

Throughout his career, Mr. Collins exemplified skill in his profession and dedication to public service, and his contributions have made Government printing more cost-effective, efficient, and environmentally sound. I join with the employees of the Government Printing Office in expressing my sincere condolences to Mr. Collins' wife Eleanor and his family.●

APPOINTMENTS BY THE VICE PRESIDENT

The PRESIDING OFFICER. The Chair, on behalf of the Vice President, pursuant to 22 United States Code 276h-276k, as amended, appoints the Senator from Utah [Mr. HATCH], the Senator from Alabama [Mr. SHELBY], and the Senator from Arizona [Mr. MCCAIN] as members of the Senate Delegation to the Mexico-United States Inter-parliamentary Group meeting to be held in Santa Fe, NM, May 16-18, 1997.

ORDERS FOR FRIDAY, MAY 16, 1997

Mr. GRASSLEY. Mr. President, on behalf of the leader, I ask unanimous consent that when the Senate completes its business today it stand in adjournment until the hour of 10 a.m., on Friday, May 16. I further ask unanimous consent that on Friday, immediately following the prayer, the routine requests through the morning hour be granted, and the Senate then begin a period of morning business with Senators permitted to speak for up to 5 minutes each with the following exceptions: Senator COCHRAN 15 minutes, Senator ASHCROFT or his designee from 10:30 a.m. until 11:30 a.m., Senator DASCHLE or his designee for 60 minutes, Senator COVERDELL for 10 minutes, Senator FEINSTEIN for 10 minutes, Senator SNOWE for 15 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

PROGRAM

Mr. GRASSLEY. Mr. President, on behalf of the leader, for the information for all Senators, tomorrow there will be a period of morning business to allow a number of Senators time to speak. Therefore, no rollcall votes will be conducted during Friday's session of the Senate.

On Monday, we hope to begin consideration of the first concurrent budget resolution by possibly beginning debate. If any votes are ordered on the resolution, votes would be postponed to occur not before 5 p.m. on Monday.

In addition, early next week the Senate could return to the consideration of H.R. 1122, the partial-birth abortion bill, or S. 4, the Family Friendly Workplace Act. As always, Senators will be notified as soon as any agreements are reached.

KIDS III

Mr. GRASSLEY. Mr. President, I have spoken many times in recent

months on my concerns for the growing threat to our kids from drug use. All of our early warning systems are sounding the alarm. All our major national reviews of drug trends indicate the emerging pattern. What they show is that month by month, day by day, minute by minute, drug use among our young people is on the rise. They also make clear that attitudes among young people about the dangers of drugs are changing—for the worse. More and more kids, some as young as 10 and 11, are seeing drug use as OK, as no big deal.

Let's stop for a minute and reflect on just what these facts mean. For those of us who remember how the last drug epidemic in this country got started, the present trend is truly disturbing. Think for a moment on what happened and how it happened. In the late 1970's and early 1980's, we saw the streets of our inner cities become battlegrounds. We saw many of our communities, our schools our public and private spaces overwhelmed with violence, addiction, and abuse. We saw families destroyed and individual lives shattered. The problem became so serious that the public demanded action. The Congress responded with comprehensive drug legislation in 1986 and 1988. We supported massive increases in public funding to fight back. We still do. To the tune of some \$16 billion annually at the Federal level alone.

That problem, the one we spend all this money on, began with our kids. It began because we as a country allowed people to sell us on the idea that drugs were OK. We bought the idea that individuals could use dangerous drugs responsibly.

The consequence was the drug epidemic of the 1970's and 1980's. An epidemic whose long-term effects we are still coping with. Let's remind ourselves who the principal audience was that was listening to all the talk about responsible drug use. It was kids. It was the baby boom generation in their teens who heard the message and took it to heart. It was a generation of young people who bought the message. It did not take them long to translate the idea that they could use drugs responsibly into the notion that they had a responsibility to use drugs.

As a result, today, a large percentage of baby boomers have tried drugs. Many of those are today's drug addicts and dealers. Many of them are today's parents who feel disarmed in talking to their own kids about drug use.

Today, we are on the verge of making the same mistake again. After years of progress in reducing drug use among kids, it is this very population that is at risk. Once again, we are seeing the glorification of drug use. Increasingly the music our kids are listening to conveys a drugs-are-okay message. The normalization of drug use is creeping back into movies, advertising, and TV. And who do you think is listening? The answer is in the numbers.

Teenage drug use is now in its fifth year of increases. And the age of onset

of use is dropping. Our last epidemic started with 16 and 17 year olds. Today's "at-risk" population, the age of onset, is 12 and 13 year olds.

One of the major reasons for this is that we have lost our message. We have in recent years been inconsistent. And, we are seeing a more sophisticated effort by some to once again promote the idea that drug use is okay. And they are targeting our young people.

Nothing brings this home better than an item in the Washington Post on 27 April.

The Sunday's Outlook section had a piece by a young woman in a New York City high school. She wrote about a recent drug lecture in her health science class. The article, entitled "Lessons You Didn't Mean to Teach Us," is arresting. I invite all my colleagues to read the piece. I ask unanimous consent that the article be printed in the RECORD at the conclusion or of my remarks.

The Article official without objection, it is so ordered.

(See Exhibit.)

Mr. GRASSLEY. The article is based on a letter this young woman wrote to her teacher. She felt compelled to write following a lecture to her class by what was billed as a former drug addict. As she says, she expected to hear about the dangers of drug use. What she and the class got, however, was very different.

In this case, a very clean-cut looking young man, identified as a former addict, spoke. While the teacher was present, the speaker evidently did talk about the problems of his personal drug use. Once the teacher left the room, though, the message changed. Instead of an anti-message, the lecture became a mini-course on drugs, drug use, and how to make a killing selling drugs. Among the things the speaker passed on was a recipe for a stronger form of cocaine. The speaker extolled the virtues of being stoned. He "raved" about the incredible amounts of money to be made peddling drugs. He left the class with the advice that since no one could drug test for alcohol, that it was okay to drink.

The teacher in this particular class, based on negative feedback, has decided not to leave classes alone with future guest speakers. Unfortunately, as the young woman who wrote about this incident notes, the damage is done.

Mr. President, if you, or any of my colleagues, have not yet read this letter, I encourage you to do so. The story that it tells is very poignant, and very disturbing. We know that there is a growing acceptance of drug use among our children. We can see the reports and the story they tell. But what we don't always appreciate is why.

As this letter makes clear, the drugs-are-okay message is back. I would hope that this lecture by this individual was an accident and a one-time occurrence. But I am concerned that it is representative of a growing effort to influence the young. His talk apparently

had everything but free samples. As the author of this letter tells us, "... the way in which he spoke of drugs made them seem appealing and beneficial." This type of message is not isolated.

From music to videos to movies and advertisement, we are seeing efforts once again to glamorize drugs. We have seen initiatives in several states to push drug legalization under various disguises. Just recently a micro-brewery in Maryland has begun to market a beer made with marijuana seeds under the title "Hempen."

Not too long ago some of our major fashion industry folks began to use models with the "Heroin Chic" look. We are seeing opinion leaders and members of our cultural elite portray drug use as simply a personal choice that is harmless and benign. Many of these individuals act as if the only issue is for responsible adults to decide for themselves. They speak as if it is only adults that we need to think about. This, however, is not in fact the case.

If you do not believe this, talk to parents. Talk to teachers. Talk to the health and law enforcement professionals who daily see the consequences. Visit the emergency room of your local hospital and talk to the doctors and nurses who see every day the effects of drug use.

Go to a treatment center and sit and talk to some of the patients, listen to their stories of how drug use has destroyed their lives, their families.

But most important, listen to what kids are telling us about what is happening in their schools. To their friends. Ask them where they get their information, and who they listen to. If this letter tells us anything, it is that we must listen to our kids, if for no other reason so we know whom they are listening to. Above all, we need to do a better job at delivering a clear, consistent, no-use message to our kids.

As we move into the appropriations cycle, we need to keep that need firmly in mind. We cannot repeat the mistake that we made in the 1960's and 1970's. Last time we had a drug epidemic we could claim ignorance. We don't have any excuses if we let it happen again.

EXHIBIT 1

LESSONS YOU DIDN'T MEAN TO TEACH US

After a former drug abuser came to speak to four 10th-grade health classes at a suburban New York City high school, 16-year-old Victoria Slade sent this letter anonymously to her teacher. The teacher subsequently told the classes that, because of negative feedback, she would not leave guest speakers alone with students. Slade has since told the teacher that the letter was from her. It is being reprinted with Slade's permission.

I am a student in one of your health classes this semester. As a transfer student from a very small private school, I am daily finding out shocking things about the various actions and addictions of my peers. I am currently drug-free, alcohol-free, pot-free, smoke-free, etc. The solid background I received from my previous school ensures that I will remain thus, but I am extremely concerned about my classmates, many of whom

I fear are already trying drugs and alcohol. For this reason, I was glad when you announced that the surprise guest speaker was someone who had been addicted to cocaine and marijuana. I expected that seeing what happens to you when you get into drugs would make many students reconsider what they were doing. However, I was sadly mistaken in this assumption.

The guest speaker entered as a well-dressed, good-looking individual. He was relatively well-spoken and complemented his serious discussion with occasional light humor. He was described as a good student who got into trouble and was saved by his loving teachers. In our eyes, he became the victim of a corrupt police force and government. Soon forgotten was the fact that he got himself into this trouble through the sale and consumption of illegal substances. While you were present in the room, the young man acted in accordance with your wishes: we could relate to him, and so we listened attentively to the important lesson he was teaching us.

However, once you left the room, this tragic figure opened with the line: "So, do you guys have any questions? I can tell you anything you want to know about drugs." He continued in the same manner, describing the different effects of different drugs: which were best, which made you able to concentrate better, how cocaine kept him awake so he could study. When asked if you could remember what you studied the next day, he responded with an emphatic affirmative. He mentioned that if you studied while under the influence of marijuana, you wouldn't do well on the test unless you were high again while taking it, in which case you would perform to the best of your ability. His explanation for this phenomenon was that you are on a different level of consciousness while high. Furthermore, he assured us that being high on marijuana has no effect on your ability to drive, as your reaction time is not altered by the drug. He described the various types of Ecstasy, explaining that he took the 70-percent drug-content one once and became very ill. However, he soon canceled this out by describing the type with 30 percent drug content as "nice." Also, he gave us a recipe for a different, stronger form of cocaine.

The pleasing physical effect of drugs was not the sole topic of conversation. At one point, someone asked him why he would get into drugs if he was doing well in school and getting good grades. This question led him into a 10-minute exaltation of selling drugs for a living. He raved about the incredible amounts of money he made, mentioning more than twice the fact that he had four nice cars. We were all impressed when he said that he made over \$500,000 in just four years of selling drugs. I'm sure that those of us who work were thinking contendedly—of our five-dollar-an-hour jobs cleaning the toilets and places like McDonald's and Boston Market.

Our new role model summed up his report on the world of drugs by telling us that he was still smoking weed until just a few days before. He said he wanted to smoke as much as he could before he had to be clean for the Navy drug test. Also, he informed us that if he had not been caught, he would definitely still be using and dealing drugs now. One of his final bits of advice was that they couldn't screen you for alcohol, so it is okay to drink.

There were many other appalling statements made by this gentleman which quite disturbed me. As I mentioned earlier, many students at this school are into drugs and alcohol. I think that the idea behind this visit was good: We could live vicariously through this young man, whose life is (or should be) all but destroyed because of drugs. However,

the way in which he spoke of drugs made them seem appealing and beneficial. It upsets me to think of how many classes of impressionable youths were influenced by this man—how many minds were made up by his wonderful tale. I hope that you do not promote future visits with this particular guest speaker and thank you for your attention.

Sincerely,

A Concerned Student.

THE CERTIFICATION PROCESS I

Mr. GRASSLEY. Mr. President, the House is in the process of taking steps to alter fundamentally the annual certification process for drugs. In addition, there have been a number of statements in the press and elsewhere by Members of Congress and others on problems with certification. Individuals in the Administration, including the Drug Czar, have also broached the idea of change. I agree that some form of strengthening of the certification process is needed. Indeed, I offered my "Three Strikes and you're out" bill last year with the idea of making the certification process tougher. I also suggested some fixes this last February in the debate over Mexico. But I also think that it is important to take a hard look at what the certification process is before we tinker with it.

The recent discussion of the certification process is born out of frustration over the decision on Mexico. I share some of these concerns and the frustration. But the present effort is little more than an attempt to water down congressional oversight of US narcotics policy. It does so in the name of flexibility. It does so so that we won't be too hard on our international partners. I believe this approach is wrong. And I will vigorously oppose efforts to short change the public's interest in upholding tough standards for certification.

Since much of the discussion in recent weeks on certification is based on a series of myths about it, I think it is useful to review some of these misconceptions.

The principal myth is that the certification process unfairly brands other countries for drug supply problems. It also maintains that this is unfair while the United States does nothing to deal with its demand problem.

There are several things wrong with this view. First, even if the United States did nothing about demand, we have a right and an obligation to do something about supply. This is especially true since most of the dangerous, illegal drugs used in this country are produced overseas. These drugs are then smuggled into the United States, often with the collusion of public officials in other countries.

Our right to stop this flow stems from the fact that we and virtually every other country in the world are signatories of international agreements. These agreements bind us and them to action to stop drug production, trafficking, and money laundering. Moreover, most of these same