just say no," people might have thought that this was a joke—but it was not. Because "Just say no" was a rallying point for communities, for families, for programs, and for schools. And from the "Just say no" came the Red Ribbon Campaign and a lot of positive media and a lot of positive campaigns. All of a sudden as we hit the 1990's, we had won the war on drugs. We had turned the corner and we were home free, or at least that is what we thought.

However, people in the treatment programs, school districts, and law enforcement knew better. We knew that the war had not been won. We knew that it just was no longer in an attention-getting position. We saw a loss of funds, we saw a loss of support, we saw a loss of community participation, we saw a loss of media attention.

As we look at what is going on, we need to consider the fact that today's young person is in a position that many of us are glad we are not in. Parents say it is difficult to be a parent, but I can guarantee you it is worse to be a teenager today. As we look at the young people of today, we have got to keep in mind that the greater percent of our young people are positive young people, who are productive citizens of our society, wanting to be involved in the solutions and wanting to make a difference, and believe me, they do.

As we look at what we can do and what has happened, we need to: First, concentrate on the fact that the media has got to start giving positive messages. We have got to start seeing positive results. You call the media out and you ask them to come and cover a Drug Free School rally or Red Ribbon, I guarantee you it is difficult to get them out. But you tell them that a student has overdosed or you say that there is a heroin problem, they come out. Again, we have got to have media support and we have to have it in a positive way.

Parents have got to become more accountable and more willing to stand up, more willing for higher expectations of young people. When we look at the fact that 42 percent of parents use alcohol on a daily basis, 25 percent of our young people come from substance abusing homes, and 27 percent of our young people are allowed to

drink in the home. I think that is a startling fact, that we have parents who accept the fact that it is all right for their teenagers to drink alcohol in the home.

Again, as we look at startling statistics, we find out that the parents of today, many of them are the baby boomers who themselves used drugs, who not only used drugs, but in surveys today, they tell you that they do not expect to be able to keep their children off of drugs. Parents who used marijuana, parents who used LSD are more accepting of the use of drugs by their own children and less willing or maybe less capable of knowing what to do about the problem.

Again, as you look at the parents' influence, we know that parents are no longer talking to their teenagers or to their children about the dangers of drugs. We know also that parents are not coming out when you have programs and you talk about drug awareness and drug involvement. We realize that the parents must be involved, and as we look at the schools and we examine the risk factors as to why young people are using drugs, we know that the schools have got to make the difference.

You say that prevention does not work or intervention does not work or treatment does not work. I will guarantee you if we did not have prevention programs, we would have a greater problem than we do today.

Within the Orange County Public Schools and other school districts, we have drug curriculum in place from pre-K through the 12th grade. We also have programs that deal with classroom teachers making a difference in class meetings and decisionmaking and coping skills. We work hand in hand with law enforcement, we work hand in hand with the treatment centers, and we work hand in hand with the religious community. We provide support groups in our schools for children who are using drugs as well as children who are children of alcoholics. And we also work in trying to get the community involved in many of our sponsored programs, in addition to young people.

I think one thing we have forgotten about is that the young people of today are involved in many programs in their schools, Project Graduation, Red Ribbon, nonviolence programs, and others.

I know that it is time for me to stop, and I have a very difficult time sometimes in doing that.

However, I want to point out to you that parent groups are making a difference. I have here a family network that is a pledge card for families who are coming together. And some of the things they are pledging to do is to provide adult supervision for all children visiting my home; provide a secure storage place for all forms of alcohol if they even have to have it in their home; and also not allow parties or gatherings in my home unless I am there. These are the type of things that we need.

Again, I urge you, I encourage you to continue to provide funding for Safe and Drug Free Schools, allocated for drug prevention and intervention programs, and for treatment programs, and a policy of zero tolerance for drugs and alcohol in any situation.

Thank you.

Mr. ZELIFF. Thank you. Mr. Jim Dawson is program supervisor of the Drug Free Schools Program for Sanford.

Mr. DAWSON. In Seminole County.

Marge and I have similar roles, so I can just take her speech and move it over here and it would probably suffice. But one, I cannot read her writing, I was just struggling with that a little bit.

Sitting here listening to the other panels, Mr. Chairman, I would like to thank you for involving Seminole County and central Florida in the area. The students I think that came up in panel 2 had as much information as anyone can provide. In jotting down some notes, because I ventured away from some prepared statements based on some of the stuff that we have heard earlier. That one, prevention is an ongoing issue. The tragedy of the families that we heard here and the families that kind of generated this type of meeting, is a tragedy in itself and we would hope in the prevention side that it does not take that kind of tragedy to get the attention necessary for prevention.

I would like to commend you on your recent votes that increased our Safe and Drug Free Schools funding. I think that is a step in the right direction, and again, to be perfectly candid and not to be offensive, I do not think that prevention needs to be a bargaining chip. It is an issue that is facing us every single day.

I think part of our prevention programs are very effective, even as the individuals you spoke with with the past panel, they knew what they were doing relative to drugs. The information that they had received in our prevention programs, our early prevention programs, gives specific information to kids, drugs are dangerous, drugs are harmful. The part that we are struggling with I think and the part that we need to make a concerted effort on is how do we affect that decisionmaking when an individual knows that something is a risk, they know there is a danger involved, they know there is a legal consequence, they know the tragedy it can bring to their families. They still make that decision. What pressures are on them to make those decisions that are not good decisions. Do we give them the skills to make those decisions? Do we give them the skills to resist the peer pressure that we know they face day in and day out?

The availability of drugs, as the young man indicated, is widespread. The cost of the drugs are coming down. So that indicates that the availability is there for a wider part of our market, or their market, and that being our young people.

I think we are as concerned in the prevention side, not dealing—and again, I am trying not to diminish the issue of the deaths that were attributed to heroin, but we are as concerned with all use, not just heroin, not just cocaine, not just crack. We are as concerned with the young man who may stick his nose into your fuel tank and huff the gasoline. We are as concerned with, as Mr. Halbig can contend to, as the young people that are taking the Freon out of air conditioning units in the back of your house, and the videoing that we had of that on one occasion, that one of the individuals involved in that was 13 years old and was pregnant, the effect it has on that young person and that unborn baby.

So our concern is not heroin for heroin's sake—it is use, it is gateway drugs. I think one of the other young people indicated that—and I think you will also find that very few people—and I

could be wrong on this, but I am sure the intervention and the treatment folks may be able to get me on this one.

I do not know that there are very few people that will jump out there and start smoking crack, or that they are going to become deeply involved in heroin. Something introduces them to that lifestyle and to that culture and the gateway drugs of tobacco—and we need to face that—the gateway drugs of marijuana and alcohol are pervasive. And I think that is an issue we need to be dealing with as much as the tragedy that occurs on the strong end or the upper end of drug use itself.

Early prevention is critical. We start, as Marge indicated, in Orange County, and in Seminole County we do the same thing—we are trying to deliver a very strong, healthy message to young people as early as we can possibly get them, and then intervene even earlier. If we can get parents in a stage that will deal with establishing consequences in the household, establishing rules and boundaries in that household, and being good role models, because all of us are role models, whether we recognize it as that or not.

I think one of the other things that comes out of the discussion today earlier is the frightening aspect of who young people have as heroes today. You will find that the glorification of drugs and the desensitization of drugs is also a difficult thing, that it appears to be OK. And when a parent deals with you and they say, well gee, he was just smoking a little pot, that is a frightening thought in itself because that is what is leading them down that difficult road.

The thing that I think our group here in Seminole County would just like to leave with you is that drug abuse prevention has to be a priority every day—not just today, not just tomorrow, but every day. And the tragedy that you have seen today in the lives and the families, and then again the successes. I think we ought to celebrate those successes and commend those young people. For stepping out of that role, is to deliver a strong, healthy message day in and day out to every student and every family, and that this is not the school system's issue, it is not the community's issue, it is not law enforcement, it is a combination of all.

I appreciate the time. Thank you.

Mr. ZELIFF. Thank you. Mr. Wolfgang Halbig.

Mr. HALBIG. Thank you, Mr. Chairman.

The part that I would like to speak about is the protection of our school systems across our country that we are seeing. A little background, I have been a State trooper in Miami for several years, I have been a teacher, a school administrator, and I worked part time for U.S. Customs. So I know what is happening and keep up with the latest information on the drug flow in our area.

What I would like to do this morning. You are here to look at the report from the front line. What I want to do this morning is show you an example of how difficult our job is at the front line. And I would like for Representative Souder to come down, I am going to promote him to assistant principal. I would like for you to see how difficult our job is as administrators in dealing with drugs on public school campuses—not just in central Florida but throughout the whole United States.

Let me show you a young man from the front lines and how we have to deal with it. Let me show you—these are the kids that we

see all the way across this country, here comes your student. You are the assistant principal, you have just been notified that this young man was dealing drugs in the restroom. And now knowing what your guidelines are and procedures, you have to confront this young man. And look how kids dress today in public schools across this country. And I want you to know that this is really important.

Gentlemen, we are educators. I want you to know this, every person who is an assistant principal, principal, school board members, we do a great job educating, we are not police officers, we are not drug counselors, we are not correctional officers and probation officers. But that is what is coming to us every day, and they are coming at us in large numbers.

Here is a typical young man. You are the assistant principal, you have just been made aware that he drove to school this morning and he might have drugs on him, he just did a drug deal in the restroom. And your job is to go ahead and deal with it. How would you go about it?

Mr. SOUDER. So you got picked up in the restroom, I understand you had drugs on you. Were you doing drugs, were you distributing them?

STUDENT. I do not do that, he is just making fun of me because I dress different, that is all, you are picking on me.

Mr. SOUDER. Why do you think they pick on you?

STUDENT. I do not know, they have nothing better to do I guess.

Mr. SOUDER. So you are saying that by the fact that a couple of other people who say that they saw you, that they are just being malicious even though they have never said anything about you before.

STUDENT. That is what I am saying.

Mr. SOUDER. Would you be willing to submit to a drug test?

STUDENT. No. Have you got a warrant?

Mr. SOUDER. Can I say yes? [Laughter.]

Mr. HALBIG. That is what we wish we did, but we do not. And again, as soon as they hear the word "no", it gives you a knot in your stomach, whether it is us or anyone else. But we are educators. As soon as you are trying to get to the next level and they say "no", where do you go with it. Go ahead.

Mr. SOUDER. Do you have any friends who do drugs?

STUDENTS. Sure.

Mr. SOUDER. Have you seen them doing it on school grounds?

STUDENT. Lately?

Mr. SOUDER. Yes, say like this morning.

STUDENT. No.

Mr. SOUDER. But you have seen them lately doing it on school grounds—last week?

STUDENT. Sure.

Mr. SOUDER. Do you hang around with those kids?

STUDENT. Sure, why not.

Mr. SOUDER. Would it not be natural then for other kids to think that you are doing the drugs?

STUDENT. That is their choice. What I do is my business.

Mr. SOUDER. So what you mean when you say what they do is their business, you are saying that while your other friends do it, you do not?

STUDENT. That is right, yes.

Mr. SOUDER. Nobody has ever seen you doing it?

STUDENT. If they do, they are not telling the truth.

Mr. HALBIG. Now he does a good job, because he is trying to keep him at ease. Does he not do a good job? He is talking with him, he is not putting him in a defensive mode. But look at his dress, look at the headsets. Do we allow headsets, do we allow hats in our schools? Do we allow bandannas? Do we allow them with their pants legs up? Those are gang activity signs. Where there are gangs, there are drugs, there are guns.

And again, we have to let them know that it is not acceptable. And I want you to know we take a tongue lashing many, many times. They will verbally abuse us and we are limited in what our scope is. But look at this, just the headset, this is all the stuff that we have taken off. Let us say you were to take this from him. These are kids who will wear these to school and look what is inside of them. We may assume that they are listening to music, but that is where they will put their rolling paper and their marijuana. And we as educators, that is our job, just like the young lady said, nobody dealt with it—you know, confidentiality, we cannot offend anybody. People are in denial. But again, look at this, there is the marijuana wrapping paper and here you have got the marijuana inside the headset.

If you look at the hat. A lot of times we will take the hats away and he is the assistant principal, he will take the hat and say look, you are not allowed to have it. But inside the headband, I want you to take a look, that is where they put their acid, their Rohypnol, they will put it inside the headband. Teachers have never ever been taught to look, because they are part of the stakeholders in the school system. They all have to get involved, but we have not been trained. But look at this, this is where your Rohypnol and acid is.

Mr. SOUDER. Am I allowed to do a search?

Mr. HALBIG. Now if you have suspicion, yes, you can. If you have reasonable suspicion—that is a good question. If I have reasonable suspicion, we can do it, but it stops when he does what? What if he says no, do not touch me? What is the next thing that you and I are going to do in trying to find out whether he has the drugs or not? Due process. The Supreme Court Justice, Mr. Thomas, talked about due process. These kids have too many rights, they have way too many rights and they know the rules and the way to play by the rules. They are killing us in public schools and we are losing the battle. And I want you to see how.

Let us say he does want to search him and he says please empty your pockets.

Mr. SOUDER. Please empty your pockets.

STUDENT. I do not think so.

Mr. SOUDER. So what do I do now? [Laughter.]

Mr. HALBIG. Now, I am going to tell you—really, this is probably the most powerful illustration, this is every principal, every administrator, that is exactly where it ends.

Now guess what, we had better hope we have a school resource officer, and we bring our policeman in. But is that probable cause? The policeman does not have probable cause. So guess what, we are

at a standstill. We can call the mother and you can say, because you have reasonable suspicion, please empty your pockets, but if he does not do it, all you have is open defiance, you suspend him for 10 days and you send him home. And he leaves with what, his drugs in his pockets. The kids know what they can and cannot do across this country.

Mr. SOUDER. If he was reported, why is that not probable cause?

Mr. HALBIG. It is reasonable suspicion. Because again, it did not come to the police officer, it comes to a school administrator. We are held to a lower standard than a police officer.

Let me show you something else we took off. This is all the stuff we take off. Here we have the books, they have guns inside the books, they have their drugs inside the books, they walk around and also if I were to ask you, Congressman, where is the No. 1 storage area in public schools for drugs today, what would you say, where would they store it?

Mr. SOUDER. I would say in their shoes or their pants.

Mr. HALBIG. That is right. It is no longer lockers, and we still hear people saying it is in their lockers. They hide it in areas where they know we cannot touch and search, whether it is male or female.

And so what tools do we have available that allow us to take a look? We do not have any tools. Is that not frightening? And that is where the heroin, that is where the marijuana, that is where the cocaine, whether female or male, they know exactly what they are going to do. And we are educators, not policemen.

And again, they will hide it in their boots, and again I know we are time limited. I want you to see this, whether it is a backpack, whether it is this—do you search this when you try to search? Yes, and in these here you will see a gun in here. Just go ahead and open it up and you will see. Kids bring these little fanny packs in here, they will bring backpacks. But again, whose job is it to look and keep our schools safe.

Mr. SOUDER. If I had tried to search him, I would have been put in jeopardy.

Mr. HALBIG. That is right. But see what I am saying? This goes on every day. And let me tell you something. With U.S. Customs, the one thing I have learned—there are two things I want to let you know. When American citizens come back into this country, they get searched. They do not have any rights when they come back into our boundaries. Or if we leave to go to another country, before we leave, we can be searched. We do not have any rights. Somewhere in public schools, if we are going to make a difference, public schools have to be sacred grounds, not to be disrespectful—take these kids' rights away. But I am going to tell you, there are too many young people dying in our schools. Whoever thought a teacher would die on a school campus in public school? We are losing teachers left and right.

Mr. ZELIFF. How about special education? We just changed that law that special education kids have more rights than regular kids to carry guns, concealed weapons, knives and things like that. We just changed that law. It is scary.

I mean we have got to look at some of the laws and some of the stupid things that we are doing as a society.

Mr. HALBIG. That is right. And it has to come from you guys because right now there is a chance to go back to Washington and take a good look at public schools, because guess what, these are the people who are going to have the jobs, they are the ones that are going to raise the kids. But again, how many more teachers have to lose their lives? And you know what, these are educators. The only thing they have for their protection is a pen. They do not have a gun. We just lost a teacher in Atlanta, GA, the other day, breaking up a fight in an alternative high school, he is an English teacher, 49 years of age, husband and father of three children. And he lost his life doing something he loves. When do we stand up for these teachers and give them some protection?

I really appreciate your time. OK? It is tough. Thanks, you all. [Applause.]

Mr. ZELIFF. I would just add one comment. I had a teacher from Tamworth, NH, call me one day, he was reprimanded for listing on the board all the kids that got A's, because that is discrimination. Something has gone wacky in America and we have got to somehow start making some changes.

I will start with you, Mr. Souder.

Mr. SOUDER. First off, I get a little—as a Notre Dame alum, I get a little nervous each time I hear Seminole County because I keep thinking you are saying Seminole country. I went down to the Orange Bowl, took my two boys down this last year and watched us get beat and heard the chop one too many times. [Laughter.]

Mr. ZELIFF. You will get over it.

Mr. SOUDER. I do not know, it may take awhile. Not this year, I do not think.

I wanted to follow up, first, let me say I believe it takes all of the categories too, both prevention at the border and prevention in education, I believe it takes treatment. One of the things we do know, however, is that even if the treatment worked, if you cannot lower the number of people coming into treatment, the number of addicts is a direct percentage of the number of users. If the number of users increases, there is nothing we can do with treatment. I also would like for the record, if the staff could find some data. This chart does not match some of what we have seen in the proportion funding, in the supply/demand funding, and I would like to see something else in the record.

Dr. CANTLEY. Mr. Souder, the source of that information by the way is the Legal Action Center in New York and I do have information. Whether or not it matches or not, that is the source.

Mr. SOUDER. What I want to see is—and we can follow up, but I want to keep open the record so we can put something in to see what is being combined under supply and demand. Sometimes that makes a difference. It may be that they are combining State and local and Federal resources on police as opposed to interdiction, because what we are seeing is a major drop in interdiction and eradication that was here and gone down steadily. I think the treatment percentages are probably roughly pretty much mixed, because that is more Federal. But that is an important debate we are having right now.

Dr. CANTLEY. Absolutely. If the staff would like to, I do have the source documents.

Mr. SOUDER. That we be helpful too, if we can get some of the source documents.

Another thing that is definitely one of the problems when we get into the analysis of treatment information and that is what constitutes success. Just like what constitutes success in eradication and interdiction and other—and prevention. Because if you have a 100-percent standard, none of it works.

At the same time, in your written testimony, you have three studies that demonstrate the problem with this. Your first one says it is not really conclusive as to what it did. It says all three produce an equal level of negative/positive outcomes and if you got out before 3 months, it did not have positive outcomes. It would be helpful to know a little bit what the positive outcomes are there.

In the second study, it has that there were substantial reductions in use after 3 months of treatment. Part of the problem we have is that longer studies are showing—when you hear the figures 80-percent recidivism, you are really not talking 3 months, you are often talking longer. And it is one of the reasons we are looking at drug testing questions at 3 months, 12 months, 2 years, because what we see is some programs are very effective and some programs have minimal follow up. And partly, it is whether they are doing testing and tough auditing during the treatment program and after the treatment program. If you can get somebody through a cycle for more than 3 months—then it said one third reported total abstinence, which means that in that study, 67 percent had some recidivism. Which like I say, does not mean it was not better than doing no treatment, it is just that it did not solve it.

And on the third one, it says the second to last point was use of substances declined by approximately two-fifths after treatment. Well, the bottom line is if one person out of five was completely cured, which would be the 80 percent who recede, and the others just declined some, you could have four of the five going on pretty much as before and still make a statement approximately two-fifths after treatment.

These are not overwhelming successes that give a lot of confidence with Federal dollars. At the same time, I am not arguing that we should cut treatment. But in the other subcommittee, this one deals with the—this subcommittee deals specifically with interdiction—but I am vice chairman of the other subcommittee on Government Reform that deals with HHS, Education. We are looking at trying next year to get into some more of this kind of data and figure out the proportionate successes.

Do you want to make any comments?

Dr. CANTLEY. I sure would, I would love to. I think these three studies were picked, you know, for the ONDCP report because they are virtually the only nationwide attempts to look at it. That is one of the biggest problems I think we have got in the system. It is easy for me to evaluate my program in Daytona Beach and come to you and say I have got an 80 percent success rate or 90 or 70, when there is no standardization anywhere in the Nation to really do that.

So I would encourage you to look at—one of the recommendations I have is that there needs to be some intensive studies to determine what is good and what is bad, what works and what does

not work, not only in treatment but education, prevention, interdiction and source country activities. We need to do some intensive scientific evaluations to make those determinations.

Mr. SOUDER. Well, thank you. Mr. Chairman, two other things. One is that if it was not, I would like to now insert his full testimony into the record so that—

Mr. ZELIFF. Without objection, so ordered.

Mr. SOUDER. And the second thing is I apologize, the next 10 minutes or so, I have to leave to catch my plane back. So thank you very much.

Mr. ZELIFF. That is why we went out of order and got your excellent testimony.

Mr. Sanford.

Mr. SANFORD. Actually, I am going to follow up on his questions on two points.

One was what are your recommendations—expand the current treatment system to entice more individuals to I guess join in early rather than late. What are enticements that you have heard of that work? Because what I heard with the three young people that spoke earlier was that regardless of the enticements, they were not going to go to a treatment center frankly until it was too late.

Dr. CANTLEY. Well, I would have two suggestions to that. First of all is that work for community support system, particularly families and parents and spouses of addicted people. If we can have good effective programs, family support, family education programs, what that does, that works with—you know the father was sitting here beside the young abuser, the young addict. If we somehow or another could have worked with that father and taught him some of these concepts that we call enabling, you know, over and over and over for several years, if we could have continued to work with the school system people to look at some of their activities.

Basically we know that we have to get some form of voluntariness out of the people coming into treatment. Not necessarily that they have to come to treatment voluntarily, but they have to agree to participate, we cannot force it on them, and if we do attempt to force it, they are not going to get it.

So we have to look at closing off, you know, those support systems that they are using. He made a big deal of talking about how he had manipulated his father. We have got to teach parents and we have got to teach community members how not to be manipulated by their loving. You know, I use a phrase all the time dealing with it, "for all the right reasons, parents do all the wrong things." They do it out of love thinking they are trying to help them and you cannot love a kid out of a drug abuse problem. So that is the first one.

The second one is that we know that by getting people into treatment earlier, they are going to be more successful. The problem is right now that we just do not have sufficient treatment capacity to do that and that is a real big piece of it.

Mr. SANFORD. So it is a capacity constraint, not an interest or enticement constraint?

Dr. CANTLEY. Oh, I think it is enticement too. It is both of them. You know, several years ago we used to have, all the programs would have outreach or case finding activities. We stopped those

many, many years ago because of the expansion of that waiting list. If we had expanded capacity to where we would have to go out and actually try to identify those people earlier and get them into treatment, we know it would be much more successful.

Mr. SANFORD. One second very quick question and that would be another recommendation here was cooperation with the movie and music industry. I did not think there had been any successes on that front.

Dr. CANTLEY. Well, where this is coming from is—there have not been, I think we need to somehow or another get that—you know, redouble those efforts.

It scares me to death to think that kids are today at least partially getting some of their ethics and values from Beavis and Butthead on MTV. That just scares me to death, and if it does not scare you to death I think you need to look at Beavis and Butthead and see some of the things that they are trying to teach the children today.

Mr. ZELIFF. Would the gentleman yield? We had a hearing with the music industry and we think you are right on the mark on that. I cannot say we made as much progress as we set out to do, but we elevated it and we are going to follow up again and again and again because it is absolutely vital.

Dr. CANTLEY. Thank you for that, sir.

Mr. SOUDER. We had a second one, we also had one in Hollywood.

Mr. ZELIFF. Yes, and we had one in Hollywood as well. But we need to do more. Excuse me.

Mr. SANFORD. No, no. In fact, I yield back the balance of my time.

Ms. LABARGE. Could I make a statement?

Mr. ZELIFF. Yes.

Ms. LABARGE. When you hear young people say that a treatment program or a program within a school cannot tell their parents, I want you to know that decision is because that is the law that has been passed as far as confidentiality goes. So as you look at that, I hope that you will understand that is not because the person who is working with that young person does not want to and does not feel that maybe sometimes they need to interfere. But the law states that unless it is a situation where it is homicidal or suicidal, that we cannot.

So again, a policy, a law that is tied to school districts and a lot of the treatment programs, many times may affect the life of the young person.

Mr. ZELIFF. It is a tragedy for us to allow that law to continue. So it is something that we need to look at.

Mr. DAWSON. Just one quick comment regarding the glorification of drugs in all forms of the media. One of the things that we are doing, and I think we are taking a step in the right direction, we are trying to counter that as often as we can and get strong positive messages to young people. And one program we initiated last year was our character education program, getting at the root values of what is right and what is wrong. And it has been very well received from this district and I think the community is starting to embrace it. It is a very simplified program where you select

words with very minimal type of activity. The message is delivered day in, day out for that particular value for a month and then a new value takes its place, and it builds onto a display of these characters as you were. So I think that is an important part as well, that everything that is negative has to be countered with as much positive or more or twice as much, because that is such a powerful message for young people. So we are taking a step in that direction.

Mr. SOUDER. I would like to ask a follow up on the parental rights question, or parental access question. Is that a circuit court decision, a Supreme Court decision or—it is not a Federal law.

Ms. LABARGE. I think it is under Federal drug confidentiality law, the drug and alcohol Federal confidentiality.

Mr. SOUDER. That particularly applies to schools.

Ms. LABARGE. Right.

Dr. CANTLEY. It applies to all individuals receiving services relative to drug abuse, and it is in Code of Federal Regulations, CFR 42, part 2.

Mr. SOUDER. It is in local parentis, the court rule in local parentis does not supersede for the schools.

Ms. LABARGE. When there is a drug treatment program or a counselor from a drug treatment program in the school setting providing support services, that law does take effect.

Mr. SOUDER. But if it is a school drug counselor—

Ms. LABARGE. If the drug counselor is furnished by a drug treatment program into the school setting, then that law takes effect.

Mr. SOUDER. But if the drug counselor reports to the school board and is funded by local taxes as opposed to the Federal, it makes no difference?

Ms. LABARGE. It probably would, yes.

Dr. CANTLEY. I think we have got a little disagreement. I think the Code of Federal Regulations says any public dollars, not just drug abuse dollars. So Medicaid dollars that are in a hospital.

Mr. ZELIFF. Do you want to take the responsibility to ferret that out? He who is getting ready to leave, we just gave him a nice little project.

I think there is a lot of gray area and I think we need to bring it to the surface and deal with it. So thank you, Mark.

Gentlemen, I know you both have to catch a plane, thank you very much for being here. John and I will finish up.

Mr. SOUDER. Thank you. If John does not mention, he has a bill that I am a cosponsor of, to require television networks to put more time for a lot of these Partnership for a Drug Free America and stuff, and partly through his pressure, we will get their attention, if we cannot get it another way. [Applause.]

Thank you all.

Mr. ZELIFF. I have a question and then I will turn it over to John Mica, but drug free schools is an issue that there is a lot of misinformation on. Back in 1993 and 1994, the Congress before us cut back I believe drug free schools money, we took a look at it in a rescission bill initially and then restored level funding this past year.

I guess I see many, many examples of good, solid programs in drug free schools programs. We also are very much aware of pro-

grams that are not so solid, lack of accountability, misuse, even fraud. And maybe each of you would just tell me—Jim I guess and Marge—just what we need to do to make sure that all the money that is going into drug free schools programs are effective and perhaps maybe you can. We kind of think we need more accountability in it and we need to share some of the ideas where it is working and where it is not working, but anything you can add to help us would be appreciated. Marge.

Ms. LABARGE. Well, I agree with you. I think that the programs have to be monitored, we have to have an evaluation, we have to have outcome. And I feel that in Florida because it comes under the Safe and Drug Free School Prevention Office under DOE, that we do have a lot of that happening. We are again monitored, we have to do outcome evaluations and I think that that is the answer. Where you see money being misspent, I think it is because either it is not handled in such a way that there is accountability, or it is not targeted specifically for drug prevention and intervention through the schools. And that is why, contrary to what some people believe, I do believe that the funds have to be earmarked to come down to a district as drug prevention and intervention, or otherwise in many areas—not in Orange County and certainly not in Seminole—but in other communities, some of those funds go for other things such as putting up fences or other areas other than really working with young people.

Mr. ZELIFF. I will turn it over to Jim, I would like to get your comments as well, but would it make sense to do block grants back to the Governors of the States and let the Governors work with the various counties to come up with targeted programs?

Ms. LABARGE. I do not believe in block grants for drug free school programs and for drug prevention. I think that it has to come down specifically allocated for that from the State.

Mr. ZELIFF. From the State and the Federal Government.

Ms. LABARGE. Right.

Mr. ZELIFF. OK. Jim.

Mr. DAWSON. I would have to agree with that. The dilution that occurs in the block grant opportunity for it to get disbursed, lessens those resources in any one particular effort.

I do not know that I could add a whole lot to Marge's comments other than that I think we are held, and should be. I agree with the accountability that we should face and that the dollars that are appropriated for that should be directed 100 percent for those issues. Again, as Marge indicated, in Seminole County as in Orange County, it almost comes in as a categorical. Those funds are reserved for those activities that we develop in a plan that goes through quite a bit of scrutiny at the State level, is board approved, our school board approves that and our dollars are directed at the activities that are basically driven by that plan and we are held accountable to that plan.

When it gets dealt with in other manners or it comes—the dollars come in other forms, I do not know that accountability would be that strong.

Mr. ZELIFF. Thank you. John—Mr. Mica.

Mr. MICA. Well, I think this hearing has been helpful. I am not an attorney, but to have you illustrate some of the problems that

you are facing in our schools demonstrates very dramatically that we need to go back and look at how we can better define not just the students' rights but the rights of the community and parents and our society to deal with this problem.

So again, I think that it is great that Mark Souder and Mark Sanford, who will be very active participants in the next Congress on this issue, heard that and saw that, because hopefully we can come up with some solutions.

But the other thing I would like, and you do not have to do it today, is give us any other specifics where we need to improve that—

Mr. HALBIG. Do you recall the other night at the summit meeting where the young lady from Orange County spoke?

Mr. MICA. Yes.

Mr. HALBIG. Remember when she made the comment that she could take anybody into any public school system, whether Seminole County, Orange County or across the Nation—you know, our customer knows what the problems are within our schools. What we have got to do is do a better job teaching these kids responsibilities, that they have got a responsibility too, to keep our schools safe. They cannot just put it on our shoulders. These kids know where the drugs are, they know who the dealers are. But for some reason, there is a code of silence in public schools. They are afraid to share, they are afraid to tell. Orange County as well as Seminole has a hotline number that encourages kids to pick up the phone and let us know if there is a problem, somebody is hooked on drugs. It gives parents the opportunity. But you know, our kids know what is happening within those schools.

Mr. ZELIFF. Does that hotline work?

Ms. LABARGE. Yes.

Mr. HALBIG. Yes, sir. It is powerful.

Mr. MICA. What happened to the tip program, is it gone?

Ms. LABARGE. Yes, at least in our area, the speak out hotline does work. We have had guns reported, we have stopped shootings, we have gotten drug busts in schools, and we have also intervened in suicidal situations. So as long as we can keep it up and we can keep advertising it, more young people will use it, and I think that is good.

Let me just leave you with one thought. When we surveyed the students in Orange County—and we do this every year—the reason they say they are not using drugs is one that I want us to latch onto, and that is because they do not need it. They do not feel they need it because they have direction in their life and they are focused and they have a goal to achieve. And yet those that say they do use, the major problem in Orange County reporting why they use is because they have to use in order just to feel good. That is a pretty sad message. And that is what I think we need to really look at.

Mr. MICA. Well, I want to thank the panel. Both of the members who participated in these hearings around the country said that they had never seen three panels that have so effectively articulated the problem and also identified some of the areas that we in Congress need to address. So as someone who represents at least part of this area, I really commend you for just being outstanding,

you and the other panelists, in getting this message to we who serve at the Federal level.

So thank you so much, and thank you, Mr. Chairman.

Mr. ZELIFF. Thank you all very, very much for your testimony. [Applause.]

The way we are going to do the next, I am going to turn the chair over to John Mica, who will do the final piece, which will be the community involvement group. And apparently everybody knows who they are, there are about 10 here. Will each of those, if you would use the podium over here and try to limit your testimony to 3 minutes, whether it be a question or a statement. And then if we have any time, we will both be here—I guess this is going to be used for a traffic court at 2 o'clock, so we have about an hour. And any extra time, we will divide it up first come-first served. So the new Chairman Mica, would you—

Mr. MICA [presiding]. Thank you, Mr. Chairman. I would like to first call up—is it Heidi Pinney and Sarah Clark and Chris Morris. They are three Lake Mary High School students who conducted a survey of their students, their fellow students, regarding drug use. Each of you are recognized for 3 minutes and we would like to hear the results of your report to our committee. Thank you.

STATEMENTS OF CHRIS MORRIS, HEIDI PINNEY, AND SARAH CLARK, LAKE MARY HIGH SCHOOL STUDENTS

Mr. MORRIS. Thank you. First of all, we are here to represent Lake Mary High School and we are presenting some information that we gathered by surveying randomly approximately 100 students.

Approximately like three-fourths of the students surveyed believed that since they have attended Lake Mary High School, there has been a visible increase in drug use, and 36 percent of the students said they had been offered either cocaine or heroin in the past.

But only 31 percent of those students feel there is a serious drug problem, half of them believe it is somewhat serious and 19 percent think there is no problem at all.

Many of those students believe that drugs are not a difficult thing to acquire, 95 percent surveyed felt that alcohol is easily accessible, 83 percent think marijuana is easy to get, 58 percent believe LSD is not a problem to get and a few voiced concern that Spanky, the campus' drug dog, was eliminating the usage of marijuana on campus. I guess they think that it is an excuse to bring other drugs that the dog cannot smell and detect.

Of the students surveyed, 26 percent said cocaine and heroin were easy to obtain if they wanted it.

Heidi.

Mr. MICA. And are you Sarah or Heidi?

Ms. PINNEY. I am Heidi.

Mr. MICA. Go ahead, Heidi. Without objection, we will make these part of the record. Thank you. You are recognized.

Ms. PINNEY. Thank you.

First of all, the students said that you really cannot compare heroin and marijuana together, because they are two extremes of two totally different drugs. Heroin is an addictive drug the first time

you use it and when we interviewed Lieutenant Cash, he made the statement, "heroin is a seductive mistress and the first time you use it, it never lets you go." Unfortunately, marijuana, on the other hand, is a socially acceptable drug among teens in high school and 83 percent said it is very easily accessible, 6 percent said it is hard and 11 percent of the students really do not know.

It is basically used as an excuse to have more fun at parties or as an escape from different problems. We had a forum on Wednesday—Thursday, we had a forum where we got students together that were freshmen, sophomores, juniors, and seniors to actually voice their own opinions. One of the questions at the forum was how accessible are drugs in the school. One person said that marijuana is the most popular among teens but Spanky can smell it, making them turn to LSD, which is worse.

Another question is where are they getting the drugs and one student said everything, they would see everything in the halls and another student said they see nothing in the halls but within 10 minutes away. The neighborhood also contributes to the drug problem and one of the students actually stood up and said there was not a drug problem in their development but there was one—actually there was not a drug problem in his development and when they asked which development he lived in, the students snickered when he answered. Unfortunately though, neighborhoods that you think are drug free are actually drug infested.

And basically to go to the last comment, if you are not looking for it, you will not find it.

So now, Sarah.

Mr. MICA. Thank you. Sarah Clark.

Ms. CLARK. With many high school students, a bad family life leads to the use of drugs. Whether it is lack of communication with the parents or the parents seem too busy or wrapped up into their work, somehow the child feels the need to fill the gap.

Another major influence on kids is their friends, peer pressure. As one high school student said in the forum that we did, she said, "I have had the same friends for 4 years and we are all active in school activities. We do not have time for drugs." But most students agree that it comes from within, the need to experiment or do drugs. One student brought out the fact that when she did drugs it was just a phase she went through.

The students of Lake Mary had many suggestions for helping to solve the problem on the abuse of drugs. Forty-four percent of the students surveyed agreed that tougher law enforcement is definitely needed to solve the problem. Usually people that get caught, they find that they just get a slap on the wrist and then they go back to doing what they were doing before.

Thirty-five percent of the students believe that easier access to treatment programs would help. Instead of paying thousands of dollars just to walk in the door of one, they need one that is affordable and cheaper and can help them better.

Twenty-six percent said that education is needed, but at an earlier age, it should be started with elementary school kids, not in high school because it is too late in high school, they are already into it. Programs such as D.A.R.E., the kids really agreed that that was the good one.

Thirteen percent of the students surveyed did not even think that there was a solution needed or that there could not be one found.

We are not giving our personal opinions, these are—we are just representing the voice of Lake Mary and this is what the Lake Mary students think and feel at Lake Mary High School.

Mr. MICA. Well, I want to thank the three of you students for the leadership role you have taken in providing this information to our subcommittee and our committee and all of your comments and these letters and your report will be a part of the record of this hearing. But we appreciate your coming. You heard the panels today, you can see how it can devastate lives and how it can devastate our community and the country. So we need everybody working on this together, and we appreciate again your taking a leadership role at Lake Mary High School.

I would like to excuse you now and we are going to hear next from Mayor Robert Breaux, mayor of the city of Maitland. Mayor Breaux, you are recognized for 3 minutes, sir.

STATEMENT OF ROBERT BREAUX, MAYOR, CITY OF MAITLAND, FL

Mayor BREAUX. Thank you, Mr. Chairman.

Mr. MICA. And if you have lengthier statements, without objection, they will be made part of the record.

Mayor BREAUX. Thank you very much.

Today, Mr. Chairman, we have heard a mixture of data and opinion. We have heard problems and solutions, we have heard responsibilities of parents, schools, children. Each of us sees this problem from our own unique perspective, but I think what we need to do is get personal.

I want to tell you a little bit about what is going on in Maitland and I have four recommendations for you.

The number of youth at risk in Orange County has risen in the last 10 years 17 percent, but the number of crimes—auto theft, concealed firearms, robbery, sexual battery—has increased in the hundreds of percent. The State of Florida still has the worst crime rate in the Nation. Florida ranked No. 1 in the number of high school dropouts.

Maitland is taking this issue very personally. For the 6th year, our part 1 crimes have gone down. The number of citizens involved in our neighborhood watch groups have gone up. Over 20 percent of all our households are now involved. We in Maitland are sponsoring a team dance—does that sound old fashioned? Well, for sixth, seventh, and eighth graders, it gives them alternative things to do on nights out. The middle school in Maitland has its team court. It is so successful, the Orange County schools are considering that as a model program. The Maitland Police school resource officer provided by the city of Maitland conducts programs for youth and the D.A.R.E. Program is taught in each of our elementary, public elementary schools, and our private elementary school.

We are taking this up close and personal for each of us as citizens, parents, and also children. I would like to recommend four things.

That you move the bureaucracy out of Washington, you begin to decrease the number of bureaucrats at the headquarters level in Washington and provide those resources out to the field where they can do a better job at the local level.

That you continue to provide funding for things like model programs at various communities who have had some successes, allow them to continue those and continue their effectiveness, but you evaluate—and that is the third—that you provide funding for training of the personnel who are conducting these successful programs.

And fourth, encourage partnerships with our universities and our local governments so that they can monitor these successful programs, evaluate those, develop standards and allow us together—university, local government, and the Federal Government alike—to develop the public policy that works the best.

In summary, we need to continue the Federal dollars to evaluate our programs, we need to continue to improve our efforts in this very important area, we need a united, organized, and systematic approach to this problem.

And Mr. Chairman, I appreciate your efforts to bring Washington down to Seminole County and Orange County so that you understand and your colleagues understand the very important issues that face all of us.

Thank you.

Mr. MICA. Thank you, Mayor Breaux.

I would like to recognize now Brenda Gilliam-Jones of the Grove Counseling Center. We are taking these in the order in which the people either contacted us or indicated a desire to testify. You are recognized for 3 minutes.

**STATEMENT OF BRENDA GILLIAM-JONES, ASSISTANT
EXECUTIVE DIRECTOR, THE GROVE COUNSELING CENTER**

Ms. JONES. Thank you. Thank you for having me here.

I have worked in substance abuse for 24 years, starting out in another State, Maryland, and now I am working in Florida. When I started, the drug of choice was heroin and I am looking at the newspaper headlines today and I see that there has been an increase in heroin use.

At the Grove, the Grove is a comprehensive substance abuse treatment program providing both substance abuse, delinquency prevention services to adults and adolescents. We, fortunately, have not been seeing an increase in the number of adolescents presenting with heroin use. As a matter of fact, in looking at our statistics, we have only seen approximately three or four adolescents over the last year.

Marijuana continues to be the drug of choice for adolescents who are coming into treatment. When they come into treatment, they indicate that they are using because of lack of leisure activities, little involvement on the part of parents, feeling the need to make themselves feel good, and a host of other things. It is really easy to blame parents and other people for why adolescents use. I think that there are a variety of reasons, as we have seen.

As I said, we offer both prevention up to and including residential treatment. Many of our clients are referred from the criminal justice system, have been in other private treatment programs be-

fore they get to us. And so we are seeing kids who have not yet reached the bottom, but they are near the bottom and they are presented with a host of problems. By the time they come into treatment, the families also need services. And so I have some recommendations in terms of what I believe and what the agency believes are needed.

I need to say as well that we receive Federal dollars out of CSAT through a prevention coalition grant with another program here and also funding through the drug free school grants. And my recommendations are: To include all aspects of the communities to work together to improve conditions and empower residents to become drug free; additional parenting training; greater accountability; more prevention programs for youngsters at an earlier age; values training; additional community substance abuse programs and family education counseling; and once treatment is over, more after-care services.

I believe our program and other programs are effective but unless we are going to follow it up and provide after-care services, we are going to see the recidivism that you talked about earlier.

Thank you.

Mr. MICA. We thank you for your testimony. And we now have Joan Ballard, the Center for Drug Free Living. One of the things, as she is coming up, we tried to distribute the witnesses on the first panels as broadly as we could from the various counties and communities, but we know the tremendous work each of these groups do, including your group, and wanted to try to be fair geographically as well as representation. So Joan, you are recognized for 3 minutes. Thank you.

STATEMENT OF JOAN BALLARD

Ms. BALLARD. Thank you and thank you and welcome. I am just overwhelmed with what we have heard this morning and what I heard last Tuesday.

I am Joan Ballard and I am director of community relations at the Center for Drug Free Living, and we are a comprehensive prevention, intervention, and treatment agency serving the residents of four counties in the central Florida area.

You have heard all the statistics you need to hear this morning. I am going to play a different role. I am going to say what now? What are we as citizens going to do? I cannot point my finger and say you can do it all. I think that everybody that was in this room this morning needs to take some responsibility for this. It is not your responsibility and it is not mine and it is not the Center for Drug Free Living or the Grove or any of the other people that spoke here today. It is everybody's problem and it is time that we started to realize that.

Eighteen years ago, I had three teenagers and I got involved because of Marge LaBarge. She had a drug awareness program and I went to it because I thought at that time that pot was something you cooked soup in. And I am not being funny, because I really did. I had escaped that whole generation.

I have a 16-month-old granddaughter right now and what is her future going to be like? If we as parents and community activists do not do something, we cannot rely on the Federal dollars all the

time, we cannot rely on the police to take care of us—we have to do something about it ourselves. And so I urge everybody that hears this message today to become involved, to take that next step, to call your Congressman, to form parent groups.

I serve in another capacity in this State and that is the president of the Florida Prevention Association. And we tried desperately to get parents and other people to join that agency and tell our prevention message. You have heard it from the kids, you have heard it from the police, and you have heard it from every area. Now it is your turn. Let your voice be heard, let people know that you can make a difference as parents and as community leaders. The business community especially needs to stop and take toll.

I will not belabor this any longer, I thank you for the opportunity for being here and I applaud your efforts and we will be happy to work with you in any way that we can.

Mr. MICA. Thank you, Joan Ballard.

And we will now hear from Richard Jones, who is president of the Florida Narcotics Officers Association. Mr. Jones, you are recognized.

STATEMENT OF RICHARD JONES, PRESIDENT, FLORIDA NARCOTICS OFFICERS ASSOCIATION

Mr. JONES. I prepared for about 5 minutes, so if you can bear with me, I will try to keep it as brief as possible. I just want everybody to know before I get started that I do work for Orange County Sheriff's Office. I have worked the streets undercover for about 7 years, working in the trenches with these people, so I know how they think and I have gotten real involved in that area.

I did not come here today to quote statistics, I have come to quote reality and offer resolves. Because of limited time, I have chosen to briefly bring to your attention two areas which have the greatest potential for eliminating the drug problem in this country.

Did you know that in the United States, there is virtually no town too small or too remote that you cannot find illegal drugs sold or used. That is a frightening observation. This is a large country. If you will all do your math, it does not take a rocket scientist to figure out the magnitude of the amount of drugs it takes to supply every city in the United States. We are losing the war on drugs, and when I say war, I mean war. The answer to this lies at our borders. I ask has anyone ever seen poppies or coca leaves growing in this country. Obviously, no.

I am a great believer in freedom and truly believe that this is the greatest, most powerful country on the face of the Earth. But during a state of war, we have to sacrifice a few freedoms for the good of our country. Gentlemen, we must officially and congressionally declare war on illegal drugs entering this country. In order to be effective, this will require the same enthusiasm and attention that we would give to any entity invading our borders in an attempt to overthrow the Government and the people of the United States of America.

Simply put, we have to quit playing around and get serious. Do not make this another Vietnam, where we do just enough to keep the status quo. We need to fight to win.

Moving on to my second and probably the most important proposal, during my career of fighting drugs, I have made many observations. I have studied why people use drugs and have found many reasons why. The most common reason that every drug user and addict in the world will cite for using drugs is it makes them feel good. That sounds kind of simple. They feel good and eventually that feeling becomes an addiction.

Now we can look to rehab programs which are expensive and have a very small percentage of success when crack cocaine and heroin are concerned. Jail sentences get more people off drugs than any other program we have. And that program is already in place.

So let us look at where the money can be best spent. The answer is antidrug education. It is just like tobacco products. Over a long period of time, we have gradually educated the people of this country to the fact that the use of tobacco products are not worth the end result of health complications and possible death. Yes, education is the key.

The one most successful and effective program that has ever been created is the D.A.R.E. Program. This program truly reaches the children at an impressionable age before their minds have been influenced by peer pressure and the lure of the streets. I am saddened that some communities have given up on this program saying that it does not work or it is too expensive. The program has not failed, we have failed by not providing the followup education. You would not teach a child addition without following up with subtraction, multiplication, division, et cetera. That would only be part of an education.

I would advocate that instead of giving up, we follow up. It is do not give up, follow up. We should begin our followup in eighth grade. This is the age peer pressure intensifies. This program should be tailored to more reality and shock value. It should be based on what real heartbreak and destruction drugs can bring to a person's life and bolster the choices that they have in life. If only this one followup program could be implemented, it would greatly increase the success stories for tomorrow's children. I also believe that to continue this natural education progression, a more intense program should be provided at the 10th grade level. At this age is when most teenagers reach their rebellious stage of development and begin looking for their identities. Schools should not be just for reading, writing, and arithmetic. It should also build character and mold our children for their future role in society as adults.

I have been told by some educators that they did not feel they should have to be the teacher and these kids' parents at the same time. Well the fact is that a good majority of children in this country—and yes, it is being greatly related to our drug problem—are not getting the social skills and moral values they need from the home environment.

So why not put forth the effort and money, which would be well spent, to teach children to make correct choices in life and resist getting involved in drugs in the first place.

I know I am running a little long here and I just want to sum things up. Enforcement—stopping the flow of drugs into this country would ease the burden on local law enforcement by reducing the availability of two main sources of concern—cocaine and heroin.

It is much easier to regulate precursors and domestic cannabis groves than it is to regulate production in other countries.

Second, we must expand on the D.A.R.E. concept, whatever the cost, because education is the key to driving down the demand. Education is best received and retained in the minds of the youth of this country. Do not wait until people are set in their ways or already have a problem before we try to change their thinking. By then it is too late.

So just remember, do not give up, follow up.

I thank you.

Mr. MICA. We thank you for your testimony and also for your service as president of the Florida Narcotics Officers Association.

I would like to recognize next Seminole County Commissioner Win Adams. You are recognized, sir.

STATEMENT OF WIN ADAMS, SEMINOLE COUNTY COMMISSIONER

Mr. ADAMS. Thank you. It is a real pleasure for me to be here. I just have a few comments that I would like to add to the already excellent testimony that you have received.

As I see it, we have a value system problem in this country. I can go back I believe to 1962 when whatever the wisdom was to strip religion out of the schools. Separation of church and State I think probably is not working the way it was supposed to. I think that the religious institutions do a much better job of providing a value system, social value system, to our citizens, than Government. That is just a comment of mine.

The other thing, with regard to the drug war, it is an economic problem. It is a business, it is one of the largest businesses in the world. As I see it, the demand is a local problem. Given appropriate resources, the local officials can help solve this problem along with the people. But on the supply side of the economics, that is a Federal problem. It is your responsibility to protect our borders, to assure that these types of drugs do not get into our country. As far as I am concerned, it is a national security problem. If these were nuclear devices coming into our country, we would probably take much different tactics as far as securing our borders. But I look upon the Federal Government having the resources, the wherewithal, the knowledge, and also the skill to stop the problem coming across our borders.

So I think the Federal Government needs to concentrate on the supply side, let the local officials and local people and citizens concentrate on the demand side.

I also think it is important that we stop sending mixed signals. For example, I read in the newspaper not too long ago that there was some idea that the CIA was involved in drugs. I believe it was reported out in California. These type of things, if they are true, have got to be stopped.

As far as solving the problem with the teenagers, I think you must get the teenagers involved. Peer pressure among their groups will probably do more than any parent or anybody else. I recall when I was growing up in Manatee County, FL, we had one of the largest gangs in the school, it was called the football team. And no one messed with our football team. The football team was the lead-

er in Palmetto High, of which I was a part of. I think we have got to listen to the students that were here talking to us, because the ideas that they have probably will work for their generation. They may not have worked for ours, but it will work for theirs.

Thank you very much.

Mr. MICA. Thank you, Commissioner Adams.

Mr. ZELIFF. Could I make a quick comment?

Mr. MICA. Yes.

Mr. ZELIFF. As far as the CIA and the Mena, AR, and all that, there is a lot of rumors that go around, but we—if anybody has any information in terms of substance and facts, we need to evaluate that and we would do that. I just want to point that out. I do not want to leave the impression the CIA is out there involving themselves with that.

There are rumors and we need to deal with the rumors, but we need to deal with it with facts. So I just point to that as a matter of record.

Mr. MICA. Thank you. I would like to recognize now Kim Barnes, clinical director of the SAFE Program. Kim, welcome, and you are recognized.

STATEMENT OF KIM BARNES, CLINICAL DIRECTOR, SAFE PROGRAM

Ms. BARNES. Yes, I am Kim Barnes, and I am the clinical director of Associated Counseling Education, and one of our programs is the SAFE Program, which is an adolescent treatment program. You heard a couple of young people who have been through our program testify this morning.

I wanted to tell you a little bit about our clients because I think there is a lot of misconceptions about who this drug problem affects. Our clients are predominantly white, they are middle class, they are from families who have two parents at home. Many of them have stay-at-home moms. Their parents were involved in the PTA, were Little League coaches, and were very active parents. These are not kids who grew up in poor urban areas with no support.

I also want to point out that our kids are not overwhelmingly using heroin and cocaine. I have really mixed feelings hearing all the talk about heroin because I am relieved at one point that heroin has gotten a little press because it has made the whole drug issue public, but I think heroin is just not the problem.

The clients that I serve are smoking pot, they are drinking alcohol, they are using Rohypnol, they are using Ecstasy, they are using LSD, and those are all things that are readily available here in America. Interdiction efforts are not going to help that problem. Even pot obviously, although some pot is coming from outside our borders, those other drugs are manufactured in labs right here in the USA. That is not to mention inhalant abuse and other things that are readily available right here in our country. So although I am not against interdiction efforts, I am a little frightened when hearing all the focus going there and away from things that are more local to our boundaries.

A couple of things I just want to emphasize that I see as important in addressing the issue. One is that parents do need to be edu-

cated about substance abuse. I think parents want to know, they want to know what to do but they do not know where to get the information. Or because of denial, which is a rampant part of having a child with a substance abuse problem, you will not access it without a little push.

Our school systems in our area are doing a really effective job of identifying and providing support for high risk kids, but they are disempowered in terms of being able to get to the parents. And what I would like to see happen is that kids who are identified as high risk for whatever reason, that their parents be required to obtain education. Hopefully so that when their kid does develop a problem, they will know what to do and where to go.

Right now, we saw from the skit earlier today, the school system does not have a lot of power to take really active steps when they need to. And I think that we need to empower them to get the parents involved, to communicate with parents, to communicate with law enforcement, to do whatever needs to be done because obviously they are at the front lines of a lot of what is happening.

The school system is being asked to be the treatment program, the educator, the counselor—they are being asked to do too much, frankly. It is not their job to solve all of our society's ills.

I think the same thing is true in terms of the juvenile justice system requiring parent education. I think every kid that is arrested, their parents should be required to go through some kind of education program. And that would be a key thing that we could do.

And then the last point I want to make, since the red light has come on, is that I would love to see a way for Government to partner with privately funded programs. We are a private program, we do not receive any Government money whatsoever. However, I think that we can still be an available resource to the public sector. The publicly funded treatment programs should be reserved for those kids who cannot afford treatment, who do not have insurance, you know, who do not have means. Let kids who do have means go to places that are private. Maybe the Government could provide incentives for private programs to exist, for programs that are already doing it well to continue to do that. As it is right now, the publicly funded programs in our area have long waiting lists and I have got beds out the wazoo. You know, I could take 20 kids today into treatment. And that is not true of the publicly funded programs.

So I will stop with that. Thank you.

Mr. MICA. Thank you for your recommendations. [Applause.]

Incidentally too, we will leave the record open how long?

Mr. ZELIFF. Five days.

Mr. MICA. Five days for additional testimony. So if you have something that is lengthier than your presentation or are not able to testify—

Mr. ZELIFF. And Mr. Chairman, I just would like to add in the last comment was a concern about interdiction taking too much of the total available resources. Interdiction is 8.8 percent of the total resources, so it is a very small piece. So I just, for the record, point that out.

Mr. MICA. And I think both Chairman Zeliff and myself know that you have to confront this on every—

Mr. ZELIFF. You need that five-legged stool.

Mr. MICA [continuing]. Every front, or you are not going to solve the problem. You let down your guard in one area—I think it was Sheriff Eslinger said it is like mercury, you push it in one place and it pops out in another.

I would like to recognize at this time James R. Purdy, with Tracking Systems Security. You are recognized, sir, for 3 minutes.

STATEMENT OF JAMES R. PURDY, TRACKING SYSTEMS SECURITY

Mr. PURDY. Mr. Chairman, can you hear me?

Mr. MICA. Yes.

Mr. PURDY. Mr. Chairman, Congressman Mica, I want to thank you for giving me these few moments.

Ladies and gentlemen, I speak from experience. I am 69 years of age, I have been a member of the American Bar for 39 years, I am a retired public administrator and I am an adjunct instructor at the University of Central Florida and Congressman Mica has addressed my students.

I come with some suggestions which may help with the utilization of the—the maximum utilization of Federal funds. I am going to keep my remarks as brief as I can.

First, the mayor from Maitland put his finger on it: education. I would suggest to the Chair and to Congressman Mica that when you go back to Washington, that you take a look at the program that HUD has used to take back and to sell to stimulate the economy those homes that have gone into foreclosure. They do a great deal of advertising in the media in general, and I am saying to you that if you in fact utilize some of those Federal dollars to do more advertising in the black media which can reach 20 million households in a week, you will make a dent in this drug problem.

No. 2—and by the way, that office that handles that is located in New York, I believe it is called Black Media, Inc.

No. 2, unlike the movies, I have received training with the New York Police Department in what we call Manhattan South, that is Kojak territory for those of you who watch TV. I am a licensed private investigator here in the State of Florida. And I say to you this, if you want to maximize even further utilization of Federal dollars, resort to the block grants. And I cite you a specific example. If you check with Chief Wheary, W-h-e-a-r-y, of the Asbury Park, NJ Police Department, and also check with the Department of HUD for the block grant that they gave in 1987 to reduce crime in the Franklin Delano Roosevelt Housing Project, I think you will see that the results are as follows.

Within 1 calendar year, under a block grant, the crime rate was reduced by 33 percent, confirmed. I know because I happened to work on that project. And I am saying that if you take your dollars, use the block grants in such a fashion. The media for education, start by maximizing the maximum number of people who may in fact be attracted to drugs or who even may want to sell them, you will make a further dent. After approximately 6 months, we had parents using hard love, they were reporting on children and we had children reporting on families. Check with the Asbury Park Housing Authority, I think they will verify it.

Thank you very much.

Mr. MICA. Thank you for your testimony, and I would now like to recognize Diane Kerr. She is from Jacksonville, FL, and came down for the hearing.

STATEMENT OF DIANE KERR, JACKSONVILLE, FL

Ms. KERR. Thank you for having me. I am a member of the Rice Process. The Rice Process is community based volunteers, we work with our policemen, we go out into the worst areas of town, we put ourselves between the drug seller and the drug buyers. By being there, we effectively attack their economy, they do not do any business while we are on the street.

We work by just chanting. We are nonviolent, we stand in front of them and we get to do what the police would like to do. Many times the police cannot say anything to these people who call them all sorts of obscenities right there to their face. But we can. We can call them drug dealer slime and we use all sort of names like this and we chant them, and we stay for 4 to 6 hours. We do things that will last all night long, we are out on the streets, we are cleaning up the beer cans and the liquor bottles that just litter everywhere.

I live in one of the worse sections of my town and I have a neighbor who has to watch her television in a cardboard box because she is afraid of having her TV stolen. That is what prompted me to do this, to go out and help the people. They help us, they are out there with us. We find things to do that give our hearts a little relief from the stress of it all. We do a drug dealer funeral on the street, we actually built a coffin and made our own drug dealer dummy and we desecrate this out there on the street, we make fun of it because the children are watching and it is very important that their ambition is not to be the drug dealer. And right now, many of these children, that is where they are going. The next step up for them is to be the drug dealer.

And I want to invite anyone else to participate in their community in any way they can. If we take it a little bit at a time, we will get a lot done.

Thank you.

Mr. MICA. Thank you. An innovative group and we appreciate your testimony.

Let me see if Ann McDaniel, director of Altamonte Center for Counseling is here. You are recognized.

STATEMENT OF ANN McDANIEL, DIRECTOR, ALTAMONTE CENTER FOR COUNSELING

Ms. MCDANIEL. Good afternoon. I am director of Altamonte Center for Counseling. We are a private full service counseling agency, we have offices in six counties. We treat about 300 adult substance abusers a week, mostly court-ordered people.

The first thing I want to do is acknowledge what we are doing here today, because what we are doing here is the same thing that we do when we counsel, we are having a conversation that makes a difference—that is exactly what we do when we do counseling.

With our clients, probably 90 percent of our adult clients are also parents. We have a youthful offender program. Probably 75 percent

of those kids who are already involved in the adult criminal justice system are parents. We have a program for women, probably 95 percent of our clients are parents. And most of them have not the faintest idea how to be parents, and in particular, they do not know how to talk to their children about why they have come here.

So we have conversations with them about how to talk to their children about what their lives have been like and how they have become involved with drugs and alcohol and how they—where their problems have led them.

What has been happening here today is about people having conversations with each other. The places where someone like me can be effective is perhaps in a conversation with my neighbor, who would never come into contact with the school system at all, but I can have an effective conversation with her. And then she can have an effective conversation with someone else. It really is a personal thing.

As I was listening to the talk here today, I kept hearing about the war on drugs. I do not want to be in a war, I do not want to be part of a war, I do not want to live in a country where there is a war. But I would love to live in a country where there was a conversation, where there were lots of conversations going on that mattered to people, that really made a difference in people's lives. And that is the sort of thing that would inspire me.

Thank you.

Mr. MICA. Thank you for your testimony. Do we have Donna Pernicci here?

[No response.]

Mr. MICA. Donna Pernicci. Kerry Walensky from Lake County had called also.

[No response.]

Mr. MICA. We have Ron Brown.

[No response.]

Mr. MICA. Stefan Longo.

[No response.]

Mr. MICA. JoAnn Driberg.

[No response.]

Mr. MICA. This is just like special orders, Mr. Chairman.

Mr. ZELIFF. We have got to quit in another 15 minutes.

Mr. MICA. Richard Jones has already testified. We have Tom Powers.

[No response.]

Mr. MICA. Not here. We have Jody Scott.

[No response.]

Mr. MICA. Dennis Head.

[No response.]

Mr. MICA. Carol Mintz.

[No response.]

Mr. MICA. Charles Ronguy.

[No response.]

Mr. MICA. Linda Poole.

[No response.]

Mr. MICA. Darlene Lee. Richard Bodecker.

Mr. ZELIFF. Darlene is here.

Mr. MICA. Oh, I am sorry. Darlene Lee?

Ms. LEE. Yes, sir.

Mr. MICA. Yes, you are recognized. Thank you.

STATEMENT OF DARLENE LEE, LAKE COUNTY, FL

Ms. LEE. I am Darlene Lee, I live in Lake County but I do work in Altamonte Springs and my sons were in treatment in Orlando, I have two druggie sons.

They started when they were 14 or 15, they are 17 and 18 now. They went through the SAFE program too and it has been a long hard row to hoe. There is such a denial problem with parents. You know, you think that you are white, middle class, I am a registered nurse, I thought I was aware of what the symptoms were, but it is such a subtle, sneaky, pervasive disease. Clairmont is a very small town, but the gang situation there is really bad. My son was in a national gang using and dealing marijuana and LSD. And LSD was his drug of choice. He is alive today and he is not in prison and he is sober because of the SAFE program.

And I just encourage you to make programs that are successful more available, because I had to declare bankruptcy in order to put my kids through treatment.

There is an answer and there is hope, but this is a progressive, terminal illness and they are going to die if they do not get help. Just focus on the groups that are working with kids that really are effective and that are helping them, and the kids that are sober. And I encourage you to support these programs. I encourage you to give parents more authority to do something about the problem, because parents are totally helpless.

It is not against the law in this State for a kid to run away, my son was missing 18 days. I could not get law enforcement to look for him. I had to make fliers and put them up on the toll booths and in the restaurants I thought he would frequent and in the teenage nightclubs and the airports and the bus stations. I felt desperate, I felt helpless. And when I finally found him, he was on the way out the door that night to use crack.

It is a joke. This whole juvenile justice system in the State of Florida is a joke. We need help as parents in giving us the authority to do something about the problem. Do not make it voluntary to go into treatment, because I do not know a druggie kid that is going to voluntarily admit themselves for treatment. Give parents the authority to admit their kids to treatment and to keep them in treatment until they recover from their addictions.

And that is all I have to say. [Applause.]

Mr. MICA. Thank you, very direct, unfortunate experience, but we appreciate your testimony, and hopefully we can look at some of these recommendations.

I think I had called Richard Boddecker, chairman of the Alcohol/Drug Mental Health Association. Welcome, sir, and you are recognized.

STATEMENT OF RICHARD BODDECKER, CHAIRMAN, ALCOHOL/DRUG MENTAL HEALTH ASSOCIATION

Mr. BODDECKER. Thank you, Mr. Chairman. I want to congratulate you on this wonderful hearing that you have had here. I at-

tended the one over in Orlando the other night and that was a good one also.

The thing that came out more I think in all of these sessions was the fact that we need more parental supervision of our children. In order to get that, we are going to have some—have to create some legislation that makes it mandatory that parents are responsible for their children's actions. When I was growing up, if I busted the man next door's window with a baseball, my daddy had to go over and fix or I did with him. That is not so any more.

The situation come up about the ability of children to say to law enforcement officers, I do not have to take anything out of my pocket or I do not have to show you anything, and in the school system, the same way.

I have been connected with the HRS and ADM for the last 10 years and we deal with not only alcohol and drugs but also the mental illness. We find that today, out of the homeless population of about 3,500 people we have in this area, that 65 percent of them are also mentally ill, besides being alcoholics and drug addicts. So the situation is needed where we must contact the alcohol-drug and mental health situation as one because of the fact that there is such a great ponderance of codependence and also the fact that they are mentally ill.

So you want to keep that in mind when we are getting funding, that we do not borrow from Peter to pay Paul. That has already been done. In this State, they took away \$40 million from children's mental health to build more jails and that is not right. So we need more funding for mental health and for alcohol and drugs, all the way across the board.

They speak about the number of days that it takes to cure an addict. We have a place in Florida called the Florida Addiction Treatment Center, it is in Avon Park. They have a program where they do not let somebody out of the program until they are ready to go out of the program, they do not have 24 days or 32 days or 62 days. And these are the things that worry us the most.

But thank you very much for your interest and good luck.

Mr. MICA. Thank you for your testimony. I will now call Herbert Reagan.

[No response.]

Mr. MICA. Vernon Brown.

[No response.]

Mr. MICA. Sandy Sims.

[No response.]

Mr. MICA. Bailey Godfrey.

[No response.]

Mr. MICA. Is there anyone else in the audience who had requested to speak? I am sorry if I missed you. Would you identify yourself and come forward.

STATEMENT OF CATHY GAMBLE

Ms. GAMBLE. My name is Cathy Gamble.

Mr. MICA. Cathy, you are recognized and welcome.

Ms. GAMBLE. Thank you.

I am a mother and an emergency room nurse. I have a son who is 18, who is also here and we went through probably the most he-

roic awful year of our life, and then in the last 9 months we have been through probably the best possible time we could as a family. My son is addicted to alcohol and drugs, and we as a family were in deep trouble. We did not know where to turn, the schools were not helpful to us, they told us to take our son away for a year, move to a different part of the country. That was not an option for us because we would have to break up as a family to do that.

Luckily for us, we did find a long-term drug treatment which, in my opinion, because it is also family and client, worked. It is the only thing that works. Putting kids in drug treatment just for themselves and not treating the family just does not work. I tried to teach my son about drugs. I watched it as an emergency room nurse. I watched kids come in, file through the emergency room door, having to stick tubes down their throat and put liquid charcoal down them to save their life, and to have a psych nurse come in and tell them that there is really nothing that anybody can do except out-patient. You know, you can take your kid and you can get them out-patient therapy. Well, that does not work. I know numerous kids who have been through out-patient therapy and they are back out on the street and they are still doing the same thing that they did.

The problem is, for families like us, who luckily by the grace of God did not get in trouble with the legal system, although that could have happened to us—insurance, there is no insurance. It paid for \$1,000. That is nothing, that is a drop in the bucket. I would have done anything, I would have mortgaged my home if I had to. Luckily, I did not have to do that, luckily I have a husband, but there are lots of parents out there who cannot afford drug treatment, whose kids need it desperately.

Do not reinvent the wheel. We have treatment centers out here that work. We need to get kids in those. We need insurance companies to back us to get these kids back on their feet and well again. Otherwise they are going to go right back out there and they are going to end up in jail and you are going to pay for them anyway.

So thank you.

Mr. MICA. Thank you for your testimony. And we have someone else. Can you stand to the mic and identify yourself please?

STATEMENT OF CINDY CRANE

Ms. CRANE. Yes, I will be glad to. My name is Cindy Crane, I am a licensed mental health counselor doing out-patient treatment right down the block.

Mr. MICA. Thank you and you are recognized.

Ms. CRANE. I am also doing—I am also a certified addiction professional. As far as someone coming into drug treatment initially, out-patient work is not going to help. They must go in-patient, they must go into a long-term treatment center. And when I say long-term, I would say 8 months would be a minimum. I very much approve of the SAFE program, I have sent kids there and they do a wonderful job.

I would like to give you a little bit of background. Besides being a licensed mental health counselor now, I was in the school system for 31 years and I retired as the assistant principal at Lake Brantley High School in 1987. I was in charge of drug treatment

and the drug and alcohol intervention program. I did design a program that allowed kids to go into treatment rather than being automatically expelled. In 1986-87, I referred over 100 kids to treatment programs through that particular program. At no point did I have any problem with the confidentiality, and I put it plain and simple to the parents. However, today in our world, most parents and most families do not really get involved until their ox is gored.

I would like to make some specific suggestions. Part of this would include the Federal level, so I will start with that first.

We have got to have more long-term programs that are affordable to people that just do not have the money. There are some around, but they must be long-term. So it is going to take Federal, State and local help again, because the drug problem is cyclical. See this gray hair? I can tell you it is cyclical.

One very definite program at the Federal level, that I hope you gentlemen can go back and do something about is the bill before Congress right now I believe on the parity of the insurance money going, minimum \$100,000 for medical but also for drug treatment and mental health. That will help tremendously, at your level.

I would strongly recommend that required parenting classes be required for all youth arrested—for the parents of all youth arrested for any crime, because all crime is—almost all crimes have some sort of drug element in them.

I recommend that after-school programs for middle school and high school students. Both parents are usually working, they have got to have something between the time they get out of school and the time parents can either pick them up or get them home, to keep them busy. Keeping them busy will help keep them out of drugs.

An intensive program at the middle school level on self-awareness, improving self-esteem, problem-solving techniques and why it is necessary to have coping skills. This program can encourage a positive self-image for these kids and you have got to get in there and work very hard with the middle school kids so that they will get the message.

I would strongly recommend increased training for all middle school and high school teachers on identifying at-risk students and how to deal with them. I do not believe there is enough of this.

I would strongly recommend that we revitalize the old neighborhood watch program to encourage neighbors to help neighbors by reporting crime and drug abuse. Where possible, the neighborhood groups may be able to arrange—and this is a new term—a child watch program, to supervise kids who are home after school while parents work. To encourage mothers to stay home with their kids may be an ideal, but it is not realistic in today's economic world.

I would strongly recommend that we increase the consistent prosecution of sanctions against anyone convicted with any crime. Most crimes again, as I said, are committed by drug users.

I would strongly recommend that we revise the juvenile laws where they need to be revised, not only at the State level, but also at the Federal level, so that parents can be responsible to enforce firm, fair and consistent discipline and without living in fear of their kids' reactions or HRS' retaliation. And I do not mean that

as a slam against HRS, I have worked with them for years and years and years and I have good cooperation with them. But there are times when something happens.

I think another thing that we need to really work on is what are the community standards, because that is what this group is going to have to work on. You have gotten us started, you have called the attention, now we have to pick up the ball and run with it.

I would strongly recommend that the schools should be unrelenting in making sure that parents are kept informed of their child's activities, both positive and negative. If it means seeing parents at night, so be it.

I would strongly recommend that we change the juvenile laws so that running away is a misdemeanor. This will help police officers get kids in the system so they can get some help. Because unfortunately, many times they do not get help until they get into the system.

I would also even suggest that stealing a car is changed in the category. It used to be a felony for anyone to steal a car. But that has changed, now—and correct me if I am wrong—if it is a family car, it is not considered a felony. Is that correct? Yes. And that is a shame. So it is kind of like, so, it is your mother's car.

I think perhaps we have met the enemy, and I think they are us. It is time to decide what we are going to do.

Thank you for the forum.

Mr. MICA. Thank you and thank you for your suggestions. [Applause.]

Our time is about out. We wanted to be fair to everyone. We have a couple of minutes and I see Barbara Kuhn, did you want to say anything?

Ms. KUHN. Thank you. I am the former chairman of the school board. Could I defer to a student of mine at FBC, who is working on a second story on this article?

Mr. MICA. Yes. And we do have several minutes left.

Mr. ZELIFF. You have 3 minutes left.

Mr. MICA. Would you like to be our last witness?

Ms. REDWITZ. Good afternoon. My name is Doris Redwitz.

What can we do now as a community to prevent the drugs?

Mr. MICA. Well, the reason that we brought this panel together is to see what we could also do at the Federal level. I think we are bringing back some very good recommendations, I think we need to look at some of the laws at the Federal level that allow schools and parents to deal with some of the problems.

I think as a community, I believe that we should adopt a zero tolerance program. I think it is very hard—I mean I heard some things here today that are amazing. I know some of the people who are involved and this is not just an inner city program, it is going to take everybody. It is going to take parents—I think maybe we have done some things in this last Congress that will help address the problems, some of the problems, some of the welfare reform, helping with some of the day care, because we do live in a different society. There are a lot of single parents out there. But I think it is going to take education, it is going to take treatment. I am glad to hear more about the different programs and the success rates. We are going to have to look at some partnerships too. I think peo-

ple made some very good points about how we need to be supporting some partnerships.

So it is a whole range of activities and we cannot let up on any of them. But as a community, I think we are going to have to do that.

The other thing too is it may take the business community too to get involved in this. We need to make public awareness, not just the hearing last week and this hearing, but public awareness and parental awareness and others getting them involved in this.

Mr. ZELIFF. Would you yield for just a second?

Mr. MICA. Yes.

Mr. ZELIFF. I think from my observation here is that you have got enough people, not only just the ones that stayed around for the whole hearing, but those that were here in the beginning as well. You have got a core of people that would be an excellent group to get started with. And if this was videotaped, you could almost—there is so much good stuff that came out of this hearing today, that you could use it to get others to join you and make sure that all the groups are represented and find somebody that wants to lead the group and follow up. You know, throughout this whole thing, we have got to follow up some things on some laws and juvenile justice system and a lot of that. But the basic decision that needs to be made is what do you as a community want to do, where do you go from here. And that is the only way—the Government is not going to do it. I have got to do it in my town, I have got to do it with my kids and my grandchildren and my neighbors and my kids down the street, but you have got to do it here and what do you guys want to do. Do you guys really want to take this another step further. If you will, and those kids back there and those young people that testified and had the courage to do that and are still here, they are some of the best talent you have in terms of really getting this message out.

Ms. REDWITZ. Thank you.

Mr. MICA. Thank you. Now I understand that we had two other individuals that wanted to get some quick remarks in.

Mr. ZELIFF. They get a minute each.

Mr. MICA. Just a minute or two each. If you would identify yourself, sir, for the record.

STATEMENT OF PAT LARKIN

Mr. LARKIN. My name is Pat Larkin and I have a son who is an addict and alcoholic. I will be only a minute and if I go over it, turn this thing off.

I can tell you as a father of three boys that I had two other boys that dabbled in drugs and alcohol. Somehow they outgrew it. My youngest son had an addictive personality and when he started, he had a problem. And I think that is what needs to be addressed somewhere along the line, is that in a lot of cases, or most cases, the peer pressure is so strong today that these children do experiment, and I want to say almost all of them. But at parties, that is pretty close to true. If you have a child there who has an addictive personality and he takes that first little puff of marijuana and this is the real problem. I can say that from what I know and from what my son has told me, it is so easy to get that, it is easier than

alcohol, it is easier than anything else. And the supply and demand was a big feature for him.

As far as the programs are concerned, when I told him he had a 30-day program to go to, he said that is easy, dad, I will do it. When I put him in a long-term program, he had a realization he was going to get fixed, and he went to the SAFE program and he made it.

Thank you very much.

Mr. MICA. Thank you. [Applause.]

We had one other, our final witness. If you could identify yourself, sir.

STATEMENT OF SELDON HENRY

Mr. HENRY. Yes, sir. I am Seldon Henry.

Mr. MICA. You are recognized.

Mr. HENRY. Thank you, sir; 3 minutes, 2 minutes.

Your committee has such an awesome responsibility, given the nature of Americans' morals today. I hope that when you go back to Washington, that you will realize that, or remember that this war on drugs, drugs are a very bad thing, is also killing thousands or tens of thousands of Americans.

When I was in school, I was harassed by the school teachers, principals because I chose to associate with all the people in the school instead of just a cliché or two clichés. I hung out with the drug dealers or traffickers, with the cheerleaders, the preppies. I have walked through Harlem, I have lived next to a billionaire and I have been across this country and back. I have walked through so much blood or seen so many people die over drugs and related issues that I can see somebody killed in front of me and go have breakfast and it does not affect me any more.

My father is an educator, retired to Ponte Vedra, right on the beach, beautiful, \$900,000 houses. Just up the street, people were Uzi'd to death in their cars for their pocket change so somebody could go out and get a hit of crack. If it is that bad, give it up please. My neighbors and my brothers and my sisters are being killed, slaughtered and it is just not worth it.

Thank you.

Mr. MICA. I thank you for your comments and your testimony. Kind of an apt closing.

I want to thank the chairman and my fellow subcommittee members and committee members for coming to my community to hear this, and you hear it is ravaging our community.

I just might say to the lady who asked about what we are doing too, that as part of what Chairman Zeliff did when he took this over, I remember going to him and he saying well—when he initially took this, he said, well we can just get the drug czar, we can get someone to take action. And then as he took the chairmanship, he found that the jurisdiction was through dozens of agencies and that it takes many aspects of and activities of the legislative branch, Congress, to get things back on track. I will say to his compliment, also Speaker Gingrich, that he appointed Denny Hastert, who is the deputy whip, about third in command, to work with our subcommittee in this effort. And we went down every one of the programs and we made sure that any program that was cut in

1993, 1994, 1995, under the last Congress, we tried to make sure that we had adequate funding. Now what we need to do is make sure that the funds are properly expended on the most important programs and successful programs and then also examine what other missing links in the Federal chain of command are missing. And if it takes judicial reforms like we heard today, we may need to do those things.

So I want to thank the community for coming out. I want to thank my chairman for coming to our community, and I turn the Chair back over to you. Thank you, sir.

Mr. ZELIFF. Thank you again for your leadership and your commitment.

I just have to tell you that I am leaving the Congress after 6 years and going back into the private sector. I do not know of anything in my life that I have done that has been more productive. I think, than to get our Nation refocused, along with others, and John has made a major commitment there.

The job is just beginning. Two years ago, nobody, nobody was talking about this thing. It was just going down the tubes. And when we go out and we visit people on the front lines and people who put their lives on the line and they are working with very limited resources, we can do better. We can do so much better and what you heard today, I mean I wish we had a chance to videotape this and bring this back and show it to—almost required for every parent to see, because we have got to wake up. I guess our message—I did a thing on CNN the other day just before our 6 hour hearing, and you know, Charles Biernbaum said, any last comments and I just said “Wake up, America.” If we do not, we go down the tubes.

My son is in the Marine Corps, he got a Purple Heart in Somalia, he is involved in Haiti, we are involved in all these other efforts, Bosnia and all this. What a waste compared to what we really should be fighting. We should be fighting to preserve the future of our country and our kids and the next generation and all of us.

You heard it today. This is a report from the front lines here in central Florida. The hearing is now adjourned. Thank you all very much.

[Whereupon, at 2 p.m., the subcommittee was adjourned.]

