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THE WHITE HOUSE

WASHINGTON

DRUG ABUSE PREVENTION MEETING

June 26, 1986

A G E N D A

INTRODUCTORY REMARKS - Dr. Turner

THE NATIONAL DRUG ABUSE PREVENTION EFFORT - Dr. Turner

- Definition of terms, the President's Strategy, Mrs. Reagan's program, private and public sector efforts.

ACTION'S PRIVATE SECTOR INITIATIVES - Mr. Ventura, ACTION

- What ACTION has done and what they can do. (5 minutes)

DRUG ABUSE PREVENTION IN THE SCHOOLS - Mr. Bauer, Education

- Department of Education prevention initiatives. (5 minutes)

DRUNK DRIVING PREVENTION INITIATIVE - Ms. Steed, NHTSA

- How DOT brought the problem to the public. Why it worked. (5 minutes)

DRUG ABUSE PREVENTION SUPPORT - Dr. Macdonald, HHS

- HHS plans for improving support to prevention programs. (5 minutes)

INTERNATIONAL DRUG ABUSE PREVENTION - USIA

- USIA's efforts to spread the word overseas. (5 minutes)


LAW ENFORCEMENT'S ROLE - Mr. Jensen, Enforcement Policy Board

- Law enforcement contributions to local community drug abuse prevention efforts. (5 minutes)

DISCUSSION - Dr. Turner

June 20, 1986

MEMORANDUM FOR CARLTON TURNER

FROM: SHARYN LUMPKINS 
SUBJECT: Prevention Meeting on June 26

Attached are (a) a draft letter forwarding agenda and list of participants; (b) a draft agenda; and (c) a revised list of participants.

You said you would call the following people about the content of their presentations. Also, they need to be told about the 5 minute limit.

Gary Bauer - 732-4000

Dr. Macdonald - 245-7694

Lowell Jensen - 633-2101

Dick will call Diane Steed, and Dick or I will talk to ACTION.

I will have draft talking points for you on Monday. Everything else is progressing and we should be in good shape by Thursday.

cc: Dick Williams

DPC WORKING GROUP AGENDA
10:30 am, February 3, 1987 - OEEOB 248

1. Opening and introductions
2. Domestic Policy Council Briefing
 - o Final status report and brief DPC in March 1987.
 - o Report comments due back on February 12, 1987.
 - o Identification of issues to be resolved by DPC.
3. Contractor Workplaces
 - o Legislative Review Task Force recommends that no government-wide requirement be imposed on government contractors at this time. (DOJ - Tom Barba)
 - o The Departments of Defense and Energy object to the Task Force recommendation. (DOD - Chapman Cox or General Olmstead; DOE -Mike Seaton)
4. Rep. Schroeder letter re: Drug Testing - OPM response
5. The White House Conference for a Drug-Free America (Ray Walters - 5 minutes on planning)
6. FY-1988 Budget (Barry Clendenin)
7. Summary Status - Implementation of Presidential Initiatives/
Anti-Drug Abuse Act of 1986
 - Goal #1 - Drug-Free Workplaces (3 minutes each)
 - o OPM (Francis Sclarfari)
 - o DOJ (Tom Barba)
 - o Labor (John Davis)
 - o Transportation (Shelton Jackson)
 - Goal #2 - Drug-Free Schools (3 minutes)
 - o Education (John Walters)
 - Goal #3 - Expanded Treatment and Research (3 minutes)
 - o HHS (Mac)
 - Goal #6 - Increased Public Awareness/Prevention (3 minutes each)
 - o ACTION (Donna Alvarado)
 - o HHS (Mac)
 - Other National Initiatives (3 minutes each)
 - o HUD (Mike Dorsey)
 - o Interior (Joe Christie)
8. Other Remarks

DPC WORKING GROUP ON DRUG ABUSE POLICY

February 3, 1987

Drug-Free Workplaces TF

DOL - John Davis (vice Mike Baroody) DOB: 09/29/52

Drug-Free Schools TF

DOEd - John Walters DOB: 02/08/52

Drug-Free Public Housing

HUD - Michael Dorsey DOB: 02/06/43

Treatment TF

HHS - Donald Ian Macdonald DOB: 04/15/31

Private Sector Initiatives TF

ACTION - Donna Alvarado DOB: 11/08/48

Legislative Review TF

DOJ - Thomas M. Barba (vice Richard Willard) DOB: 08/18/54

Members

DOD - Chapman B. Cox DOB: 07/31/40

DOD - Stephen Olmstead DOB: 11/10/29

DOE - Michael B. Seaton (vice Sylvester Foley) DOB: 10/02/39

OPM - Francis Sclarfari (vice Connie Horner) DOB: 08/25/49

Treasury - Francis A. Keating II DOB: 02/10/44

DOT - Shelton Jackson (vice Matthew Scocozza) DOB: 09/07/35

BIA - Joseph Christie (vice Ross O. Swimmer) DOB: 09/24/45

IMN - James Van Wert (vice Ann Wrobleski) DOB: 03/24/44

OPD - Charles D. Hobbs and/or Gary Bauer

OMB - Barry Clendenim (vice Debbie Steelman)

Ex-Officio:

DOJ - Becky Norton Dunlop DOB: 10/02/51

WHS - Dick Williams
Paul Gigot
Sharyn Lumpkins
Bob Kruger
Howard Gehring
Eileen Doherty

Others:

DOEd - William Lenox

DOB: 05/23/49

OPM - Mark Barnes

DOB: 01/10/57

HUD - Nancy Goetschuis

DOB: 02/06/43

ACTION - Henry Ventura

DOB: 09/04/45

DOMESTIC POLICY COUNCIL MEETING - October 15, 1986

A. BACKGROUND

- Events since Sep 11th DPC Meeting when President approved:
 - * WG report
 - * Executive order
 - * Legislative proposal
- September 14 - RR/NR address to Nation
- September 15 - RR Executive Order & legislation

B. TREMENDOUS RESPONSE

- Media blitz peaked nationally -- but can expect continued coverage of all aspects of drug issue Regional coverage to peak ca. late Oct-early Nov.
- RR/NR set moral leadership tone, private sector is picking up the momentum -- anti-drug efforts are carrying own weight
 - * Pacesetter Steel (headbands)
 - * Seven-Eleven
 - * Converse
 - * Jesse Phillips
- Established private sector initiatives full-steam ahead
 - * IBM 5th grade comic books - ~~late~~ November (total 5 million)
 - * Warner Communications offers additional support
 - * Keebler "I believe in me"

C. STATUS OF GOVERNMENT INITIATIVES

- September 15 - "Schools Without Drugs"
 - * 100,000 inquiries 1st day
- September 22 - Working Group Meeting - implementation
- October 4 - Implementation memos from President
 - * Directive Memo to agency heads
 - * Memo to each employee (agency head add message)
 - * Ask reaction

D. ONGOING

- Legislative Task Force -- contractor workplaces (ask for support of Task Force)
- OPM & AG -- guidance on implementing Executive Order expected by mid-November
- Status of Working Group initiatives
 - * 45 initiatives approved
 - * 9 completed -- others on-track

- October 6 - National Drug Education Week - asked for video USIS

E. UPCOMING

- RR's Meeting with Ambassadors postponed (ca. early November)
- Private sector initiatives
 - * Planning for Blue Ribbon Panel (approved by RR)
 - * Consultant to assist in large number of offers

F. LEGISLATION - Can refer to Ball

- Overfunding & Less flexibility
- Congress emphasizing government, Administration emphasis on private sector efforts (Lincoln quote)

MONEY - Refer to Miller

I. THANK ALL FOR SUPPORT & INVOLVEMENT

February 13, 1987

MEMORANDUM FOR EDWIN MEESE III

FROM: RALPH C. BLEDSOE

SUBJECT: Seventy-Ninth Meeting of the Domestic Policy Council

The Domestic Policy Council will hold its seventy-ninth meeting on Tuesday, February 17, 1987 at 2:00 p.m. in the Roosevelt Room. The sole agenda item for the meeting is Drug Abuse Policy.

Drug Abuse Policy

- o There are two purposes for the meeting: 1) to obtain Council recommendations on whether the Working Group should be folded into the new Drug Prevention and Health Coordinating Group, and 2) whether we should issue a government-wide requirement pertaining to drug-free workplaces for government contractors.
- o You may wish to begin the meeting by reviewing the Executive Branch Drug Policy Organization approved by the President, with special emphasis on:
 - the name change to "National Drug Policy Board",
 - the appointment of Secretary Bowen as Vice Chairman,
 - the additional Cabinet members to be on the Board, and
 - the Drug Prevention and Health Coordinating Group.
- o You might also indicate that Mac Macdonald and I have recommended that the Council's Drug Abuse Policy Working Group become the core of the new Coordinating Group.
- o I will begin the Working Group report by briefly reviewing the background of the Group. Key points are:
 - it was set up in July, 1986
 - its purpose was to more fully develop the 6-goal program,
 - it was chaired by Carlton Turner,
 - it consists of members from 20 different organizations,
 - it has five task forces for goals and special initiatives.
- o I will ask the major Working Group members, about 9 of them, to take 3-minutes each to describe the initiatives the President approved for which they have the lead. (At a Working Group meeting last week they stayed within the time.)

- o The presenters will be:

Goal #1 - Drug-Free Workplaces

- OPM (Connie Horner), on Federal workplaces drug testing
- DOJ (Richard Willard), on drug testing EO and Court cases
- Labor (Mike Baroody), on private industry, union programs
- Defense (Chapman Cox), on programs for the military
- Transportation (Shelton Jackson) on drug-free transport.

(We will try to resolve the issue of whether to establish a government-wide requirement for government contractors during Richard Willard's presentation.)

Goal #2 - Drug-Free Schools

- Education (John Walters) on booklets and school programs

Goal #3 - Expanded Treatment and Research

- HHS (Macdonald) Treatment programs and state initiatives

Goal #6 - Increased Public Awareness and Prevention

- ACTION (Donna Alvarado) on private sector initiatives

Other National Initiatives

- HUD (Mike Dorsey) on drug-free housing programs
- Interior (Ross Swimmer) on programs among native Americans

- o Mac Macdonald will wind up the report with our recommendation that the work of this group become the core of the new Drug Prevention and Health Coordinating Group.
- o You might then ask for the Council's views on the efforts of the Working Group, including whether they should be folded into the new Coordinating Group, whether there are other approaches that should be used, other initiatives that should be developed, or any other ideas they may have about the directions the Administration is going.



2/18/87

Update

Memorandum

(1)

Date February 12, 1987
From Sue Becker *SB* *JK*
Subject Comments on Implementation Status Report
To Helen Cesari

1. Regarding Goal #1 - Drug-Free Workplaces: All drug information/education programs for Federal employees should incorporate information on health insurance coverage, its availability, benefits, and encouragements to employees to insure that they have adequate personal and family coverage. As it is currently treated, the health insurance coverage is not integrated into the educational programs and would be highlighted only at the time of open season. We must work all year, consistently to insure that during open season, employees take care to acquire adequate coverage for their families. The same should be said for all public awareness efforts to non-Federal workforces and parents in general.
2. Regarding Goal #2 - Drug-Free Schools: There is no emphasis among their programs on State coordination. We should facilitate development of cooperative relationships and coordination of effort among State level educational agencies and the single State authorities for alcohol and drug abuse. This is a major structural weakness to our Federal proposals at this point in time. If Federally sponsored efforts are coordinated with State and local efforts and leaders, this program stands a chance of being maintained and achieving impacts at the community level.
3. Typos - Page 4 - 3rd line of should be on *OK*
Page 23 - line 19 something is missing here *OK*

I. GOAL #1 - DRUG-FREE WORKPLACES

1. **Accelerate development of a drug-free Federal Workplace.** (pp. 1-11)

COMMENT

This section lists actions a number of components should take. However, significantly, it omits specific actions that could/should be taken to protect persons whose care is provided by the Federal Government by Federal workers or under Federal contracts (examples range from research patients of the Public Health Service to American Indians under care of the Indian Health Service to members of the uniformed services and their beneficiaries). Screening for use or abuse of a wide range of substances may be appropriate, particularly given significant opportunity to acquire drugs and substances in hospital and research settings.

4. **Mobilize management and labor leaders in the private sector to fight drug abuse in the workplace.**

- A. Mobilize CEO's of Fortune 500 companies, as "leaders of corporate communities," in the national crusade for a drug-free America. (pp. 13-14)

COMMENT

This section aims at one group of employers. Yet, the broad parameters of abuse of substances (but not necessarily alcohol) suggest that it is more common among adolescents and young adults. To the extent this is true, then a strategic argument could be made to aim at those sectors of the economy employing higher proportions of younger persons. This implies heavier programming to the service economy, which has smaller firms although some are significantly franchised (e.g. fast foods).

At the same time, while technically not in the workplace, a case can be made to attempt to reach the unemployed prior to their return to the workplace so that new and returning workers are not using or abusing drugs. Note, in this connection that younger persons experience a higher rate of unemployment.

III. GOAL #3 - EXPANDED DRUG TREATMENT AND RESEARCH

1. **Encourage [S]tates and communities to develop programs to treat specific drug-related health problems.** (p. 29)

- A. Provide for emergency expansion

* * * *

Status: HHS

COMMENT/STATUS UPDATE

Section 4005 of the Anti-Drug Abuse Act of 1986 (Pub. L. 99-570) established a new Office for Substance Abuse Prevention in the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) and authorized the Director to the new Office to make grants to demonstrate effective models which may be replicated for prevention, treatment, and rehabilitation of drug abuse and alcohol abuse among high risk youth. \$20 million was appropriated for these grants in fiscal year 1987. \$12 million of these funds will be utilized for grant projects to demonstrate improved comprehensive community service systems for the high risk youth population. Models that coordinate and fill in gaps in a continuum of activities, including information/education, early intervention, treatment and rehabilitation, will be given priority.

V. OTHER NATIONAL INITIATIVES

1. **Drug-Free Public Housing (pp.49-51)**

COMMENT

Two comments on this section:

- (1) Development of drug abuse prevention materials should be on at least two levels: (a) directed to users of marijuana, cocaine, crack, PCP, and inhalents, and (b) IV (heroin) abusers. The characteristics of these two groups are sufficiently different as to warrant different approaches.
- (2) Overall, these initiatives rely heavily on government agencies bringing programs into public housing communities. "Community ownership" of drug abuse problems has important implications for efforts at prevention. Drug abuse is avoidable and preventable. By accepting responsibility for drug abuse that occurs in their own communities, citizens empower themselves to press more vigorously for adequate and comprehensive efforts -- something along the lines of existing, successful programs of community-based efforts in crime prevention.

2. **Improve drug and alcohol abuse prevention and treatment programs available to Indians and Alaskan Natives. (pp. 52-53)**

COMMENT

Participation of Indian and Alaskan Natives in development of these activities is essential. In the past, "parachuting" of programs into these cultures has often had minimal effect. Sensitivity to the unique features of these diverse cultures is critical for overall success.



DEPARTMENT OF HEALTH & HUMAN SERVICES
HEALTH RESOURCES AND SERVICES ADMINISTRATION
BUREAU OF HEALTH CARE DELIVERY AND ASSISTANCE

Public Health Service

4

Memorandum

Date : FEB 17 1987

From : Special Assistant to the Director

Subject : Response to Request on Status of HRSA's Substance Abuse Activities in Relationship to the White House Domestic Policy Council Plan

To : Program Analyst, ADAMHA

The Health Resources and Services Administration (HRSA), U.S. Public Health Service, is undertaking a wide range of substance abuse activities that will have effect on both the workplace and the community. These programs are the result of cooperation among the various program within HRSA and agreements with other entities, (including ADAMHA), both public and private.

HRSA programs include funding for health professions training, health care for Native Alaskans and American Indian through the Indian Health Service, program in AIDS and organ transplantation, and primary and community health centers. Through these program, we reach primary care providers, both in practice and training, and a wide variety of special populations, including those with AIDS, organ transplantation patients and providers, and community/migrant health center (C/MHC) patients and providers. For example, C/MHC populations served are primarily minority (64%), young (45% are under 20 years of age), poor (60% are below the poverty level) and female (60%).

The major components to this initiative are described below with primary focus on Goal #3, Expanded Drug Treatment and Research, along with substantial emphasis on Goal #1, Drug Free Workplaces. However, HRSA programs will probably effect other goals as well, including drug free schools and drug-free public housing.

Goal 1 - Drug-free Workplaces

- A. To accelerate the development of a drug-free Federal Workplace, HRSA will undertake a number of activities to identify available resources, improve counseling services, and provide additional training for supervisors and employees in dealing with employee substance abuse problems.

The employee counseling service has awarded seven (7) contracts in fiscal year 1986, to serve 80,000 federal employees across the country. These contracts will continue through this fiscal year.

During fiscal year 1986, the employee counseling service program at the HRSA headquarters in Rockville, Maryland, saw 746 employees, 16 percent of whom were seen for substance abuse problems. An outreach center was also opened in Silver Spring, Maryland. In addition, new programs were initiated as determined in a needs assessment of Parklawn Building employees. There are also open meetings of private support groups (e.g., Alcoholics Anonymous, OA, Alanon). The employee counseling service program continues to service several other entities, such as the Bethesda Naval Command, the U.S. Navy Tri-Service Alcohol Rehabilitation Facility and other PHS agencies for referral and resource sharing.

- B. To expand drug abuse awareness, HRSA will identify and develop (if necessary) resources, including printed media (pamphlet and brochures), video presentations, and others, to be used in the expansion of drug abuse awareness by HRSA supervision and employees.

The employee counseling service program continues its Alcohol and Drug film series which included in fiscal year 1986 18 films and nearly 400 attendees in three separate locations. These informational services will continue through fiscal year 1977.

- C. To provide improved supervisory training and employee assistance, HRSA will provide adequate training on how to detect and treat problemed employees, current services available for substance abuse treatment, and gauge the extent of the alcohol and drug abuse problem within HRSA.

The employee counseling service program will also develop an advanced supervisory training module for the understanding and identification of employee problems, including substance abuse.

Goal #2 - Drug-Free Schools

While HRSA does not directly address this goal, the effects of Goal #3 - Expanded Drug Treatment and Research, as discussed below, will have significant impact on and assist to achieve drug-free schools. The IHS will provide instruction on substance abuse in all American Indian/Alaska Native schools.

Goal #3 - Expanded Drug Treatment and Research

- 1. Encourage states and communities to develop programs to treat specific drug-related health problems.
 - A. To provide expanded services in primary care settings for drug abusing clients who could not otherwise afford treatment. HRSA, with \$2 million earmarked to be awarded by August 1987, will establish pilot/model substance abuse projects in selected community/migrant health centers with emphasis on preventive

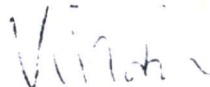
effects toward youth, minority and mothers. The Indian Health Service will integrate alcohol and drug abuse treatment into the IHS health care delivery system, including acute detoxification and will also develop 10 youth treatment centers.

2. Expand research in health-related areas, including drug testing

- B. Expand research which will strengthen resources for preventing, identifying and treating illegal drug use.

Through a signed Memorandum of Understanding agreement with the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA) on February 9, 1987, additional materials for prevention, identification and treatment of substance abuse will be made available to primary care patients providers within community and migrant health centers, the Indian Health Service delivery system, in AIDS and Hill-Burton programs, and for those preparing to become primary care providers.

These activities will increase public awareness and prevention (goal #6) as well as facilitate drug-free public housing, especially in those community health centers located in or serving populations from public housing facilities.


Vivian Chen



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Memorandum

Date February 14, 1987

From Chief, Policy and Legislative Branch, OPRM, NIDA

Subject Review of Domestic Policy Council Working Group on Drug Abuse Policy Implementation Status Report

To Director, Division of Policy Operations, Office of Policy Coordination

Pursuant to your memorandum of February 11, 1987, the working draft paper was reviewed and the following comments are offered:

Include in item #2 where appropriate.

- o It is recommended that the paragraph below be incorporated into Goal #2, "Drug-Free Schools."

NIDA and the Advertising Council, Inc., are now working on a new anti-drug campaign. The new work will include the production of up to ten (10) television and a minimum of four (4) radio public service announcements. The current plan is to produce the public service announcements for high school and college students to respond to the increasing demand for public education materials on cocaine addiction and the crack problem. This phase of the campaign will be distributed in September 1987 to approximately 820 television stations and networks. ✓

- o The following sentence cited on page 30 is correctly incorporated into the report:

An interagency agreement is being prepared between NIDA and the Food and Drug Administration (FDA) to utilize FDA's Rapid Response Capability. ✓

The contents of the report are correct and include all relevant NIDA activities.


Joel A. Egertson

(3)

Pgs. 44-45 Goal #6, IV.3.C.

STATUS:

The Office For Substance Abuse Prevention (OSAP) is located in the Office of the Administrator, Alcohol, Drug Abuse and Mental Health Administration (ADAMHA). OSAP was staffed in November, 1986, and held a National Strategy Conference on December 15, 16, 1986 that was attended by about 180 leading experts on substance abuse prevention. These experts reviewed OSAP's preliminary action plans and offered guidance and recommendations.

Building on these recommendations, OSAP has finalized its grant announcement for the High-Risk Youth Demonstration Grants Initiative.

OSAP has completed action plans for establishing a new National Clearinghouse for Alcohol and Drug Information, which will be launched in May. This effort combines and extends the previous clearinghouse programs operated by the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism. The new clearinghouse will have expanded capabilities for developing materials for various target audiences, including minorities.

OSAP has completed other action plans to provide nation-wide assistance to youth and parent groups and organizations, with particular attention given special populations (including minorities), the handicapped, and the medical/health communities.

OSAP is developing an evaluation strategy rooted in a comprehensive assessment of substance abuse prevention research and practice. Evaluations will focus on the entire OSAP program, with a primary focus on the high-risk youth demonstration program.

OSAP will be sponsoring many workshops, conferences, and technical assistance activities on a national, regional, state, and local basis in order to promote state-of-the-art understanding of substance abuse prevention.

OSAP has met regularly with other Federal Departments, including DOED, DOJ, DOL, HUD, and ACTION, in order to coordinate activities. It is anticipated that Inter-Agency Agreements will be signed with most of these Departments/Agencies. One is currently being drafted with the DOED.

In addition, a new OSAP media campaign entitled "Be Smart! Don't Start! Just Say No!", is ready for national kickoff scheduled late April 1987. Aimed at 8-to-12 year olds and designed to prevent the early use of alcohol by this age group, this multi-media campaign features the

popular rock music group "The Jets" and involves music videos and public service announcements, along with print materials for youth, parents, teachers, and others. All 50 states have campaign coordinators working to fully implement the campaign in their service areas with both public and private sector organizations. CBS has made a major commitment to airing the announcements in prime time throughout the Spring.

OSAP is also formulating plans for the systematic involvement of private sector organizations, particularly major corporations and foundations, in substance abuse prevention activities.



U.S. Department of Justice

Civil Division

3948

Office of the Assistant Attorney General

Washington, D.C. 20530

DEC 22 1986

MEMORANDUM

TO : Addressees Listed Below

FROM : *RAW* Richard K. Willard
Assistant Attorney General
Civil Division

RE : Proposed Recommendation Of The Legislative
Task Force On Contractor Drug Testing

We have received responses from various agencies regarding current drug testing by their contractors and expressing their views as to whether the federal government should impose a government-wide policy of requiring that contractors conduct drug testing of their employees. With the exception of the Departments of Defense and Energy, most agencies are not interested in imposing such a requirement at this time. Based on the lack of interest, as well as the practical and legal implications previously discussed at our meetings, I propose that our task force recommend to the Working Group on Drug Abuse Policy that no government-wide requirement for contractor drug testing be imposed at this time. Attached is a draft memorandum to Carlton Turner explaining the basis for this recommendation.

If you believe that a meeting of the task force is necessary to discuss this recommendation before submitting it to the Working Group, please advise Bob Cynkar (633-3309) or Nanette Everson (633-1258) of my staff by December 30.

Attachment

Addressees:

Michael E. Baroody
Gary Bauer
Donald Ian Macdonald
Rick Ventura
J. Michael Dorsey
James Colvard
Lenore Mintz
Joel M. Mangel
Ronald E. Robertson
Deborah L. Steelman

Bruce Wood
Lee Cummings
Kevin P. Cummings
Jack M. Kress
Dennis H. Trosch
John Walters
Karen Wilson
Ellen Reichenbach
Robert H. Brumley
Gregory S. Dole

cc: ✓ Carlton Turner
Becky Norton Dunlop
Arnold I. Burns



U.S. Department of Justice

Civil Division

DRAFT

Office of the Assistant Attorney General

Washington, D.C. 20530

Domestic Policy Council
Deliberative Document

TO : Carlton E. Turner
Chairman, Drug Use Prevention Working Group
Domestic Policy Council

FROM: Richard K. Willard
Chairman
Legislative Review Task Force

RE : Report of the Legislative Review Task Force Regarding
Requiring Government-wide Contractor Drug Testing

The Legislative Review Task Force has met on several occasions to consider what action, if any, should be taken regarding drug testing of employees of contractors who do business with the federal government. Specifically, we have considered whether the federal government should adopt a government-wide policy requiring government contractors to conduct drug testing of their employees. Based on the practical and legal implications discussed below, we recommend against imposing a government-wide requirement that contractors conduct such testing of their employees at this time. However, to the extent that an agency wishes to have a particular contractor conduct employee drug testing, we are available to advise the agency of the possible constraints of such a requirement and assist them in the fashioning of a specific contractor drug-testing requirement.

One practical factor cautioning against imposing a uniform requirement that all government contractors conduct drug testing of their employees is the significant diversity among the sizes, responsibilities and missions of government contractors. While some agencies, such as the Department of Defense, may have contractors who employ a large number of employees, other agencies, such as Action, have primarily small contractors. In addition, the nature of federal government contractors may vary from agency to agency. For example, more than half of the Department of Health and Human Services contractors are colleges, universities, state and local governments and non-profit organizations. A uniform requirement that all government

contractors test employees for use of illegal drugs could significantly damage the ability of an agency to work with small contractors and public and private-sector groups or groups who may wish to donate a portion of their services.

While an attempt could be made to formulate a policy articulating which contractors should be subject to an employee drug-testing requirement, such an undertaking would most likely be cumbersome and very time-consuming considering the number and diversity of government contractors. Moreover, such varied requirements would require amendments to the federal acquisition regulations. Because we do not know at this time which contractors are already testing or planning to test in the future on their own initiative and which are not, a requirement of government-wide contractor testing would be inadvisable.

An additional practical consideration in requiring drug testing of all contractors is the current availability of laboratories that are equipped to handle and accurately test the large volume of drug testing that would be entailed pursuant to a government-wide requirement of contractor testing. Particularly at this time, as federal agencies are implementing drug-testing programs for federal employees pursuant to the President's Executive Order and contracting with laboratories for a substantial volume of drug testing nationwide, a similar requirement that all government contractors also procure such services may result in either over-burdening otherwise qualified laboratories or having contractors utilize laboratories which do not have the capabilities to conduct accurate testing. Obviously, the accuracy of the testing results and the promptness of testing specimens and reporting confirmed positive results are essential not only to the validity of any drug-testing program, but also to the success of any ensuing litigation. Thus, it would make the most sense to require any contractor testing gradually, after careful analysis of which contractors should conduct testing and there is sufficient laboratory availability to conduct needed testing.

Another important consideration in the analysis of mandatory contractor drug testing is that to the extent that a contractor is required by regulation or its contract with the United States to implement a drug-testing program for its employees, that action is likely to be considered "state action" subjecting the contractor's action to constitutional scrutiny.¹ The Supreme

¹ The personal liberties recited in the Constitution, including the Fourth Amendment prohibition against unreasonable search and seizures, are not protected against individual action. Rather, the Amendments afford protection against "state action," that is, action by the government.

Court's decisions in this area make it clear that conduct of private parties may constitute "state action" where the challenged conduct is "fairly attributable to the state." Rendell-Baker v. Kohn, 457 U.S. 830,838 (1982). The fact that federal acquisition regulations (or individual contractual provisions) would require contractor drug testing of employees would probably lead a court to conclude that a contractor's drug program constitutes state action.

Similar constitutional challenges have been raised to drug testing programs adopted by a number of defense contractors at the request of the U.S. Army Armament, Munitions and Chemical Command are currently pending in Oil, Chemical and Atomic Workers v. United States Department of the Army (D.D.C., filed September 5, 1986). In short, government-mandated contractor drug testing would provide a new avenue of attack against hitherto private drug testing programs by creating an arguable basis for characterizing contractor drug testing programs as federal action. While we believe that the constitutionality of government drug-testing programs will eventually be upheld by the courts, extensive litigation on this issue is very likely.

Additionally, government inducement of contractor drug-testing programs may result in both the contractors and the federal government having to defend in court contractor drug-testing programs that would otherwise not come before a court at all. Ordinarily, disputes over programs adopted by private employers would have to be resolved in accordance with applicable collective bargaining agreements, which often provide for grievance and arbitration procedures as exclusive remedies. Federal involvement would give the unions a pretext for arguing the existence of non-arbitrable issues (*i.e.*, issues going to the validity of the government's requirements), and thus for invoking the jurisdiction of the courts. Further, to the extent that employees or their unions challenge the federal requirement in the context of challenges to contractors' actions thereunder, the government and its contractors may become embroiled in widely scattered litigation and find themselves in the position of defending not only the regulation or contractual provision, but also the manner in which particular contractors implement them.

These difficulties generated by government-mandated drug testing seem all the more unnecessary in light of the fact that a number of government contractors have already adopted drug testing programs on their own initiative and more may be expected to adopt such programs as employers' experience with employee drug testing continues to grow.

The Legislative Task Force elicited responses from various agencies regarding current drug testing by their contractors and their views as to whether the federal government should impose a

government-wide policy of requiring that contractors conduct drug testing of their employees. With the exception of the Departments of Defense and Energy, most agencies are not interested in having such a requirement imposed at this time. Based on the lack of interest, as well as the practical and legal implications outlined above, we recommend that no government-wide requirement for contractor drug testing be imposed at this time.

DRAFT

Anonymous Assessment of Illicit Drug Use by Federal Employees

Background

In order to properly respond to any workplace problem, good management requires some assessment of the magnitude of the problem prior to the development of problem solving actions. Some assumptions have been made as to the extent of illicit drug abuse in the Federal Workforce based on National Surveys of the US population, however, with the exception of the DOD few Federal Agencies have attempted to ascertain the extent of drug abuse among their employees. Such an assessment would be extremely valuable in formulating policies and procedures for the Federal Workforce and could be used as a baseline against which the effectiveness of various strategies could be measured.

The use of urinalysis testing as the method of assessment presents significant problems in obtaining a truly representative sample. A volunteer population would clearly be biased toward underestimating the problem. Mandatory participation would more closely approach a true assessment, however, the issues of employee rights, morale, logistics, right to refusal etc. make this a difficult option.

Procedure

Using a mandatory participation policy, a stratified sample could be selected and tested on a single occasion. Having a continuing assessment program would most certainly become widely known and change individual behavior. It is recommended that the focus of a urinalysis test assessment be on the young male population (ages 17-35) which has proven to be the group most likely to be using illicit drugs. The anonymity of the assessment must be guaranteed, and considerable efforts must be made to assure personnel of the confidentiality of their participation. Collection and assay of specimens should probably be done by contract outside the Federal system. The specimens should be assayed for: Marijuana, Cocaine, Other Stimulants, PCP, and Opiates to properly assess the extent of illicit drug use.

Outcome

The results of such an assessment using mandatory urinalysis should produce a relatively accurate picture of recent drug use by the Federal employees who are most likely to use drugs. A good case could be made, however, that a paper and pencil survey of all employees would be less costly, less embarrassing, and would give a better estimate of general use of illicit drugs (ie not only use within the last few days). The Department of Defense experience indicates good correlations between paper and pencil surveys and urinalysis testing.

**DRAFT**Alcohol, Drug Abuse, and
Mental Health Administration
Rockville MD 20857

Suggested Approach:
Management of the Drug-Using Employee

The most sensitive issue surrounding urine screening for drugs is deciding how to deal with the employee who uses drugs. Urine testing is only a tool, but can be an effective component of a well thought out and comprehensive substance abuse program. There must be concern for both the worker and the workplace.

Part of the beneficial impact of a urine testing program is that it sends a message to employees that drug use will not be tolerated. This message will be diluted if there is no penalty associated with an employee's first positive urine. On the other hand, immediate dismissal of a drug-using employee ignores at least three important points. One is that business has found it is cost effective to rehabilitate drug-using employees. Second is that firing an employee with a drug problem may clean up the employer's workplace, but does little for our society which gains an unemployed drug user. Third, it does not seem to fit with the President's stated commitment to helping people.

We recommend a combination of penalty and, if the employee is willing to quit using drugs, probation. Assistance should be offered as needed. The employee must be confronted and told that drug use is incompatible with continued employment. Employees who voluntarily admit drug use prior to discovery by urine testing should be placed on probation and offered help. Probation would include periodic urine testing (at the employee's expense?) Subsequent offenses would carry additional penalty.

In some sensitive positions, a first offense may disqualify a worker from job continuation. Where possible, reassignment should be considered, coupled with the same probationary follow up that exists for other less sensitive jobs.

Each Federal department and agency should be held responsible for establishing its own internal program and guidelines but all should be submitted to a central policy office for approval to avoid major discrepancies in the way workers are handled.

DOMESTIC POLICY COUNCIL
WORKING GROUP ON DRUG ABUSE POLICY

February 3, 1987

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D R A F T W O R K I N G P A P E R

GOAL #3 EXPANDED DRUG TREATMENT AND RESEARCH

1A. - Emergency Alcohol and Drug Treatment Funds

Status:

The Anti-Drug Abuse Act (P.L. 99-570) provided \$162 million for allocation to the States for the treatment and rehabilitation of alcohol and drug abuse. The alcohol and drug monies are to be divided among States with 45 percent to be population based, and 55 percent based on need. ADAMHA requested State applications for the 45 percent monies in a letter to all Governors on November 24, 1986. As of January 23, 1987, 36 States have applied for these funds, and 29 States have received their share of these monies, as well as the first increments of the Part B ADMS Block Grant.

ADAMHA has developed a funding allocation formula for the 55 percent monies which was transmitted on January 20, 1987 to State Governors for comment. An open meeting to discuss State feedback on the proposed formula was held at ADAMHA headquarters on January 30, 1987. When all comments are received and reviewed, a final allocation amount can be determined for each State.

States must comply with legislative requirements in receiving these monies by completing an acceptable application. ADAMHA has developed application guidelines and requirements in line with the legislation's intent and has submitted this package to the Department for review and comment. It is anticipated that the application will be submitted for OMB clearance in the next few weeks and, upon approval, forwarded for State use soon thereafter. ADAMHA is making every effort to assure the timely distribution of these treatment and rehabilitation funds in accord with the legislative timeframe.

\$2.3 million is available to ADAMHA to develop and evaluate alcohol and drug abuse treatment programs to determine the most effective forms of treatment. As a result of a series of internal planning meetings with leadership of the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism, ADAMHA plans to utilize these funds to study the efficacy and cost effectiveness of various alcohol and drug therapies in a variety of treatment settings. Prior to issuance of a special grants announcement implementing this effort, ADAMHA will initiate dialogue with representatives of various treatment providers and organizations on approaches to effective conduct of these evaluation projects.

D R A F T W O R K I N G P A P E R

GOAL #3

1C. Remove Congressional quotas on ADMS Block Grants and extend Block Grant for an additional five years.

Status:

The Anti-Drug Abuse Act added \$13.8 million to the existing ADMS Block Grant (Part B). These additional funds, and all Part B Block Grant funds, remain subject to existing set-asides and earmarks. ADAMHA has submitted legislative proposals which support elimination of these earmarks (quotas) for Block Grant activities beginning in Fiscal Year 1988.

Provided on:

2/12/87

Under "Other National Initiatives"

2.A. Interdepartmental Memorandum of Agreement:

The Department of Interior's Bureau of Indian Affairs (BIA) and the DHHS Indian Health Service (IHS) are jointly working to complete a Memorandum of Agreement by February 24. Interior has delegated to the BIA authority to sign the agreement. IHS desires a like delegation of authority in order to accomplish the requirement by the mandated deadline.

2.D. Newsletter:

IHS, in collaboration with the BIA, has determined that the most effective means of implementing this requirement is to "piggyback" on an existing publication LINKAGES - The Indian Child Welfare Program newsletter. BIA and IHS will share the cost of expanding the newsletter, both in terms of the length of the publication and in the number of copies distributed. The February issue is to be the first expanded edition of the publication.

2. G. Treatment and Rehabilitation:

The law mandates 11 regional treatment centers for youth. Criteria for site selection have been established and IHS is currently designing a process for identifying renovatable centers. Since the FY87 funds designated for this purpose fall short of the amount necessary to implement construction and staffing of all centers, IHS plans to start up as many facilities as possible with available funds. Should a balance of funds remain in FY87, it will be applied to purchasing residential treatment programs for youth from non-IHS or tribal programs.


The law further provides for community based rehabilitation and followup services in every service unit. Funds will be made available to regions to begin aftercare services in existing and new programs.

\$4 million have been earmarked for community education and training. Funds will be made available to tribal leadership, health, law enforcement, judicial services, and educational personnel to use for training in substance abuse. Funds will be distributed by an alcohol resource allocation methodology formula that factors community need based on alcohol and substance abuse morbidity and mortality, YPLL (years of potential life lost) of alcohol cirrhosis, dependence, psychosis, rates of motor vehicle accidents, suicide, homicide, population, and demand for education and prevention services.

- D. Establish Community Systems Development Projects to assist communities in mobilizing comprehensive, integrated treatment and prevention efforts to reduce illegal drug use.

Administration Action: Presidential memorandum of October 4, 1986 directed HHS to establish Community Systems Development Projects.

Status: Section 4005 of the Anti-Drug Abuse Act of 1986 (P.L. 99-570) established a new Office for Substance Abuse Prevention in the Alcohol, Drug Abuse, and Mental Health Administration and authorized the Director of the new Office to make grants to demonstrate effective models which may be replicated for the prevention, treatment, and rehabilitation of drug abuse and alcohol abuse among high risk youth. \$20 million was appropriated for these grants in fiscal year 1987. \$12 million of these funds will be utilized for grant projects to demonstrate improved comprehensive community service systems for the high risk youth population. Models which coordinate and fill in gaps in a continuum of activities, including information/education, early intervention, treatment and rehabilitation, will be given priority.



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U.S. Department of
Transportation

Office of the Secretary
of Transportation

Office of Assistant Secretary

400 Seventh St., S.W.
Washington, D.C. 20590

MAR 24 1987

MEMORANDUM TO: Ralph Bledsoe
Chairman, Working Group on
Drug Abuse Policy
Domestic Policy Council

SUBJECT: Implementation Status Report

Attached per your request of March 13, 1987, are the Department of Transportation's revisions to the draft "Working Papers: Implementation of the President's Fall 1986 Initiatives Against the Use of Illegal Drugs." Because the Secretary of Transportation has moved so quickly on anti-drug abuse actions, there have been significant changes since we submitted our report to you in January. Your memo noted that the report reflects the status of initiatives as of February 28, 1987. The changes I am submitting reflect the status of our activities as of February 28, 1987.

Matthew V. Scocozza
Assistant Secretary for Policy
and International Affairs

Attachment

DrB RCP
Sharon Stephens

Redblock
vs.
<Roadblock>

CORRECTIONS TO THE DOT SECTIONS OF THE "WORKING PAPERS:
IMPLEMENTATION OF THE PRESIDENT'S FALL 1986 INITIATIVES AGAINST
THE USE OF ILLEGAL DRUGS"

In most cases, we have made corrections in the text. However, for those sections where there are significant changes, we have provided inserts. The following is a summary of our corrections.

p. x:	See corrections in text.
p. 9:	See corrections in text.
p. 10:	See corrections in text.
p. 11:	See corrections in text.
p. 13:	No change.
p. 15:	See corrections in text.
p. 16:	See corrections in text.
p. 19:	No change.
p. 27:	No change.
pp. 49-50:	No change.
pp. 51-55:	See corrections in text and add Inserts A, B, C and D. (Inserts are attached)
p. 56:	No change.

INSERT A, page 51, after Status:

The Secretary of Transportation is taking the lead in the national effort to ensure safe transportation for people and goods. Anti-drug abuse activities are being pursued in all areas of transportation, including aviation, water, rail, motor carrier, pipeline, bus, and urban rail transportation. In most cases, rulemaking will cover pre-employment, periodic, reasonable suspicion or reasonable cause, post-accident or post-casualty and random drug testing. ✓

INSERT B, page 51, at the end of the sentence as noted in the attached text.

or who violate the federal prohibition against alcohol or drug use. The Secretary has called upon Congress to act immediately to give the Department enforcement authority to penalize directly railroad employees with safety-related responsibilities who violate the safety laws.

Additional current and proposed actions are summarized below.

Aviation:

Certain Air Carrier, Commuter and General Aviation Personnel

- o Use of drugs is prohibited for airman certificate holders.
- o Initiated rulemaking for a drug testing program for all safety-related industry personnel. The comment period closed on February 23, 1987.
- o More than 650 comments were received on pre-employment, post-accident and random testing of commercial airline pilots and crew, and other employees directly responsible for the safety of flight operations.

FAA Personnel

- o Drug testing of safety and security-related Federal Aviation Administration (FAA) personnel as of February 15, 1987.

Water Transportation:

Commercial Marine Operating Personnel

- o Federal law prohibits issuing merchant mariners licenses, certificates or documents to individuals who have used certain drugs, unless they can prove they are cured. Also, licenses, certificates or documents will be revoked if individual is determined to have used such drugs.

- o DOT will issue proposed rulemaking shortly that would require pre-employment drug screening of commercial marine operating personnel and testing at periodic physicals.
- o A rulemaking is in process that would provide for mandatory post-casualty testing of commercial marine operating personnel after serious marine incidents.

Recreational Boaters

- o Published proposed rulemaking that would establish Federal standards for intoxication of recreational boaters.

U.S. Coast Guard Military Personnel

- o U.S. Coast Guard military personnel have been subject to random drug testing since January 1983.

Rail Transportation:

Certain Employees in Safety-Sensitive Functions (e.g., train crews)

- o The Federal Railroad Administration has a rule in effect that requires post-accident and pre-employment toxicological testing for certain safety-related rail crew. It also provides for breath and urine testing for reasonable cause.
- o DOT has called upon Congress to act immediately to give the Department enforcement authority to penalize directly railroad employees with safety-related responsibilities who violate the safety laws.
- o FRA is considering development of a random drug testing rule.

Motor Carrier Transportation:

Interstate Truck and Bus Drivers

- o Currently, interstate truck and bus drivers are medically certified upon initial entry into the industry and biennially as not using prohibited drugs and not having a current diagnosis of alcoholism. Drug screens are not currently used in these examinations.
- o Rulemaking has been proposed for pre-employment and periodic testing. Rulemaking covering pre-employment, periodic, reasonable suspicion, post-accident and random drug testing is in the drafting stage.

Urban Public Transportation:Transit Bus Drivers, Urban Rail Motormen, Conductors

- o The Urban Mass Transportation Administrator sent a "Dear Colleague" letter to all transit operators encouraging development of local drug and alcohol abuse programs. Considering requiring a plan as a condition for federal assistance. Technical assistance will be provided to grantees for establishing alcohol and drug abuse programs.

Pipelines:

- o A rule is being developed for drug testing of certain natural gas, liquefied natural gas and hazardous liquid pipeline personnel.

School Bus Operators:

- o DOT is working with the Department of Education to develop educational material on drug abuse. A pamphlet on school bus drivers and substance abuse, "Anti-Substance Abuse and the School Bus Driver," will be distributed soon.

Highway Vehicle Operators:

- o Anti-drugged driving report due to Congress by November, 1987.

State DOTs:

- o The Secretary will send a letter to State DOTs encouraging the development of local drug and alcohol abuse programs.

INSERT C on page 55 after the paragraph ending "...appeals for the Ninth Circuit."

Congress is considering legislation which would require FRA to expand its alcohol and drug program to include random testing. Anticipating enactment of such legislation, FRA is considering the likely structure of a random testing program. ✓

INSERT D on page 55 in place of the paragraph beginning with "As soon as Congress..."

If Congress gives DOT enforcement authority to penalize directly railroad employees with safety-related responsibilities who violate the safety laws, the Department will be better able to deter unsafe behavior, including that involving substance abuse. ✓

DRAFT

CORRECTIONS TO
DOT SECTIONS

- DOJ has produced a series of videos on the dangers of illegal drug use and has made these videos available to schools and other community groups.
- The Department of Labor has been in contact with numerous unions, employers and assistance groups to discuss a drug-free workplace and has represented the Administration at conferences specifically devoted to drug abuse prevention.
- Agencies of the Department of Transportation are providing information about drug abuse in their dealings with the public and the transportation industry.

OTHER NATIONAL INITIATIVES

1. **Ensure drug-free public transportation.**

- The Secretary of Transportation is taking the lead in a national effort to ensure safe transportation for people and goods. Anti-drug abuse activities are being pursued in all areas of transportation, including aviation, water, rail, motor carrier, bus and urban rail transportation. ✓
- Through ^{drug} regulation, the Department of Transportation (DOT) will require pre-employment, post-accident and random ^{pipeline,} testing for commercial airline pilots and crew, and other employees directly responsible for the safety of flight operations. ✓
- In addition, periodic testing will be required as part of the annual physical for those airline personnel listed above who are required by DOT regulations to have such physicals.
- In rail transportation, DOT implemented in 1986 the first rule in American history to deal with alcohol and drug abuse by railroad employees; and the Secretary has called upon Congress to give the Department authority to regulate directly the conduct of railroad employees who have safety-related responsibilities.
- The National Highway ^{Traffic} Safety Administration (NHTSA) is working with the Department of Education to develop and distribute educational materials to state and local public transportation officials. ✓
- The Federal Railway ^{road} Administration (FRA) has provided leadership for a national voluntary alcohol/drug abuse prevention program known as "Operation ^{Red} Road Block." ✓

x

DRAFT

- o The existing DOL employee assistance program for the national office and field employees has been reassessed and will be updated and changed to assure complete consistency with OPM guidelines.
- o DOL has directed that training will be provided to supervisors to assist them in understanding the Federal drug-free workplace and in identifying and assessing illegal drug use. A training program is being developed.
- o The **Mine Safety and Health Administration (MSHA)** has created a videotape program for employee training and information. It was developed by their labor-management committee and will be previewed on March 19, 1987. After that date, DOL will make the tape available to other departments upon request.

Department of Transportation:

Pursuant to the President's Executive Order and statutory authorities, the Secretary has proposed a comprehensive program for Department of Transportation (DOT) employees, which includes extensive drug awareness and education campaigns, drug testing of certain Departmental employees, and rehabilitation assistance.

- o DOT has ~~developed~~ ^{will} ~~establishes~~ ^{under development} and describes the program. The policy statement informs all employees of the purpose of the document, i.e., to establish a drug-free Federal workplace as intended by Executive Order 12564 and the President's October 4, 1986 memorandum to department and agency heads.
- o The directive emphasizes the importance of creating an awareness on the part of DOT employees of the problems associated with drug abuse, including a requirement that all employees be informed of the adverse health, family and community implications inherent in illegal drug use, the impact on the workplace, the availability of the employee assistance program and rehabilitation and abatement resources.
- o Extensive requirements are included in the document regarding employee assistance programs. Strict standards for these programs are established and procedures set forth which Departmental elements must follow in providing

these services. There is also a requirement that intensive training be provided to supervisors and managers in the operation of the program to ensure accomplishment of the objective.

- o The program provides for testing of employees in critical safety and security positions with a direct impact on public health and safety, the protection of life and property, or national security, including such positions as railroad, truck, aviation and highway inspectors, and air traffic controllers. These positions require the highest degree of trust and confidence.
- o Employees in these positions will be subject to pre-employment, random, reasonable suspicion, and accident or unsafe practice testing. In addition, employees whose jobs require periodic medical examinations will be routinely tested as part of that procedure. All other DOT employees will be subject to post-accident testing and will continue to be subject to reasonable suspicion testing.
- o The document also provides for the assessment of discipline where appropriate to employees who use illegal drugs.

Implementation of the DOT Program to establish a drug-free workplace is awaiting final clearance of the above mentioned policy document.

The United States Coast Guard (USCG) will implement ^a ~~the~~ civilian drug testing program ~~in concert with and administered similarly to~~ the program planned by the Office of the Secretary of Transportation. *There will be one DOT civilian drug program.*

The Federal Aviation Administration (FAA) initiated its efforts toward a drug-free workplace in August 1985 by issuing an Agency Policy on Substance Abuse.

- o The policy directed the Federal Air Surgeon to develop a substance abuse urinalysis program for those employees who are engaged in safety-related activities. ~~This screening program was scheduled to begin in mid-February 1987 and will be conducted~~ in conjunction with employees' annual ^{or periodic} physical examinations.

- o For those employees who have problems related to substance abuse, the agency has in place an employee assistance program which will provide counseling and direct employees to an appropriate

as part of

The drug testing program, which began in mid-February 1987, is conducted

drug abuse rehabilitation center or alcohol abuse treatment program. An active employee assistance program is currently functioning in each employing jurisdiction.

- o The agency has embarked upon an extensive educational program to increase drug abuse awareness by each employee. The awareness programs have been quite successful and will continue in the future.
- o FAA is in the process of issuing procedural guidelines, which will be disseminated prior to beginning the agency's testing program in February 1987.

delete

~~DOJ is currently reviewing the FAA program, and the actual implementation will commence when approval is received. The FAA program will be superseded by the Department's program when implemented.~~

Department of the Treasury:

the latter is incorporated into

The Treasury Department is actively engaged in the development of policies and procedures to implement the Executive Order for a drug-free Federal workplace. The Office of Enforcement has received input from all of the heads of offices and bureaus within the Department to assist in establishing a Departmental program. Responses have been received with a resulting informational base on the following issues:

1. Which positions are critical/sensitive;
2. The number of employees in sensitive positions, now and for the next two years;
3. Which positions should require applicants to be tested and how many tests are involved over the next two years;
4. The number of employees who might volunteer to be tested; and
5. The nature of all employee assistance programs in the Department.

A Treasury working group is processing this survey data and collating it with the OPM and HHS Guidelines as well as the Executive Order.

television public service announcement directed toward civil servants is being prepared in cooperation with HHS and FAA. A companion poster and brochure are also being prepared. Additional printed informational materials such as press releases and articles will be distributed.

The National Institute on Drug Abuse (NIDA) developed a short drug abuse program for senior staff of cabinet departments. The program, which took place in November 1986, clarified the issues surrounding drug testing of Federal employees and enlisted the support of the departments in dealing with drugs in the Federal workplace. NIDA also provided consultants for a training course for OPM supervisors and is preparing to participate in an orientation program for new DOL and HUD senior executives.

Department drug abuse education and prevention programs are included under the comprehensive drug-free workplace programs detailed in 1A above.

Of note:

Health educational pamphlets and films on drug and alcohol abuse and smoking have been procured, produced and used in the **Department of Defense**. The Armed Forces Radio and Television Service has produced many radio and TV spot announcements. A total of 175 drug and alcohol audiovisuals are available for use within the Services and DOD.

The **Federal Aviation Administration** began in November 1986 a series of briefings to explain to agency employees the nature and extent of its drug testing programs. The briefings were also designed to examine some of the more commonly raised myths regarding drug testing and to increase the level of drug abuse awareness among FAA employees. Further, FAA contracted with one of the world's most comprehensive laboratories specializing in testing for drug abuse to provide technical support and to assist the agency in the development and implementation of the program. Employees were given detailed information on laboratory cutoff levels, specimen collection, and laboratory procedures. Further, over 40,000 booklets and pamphlets have been disseminated to employees covering practically all aspects of substance abuse in the workplace. The agency is also developing training courses to assist FAA supervisors and managers in dealing with drug-related problems.

Federal agencies, as well as responding to inquiries from Federal employees and members of the public. In addition, OPM has responded orally to numerous inquiries from Federal agency officials.

- On February 19, 1987, the Department of Health and Human Services issued the **Scientific and Technical Guidelines for Drug Testing Programs**.

The Department of Justice has provided assistance to OPM and HHS in preparing the drug testing guidelines called for by the Executive Order.

Status - Department/Agency Programs:

Department of Defense: Drug testing in the military has been in effect since the 1970s. Since this Administration first came into office, the military has shown a dramatic 67 percent reduction in reported drug use. In 1985, less than 9 percent of our military men and women report using illegal drugs in the preceding 30 days.

In April 1985, DOD authorized the establishment of the DOD civilian drug testing program. The Army is the only DOD component that currently has an ongoing program in this area. The Navy program is being reviewed. The Directive authorizing the program was revised to comply with the President's Executive Order 12564 and the OPM regulation of November 1986 establishing a drug-free Federal workplace. Department-wide implementation of the revised Directive is expected in Spring 1987.

Department of Education: DOE is currently developing its policy and designating which of its employees are subject to drug testing. (See 1A above.)

Department of Justice: DOJ specifically references and follows the February 19, 1987 guidelines provided by HHS and the November 28, 1986 guidelines distributed by OPM as these guidelines relate to drug testing, supervisory training and employee assistance programs. As stated in item 1A above, the Department has ongoing employee assistance programs.

Department of Transportation: DOT's ^{proposed} program was brought into conformance with the OPM guidance issued on November 28, 1986. The ~~program~~ is now being reviewed for conformance with the recently-released HHS guidelines and modified where appropriate. ~~The Bill's~~ ✓

will be

proposal

~~drug testing program is currently being reviewed by DOJ for consistency with OPM and HHS guidelines.~~

- D. Improve the adequacy of sources of payment for drug and alcohol abuse rehabilitation.

Administration Action: OPM negotiated improved Federal Employee Health Benefits Program (FEHBP) benefits covering drug and alcohol abuse rehabilitation with each of the FEHBP carriers last summer. The brochures summarizing each carrier's benefits included a new summary of drug and alcohol abuse rehabilitation afforded by each carrier. Those updated brochures were made available to all Federal employees in the most recent open season for changing FEHBP carriers.

Related Legislation: The ADAA, Title VI (Federal Employee Substance Abuse Education and Treatment), Section 6005 requires HHS, with the National Academy of Sciences, to conduct a study concerning the adequacy of sources of payment for drug and alcohol abuse rehabilitation and report to Congress within one year.

Status:

OPM will continue to monitor and improve, when the opportunity exists to do so, the use of FEHBP to cover the expense of drug and alcohol abuse rehabilitation.

- E. Requirement for annual report to Congress on Federal program.

Related Legislation: The ADAA, Title VI (Federal Employee Substance Abuse Education and Treatment), Section 6002, requires OPM in cooperation with the President, the Secretary of HHS and other agencies (a) to develop appropriate prevention, treatment and rehabilitation programs and services for drug and alcohol abuse among employees and (b) to report to Congress on the above programs and services within six months and annually thereafter.

Status:

OPM has started work on the report that is due to Congress by April 27, 1987. The report will be based on agencies' Fiscal Year 1986 Annual Reports to OPM on their Federal Employee Counseling Programs as well as additional information required under the ADAA which agencies are now being asked to provide.

- B. Send letters from appropriate Cabinet members and agency heads to the heads of their counterpart organizations in state and local governments.

Administration Action: Required in Presidential memorandum dated October 4, 1986.

Status:

The **Attorney General** and other Department of Justice Officials will send appropriate correspondence to their counterpart organizations in state and local governments following full implementation of the Federal program.

The **Secretary of Education** has sent copies of Schools Without Drugs to all state education agencies and to all elementary and secondary schools inviting them to use the information contained in the booklet to achieve drug-free schools.

The **Secretary of Housing and Urban Development** has sent a letter to all Public Housing Authorities, encouraging them to take an active leadership role in eliminating illegal drugs from public housing developments.

A letter is being drafted from the **Secretary of Labor** to state Commissioners/Secretaries of Labor.

A letter to state transportation department executives is being drafted for signature by the **Secretary of Transportation**. The **Urban Mass Transportation Administrator** has sent a similar letter to the heads of the public transportation agencies as part of DOT's anti-drug abuse program.

OK

The **Office of Personnel Management's** Office of Public Affairs has provided copies of OPM's government-wide guidelines to state officials. OPM will prepare letters to counterpart organizations in state and local governments outlining the activities being undertaken by OPM in support of the President's initiative.

4. **Mobilize management and labor leaders in the private sector to fight drug abuse in the workplace.**

- A. Mobilize Chief Executive Officers of Fortune 500 companies, as "leaders of corporate communities," in the national crusade for a drug-free America.

abuse prevention efforts directed at youth, including positive prevention models such as character-building, as well as "Just Say No Clubs" and others. The results, especially as they pertain to school-based programs will be shared with DOEd.

- o In consultation with DOEd, ACTION will invite representatives from major school districts to participate in a series of regional conferences for community-based volunteer groups to identify mutual efforts in achieving drug-free communities.
- o ACTION will coordinate with DOEd in the development of a national drug abuse prevention essay, poster and video contest for the Nation's students, with underwriting by the major corporations.

The U.S. Coast Guard is planning to adopt the First Lady's "Just Say No" program on five selected large installations which will allow them to expose the program to the greatest number of elementary school age children possible. The Coast Guard has obligated \$250,000 to this program and plans to hire a GS-11 civilian to administer the program. The Coast Guard Military and Family Social Actions Staff has already contacted the national Just Say No program administrators in California for the requisite materials and training aids; they expect the program to be operating by the end of Fiscal Year 1987.

OK

3. Increase penalties for distributing drugs to students and for using juveniles for the distribution and/or manufacture of illegal drugs.

- A. Attorney General and Secretary of Education to work together to ensure that Federal laws against distributing drugs in or near schools are known and enforced in cooperation with local authorities.

Administration Action: Directive included in Presidential memorandum dated October 4, 1986.

Status:

The Attorney General has caused to be distributed to all United States Attorneys and Assistant United States Attorneys a prosecution manual which analyzes sections dealing with distributing drugs to students and for using juveniles for the distribution and/or manufacturing of illegal drugs. In addition, the FBI

- o The first video (10 minutes) features five drug addicts in Pittsburgh and shows the dangers and other disturbing aspects of drug abuse. This video was subsequently shown to two high school assemblies which also featured a skit by RAP, Inc. (a local drug rehabilitation program) and presentations by a U.S. Attorney and Dr. Mark Gold, who established the 800-COCAINE Helpline. Excerpts from these assemblies were combined with the original video to make a new video which, together with the descriptive brochure, was offered to all U.S. Attorneys for use with schools and community groups.
- o Office of Public Affairs representatives traveled to 20 judicial districts to meet with school superintendents, local principals and community groups.
- o Film clips from the first two videos have now been combined with film messages from the President, the Attorney General and other individuals to make a new, 22-minute video entitled "It Can't Happen to Me" for distribution to any interested parties. The Office of Public Affairs is currently trying to identify an appropriate distribution agency for this new video.

DOJ components are participating in a working group designed to share information between components involved in the demand-side efforts. With coordination from the Office of Public Affairs, management level employees are accepting speaking engagements on the drug abuse issue.

Department of Labor: The Department of Labor has been in contact with numerous unions, employers and assistance groups to discuss a drug-free workplace. In addition, DOL personnel have represented the Administration at conferences addressing drug abuse prevention, such as the recent meeting of the Association of Labor Management Administrators on Alcohol (ALMACA) and the National-American Wholesale Grocers' Association (NAWGA).

Department of Transportation: Drug abuse prevention and education activities are carried out by the operating Administrations in their dealings with the public and the transportation industry -- for example, the USCG in boating safety efforts, the FAA in carrying out its safety and inspection responsibilities with

pilots and airmen, etc. Also see DOT comments under Chapter VI, Section 1.

Department of Housing and Urban Development: HUD has launched a major national campaign to achieve drug-free public housing, as described in Chapter VI, Section 2.

was asked by the President

VI. OTHER NATIONAL INITIATIVES

1. Ensure drug-free public transportation.

A. The Secretary of Transportation ^{the} to take lead in an effort to ensure safe transportation of people and goods and work with the Secretary of Health and Human Services, the Secretary of Education, and the Attorney General to promote regulatory changes, drug-testing, prevention, and education leading to a drug-free transportation system.

Administration Action: Directive included in Presidential memorandum dated October 4, 1986.

INSERT A

Status:

Through regulation, the Department of Transportation will require pre-employment, post-accident and random testing for commercial airline pilots and crew, and other employees directly responsible for the safety of flight operations. In addition, periodic testing will be required as part of the annual physical for those who are required by DOT regulations to have such physicals.

In rail transportation, DOT implemented in 1986 the first rule in American history to deal with alcohol and drug abuse by railroad employees. Stronger measures are still necessary. For example, DOT does not have the statutory authority necessary to penalize railroad employees who tamper with safety devices such as cab warning whistles. ~~The Secretary has called upon Congress to act immediately to give the Department authority to regulate directly the conduct of railroad employees who have safety-related responsibilities.~~

INSERT B

~~The National Highway Safety Administration (NHTSA) is working with the Department of Education to develop and distribute educational materials to state and local public transportation officials. A pamphlet has been drafted, "Anti-Substance Abuse and the School Bus Driver," with plans to distribute it in the third quarter of 1987.~~

~~In addition to these actions, DOT has a number of other current or proposed actions which are summarized below with their status as of January 1987.~~

INSERT B (continued)

Aviation:

- o Air Carriers, Commuters and General Aviation
 - Use of drugs prohibited for airman certificate holders. (Status: Program in effect.)
 - Drug testing program for safety-related industry personnel. (Status: ANPRM issued 12/09/86. Comments close 02/23/87.)

Water Transportation:

- o Commercial Marine Operating Personnel
 - Drug screening for mariners at physicals. (Status: NPRM in DOT coordination shortly.)
 - ~~Optional post-casualty testing~~; "intoxication" defined. (Status: Final Rule expected within few months.)
 - Mandatory post-casualty drug testing. (Status: NPRM in coordination shortly.)
- o Recreational Boaters
 - Establish Federal standards for intoxication and enforcement. (Status: NPRM sent to OMB 12/02/86.)

Rail Transportation:

- o Certain Safety-Related Rail Crew
 - Post-accident and pre-employment toxicological testing. Breath and urine testing for reasonable cause. (Status: Rule in effect. Undergoing judicial challenge.)
- o AMTRAK
 - Testing of safety-sensitive employees at physicals, also covered by Federal Railroad Administration (FRA) testing program. (Status: In effect.)

current diagnosis of alcoholism.
certain prohibited drugs and

Motor Carrier Transportation:

- o Interstate Truck and Bus
 - ~~Pre-employment disqualification for alcoholism or use of certain drugs.~~ (Status: In effect.)
 - Pre-employment and ^{periodic} regular drug testing. (Status: ANPRM published 05/13/86.)
 - Post-accident testing. (Status: ^ASNPRM in DOT coordination.)
- o Hazardous Materials Drivers
 - Mandate or recommend drug testing requirement. (Status: NPRM published 05/13/86.)
 - Random drug testing. (Status: SNPRM in DOT coordination.)

INSERT B
Cont.

Urban Public Transportation:

- o Transit Bus Drivers, Urban Rail Motormen, Conductors
 - Encourage development of local drug and alcohol abuse programs. (Status: "Dear Colleague" letter sent to operators.)

Other:

- o School Bus Operators
 - NHTSA working with Department of Education to develop educational material on drug abuse. (Status: NHTSA is drafting and expects to complete pamphlet by third quarter of 1987.)
- o Highway Vehicle Operators
 - Anti-drugged driving activities. (Status: Report due to Congress by 10/27/87.)
- o State Departments of Transportation
 - Send letter from the Secretary encouraging development of anti-drug and alcohol abuse programs. (Status: Being drafted by DOT Governmental Affairs.)

DOT Personnel:

- o All Employees
 - Drug awareness and education program. (Status: Proposed 01/21/87.)
- o Safety and Security-Related Employees
 - Random drug testing. (Status: Proposed 01/21/87.)
- o FAA Safety and Security-Related Employees
 - Periodic drug testing. (Status: Awaiting Department of Justice clearance.)
 - Random drug testing. (Status: Proposed 01/21/87.)
- o U.S. Coast Guard Military Personnel
 - Random drug testing. (Status: In effect since January 1983.)

- B. Establish mechanisms to ensure that common carrier operators are not under the influence of alcohol or drugs.

Related Legislation: The ADAA, Title I, Subtitle T (Common carrier operation under the influence of alcohol or drugs) establishes penalties of not more than five years imprisonment or not more than \$10,000 fine, or both, for an individual who operates or directs the operation of a common carrier while under the influence of alcohol or drugs.

Status: See comments under VI-1A.

Rail Initiatives

Federal Railroad Administration regulations for the control of alcohol and drug use have been in effect since February 10, 1986. Those regulations prohibit employees who are directly involved in train operations from using, possessing, being under the influence of, or being impaired by alcohol or drugs while on the job. The regulations require blood and urine testing of employees involved in major accidents. For example, the toxicological tests performed on employees involved in the fatal Amtrak/Conrail crash in Maryland on January 4, 1987 were done under the authority of FRA's

rule. The regulations also permit urine and breath testing where reasonable cause exists, and require:

- (i) Adoption of railroad policies to identify and treat employees with alcohol or drug problems,
- (ii) ^{Pre-} Re-employment drug screening, and
- (iii) Improved reporting of the role of alcohol and drugs in accidents.

FRA ^{held} ~~will hold~~ a hearing on February 18, 1987 to obtain information to assist in evaluating its regulations. Should that information indicate a need for revisions, a Notice of Proposed Rulemaking (NPRM) would be issued at a later date.

INSERT C

FRA's regulations are being challenged in court by rail labor organizations which allege that the testing provisions violate the Fourth Amendment. The parties are awaiting decision by the United States Court of appeals for the Ninth Circuit.

In addition to the regulatory and enforcement action FRA has taken to ensure drug-free rail transportation, FRA provides leadership for a national voluntary alcohol/drug abuse prevention program known as "Operation ~~Road Block~~." A joint effort uniting labor, management and FRA, this program stresses peer intervention, as well as general prevention and training activities.

Red

INSERT D

~~As soon as Congress gives DOT authority to regulate directly the conduct of railroad employees who have safety-related responsibilities, the Department will set requirements similar to those planned for aviation,~~

- C. Improve highway safety by implement programs to prevent drugged driving.

Related Legislation: The ADAA, Title III, Subtitle G (Transportation Safety), Section 3402 requires the Secretary of Transportation to conduct a study, with a report submitted to Congress within one year, on the relationship between the use of controlled substances and highway safety.

Status: See comments under VI-1A above.

The National Highway Traffic Safety Administration is undertaking the study required by Congress. The report will contain a review of what is known about the

effects of drugs on simulated driver behavior and the incidence of drugs in fatally injured drivers. It will also contain a description of ongoing research designed to provide more definitive information on the drug/highway safety hazard. The report will be submitted by October 27, 1987, as required by Congress.

- D. Prevent the operation of commercial motor vehicles while under the influence of drugs or alcohol.

Related Legislation: Section 12008 of the Commercial Motor Vehicle Safety Act of 1986 (Title XII of the ADAA) requires the Federal Highway Administration (FHWA) to contract with the National Academy of Sciences (NAS) to conduct a study to determine the appropriate blood alcohol concentration (BAC) level (0.10 to 0.04 percent) by which a person operating a commercial motor vehicle would be deemed to be driving under the influence of alcohol. The Secretary of Transportation, guided by the study's results and rulemaking comments, will then promulgate a commercial motor vehicle driver BAC standard. Drivers who operate commercial motor vehicles in violation of this standard will be subject to disqualification and possible civil or criminal penalties. States would be required to enact similar laws providing that any driver who operates a commercial motor vehicle at or above the Federal level is deemed to be driving under the influence of alcohol. States not enacting a BAC level law mandating licensing suspension for violators risk the loss of Federal-aid highway funds. Failure by the Secretary to establish a BAC standard under Section 12008 by October 17, 1988 will result in the adoption of a 0.04 percent standard as the applicable Federal standard. The final report is due October 27, 1987.

Status: The FHWA has contracted with NAS for the study, which will cost \$275,000 and was awarded on January 12, 1987. Currently, the NAS is assembling a committee of alcohol and safety experts to study and research the contracts objective.

2. Reduce the level of illegal drug activity in Public Housing Authorities.

- A. The Secretary of Housing and Urban Development to take the lead in a cooperative national effort to reduce the level of illegal drug activity in Public Housing Authorities. Includes partnership formed by HUD with DOJ, HHS and DOL to work with local Public House Authorities, law enforcement officials, and appropriate local authorities to achieve drug-free public housing.