

DRAFT

STATEMENT BY

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(MANPOWER AND RESERVE AFFAIRS)

BEFORE THE

SPECIAL SUBCOMMITTEE TO INVESTIGATE
ALLEGED DRUG ABUSE BY MEMBERS OF THE ARMED FORCES

COMMITTEE ON ARMED SERVICES

HOUSE OF REPRESENTATIVES

14 OCTOBER

~~1 OCTOBER 1970~~

Mr. Chairman:

I am Arthur W. Allen, Jr., Deputy to the Assistant Secretary of the Army for Manpower and Reserve Affairs. I am also a member of the Department of Defense Drug Abuse Control Committee chaired by Mr. Frank Bartimo who has already testified before this Subcommittee.

I am accompanied by Major General Franklin M. Davis, Jr., Director of Military Personnel Policies, Office of the Deputy Chief of Personnel and Colonel Stewart L. Baker, Jr., Office of the Surgeon General of the Army.

My purpose is to discuss the problems of drug abuse as they apply to the Army. My statement is intended to encompass the areas of interest which were identified in the Chairman's letter to the Secretary of the Army on 28 August 1970.

Previous testimony has revealed some of the difficulties we encounter when we attempt to measure precisely the extent of drug abuse within the Army. Our most supportable statistical measurements are necessarily based primarily upon Criminal Investigation files. To be more direct, we measure the number of soldiers who were investigated for drug offenses. These statistical rates for the years 1968, 1969 and the first half of 1970 are attached to and made a part of this statement. We recognize that these statistics do not reflect the total number of drug abusers in the Army because they do not include the instances of abuse

which go undetected even in the controlled environment of the military service. Nevertheless they do provide us with insights into both magnitude and trend.

As to magnitude:

- o The greatest percentage of detected drug abusers in the Army consists of marijuana offenders.
- o There is a higher incidence of detected abuse in Vietnam than in other areas.
- o Hard narcotics violations constitute a relatively small number of Army offenses although they are a growing and difficult-to-handle problem.

The trends are not encouraging:

- o The number of soldiers investigated has increased each year since 1965.
- o Rates of abuse of the various drugs have increased significantly since 1968.

Undoubtedly increased command awareness and concern coupled with heightened investigative effort account for some portion of the increase in detection. In 1967 4.8% of the cases received at the investigative repository for file were drug cases. The percentage rose to 27.4 in 1968 and to 37.4 in 1969. While it is not unusual that the more one looks for drugs, the more he will find, frequency of abuse has undoubtedly increased, as it

has with other elements of society, and constitutes a growing problem which we must view with serious concern.

Recognizing that available Army statistics reflect only those individuals who are investigated for abusing drugs some commands have conducted anonymous questionnaire surveys in an effort to estimate the number of personnel who have used drugs illegally.

A survey of prisoners at the Long Binh Stockade in June 1967 found that of prisoners who had never been convicted of a drug offense, 63% admitted to use of marijuana at least once, the majority before arrival in Vietnam. Eighty percent of prisoners confined for marijuana offenses had first used it in civilian life. I have cited this study only because it has been referred to in other inquiries. The population studied was not representative of any military unit.

Another survey conducted in Vietnam over a three month period during the fall of 1967, reflected that 31.7% of the questionnaire respondents had used marijuana sometime during their life time. It is interesting to note that a smaller percentage -- 28.9% -- admitted using marijuana while in Vietnam. The sampling represented nearly 4% of the men leaving the two southern Corps areas for return to the United States during the period.

From January through April 1969, a team of three researchers conducted a survey of over 5,000 enlisted men at Fort Sill, Oklahoma. 29% of the respondents admitted drug use at some time during their life time. Of the admitted users, 83% used marijuana and 5% used heroin.

The most recent survey in Vietnam was conducted in the 173d Airborne Brigade in March 1970. 1064 soldiers completed questionnaires, and 68% of the acknowledged use of marijuana at some time during their life time. Of acknowledged users 54% had used it once or twice but never again. Questions as to the frequency of use were also asked. It was found that 31% of the sampling used marijuana at least once a week. This 31% was about equally divided as to frequency, with slightly over half categorized as regular users -- more than four times a week -- and the remainder as irregular users -- not more than four times a week. Nearly 22% of the total sampling first tried marijuana in Vietnam. Of the other illegal drugs, only opium appeared as a frequent drug of abuse. 63 soldiers -- approximately 6% of the sampling -- admitted that they were regular users of opium. A qualifying factor in considering this survey is the fact that at the time of the survey, the Brigade was primarily assigned to pacification-type duty, which means that the soldiers were broken down into small groups and were working closely with Vietnamese natives. Thus, control was decentralized and the availability of drugs can be assumed to have been high.

In a survey conducted at Fort Carson, Colorado, during the spring of this year, 684 individuals completed questionnaires. It was found that 20% of the respondents were using some drugs more than once a week, and an

additional 5.6% were using drugs more than once a month. The survey showed that Vietnam returnees at Fort Carson did not exhibit a significantly different degree of drug abuse than did other members of the military surveyed.

In evaluating the validity of these surveys, we recognize that it is extremely difficult to obtain reliable information about such a sensitive subject as drug abuse. The surveys do serve to provide indications of the extent of drug abuse and trends in the rate of abuse.

Recognizing the lack of precision in our data, the probable understatement derived from reliance on criminal investigation files and the likely overstatement inherent in the application of anonymous sample survey to total Army population because of the biased nature of the samples we nevertheless conclude that drug abuse has increased in the Army. Reasons for the increase are easy to discern:

- o The civilian sector of society is undergoing a drug revolution.
- o Despite some pronouncements to the contrary, marijuana is looked upon by many of young as no more harmful than alcohol.
- o Criminal sanction may invite rather than deter usage for those seeking a thrill.
- o Many of those who use marijuana in the Army have used it previously.
- o The supply of marijuana and opium in Vietnam and elsewhere, despite our best efforts, has not been choked off.

It is important to state at this point that although the use of marijuana and other drugs has increased it is not known to have interfered with, nor do we expect it to interfere with, mission effectiveness of our units. To the contrary, general observations by medical and other personnel in Vietnam suggest that marijuana users refrain from smoking on offensive combat operations. Incidents believed to be caused by drug abuse are essentially individual type actions such as refusals to obey orders, rather than group offenses.

None of the preceding should be interpreted as minimizing the problems of drug abuse in the Army or the Army's concern over them. We are disturbed by the data on the frequency of marijuana use and we recognize the potentially debilitating effects of its increase. While hard narcotic violations constitute a relatively small number of Army drug offenses, we are deeply concerned with the growth of hard and dangerous drug use and with the disposal of the offenders.

All drug abuse offenses are felony type crimes but Army policy has been neither static nor rigid in the face of the growing drug abuse threat. While Army treatment of offenders had traditionally been punitive, command interest in drug education as a preventive measure began in early 1967. Material developed by the Office of Information for the Armed Forces has been widely circulated to enable commanders to identify drug users and their problems and to inform the individual

soldier of the dangers of drug abuse. In addition, command letters in April 1968 and July 1969 announced policies on the necessity of incorporating drug abuse material in existing programs, as well as requirements for initial orientations and pre-overseas departure training, in consonance with the Department of Defense Directive. In December 1969 and January of this year, all major commanders were queried as to the content and conduct of their programs, and selected commands were required to provide copies of lesson plans for review. It is evident that commanders throughout the Army are expending great efforts in educating their troops about the dangers of drug abuse. Additional educational material has been and will continue to be provided to senior commanders to enable them to cope with the drug abuse problem in their commands.

In 1969, all Services started to report, on a semi-annual basis, the disciplinary action taken against drug offenders. Three reports have been rendered thus far. The trend of referrals to nonjudicial punishment has been steadily up in the three reporting periods with a total of 1734 during the January through June 1970 period, 1166 during the July through December 1969 period, and 876 during the January through June 1969 period. Court-martial referrals have fluctuated but remained largely static despite the increased number of offenders. Thus, the trend appears to be away from the harsher disciplinary actions of courts-martial, and towards

the nonjudicial punishment for drug users.

In this regard, I would like to briefly present our viewpoint on what is called administrative separation for drug abusers. Drug abusers are separated administratively from the Army when commanders determine that the individual is unfit for continued Army service. The Army tries to avoid using this type of separation except in extreme cases. Statistically, the trend of such separations is up, although the numbers of such separations are very small. During the past fiscal year which ended on 30 June, 369 soldiers were separated for unfitness because of drug involvement. This compares to 217 during Fiscal Year 1969 and 144 during Fiscal Year 1968. Approximately 70% of these separatees received other than honorable discharges.

Indicative of the enlightened trend in drug abuse control is an experimental rehabilitation program -- called Operation Awareness -- which was started at Fort Bragg in the spring of this year. I would like to emphasize the fact that this program is experimental and that it is still too early to evaluate its effectiveness or the desirability of the Army assuming a role of rehabilitation of drug afflicted soldiers. At Fort Bragg, a rehabilitation ward has been set aside with a capacity of twelve inpatient drug-dependent soldiers who voluntarily undergo treatment with the hope that some or all of them can be returned to productive duty. Because of the high rate of

recidivism and the difficulty in weaning individuals from the rehabilitation environment which have been experienced in similar efforts in the civilian community, the Fort Bragg experiment is being monitored with great interest. We believe, however, that long-range rehabilitative efforts are best handled by civilian agencies.

Recognizing that commanders have a need for more guidance on ways to deal with drug abuse, the Department of the Army undertook development of such guidance in the form of an Army regulation in March of this year. A copy of the final draft of the regulation is attached to and made a part of this statement. It is expected that the regulation will be published on or about 15 October 1970. This regulation includes the key portions of the recently developed Department of Defense directive which Mr. Bartimo has already mentioned. In writing the Army regulation, emphasis was placed on striking a balance between the enforcement, purely legal aspects of drug abuse and the more humanistic, individual aspects. The key policy statement in the regulation stresses that the Department of the Army will continue efforts to prevent and eliminate drug abuse, while attempting for the first time to restore and rehabilitate soldiers who express a desire and a willingness to undergo such restoration. The rehabilitation portion is designed to help those soldiers using drugs before we catch them and are embarked on a rather costly investigative, judicial, and

confinement procedure.

The concept is patterned after a program currently in effect in the U. S. Army in Vietnam. Under this concept, soldiers can turn themselves in for help without fear of prosecution, and receive medical assistance, counseling, education, and where feasible, designation of another soldier as a "buddy" to help the afflicted soldier in his goal of abstinence. It is hoped that this idea will be well received by individual soldiers, and that they will recognize that they have a second chance to change their pattern of drug abuse if they are so motivated. For the most part, these are individuals who are presently using drugs in an "underground" fashion, so to speak. These individuals can contribute to the spread of drug abuse through their influence on the undecided and the uninitiated.

Education requirements are increased in the regulation, by requiring as a minimum, an initial orientation as soon as possible after entry into the Army, annual refresher training, and special area-oriented briefings just before departing for an overseas assignment and shortly after arriving in the overseas area.

I believe that the policy statement in this regulation is worthy of your attention as an accurate description of the Department of the Army's efforts and attitudes toward the acknowledged problem of drug abuse.

- a. It is the policy of the Department of the Army to prevent

and eliminate drug abuse and to attempt to restore and rehabilitate members who evidence a desire and willingness to undergo such restoration. The illegal or improper use of drugs by a member of the Army may have a seriously damaging effect on his health and mind, may jeopardize his safety and the safety of others, and may lead to criminal prosecution and discharge under other than honorable conditions, and is altogether incompatible with military service or subsequent civilian pursuits. The Department of the Army acknowledges a particular responsibility for counseling and protecting its members against drug abuse and for disciplining members who use or promote the use of drugs in an illegal or improper manner.

b. Appropriate disciplinary and administrative actions in cases of drug abuse will be dependent upon all the facts and circumstances of each case and will include consideration of whether the individual involved is a drug experimenter, drug user, drug addict, supplier, or casual supplier (as defined herein).

I think it clear that the Army in conjunction with the Department of Defense Drug Abuse Control Committee has acted rapidly and vigorously to control the drug abuse problem.

o The problem of controlling drug abuse is not insoluble but neither is it simple.

o The Army recognizes the delicate balance which must be maintained between concern for the individual soldier who mistakenly

abuses drugs and the need to maintain a disciplined effective fighting force.

- o The program that we have outlined above attempts to achieve this delicate balance by demonstrating a concern for the individual without sacrificing the needs of the Army or this nation.

DRUG ABUSE STATISTICS

Comparative rates per 1,000 average assigned strength of personnel investigated for drug offenses:

MARIJUANA	CY 68	CY 69	CY 70*
Vietnam	8.88	15.63	28.20
Europe	4.23	7.35	8.94
CONUS	3.62	5.38	9.22
USARPAC(less USARV)	9.61	12.31	23.38
Worldwide	5.01	9.08	15.14

HARD NARCOTICS (Opium, Heroin, Morphine, Cocaine)			
Vietnam	.35	.79	1.94
Europe	.01	.31	.24
CONUS	.34	.73	2.22
USARPAC(less USARV)	.68	.76	.94
Worldwide	.29	.69	1.78

DANGEROUS DRUGS (LSD, Depressants, Stimulants, Hallucinogens)			
Vietnam	.12	1.76	3.86
Europe	.06	.18	.44
CONUS	.26	.83	2.16
USARPAC(less USARV)	.67	1.20	4.56
Worldwide	.21	1.02	2.62

*Projection based on investigations received at Fort Holabird through 30 Jun 70.

3.
ARMY REGULATION

No. 600-_____

*AR 600-_____

HEADQUARTERS
DEPARTMENT OF THE ARMY
WASHINGTON, D.C., (Date) _____

PERSONNEL - GENERAL

14 SEP 1970

DRUG ABUSE PREVENTION AND CONTROL

Effective 1 December 1970

This regulation announces Department of the Army policies for reducing drug abuse by members of the Army on active duty and members of the Reserve Forces, and assigns responsibilities for an aggressive preventive program and procedures for processing drug abusers. It specifically prohibits the wrongful use, possession, sale, manufacturing, compounding or transfer of narcotics, marijuana, and certain depressant, stimulant, and hallucinogenic drugs by persons subject to the Uniform Code of Military Justice or to separation under applicable Reserve Component directives. Any person subject to this regulation violating the prohibitions set forth herein shall be subject to appropriate punitive action. This regulation implements DoD Directive 1300.11. Local implementation of this regulation will be accomplished as necessary. Local limited supplementation of this regulation is permitted, but is not required. If supplements are issued, Army Staff agencies and major Army commands will furnish one copy of each to the Deputy Chief of Staff for Personnel; other commands will furnish one copy of each to the next higher headquarters.

*This regulation supersedes DA letters AGAM-P(M) (9 Apr 68) PMGS-C, 9 Apr 68 and AGSC-R(M) (9 Apr 68) PMGS-C, 1 Jul 69, subjects: Illegal or Improper Use of Drugs, paragraph 18.1, Change 4, AR 600-50.

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SECTION I. GENERAL

1. Purpose. This regulation announces Department of the Army policy on drug abuse and assigns responsibilities for prevention and control of drug abuse and procedures for the processing of drug abusers. In addition, it prohibits the wrongful use, possession, sale, or transfer of certain depressant, stimulant, and hallucinogenic drugs by persons subject to the Uniform Code of Military Justice or to separation under applicable Reserve Component directives.

2. Explanation of Terms.

a. Narcotics - any opiates, synthetic opiates, or cocaine. Examples are opium, heroin, morphine, codeine, paregoric, dilaudid, meperidine, pethidine and methadone hydrochloride.

b. Marijuana - the intoxicating products of the Indian hemp plant, cannabis sativa, or any synthesis thereof, including hashish. Tetrahydrocannabinol (THC), the active ingredient of marijuana, is a strong hallucinogen with sedative properties.

c. Dangerous Drugs (an administrative label) - those non-narcotic substances which the Attorney General or his designee, after investigation, has found to have, and by regulation designates as having, a potential for abuse because of their depressant or stimulant effect on the central nervous system or their hallucinogenic effect. (See Title 21 of the Code of Federal Regulations.)

d. Drug Abuse - the illegal, wrongful, or improper use of any narcotic substance, marijuana, or other dangerous drug, or the illegal or wrongful possession, sale, transfer, delivery or manufacture of the same. When such drugs have been prescribed by competent medical personnel for medical purposes their proper use by the patient prescribed for is not drug abuse.

e. Drug Abuser - one who has illegally, wrongfully, or improperly used any narcotic substance, marijuana, or dangerous drug, or who has illegally or wrongfully possessed, sold, transferred, delivered or manufactured the same.

(1) Drug Experimenter - one who has illegally, wrongfully, or improperly used any narcotic substance, marijuana or dangerous drug as defined herein not more than a few times for reasons of curiosity, peer pressure or other similar reason. The exact number of usages is not necessarily as important in determining the category of user as is the intent of the user, the circumstances of use, and the psychological makeup of the user. Final determination of the category will be made by the appropriate commander.

(2) Drug User - one who has illegally, wrongfully, or improperly used any narcotic substance, marijuana or dangerous drug as defined herein several times for reasons of a deeper and more continuing nature than those which motivate the drug experimenter. Final determination of the category will be made by the appropriate commander.

(3) Drug Addict - one who exhibits a behavioral pattern of compulsive drug use, characterized by overwhelming involvement with the use of a drug, and the securing of its supply. As the term "drug addict" is used herein, one may or may not be physically dependent on the drug. Rather the term refers in a quantitative sense to the degree to which drug use pervades the total life activity of the user.

f. Supplier - one who furnishes illegally, wrongfully, or improperly any of the proscribed drugs defined herein to another person.

g. Casual Supplier - one who furnishes illegally, wrongfully, or improperly to another person a small amount of any of the proscribed drugs defined herein for the convenience of the user rather than for gain.

3. Policy.

a. It is the policy of the Department of the Army to prevent and eliminate drug abuse and to attempt to restore and rehabilitate members who evidence a desire and willingness to undergo such restoration. The illegal or improper use of drugs by a member of the Army may have a seriously damaging effect on his health and mind, may jeopardize his safety and the safety of others, and may lead to criminal prosecution and discharge under other than honorable conditions, and is altogether

incompatible with military service or subsequent civilian pursuits. The Department of the Army acknowledges a particular responsibility for counseling and protecting its members against drug abuse and for disciplining members who use or promote the use of drugs in an illegal or improper manner.

b. Appropriate disciplinary and administrative actions in cases of drug abuse will be dependent upon all the facts and circumstances of each case and will include consideration of whether the individual involved is a drug experimenter, drug user, drug addict, supplier, or casual supplier (as defined herein).

SECTION II. SPECIFIC GUIDELINES

4. Responsibilities:

a. Major commands. Each commander will provide as a minimum:

(1) Initial orientation for all military personnel currently on duty.

(2) Annual refresher training for all military personnel. Refresher training in Army colleges and schools (less Branch Officer Basic Courses) may be presented as integral parts of related subjects, such as personnel management; training will be designed to assist leaders in coping with their future responsibilities for drug abuse control. Medical officer, judge advocate, and chaplain training programs shall include identification, treatment, discipline (as appropriate), rehabilitation, and counseling of drug abusers.

(3) A special briefing for all military personnel before their departure to and return from overseas areas, and as soon as practicable after arrival in overseas areas.

(4) Dissemination of informational material to military personnel under their command, with supplementary information material disseminated on a more frequent basis in areas where drugs may be illegally obtained with relative ease.

(5) Special attention, particularly in overseas areas, to preventing mailing, shipping, or transporting of drugs illegally by soldiers traveling from one country to another.

(6) Orientation, education, and workshops, as appropriate, to involve civilians employed or residing within the command, to include dependents.

b. Army Training Centers and Branch Officer Basic Courses. Commanders (commandants) will insure that all personnel, whose first duty station is under their command, receive orientation prescribed in paragraph 4a(1) and 4a(3), above.

c. US Army Recruiting Command. The Commanding General will insure that drug users, addicts, and suppliers, as defined herein, are not inducted or recruited into the Army contrary to AR 40-501 and AR 601-270.

d. Installations. Each commander:

(1) Cooperate and coordinate with civil police and other Government agencies in dealing with off-post drug problems that affect the welfare of Army personnel. When actions taken in coordination with the local community fail to achieve the desired results, "off limits" action

(AR 15-3) will be considered. In addition, commanders in overseas areas will inform the appropriate local authorities of all "off limits" actions and will attempt to formulate coordinated law enforcement procedures designed to eliminate sources of illegal drugs. Local authorities, however, should not be requested to enforce "off limits" actions taken by commanders in overseas areas.

(2) When appropriate, develop drug rehabilitation programs in cooperation with suitable private and Government agencies.

(3) Refer incidents of drug abuse requiring investigation or coordination with other investigative agencies to the local Provost Marshal office.

(4) Review the degree of access to classified information that persons involved in drug abuse incidents are authorized, and when appropriate take action under the provisions of AR 604-5.

5. Orientation and Refresher Training. These programs will be designed to:

a. Emphasize the physiological and psychological dangers inherent in the use of drugs. Only factually correct information will be presented.

b. Stress the inconsistency between drug abuse and military responsibility; and the implications of drug abuse in security determinations, administrative separation actions, and possibly upon civilian pursuits where

screening of military records is a determinant for acceptance in education or employment.

c. Accent the moral implications of drug abuse, and the consequent dangers to ethical conduct. Responsibility towards parents, brothers and sisters, wives and other loved ones should be a key part of the moral considerations.

d. Explain the disciplinary actions that may result from drug abuse.

e. Emphasize the importance of promptly reporting to the military police any knowledge of drug trafficking, as a means of protecting the health and welfare of fellow soldiers and of assisting in neutralizing those who sell drugs to members of the Army community.

f. Recognize the necessity for total community involvement in drug abuse control. Consideration must be given to the management of drug abuse as a group challenge which is inadequately met by educating only isolated segments of the total installation or unit environment, since dependents and civilian employees are as vulnerable to the threat of drug abuse as are uniformed personnel. Different education programs for specific audiences within the total community are encouraged, with consideration being given to such factors as age, educational background, responsibilities, type of duties, and previous experience with or knowledge of the drugs of abuse.

g. Take maximum advantage of the manpower resources available to assist in all phases of the drug abuse control program. Ex-drug dependents who are stabilized in their rehabilitation should help in

the education, orientation and rehabilitation aspects of the program, when such help is feasible and effective. Knowledgeable and interested members of the Reserve Forces such as medical doctors, educators and social workers should be used in developing military-civilian drug education programs.

6. Prohibitions and Penalties.

a. Army personnel subject to this regulation will not use, possess, sell, distribute, deliver, process, compound or manufacture any narcotic marijuana, or other dangerous drugs as defined in paragraph 2c above, nor will they introduce any such drug onto an Army installation or other government property except that which has been legally obtained for a purpose or use authorized or accepted by law. Violations of these prohibitions may be prosecuted under Article 92, Uniform Code of Military Justice, or other appropriate articles of the Code, or administrative action may be taken in accordance with applicable directives.

b. The prohibitions in a above, and the possibility of prosecution for their violation, do not preclude disciplinary or other action, when appropriate, for offenses proscribed elsewhere - such as, drunk driving in violation of Article 112, UCMJ, or other violations of Article 134, UCMJ, based upon Federal criminal laws or state laws assimilated under 18 U.S.C. 13.

7. Disposition of Persons Involved in Drug Abuse.

a. The immediate commander will evaluate each person involved in an incident of drug abuse and will determine the appropriate disposition

of his case to include rehabilitative steps under paragraph 8 of this regulation, disciplinary action under the provisions of Article 15, Uniform Code of Military Justice, administrative separation, and trial by court-martial. This regulation does not require that any particular course of action, or any action at all, be initiated with respect to any person. It does require that persons having responsibility for discipline and personnel administration within the Army consider each case on an individual basis. The commander should seek advice from his chaplain, medical officer, and legal officer in cases where he needs help in understanding how to manage the social and individual behavior.

b. Soldiers convicted by court-martial of offenses involving narcotics, marijuana, or other dangerous drugs will be considered for rehabilitation. In determining whether such treatment is appropriate, consideration should be given to all of the circumstances involved. For example, some circumstances to be considered are:

- (1) The number and nature of the offenses and type of drug abuse involved.
- (2) The age and background of the accused.
- (3) His attitude and motivation for further military service.
- (4) The extent to which drug abuse has affected performance of his military duties or the health, welfare, or safety of other persons, if at all.
- (5) His rehabilitative potential. Evaluations of such potential will be made by a medical officer, legal officer and chaplain, and an

officer in the grade of O-3 or higher, other than the individual's unit commander.

c. When confinement is adjudged, the prisoner will receive a medical and psychiatric evaluation before a determination is made concerning the place of confinement and/or treatment. Prisoners not medically cleared will be sent to a medical facility for treatment. A place of confinement for prisoners medically cleared will be designated under the provisions of AR 190-4, giving weight to the availability of facilities for rehabilitation at the confinement installation designated.

d. Persons who are convicted by civil courts for drug abuse and persons who are unfit for further military service because of drug abuse will be considered for administrative separation under the provisions of AR 635-100, AR 635-200, AR 635-206, AR 635-212, AR 135-175, or AR 135-178. If administrative separation is not appropriate, these individuals will be afforded rehabilitative treatment as described in paragraph 8 below.

8. Rehabilitation. Limited rehabilitation of restorable drug abusers, when appropriate, and consistent with the sensitivity of the mission, will be provided at the lowest unit level possible. A soldier seeking rehabilitation who voluntarily presents himself as a drug user to his commanding officer, post or unit surgeon, chaplain or other designated personnel will not be punished merely for admitting to the use of drugs. Such a soldier will be granted amnesty for personal drug abuse providing his drug abuse has not already been brought to the attention of the command. He will not necessarily be given amnesty for any other acts associated

with drug abuse, such as encouraging others to abuse drugs or for committing a crime under the influence of drugs. A grant of amnesty should stipulate the member's full cooperation in his own rehabilitation. Mere status as a drug dependent or addict is not, of itself, a basis for criminal prosecution. Self-admitted drug abusers who voluntarily seek assistance and soldiers who have received suspended sentences for the purpose of rehabilitation following conviction for drug offenses, will be provided the following assistance:

- a. Limited hospitalization in order to determine the nature and extent of individual drug abuse.
- b. Maximum counseling by a medical officer, preferably a psychiatrist, and a chaplain, to include participation in group therapy where feasible. During this period the individual, to the maximum degree consonant with the nature and extent of his drug problem, will continue to perform full military duties with his own unit.
- c. This assistance will consist of positive efforts toward reinforcement of individual attitude changes leading to full restoration to military duty.
- d. Where considered advisable, another soldier may be designated to assist and support the drug abuser in his goal of abstaining from the illegal or improper use of drugs.

9. Personnel Records. Statements indicating each individual's latest attendance at required orientations and training described in paragraph 4 will be filed in each individual's Military Personnel Records Jacket,

US Army, as a semipermanent document under the provisions of paragraph 1-8c, AR 640-10.

10. Educational Materials and References.

a. Materials, including films and pamphlets, for the orientation and continuing education of all Army members on the dangers of illegal or improper drug usage will be procured through normal distribution channels to the maximum extent possible. Appendix A contains a list of educational materials about drugs.

b. References to Army regulations concerning drug abuse control are listed in Appendix B.

The proponent of this regulation is the Deputy Chief of Staff for Personnel. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications) to the Deputy Chief of Staff for Personnel, ATTN: SARD, Department of the Army, Washington, D. C. 20310.

APPENDIX A

EDUCATIONAL MATERIALS

A-1. Service Information Publications. (In the interest of economy and standardization the Office of Information for the Armed Forces, DoD, has been designated to produce pamphlets, films and other materials to support all services in countering drug abuse.)

a. DA Pamphlet 360-530, Drug Abuse: Game Without Winners. A handbook designed to help commanders understand and combat drug abuse problems. It describes various harmful drugs and non-drug products, what to do when drug misuse is suspected and the overall command relationship to drug matters.

b. DA Pamphlet 360-602, Drugs and You. A 12-panel folder written for the individual soldier. It describes the five basic drugs that are misused: opiates (heroin), marijuana, hallucinogens, depressants, and stimulants.

c. Commanders Digest. Special items on drugs were included in issues of 25 October 1969, 13 December 1969, 27 December 1969, 14 March 1970 and 18 April 1970; future issues will be distributed as developed.

A-2. Motion Pictures.

a. The Hang Up (AFIF-189). A dramatic presentation of the harmful effects of drug abuse. Produced by the Office of Special Investigations, US Air Force, the film discusses the moral, physical, psychological and legal consequences of drug abuse.

b. Trip to Where (AFIF-139). Emphasis is placed on the effect of LSD and the consequences of its use, illustrated by the experiences of three seamen. This film was produced by the Bureau of Medicine, Department of the Navy.

c. Marijuana (AFIF-196). Sonny Bono narrates this film which deals solely with the subject of marijuana. Questions are posed and answers given by youths who state their reasons either for using "pot" or why they do not need to use it.

d. Trip Back (AFIF-197). Florence Fischer tells her story of 24 years of drug addiction to a group of young people at the New York Daily News. She answers questions in a straightforward, hard-hitting, give-and-take session with the youth.

e. People vs. Pot (AFIF-198). This film explores the causes and effects of the use of marijuana with special emphasis placed on use by military personnel. The cases depicted are true.

A-3 . Pentagon Forums. Four Pentagon Forums (video taped), a 30-minute panel discussion, have been devoted to the subject of drug abuse. Copies are available by writing the Director, Office of Information for the Armed Forces, Department of Defense, Washington, D. C. 20301.

A-4. AFRTS - Los Angeles Programs.

a. Television.

- (1) "Mike Douglas" - Segment on teenage drug problem in Boston.
- (2) "Felony Squad" - Teenage Speed Party.
- (3) "Burke's Law" - Program on narcotics addiction.
- (4) "Hatful of Rain" - Effect of drugs on user and his family.
- (5) "Hawaii 5-0" - Story on teenage users.
- (6) "Dragnet" - Story of illegal flow of marijuana through Mexican

border.

- (7) "The Distant Drummer" - Three-part series on drugs.
- (8) "Guideline" - First two parts of four-part series.
- (9) "Joey Bishop" - Segment on marijuana leading to other drugs.
- (10) "The Teeny Dopers" - Five-part series.
- (11) "The LSD Story" - US Navy Film.

b. Radio.

(1) Thirteen excerpts of various lengths from network programs such as "Dimension."

- (2) "Turn Off, Put Down, Come Back" - 10:00.
- (3) "Drug Traffic and Organized Crime" - 13:56.
- (4) "Schools + Drugs = Trouble" - 14:01.
- (5) "It's Time to Rat" - 15:00.
- (6) "Drugs and Narcotics" - 15:00.
- (7) "Pot for a Poppy" - 25:00.
- (8) "Listen to Their Voices" - 25:00.

(9) "Listen to Their Voices" (No. 2) - 25:00.

(10) "Russian Roulette with a Sugar Cube" (Audio of US Navy Film - "The LSD Story") - 30:00.

(11) "Discussion on Narcotics" (Mr. Broger - Director, Office of Information for the Armed Forces) - 45:00.

(12) "Lucy in the Sky with Diamonds" - 25:00.

A-5. References.

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APPENDIX B

ARMY REGULATIONS

B-1. The following regulations are pertinent to drug abuse control:

a. Paragraph 2, AR 15-3 - Armed Forces Disciplinary Control Boards: Prescribes "off limits" policies and procedures designed to eliminate conditions inimical to the health, morals and welfare of Army personnel.

b. Paragraph 2-34 and 6-32, AR 40-501, Standards of Medical Fitness: Includes drug addiction as a cause for rejection for appointment, enlistment, and induction under "character and behavior disorders."

c. Paragraph 9, AR 55-73, Customs and Other Entry Requirements and Related Services: Outlines the application of laws, agreements, or regulations governing customs and other entry requirements for household goods and other personal property into the United States. "Smoking opium" and narcotic drugs are listed as articles whose importation is prohibited. DA message 845206, 6 March 1968, Subject: Articles Prohibited Importation, adds marijuana to this list of prohibited articles.

d. Chapter 2, AR 135-175, Reserve Components - Separation of Officers: Policy on elimination of Reserve officers who are not on active duty.

e. Chapter 7, AR 135-178, Reserve Components - Separation of Enlisted Personnel: Policy on separation of Reserve enlisted personnel for unfitness and unsuitability.

f. Paragraph 1-3, AR 190-4, Uniform Treatment of Military Prisoners: Policies and procedures for the administration and treatment of military prisoners.

g. Paragraph 6, AR 190-19, Military Police - Correctional Training Facilities: Establishes criteria and administrative procedures for correctional training facilities.

h. Paragraph 3-9, AR 195-10, Military Police Criminal Investigative Activities: Directs US Army military police cooperation with Federal, state, and municipal law enforcement agencies in the enforcement of narcotics laws.

i. Paragraph 3-9, AR 601-270, Armed Forces Examining and Entrance Stations: Prohibits acceptance into the Army of individuals with a record of drug abuse.

j. Paragraph 3-1, AR 604-5, Personnel Security Clearance: Lists drug addiction as a possible ground for the denial or revocation of security clearances.

k. Paragraph 1-5, AR 611-15, Selection, Assignment and Retention Criteria for Personnel in Nuclear Reactor Positions, Nuclear Weapons Positions, and Command and Control Positions: Lists requirements and disqualifying factors for initial selection, assignment, and retention in nuclear duty positions or command and control positions. Evidence of unauthorized use, possession or sale of drugs or narcotics is included as a disqualifying factor.

1. Paragraph 5-12, AR 635-100, Personnel Separations - Officer Personnel: Policy on elimination of officers for moral or professional dereliction of duty.

m. Chapter 10, AR 635-200, Personnel Separations - Enlisted Personnel: Policy includes provisions for separation for the good of the service and for personnel who did not meet the medical fitness standards for enlistment or induction.

n. Chapter 5, AR 635-120, Resignations and Discharges: Policy on separation of officers and warrant officers, including resignation for the good of the service and for personnel who do not meet the medical fitness standards at time of appointment.

o. Paragraphs 22 and 24, AR 635-206, Misconduct: Policy for personnel separations under certain conditions, including fraudulent entry and conviction by civil court.

p. Paragraph 6, AR 635-212, Discharge - Unfitness and Unsuitability: Specifies drug addiction, habituation, or the unauthorized use or possession of narcotics, marijuana, sedatives, tranquilizers, stimulants, or hallucinogens as a basis for separation from the service for reasons of unfitness.

q. Paragraph 1-8c, AR 640-10, Military Personnel Records Jacket US Army: Administrative procedures for the maintenance of military personnel records jacket.