The Clinton Administration Methamphetamine Strategy

Over the past few years, trafficking and abuse of a highly potent form of methamphetamine has been on the rise in the United States. Although still more common in western areas of the country, methamphetamine is no longer confined to any one region; Given the production and trafficking structures now in place, if unchecked, the nation as a whole is poised for a methamphetamine boom of pandemic proportions.

The Clinton Administration Methamphetamine Strategy attacks the emerging methamphetamine trade at every level and every front. This comprehensive national strategy includes a combination of a coordinated law enforcement response, regulation of precursor chemicals, international initiatives, sentencing and legislative proposals, training of investigators and prosecutors, treatment and prevention and a public awareness campaign.

Specifically, the Methamphetamine Strategy includes:

- Additional investigative and prosecutive resources, especially along the Southwest Border and in rural areas [Administration's FY97 budget request seeks $10 million for methamphetamine law enforcement efforts]

- A Directive from the Attorney General to each United States Attorney to assess and address the methamphetamine problem in each district and to coordinate a multi-pronged response and to report back to her within 90 days.

- Increased mandatory minimum sentences for methamphetamine to equalize it with crack cocaine mandatory minimum of 5 years for 5 grams and 10 years for certain greater amounts.

- Increased penalties for trafficking in precursor chemicals; so that they remain in proportion to increased methamphetamine penalities in this bill.

- A new separate offense for the improper storage, use or other handling of the dangerous chemicals used in the clandestine manufacture of methamphetamine; offense would be treated as endangering the public health with dangerous substances with sentences now usually in the 3-5 year range.

- Training for law enforcement to protect against the risks encountered at clandestine laboratories and chemical dump sites;

- Tighter regulatory controls on drug products containing the precursor chemicals ephedrine and pseudoephedrine;

- Establishing an operational binational chemical control task force between the United States and Mexico; and

- an educational campaign focused on persons at risk.

Preface

Abuse of **methamphetamine** -- a potent, destructive and addictive drug -- is steadily increasing. While the greatest concentration of trafficking and abuse is still in the West and Southwest, mehtamphetamine is spreading steadily eastward across the country to the Midwest and elsewhere. The inextricable association between methamphetamine and violence is like that of few other addictive substances and it is not limited to the traffickers' fierce efforts to protect their interests in the illicit marketplace or to an addict's desperate craving in search of resources needed to purchase another fix. The violence of methamphetamine is chemically generated in the user -- hostile, uncontrollable, toxic rages that frequently result in harm against others in the home, the immediate community and in law enforcement. Some clinicians believe that there has never been an addiction so proficient in human destruction -- of the brain, the family and the community.

The law enforcement, medical, research and treatment communities are coming together to sound a warning and meet a growing threat. At the Attorney General's invitation, many have contributed to this threat assessment and proposed strategy: the Criminal Division of the Department of Justice, the Drug Enforcement Administration and our partners in State and local law enforcement, in particular, the Attorneys General of California and New Hampshire and the California Bureau of Narcotics Enforcement. We are grateful for the contributions of S. Alex Stalcup, M.D. of San Francisco; Michael Abrams, M.D. of Des Moines; and the following offices of the Justice Department: the Attorney General's Advisory Committee of U.S. Attorneys, the Environment and Natural Resources Division (Environmental Crimes Section), the Office of Policy Development, the National Institute of Justice and the Office of Justice Programs. We are also grateful for the thoughtful comments of the Departments of Treasury, State and Health and Human Services; the Office of National Drug Control Strategy; the Environmental Protection Agency; and the National Institute of Drug Abuse.

In February 1996, over 200 members of Federal, State and local law enforcement nationwide met in Arlington, Virginia, for a conference sponsored by DEA and developed along with the California Bureau of Narcotics Enforcement and the California Narcotics Officers Association. The conference assembled a broad representation of the law enforcement community to share information and experience in issues relating to methamphetamine. The content of the discussions and the recommendations of the conference working groups are incorporated in this strategy. Together, we have begun the process of developing a comprehensive strategy, not limited to law enforcement, but encompassing, as well, regulation of precursor chemicals; international initiatives; sentencing and legislative proposals; training of investigators and prosecutors; treatment and prevention; and public awareness.

Table of Contents

Table of Contents (cont'd)

I. Methamphetamine abuse and trafficking patterns

Trafficking and abuse of a highly potent form of methamphetamine have been on the rise in the United States over the past few years, and this drug continues to devastate many communities. Although still more common in western areas of the country, methamphetamine trafficking and abuse are no longer confined to any one region: methamphetamine is spreading eastward. For example, in areas like New York, New Jersey and Delaware, methamphetamine use in the past had been confined to a small group of users typically associated with motorcycle gangs; in the past year, however, methamphetamine has become popular with college students, housewives and factory workers and has become a drug of choice at "raves" (all-night dance gatherings). Given the production and trafficking structures now in place, if unchecked, the nation as a whole risks experiencing very serious levels of methamphetamine abuse.

A. Production: Clandestine Laboratories

Historically, the suppliers of methamphetamine throughout the United States were outlaw motorcycle gangs and other independent trafficking groups. Although these groups continue to operate, Mexican polydrug trafficking organizations now dominate wholesale methamphetamine trafficking. Mexican organizations have revolutionized production by operating large-scale laboratories capable of producing unprecedented quantities of high-purity methamphetamine and have saturated the market in the Western United States with this product. Much of the clandestine laboratory activity remains centered in California, where the methamphetamine problem is most acute.

In the Midwest, there is an increase in methamphetamine abuse in Iowa, Nebraska, Kansas and Missouri, signalling eastward expansion. However, the Midwest laboratories are relatively small-scale in comparison to the laboratories operating in California. DEA believes that the rise in laboratory seizures in the Midwestern states does not reflect a concerted effort by major traffickers to shift production from sites in California, as much as it reflects the increasing effort by local entrepreneurs, who operate on the periphery of the methamphetamine market, to exploit the expanding demand for the drug. Figure 1 illustrates the number of clandestine methamphetamine laboratories seized by DEA, in whole or in part, in each state over the last three calendar years (with partial data for FY95).[1]

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[1] Importantly, Figure 1 shows only seizures in which DEA played a role; it does not show seizure made solely by state and local law enforcement. This is significant when one considers that the California Bureau of Narcotics, for example, seized 419 clandestine labs in 1994 and 465 in 1995.

Clandestine methamphetamine laboratories in the United States are makeshift operations that usually operate on an intermittent and transient basis. After "cooking," a batch of finished product is often moved or stored and the lab is disassembled while additional chemicals are acquired. The laboratory may be relocated sometime later to "cook" another batch; relocation affords some protection against detection. Storage facilities often are used to house or safeguard chemicals, glassware and the finished product. It is not uncommon for operators to have multiple laboratory sites.

Methamphetamine laboratory operators often are well-armed, and their labs occasionally are booby-trapped and equipped with scanning devices employed as security precautions. Weaponry, ranging from single firearms to arsenals of high-powered weapons and explosives, are commonly found at laboratory sites.

Laboratory operators, or "cooks," usually display little or no concern for public safety or the environment. Cooks vary from high school dropouts with no real chemistry education to professionals with graduate degrees in chemistry. Typically, however, they have little formal training, and learn from a handwritten recipe, underground publications, the computer information networks, apprenticeships or fellow inmates during periods of incarceration.

The clandestine nature of the manufacturing process and the presence of ignitable, corrosive, reactive and toxic chemicals at the sites have resulted in explosions, fires, toxic fumes and irreparable damage to human health and to the environment. Every year, fires or explosions at a number of clandestine laboratory sites lead to their discovery. Hazardous chemical wastes, the by-products of the clandestine drug manufacturing process, are disposed of by unsafe and illegal methods -- operators dump them on the ground or in nearby streams and lakes, pour them into local sewage systems or septic tanks, or bury them. The toxicity and flammability of methamphetamine laboratories pose a great danger to law enforcement. As a result, special training in health, safety and environmental protection measures and careful planning are prerequisites to any laboratory raid.

In addition to the manufacture of methamphetamine in the United States, it increasingly is being produced in Mexico and smuggled into the United States. Clandestine methamphetamine laboratories in Mexico appear to be operated in a similar manner to their counterparts in the United States. For example, temporary laborers are hired to perform the production process, laboratories often are located in remote areas (e. g., ranches), and large-capacity laboratory apparatus are used. Seizures of large amounts of methamphetamine in Mexico are common.[2]

B. **Distribution, Availability and Seizures**

Domestic methamphetamine production and abuse is concentrated in the Western and Southwestern United States. The hardest hit cities in these regions include Los Angeles, Phoenix, San Diego, San Francisco and, to a lesser degree, Dallas, Denver and Seattle. Methamphetamine also is available consistently in wholesale quantities in some cities in the Midwest and the South. Mexican drug trafficking organizations reportedly have supplanted Asian suppliers of the Hawaiian methamphetamine market. According to the DEA, areas of the Pacific Northwest, Midwest and some portions of the South and Southeast have experienced a dramatic increase in the availability of methamphetamine supplied by Mexican trafficking organizations.

Methamphetamine trafficking is a violent business. For example, in June 1994, DEA Special Agent Richard Fass, acting in an undercover capacity, was attempting to make a purchase of methamphetamine in a Glendale, Arizona strip-mall. S/A Fass was ambushed, shot and killed by four methamphetamine traffickers whose sole intent was to rob him.

Seizure statistics indicate that methamphetamine availability is increasing. The growing frequency of large, high-purity methamphetamine seizures over the past few years provides strong evidence of significantly increased availability of the drug. The total weight and number of methamphetamine seizures submitted to DEA laboratories have increased over the past four years. The average purity of methamphetamine seizures submitted both in FY94 and FY95 was 87 percent, the highest average potency level in the last 12 years.

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[2] Methamphetamine seizures in Mexico have increased from a negligible quantity in 1992 to 496 kilograms in 1995. Seizures of methamphetamine along the U.S.-Mexico border also increased from 6.5 kilograms in 1992 to 653 kilograms in 1995. Moreover, seizures of ephedrine, a key precursor chemical, have increased steadily in Mexico, from 2,651 kilograms in 1992 to 6,397 kilograms in 1995.

Figure 2

Methamphetamine Submissions

Fiscal Year	Total # of Seizures	% Change	Total net wt. (kilos)	% Change
1985	704	--	103.9	--
1986	785	+12%	229.1	+121%
1987	868	+11%	167.6	-27%
1988	1,122	+29%	576.3	+244%
1989	1,032	-8%	518.8	-10%
1990	941	-9%	751.6	+45%
1991	772	-18%	293.5	-61%
1992	841	+9%	357.9	+22%
1993	880	+5%	488.8	+37%
1994	1,145	+30%	704.8	+44%
1995*	1,470	+28%	950.3	+35%

* FY95 figures are preliminary and subject to updating.

Note that statistics on the quantities of drugs seized can be significantly affected by a small number of large seizures. For example, the increase in the FY95 figure was due in large part to a large seizure in Las Cruces, New Mexico, without which the overall percentage change in the quantity of methamphetamine seized during FY95 would have decreased.

Also note that the above figures represent DEA seizures. Figure 3 summarizes seizures by the California Department of Justice Bureau of Narcotic Enforcement.

According to the El Paso Intelligence Center, the amount of methamphetamine seized in transit from Mexico to the United States increased dramatically beginning in 1993. This is clearly borne out by the following seizure statistics along the border:

Figure 4

Methamphetamine Seizures in Kilograms

	1992	1993	1994	1995
Southwest Border (EPIC)	6.5	306	682	653

DEA expects that increasingly strict chemical controls and enforcement efforts at the Federal and State levels, especially California, will result in a shift to increased production of methamphetamine in Mexico. In addition, Mexico does not have adequate laws in place to control the importation and diversion of ephedrine, a precursor chemical for methamphetamine production.

Interestingly, the trend in the <u>number</u> of methamphetamine laboratory seizures -- once heavily relied on by DEA as a gauge of the volume of methamphetamine trafficking -- does not reflect the increased volume of drugs seized. This is due to the greatly increased scale of manufacture by Mexican organizations, compared to the smaller scale laboratories found in previous years.

Figure 5

Methamphetamine Laboratory Seizures Reported to DEA[3]

1977	1978	1979	1980	1981	1982	1983	1984	1985	1986
46	69	136	126	89	132	119	185	266	412

1987	1988	1989	1990	1991	1992	1993	1994	1995
653	629	652	429	315	288	218	263	315

[3] As reported to DEA Headquarters by teletype, reports of investigation and Clandestine Laboratory Report, pursuant to DEA Agents Manual reporting requirements. DEA defines a clandestine laboratory as "an illicit operation consisting of a sufficient combination of apparatus and chemicals that either has been or could be used in the manufacture or synthesis of controlled substances." This definition does not include the seizure of chemicals, glassware or other equipment which by themselves may or may not demonstrate the existence of a laboratory.

California Bureau of Narcotics Enforcement (BNE) seizures of methamphetamine and clandestine labs have increased dramatically. Methamphetamine seizures surged from 1,400 pounds in 1991 to over 18,000 pounds in 1995. Also, last year, BNE's lab seizures reached 465 -- one every 19 hours. Figure 6 depicts BNE clandestine laboratory seizures.[4]

The price of methamphetamine has remained within a fairly constant range over the past several years. The nationwide range of prices are estimated per pound ($6,500-$20,000), per ounce ($500-$2,700) and per gram ($50-$150). Methamphetamine prices are heavily influenced by the supply of the key precursors, ephedrine or pseudoephedrine. For example, through mid-1995, when ephedrine and pseudoephedrine supplies were readily available, a pound of methamphetamine sold for as low as $3,000 in Los Angeles and San Francisco. Lately, however, pound prices have increased, most likely as a result of recent efforts to curtail ephedrine and pseudoephedrine supplies. Currently, a pound of methamphetamine sells for $6,500 to $10,000 in both cities.

C. Use

The latest information from the Drug Abuse Warning Network (DAWN)[5] shows that the estimated number of nationwide emergency room drug abuse episodes involving methamphetamine has increased steadily since 1992, following significant decreases that had begun in 1990.

DAWN statistics confirm that the Western cities are hardest hit by methamphetamine abuse. In Phoenix, emergency room episodes involving methamphetamine nearly quadrupled from 1991 to 1994. In addition, methamphetamine-related deaths reported to DAWN by Phoenix medical examiners increased eleven-fold from 1991 (11 deaths) to 1994 (122 deaths).

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[4] We note that comparison of lab seizures between and among different law enforcement agencies is difficult because of varying definitions of what is a "lab" (e.g., whether to include the temporary use of a hotel room). This variance in definition also accounts for differences reflected in Figures 5 and 6.

[5] The most recent available DAWN data is preliminary data for calendar year 1994.

Figure 7

Methamphetamine-Related Emergency Room Mentions in Selected Cities

City	1991	1992	1993	1994	% Change
Los Angeles	506	827	1,227	1,418	180%
Phoenix	164	281	481	770	370%
San Diego	516	931	930	967	87%
San Francisco	839	688	992	1,150	37%
FOUR CITIES	2,025	2,727	3,630	4,305	113%

Figure 8

Methamphetamine-Related[6] Deaths in Selected Cities

City	1991	1992	1993	1994	% Change
Los Angeles	99	68	198	219	121%
Phoenix	11	20	63	122	1009%
San Diego	60	97	110	172	187%
San Francisco	41	48	62	69	68%
FOUR CITIES	211	233	433	582	176%

User groups for methamphetamine have traditionally been white males between the ages of 19 and 40. This population remains most prominent in the DAWN data. However, reports from epidemiologist and treatment personnel reveal several possible modifications in the methamphetamine user profile. For example, methamphetamine use has increased among the Hispanic population in the United States, possibly as a result of the increasing involvement of Mexicans in the production and retail distribution of the drug. There also are reports that methamphetamine use is increasing among college students and young professionals involved in the club scene or participating in "rave" parties, where the drug has emerged among a battery of "party drugs" including LSD, marijuana, Ketamine and alcohol.

The Drug Use Forecasting (DUF) system also shows serious methamphetamine use. In 1994 through September 1995, six of 23 DUF sites showed significant rates of methamphetamine use among arrestees. The percent of arrestees testing positive were: San Diego (37%), Phoenix (23%), San Jose (18%), Portland (16%), Los Angeles (8%), and Omaha (6%). In all DUF sites, positive tests for methamphetamine increased from 6% in 1991 to 16% in 1995.

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[6] The DAWN data under-count the number of "methamphetamine-related" deaths in some measure. Many of the violence-related consequences of methamphetamine trafficking and use are not included in the DAWN statistics and/or are not widely understood, *e.g.*, homicides, domestic violence, shaken-baby syndrome and HIV transmission.

D. **Pharmacology**

Methamphetamine~~, like cocaine,~~ is a potent central nervous system stimulant. It can be smoked, snorted, injected or taken orally. Snorting and smoking have increased as methods of administration, but injection still predominates among the largest user groups in San Francisco. Ingestion of methamphetamine increases heart rate, blood pressure, body temperature and rate of breathing; dilates the pupils; and produces euphoria, increased alertness, a sense of increased energy and tremors. High doses or chronic use have been associated with increased nervousness, irritability and paranoia, which in turn lead to hyperactive behavior and dramatic mood swings. Heavy users, who can inject up to 2.5 grams (2,500 milligrams) per day, exhibit extreme belligerence and paranoia. Methamphetamine is neurotoxic; adverse consequences of abuse include the risk of stroke and/or prolonged psychosis. ~~The behavior of a methamphetamine user is so violent and bizarre that public health officials often find it difficult to distinguish methamphetamine users from paranoid schizophrenics.~~ Withdrawal from high doses produces severe depression.

~~As noted at the very beginning of this report, some experts believe that methamphetamine is even more destructive than crack cocaine. According to Dr. Michael Abrams, a physician at Broadlawn Medical Center of Des Moines, Iowa, the chemical structure of methamphetamine renders it more stimulating to the brain than any other drug and capable of far more destructive brain damage.~~

Law enforcement officers and members of the treatment community have come forward with extensive anecdotal evidence that the recent changes in methamphetamine production have produced severe consequences for abusers. For example, Dr. S. Alex Stalcup, a physician specializing in treatment of methamphetamine-addicted individuals in the San Francisco Bay area, defines three amphetamine/methamphetamine user groups: low-intensity, "binge" and high-intensity users. Low-intensity users take methamphetamine to lose weight and stay alert and awake; adolescents, housewives and shift workers are common among this group.

Dr. Stalcup's anecdotal observations reflect a pattern of "binge" use~~rs is~~as depicted in Figure 9. According to Dr. Stalcup, the initial "rush" and "binge" to maintain the original "high" of methamphetamine are followed by 4-24 hours of "tweaking" -- the phase of the binge in which a user need not ingest any additional drug, but remains high and exhibits little control over his or her behavior. This "tweaking" phase -- a nearly intolerable state, according to Dr. Stalcup -- poses the greatest risk to family, friends, the public and police; the body's release of adrenaline can induce a violent rage manifest through aggression, violence, paranoia, anxiety, hallucinations and hyperactivity. It can also cause the user to have severe physical reaction -- heart attacks and stroke -- if the user is physically restrained using traditional law enforcement methods.

The tweaking phase is followed by the "crash," during which the user sleeps for one to three consecutive days. According to Dr. Stalcup, an average "binge" methamphetamine user can follow the crash with up to a week of normal behavior before withdrawal sets in, triggering the next binge cycle.

The third category, high-intensity methamphetamine users, varies from the binge users in that they follow the crash immediately by another 5-15 day binge, putting these users in an almost perpetual cycle of rushing, tweaking and crashing (<u>see</u> Figure 10). These users may experience extreme weight loss, aggression, toxic psychosis (including paranoia, hallucinations and hysteria), stroke and heart failure.

Binge and high-intensity methamphetamine use leave no time for the care of children; domestic violence, child neglect and abuse are inevitable consequences. According to Dr. Stalcup, neither the binge, tweaking nor crash phases yield time to tend to the needs of dependents. At the most violent, irritable and paranoid phases of the binge, children are at risk of physical abuse, "shaken baby" syndrome, or worse. In at least one highly publicized case, an Arizona man, high on methamphetamine, beheaded his 14-year old son, believing him to be a demon, and tossed the dismembered head onto a New Mexico public highway.

Domestic violence is only one of a number of public health risks. Dr. Stalcup **believes that methamphetamine abuse plays a causative role in HIV infection in and transmission by** ~~cites an increased incidence of HIV in~~ female methamphetamine users~~, the result of increased promiscuous behavior in the "tweaking" phase and of trading sex for drugs to satisfy severe craving for additional drugs. According to Dr. Stalcup, the number one risk factor in contracting HIV is a history of stimulant abuse~~.[7]

Finally, the pharmacology of methamphetamine indicates severe and crippling depression in the extended, long-term withdrawal process -- a process that does not even begin until approximately 30 days after use (and often well after the term of availability of traditional treatment interventions). This fact

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[7] **Dr. Stalcup believes that methamphetamine abuse may be responsible for HIV transmission, both because of increased sexual activity on the part of stimulant users and because addicted individuals typically trade sex for drugs. We note, as well, the the popularity of injection as a method of ingestion generally increases risk of HIV-transmission.**

must be addressed by the treatment community in developing methods to break the cycle of methamphetamine dependency. Similarly, treatment providers need to know how to deal with users at whatever stage they present.

II. Enforcement Activities -- Federal and State

A. Current Enforcement Efforts

DEA field divisions have initiated specific programs to address methamphetamine trafficking and diversion of precursor and essential chemicals. In particular, efforts are underway to:

- Develop additional intelligence on clandestine methamphetamine production sites and target laboratory operators.

- Identify trafficking organizations that are transporting methamphetamine from sources of supply in Mexico and the Western United States. Gather intelligence on maritime, air and land transshipment methods and routes used by domestic and international drug trafficking groups.

- Monitor shipments of methamphetamine precursors into the United States, which must be reported under the Controlled Substances Act.

- In addition to mandatory controls, maintain ongoing liaison efforts with chemical companies that import/export and/or distribute listed chemicals used to manufacture methamphetamine to garner the cooperation of legitimate firms. Specifically, work with chemical suppliers to identify suspicious orders of precursor and essential chemicals, glassware and other equipment and determine which chemical suppliers are, whether wittingly or unwittingly, responsible for precursor chemical diversion.

- Focus special emphasis on major violent methamphetamine trafficking organizations.

- Select high-level targets who are involved in significant money laundering and other organized criminal activities.

- Maintain liaison with federal, state and local law enforcement and regulatory personnel to ensure that there are no gaps in the law enforcement system. Rely on state law and regulatory controls where they are stronger than the federal law.

B. **Proposed Strategy; Implementation Items**

- Continue all elements of Section II.A, above, entitled "Current Enforcement Efforts."

- The U.S. Attorney in each judicial district should meet with the Federal, State, and local law enforcement leadership and public health officials in the district and then together (i) assess the threat of methamphetamine to the district; and (ii) thereafter, if a threat is detected, develop a comprehensive plan to attack that threat through a combination of law enforcement efforts, education and public awareness campaigns, consultations with local medical/hospital personnel and addiction treatment providers. The comprehensive plan should inventory available and needed resources -- personnel and funding -- to meet the threat and carry out the plan of attack. The district threat and coordinated efforts of quelling the problem should be communicated to and among surrounding or related districts and to the Department. Specific deadlines for taking the assessment and developing a plan will be provided.

- Form a commitment to information-sharing by Federal, State and local agencies, including standardization of reporting (e.g., a uniform definition of "clandestine lab"); identify methods of connecting existing intelligence information databases; publish a list of databases, agencies, organizations, informational sources and points of contact that can be of assistance in methamphetamine investigations.

- Form or intensify use of existing task forces composed of federal, state and local law enforcement officials (e.g., OCDETF, Safe Streets Task Force) to investigate methamphetamine trafficking, particularly in rural areas in need of enhanced resources.

- Form regional working groups to tailor implementation plans specific to local concerns and enforcement issues.

- Enhance the focus of investigative and prosecutive resources of the Southwest Border Initiative on the methamphetamine production and chemical supply operations of the Mexican trafficking organizations targeted by the Initiative.

- Initiate "Operation Summer Surge," a U.S. Customs Service operation involving agents, analysts, inspectors and K-9 officers providing additional vigilance against precursor chemical smuggling organizations operating on the U.S.-Mexico border.

- Regularly convene conferences among federal, state and local law enforcement officials to share operational intelligence and investigative and prosecutive strategies.
- Monitor publicly accessible electronic media (e.g., the Internet) to gain information on methods of production and trafficking, after ascertaining Privacy Act and constitutional limitations, if any.
- Utilize all available law enforcement techniques, including undercover operations, electronic surveillance -- with particular focus upon the command and control communications structures -- and grand jury investigations, to identify and pursue the larger production and trafficking organizations.
- Develop or maintain agreements and working relationships as necessary between federal, state and local law enforcement and environmental agencies to respond to clandestine methamphetamine laboratories identified in investigations in order to pool the expensive, specialized equipment, training and expertise needed to respond to clandestine laboratories, which are usually associated with highly flammable and hazardous chemicals.
- Build upon existing liaisons and develop new liaisons with security personnel at United States points of entry and with public and private mail services.

III. Regulatory Controls

A. Analysis of Current Situation

1. Methamphetamine

Methamphetamine is regulated under the Controlled Substances Act (CSA), 21 U.S.C. § 803 et seq., and implementing regulations as a Schedule II stimulant (see 21 C.F.R. § 1308.12(d)). As such, it is subject to the most stringent regulatory criteria of any drug with a currently accepted medical use. Currently accepted medical uses of the drug include the treatment of obesity and attention deficit disorder. See Physicians Desk Reference (50th ed. 1996, at 419).

As a Schedule II controlled substance, methamphetamine is subject to production quotas based on total estimated annual needs for medical, scientific, research and industrial purposes. See 21 U.S.C. § 826. The 1995 production quota was 16 kilograms. The 1996 quota will increase to 44 kilograms. The nearly threefold increase is explained by depletion of methamphetamine inventories by existing manufacturers and distributors. Coupled with the penalties imposed for methamphetamine trafficking -- mandatory minimum penalties of 5 and 10 years for 10 and 100 grams, respectively -- regulatory controls on the drug itself are appropriately stringent. These statutory and regulatory measures have, in fact, largely curtailed the diversion and abuse of licitly produced methamphetamine from legitimate channels, as evidenced by the very small number of cases of methamphetamine diversion through such schemes as bogus prescriptions or "back door" sales from pharmacies.

2. Precursor Chemicals: Ephedrine and Pseudoephedrine

A more troublesome issue is the regulation of the precursor chemicals from which methamphetamine is manufactured. A brief history of the illicit manufacturing process is necessary to appreciate the current situation. The earliest clandestine methamphetamine labs used the chemical phenyl-2-propanone, also known as phenylacetone or P2P, to produce methamphetamine. In response to clandestine lab seizures throughout the 1970s, P2P was placed on Schedule II of the Controlled Substances Act under the provision which allows the Attorney General to control a substance if it meets the definition of an immediate precursor. See 21 U.S.C. §§ 802(6), 811(e). This action increased the difficulty and risk of obtaining P2P and led to a brief decline in clandestine lab seizures.

However, traffickers adjusted to the scheduling of P2P, first by switching to production of P2P from other uncontrolled chemicals, and then by shifting to the hydriodic acid/ephedrine reduction method of methamphetamine production, which does not require P2P, and which was first discovered by DEA in a 1987 lab seizure. Since then, the relatively simple, high yield ephedrine reduction method of production has outstripped the P2P method in seized labs by a factor of six to one. Ephedrine is used lawfully as a bronchodilator for asthma, while pseudoephedrine is a very widely used nasal decongestant.

The transition from production methods using P2P to those using ephedrine and pseudoephedrine as precursors has resulted in a far more potent drug. The P2P method produces an equal mixture of D- and L-methamphetamine; the ephedrine-based method produces only D-methamphetamine. As d-methamphetamine is the more active isomer, ephedrine-based methamphetamine is twice as potent as P2P-based methamphetamine.

The ephedrine reduction method is also generally more efficient than the P2P method in terms of production. In the clandestine laboratory setting, the ephedrine reduction method yields approximately 50-70% methamphetamine. Thus, although greater yields are possible, one kilogram of ephedrine usually converts to about 500-700 grams (0.50 to .70 kilograms) of methamphetamine.

In 1988, following a successful pilot project,[8] DEA obtained legislative authority to launch a program of controls on precursor and essential chemicals. The Chemical Diversion and Trafficking Act of 1988 (CDTA)[9] imposed domestic and import/export regulatory controls on a list of chemicals that includes ephedrine and pseudoephedrine. The CDTA effectively controlled only the bulk form of ephedrine and did not regulate lawfully manufactured drug products containing ephedrine. It is a simple matter to extract the ephedrine from these tablets or grind them up for use in the final product. Clandestine manufacturers quickly seized on this exemption, facilitated by a gray market of mail order firms that developed to supply ephedrine tablets in bulk to methamphetamine producers, despite indicia of probable diversion that would have led legitimate businessmen not to make the sale.

Abuses of this "legal drug exemption" for ephedrine tablets were part of the impetus for the Domestic Chemical Diversion Control Act (DCDCA), passed by Congress in November 1993 and effective April 16, 1994. This law removes the exemption from record-keeping and reporting requirements for single entity ephedrine products and requires DEA registration for distributors of ephedrine and other chemicals on "list I," which are mostly precursors. The Final Rule setting forth implementing regulations for the DCDCA was published on June 22, 1995.[10] Now firms that handle list I chemicals must seek registration with the DEA, though the burden remains on DEA to demonstrate that registration of any applicant is <u>not</u> in the public interest. <u>See</u> 21 U.S.C. § 823(h). This registration hurdle is such that DEA has found that only legitimate chemical firms are seeking registration;[11] the "rogue" chemical companies have eschewed the process.

Predictably, however, traffickers and rogue chemical firms have adjusted to the new regulatory environment by exploiting remaining opportunities. Traffickers are turning to over-the-counter pseudoephedrine, which is chemically similar to ephedrine, may be substituted in the production process, and

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[8] Title II of the Psychotropic Substances Act of 1978 required reporting of sales of piperidine, a precursor to phencyclidine (PCP). <u>See</u> P.L. 95-633, 92 Stat. 3768-78.

[9] Title VI, Subtitle A, P.L. 100-690, the Anti-Drug Abuse Act of 1988.

[10] 60 Fed. Reg. 32,447 (22 June 1995).

[11] About 400 firms have applied for DEA registration to distribute list I chemicals, a smaller number than DEA anticipated.

yields the same quantity of methamphetamine. Laboratory operators also are turning to drug products containing ephedrine in combination with other substances -- e.g., ephedrine with guaifenesin -- so that they remain exempt.

Law enforcement authorities have countered with two recent regulatory initiatives. First, effective November 10, 1994, DEA eliminated the regulatory quantity threshold for ephedrine, which had been one kilogram. See 59 Fed. Reg. 51,365. Now all single-entity ephedrine transactions are subject to reporting, record-keeping and notification requirements, regardless of the quantity involved.

Second, a DEA Proposed Rule published in the October 31, 1995 Federal Register would remove the regulatory exemption for certain pseudoephedrine products. Because pseudoephedrine is an ingredient in many legitimate over-the-counter drugs, the proposed rule generally regulates only products in which pseudoephedrine is the sole active ingredient, or is combined with other active ingredients such that pseudoephedrine can be readily recovered.[12] The threshold of 24 grams pseudoephedrine base corresponds to a 120-day supply at the maximum adult daily dosage established by the FDA. Significantly, a waiver ensures that the approximately 750,000 retail distributors of pseudoephedrine will remain exempt, unless they engage in sales of above-threshold quantities.[13]

On the international front, implementation of the CDTA and some successful prosecutions of domestic methamphetamine trafficking organizations gave rise to a fundamental change in the illicit methamphetamine trade. As noted in Part I, Mexican polydrug organizations replaced domestic outlaw motorcycle gangs as the primary methamphetamine producers, traffickers and distributors in the Western United States. In 1990, smuggling of precursors along the United States/Mexico border increased significantly. This practice exposed the Mexican traffickers to the much lower penalties for smuggling chemical precursors, avoiding the tougher penalties associated with smuggling the

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[12] 60 Fed. Reg. 55,348 (Oct. 31, 1995). The newly regulated combination products are tablets, capsules, and powder packets containing pseudoephedrine and antihistamines, guaifenesin or dextromethorphan. 60 Fed. Reg. at 55,350.

[13] "Retail distributor" is defined as one "selling only personal use quantities to walk-in customers" 21 CFR 309.02. Thus, the seller to a pharmacy is required to report, the pharmacy is not.

final product.[14] According to the DEA, Mexican chemists operating on both sides of the border are now responsible for most methamphetamine production.

The scope of Mexican methamphetamine trafficking became apparent in March 1994, as a result of a chance Customs seizure of 3.4 metric tons of ephedrine at the Dallas/Ft. Worth Airport. Manufactured in India and brokered by a Swiss firm, the shipment was intercepted en route from Zurich to Mexico City. Four months later, a 2.3 metric ton ephedrine seizure was made at the same location. Further investigation revealed source countries as diverse as India, China and the Czech Republic; transit countries that included the United Arab Emirates, the Netherlands, Germany, Guatemala and other Latin American countries; brokers in Switzerland; and distribution points in Guatemala and Mexico.

As a policy matter, further regulatory controls on precursor chemicals will require balancing the competing interests of law enforcement and the legitimate needs of industry. Even as traffickers constantly shift to meet regulatory changes, each successive control measure places greater strain on the chemical and pharmaceutical industries, the vast majority of which are composed of legitimate firms conducting legitimate transactions. Either chemical may be obtained naturally from the ephedra plant or may be produced by purely synthetic methods. On balance, we think it is possible to increase regulatory controls and government powers in the limited manner suggested below in Section III.B.

B. <u>Strategy: Implementation Items</u>

- Current regulatory measures for methamphetamine are adequate. Schedule II controls are appropriately stringent, and have been effective in preventing diversion and abuse of licitly manufactured and lawfully prescribed methamphetamine.

- Impose significant civil monetary penalties on persons and firms that continue to supply chemicals and other laboratory supplies to clandestine drug laboratories, after they have been notified by DEA, or otherwise are aware, that supplies they sell are falling into the hands of clandestine laboratory operators. Proposed legislative language (not in bill form) to implement this concept appears at Appendix A.

- Create the authority to enjoin the sale of chemicals, whether or not they are regulated <u>per se</u> under the CSA, by making violation of 21 U.S.C. §§ 843(a)(7) enforceable by

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[14] This problem and possible solutions are discussed below in Part V, "Sentencing and Legislative Initiatives."

means of injunctive relief (subjecting a violator to potential imprisonment for contempt). This change could be made as part of a broader amendment to permit enforcement of all of §§ 842 and 843, which set forth the more minor and essentially regulatory violations of the CSA, through civil injunctive relief. The following draft legislative language, under the heading "Alternative civil and injunctive measures," is offered as a new subsection 21 U.S.C. § 843(f):

> In addition to or in lieu of the foregoing penalties, the Attorney General is authorized to commence a civil action for appropriate relief, including a permanent or temporary injunction, where there is a reasonable basis to believe that a violation of this section or section 842 of this subchapter will occur. Any action under this subsection may be brought in the district court of the United States for the district in which the defendant is located or resides or is doing business, and such court shall have jurisdiction to restrain such violation.[15]

The greater flexibility and lower standard of proof to obtain a civil injunction could be a useful tool to prevent imminent suspicious transactions. As a practical matter, civil AUSAs in some districts may be in a better position to seek such injunctions than their criminal counterparts would be to pursue relatively technical violations of the CSA.

- Establish a procedure, with appropriate due process safeguards, whereby DEA can instruct a firm not to engage in a particular chemical transaction with another firm. In other words, DEA should have the authority to suspend a sale of chemicals domestically parallel to its authority to interdict an import or export under 21 U.S.C. § 971(c). The following draft legislative language, under the heading "Suspension of suspicious chemical transactions," is offered for consideration as a new subsection 21 U.S.C. § 830(c):

> (1) The Attorney General may order the suspension of any transaction involving a listed chemical, where there is a reasonable basis to believe that the transaction will facilitate the unlawful manufacture of a listed chemical or controlled substance. From and after the time when the Attorney General provides written notice of the order to the regulated person

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[15] Existing injunction provisions of the CSA require a conviction prior to their issuance. The suggested language is adapted from 33 U.S.C. § 1319(c), which provides for injunctive relief to enforce certain environmental compliance orders.

(including the legal and factual basis for the order), the regulated person shall not carry out the transaction.

(2) Upon written request to the Attorney General, a regulated person to whom an order applies under paragraph (1) is entitled to an agency hearing, on the record, in accordance with subchapter II of chapter 5 of Title 5. The hearing shall be held on an expedited basis and not later than 45 days after the request is made, except that the hearing may be held at a later time, if so requested by the regulated person.[16]

Note: Under current law, there are times when DEA develops information on suspicious domestic sales, e.g., to pharmacies that divert chemicals out the "back door," but cannot act on the information. The one district court to rule on DEA's application of current 21 U.S.C. § 830, which would on its face permit DEA to order a firm not to engage in a domestic chemical transaction, read the statute more narrowly, based on statutory construction and procedural due process concerns. Chemicals for Research and Industry v. Thornburgh, 762 F. Supp. 1394 (N.D. Cal. 1991).

- Consider legislation that would reverse the presumption of exemption from regulatory controls under the Controlled Substances Act those drug products that include ephedrine, pseudoephedrine and phenylpropanolamine. (See draft language at Appendix A.)

- After giving public comments good faith consideration, follow through on the current proposed rule to impose regulatory controls on those products in which pseudoephedrine is the only active ingredient or can be readily recovered.

- Similar to the rule imposing greater regulation on pseudoephedrine, undertake regulation of appropriate ephedrine combination products, particularly ephedrine with guaifenesin and other products from which the ephedrine can be readily retrieved by clandestine methamphetamine "cooks."

- In an effort to anticipate the clandestine lab operators' next moves, the DEA should conduct a comprehensive review of

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16 This amendment suggests deletion, as unnecessary, of the following language from 21 U.S.C. § 830(b)(1): "A regulated person may not complete a transaction with a person whose description or identifying characteristic is furnished to the regulated person under subparagraph (B), unless the transaction is approved by the Attorney General."

other feasible methods by which methamphetamine can be manufactured, taking into account historical methods, substitute chemicals and probable innovations.

- Amend the Controlled Substance Act to permit seizure of regulated chemicals where suspicious transactions or regulatory violations are detected. As interpreted by DEA, current law permits only criminal forfeiture, predicated on import, export, distribution, possession, etc. in violation of a felony provision of the CSA, under 21 U.S.C. § 881(a)(9). It may be necessary to amend 21 U.S.C. §§ 844 and 884 to give DEA legal authority to seize and dispose of List I chemicals when a registration is not granted, has expired, or has been revoked or suspended pursuant to 21 U.S.C. § 824(f) and (g).[17] Draft bill language appears at Appendix A.

- Encourage prosecutors to make greater use of 21 U.S.C. § 843(a)(7), as revised, which makes it a crime to manufacture, distribute, import or export, <u>inter alia</u>, any equipment, product or chemical -- whether or not it is regulated under the CSA -- "knowing, intending, or having reasonable cause to believe that it will be used to manufacture a controlled substance or listed chemical in violation of [the CSA]." This could even reach chemicals <u>not</u> (yet) regulated by DEA.

  <u>Note</u>: Prosecutors would need to see the importance of such prosecutions beyond prison sentences, as the penalty range is 0-4 years, plus fine and injunction. Increased sentences are not being proposed because other provisions impose stiffer penalties for similar conduct with regulated chemicals. <u>See</u> 21 U.S.C. §§ 841(d)(1), (2), (g)(1), 960(d)(1), (2).

IV. <u>International Initiatives: Focus on Mexico</u>

A. <u>Analysis of Current Situation</u>

As noted above, the production and trafficking of methamphetamine and the diversion of its precursor chemicals have a strong international dimension, so our international efforts -- including bilateral and multilateral agreements and cooperative arrangements -- are important. Cooperation with Mexico is especially crucial. The nearly 2,000-mile U.S.-Mexican border is the primary entry point for illicit ephedrine into this country, and Mexican organized crime now controls much of the illicit

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[17] Unlike controlled substances, the mere possession of which violates 21 U.S.C. § 844, precursor chemicals are not readily shown to be contraband.

manufacture, sale and distribution of methamphetamine in the United States. The United States Attorneys along the border, the Criminal Division of the Department of Justice, the FBI, DEA, Customs Service and other federal law enforcement agencies are engaged in a Southwest Border initiative -- a major cooperative effort -- aimed at combating drug trafficking across the border with Mexico, including trafficking in methamphetamine and its precursor chemicals.

Among the polydrug trafficking organizations with a stake in the emerging methamphetamine trade are:

- The Juarez Cartel, led by Amado Carrillo Fuentes, operates from Hermosillo in the west across the border to Arizona and from Juarez into Texas. Carrillo Fuentes is believed to have controlled the 315 kilograms of methamphetamine that were seized in Las Cruces, New Mexico, in February 1995.

- The Sonora Cartel, headed by Miguel Caro Quintero, operates from Hermosillo, Agua Prieta, Guadalajara and Culiacan, as well as the Mexican states of San Luis Potosi, Sinaloa and Sonora. Its smuggling routes extend into California, Arizona, Texas and Nevada; the organization is believed to be responsible for trafficking hundred-pound quantities of methamphetamine through the Arizona ports of entry.

- The Arellano Felix brothers, Benjamin, Francisco, Eduardo and Ramon, operate from Tijuana into Arizona and southern California. The gang has connections to the methamphetamine trade in San Diego through direct contact with the Logan Heights Calle Trienta and other street gangs. The group is considered the most violent of the Mexican trafficking organizations. Through their sponsorship of San Diego methamphetamine trafficker Nico Marron, the group is alleged to have assisted in 26 drug-related murders.

- The Amezcua organization -- headed by Jesus Amezcua Contreras and his brothers Luis and Adan -- is extremely successful at procuring and diverting chemicals used to manufacture methamphetamine. It operates primarily out of Guadalajara but, through agreements with other Mexican gangs, the Amezcuas' reach extends all along the border. The Amezcuas control methamphetamine labs in Guadalajara and Tijuana; their associates across the border are heavily involved in methamphetamine distribution and ephedrine trafficking, especially in southern California.

While DEA has good working relationships with its Mexican counterparts at the operational level, Mexico still lacks adequate legislation to regulate precursor and essential chemicals and to punish chemical trafficking. Strong legislation proposed in 1993 resulted in only minor changes to the Mexican public health law, under which ephedrine and pseudoephedrine are loosely monitored.

An increase in penalties in the United States for trafficking in ephedrine and pseudoephedrine, as urged below in Part V of this Strategy, could have a collateral impact in Mexico. It would add to the existing pressure on traffickers -- resulting from a tougher U.S. law enforcement and regulatory environment -- to shift production from the United States to Mexico. This possibility makes an effective chemical control regime in Mexico all the more important.

B. <u>Strategy; Implementation Items</u>

- Continue to meet with, advise and train foreign counterparts -- particularly in Mexico -- at both policy and operational levels concerning the problem and consequences of chemical diversion and the legal, administrative and practical means to prevent and detect diversion.

  -- In our bilateral relationship with Mexico, lay special emphasis on the need to curb trafficking in methamphetamine and its precursor chemicals, especially ephedrine and pseudoephedrine.

  -- Urge Mexico to pass chemical control legislation to provide the legislative and regulatory basis to meet its obligations under Article 12 of the 1988 UN Vienna Convention; advise Mexico to use the OAS model regulations on drug-essential chemicals as a prototype for its law.

  <u>Note</u>: The OAS model laws include, among other measures, the power to suspend or cancel imports and exports on reasonable suspicion of diversion, and a requirement of shipment-specific notice to allow for investigation of intended use of chemical products.

  -- Urge Mexico to establish a dedicated unit to administer chemical control laws and regulations.

- Undertake a series of coordinated demarches by U.S. and Mexican embassies in major precursor chemical source countries (such as countries in Eastern Europe, the PRC, Taiwan and elsewhere) for methamphetamine, seeking their agreement to:

  -- provide advance notification to U.S. and Mexican authorities of any proposed export transaction in ephedrine, pseudoephedrine or phenylpropanolamine to either the U.S. or Mexico; and

-- withhold authorization for such export transactions until officially notified by the government of the importing country.

- Augment the policy-making role of the Bilateral U.S.-Mexico Working Group on Precursor Chemicals (which now serves as an ad hoc operational consultative body) and establish an operational bi-national chemical control task force that will share information on precursor chemical consignees in both countries and verify the legitimacy of the end-use of proposed chemical imports.

- Encourage more investigation of importers and major distributors of methamphetamine and its major precursors by law enforcement authorities in Latin America, especially Mexico.

- Continue to cooperate with the United Nations International Narcotics Control Board (INCB) to foster and enhance its role as a central collection point for data regarding ephedrine and pseudoephedrine shipments, which it distributes via electronic mail.

- Continue to work with the INCB and other international bodies -- including regional organizations such as the OAS anti-drug commission (CICAD) -- and foreign counterparts to focus attention on the problem of chemical diversion and its quintessentially international dimensions.

V. Sentencing and Legislative Initiatives

A. Analysis of Current Situation

Under current law, there is a 10-year mandatory minimum penalty for trafficking in 100 grams or more of pure methamphetamine or 1,000 grams (one kilogram) or more of a mixture containing methamphetamine, and a 5-year mandatory minimum penalty for trafficking in 10 grams or more of pure methamphetamine, or 100 grams or more of a methamphetamine mixture. Even at the retail ounce and gram levels, most seizures of methamphetamine are in the purity range of 50-70%, so most cases involve determination of the quantity of "pure" methamphetamine for sentencing purposes. Although quantifying an "average" dosage of methamphetamine with exactitude is difficult, clinicians estimate that an average "binge" user ingests approximately 500 milligrams (or 0.5 grams) per day. Assuming an average of 60% purity, this dose has about 300 milligrams (or 0.3 grams) of "pure" methamphetamine.

Methamphetamine is a central nervous system stimulant, similar to powder and crack cocaine in its euphoric effects. The

Sentences are inconsistent to cocaine, crack + meth - must clear supp definitions of doses

comparison of sentencing consequences, by amount and dosage, are as follows:

Figure 11

	Five-year Minimum	Ten-year Minimum
Methamphetamine	10 grams (pure) 33 days dosage	100 grams (pure) 333 days dosage
Powder Cocaine	500 grams 1,000-5,000 doses	5 kilograms 10,000-50,000 doses
Crack Cocaine	5 grams 10-50 doses	50 grams 100-500 doses

Given that the methamphetamine use pattern is similar to that of crack cocaine -- and that much of the potent methamphetamine available today produces a severe reaction -- threshold quantities for determining mandatory minimum penalties for trafficking methamphetamine should be set at or about the same levels established for crack to reflect methamphetamine's destructive effects.

At present, 10 grams of pure methamphetamine, as compared with 5 grams of crack, triggers the five-year mandatory minimum sentence. One hundred grams of pure methamphetamine, as compared with 50 grams of crack, triggers the ten-year mandatory minimum sentence.[18] The sentencing scheme should be the same for these two drugs.[19] Legislation should be introduced to set the five-year mandatory term at 5 grams (or approximately 17 days dosage) and the ten-year mandatory term at 50 grams (or approximately 167 days dosage) for methamphetamine, as well.

In addition, we should consider appropriate sentencing enhancements for methamphetamine manufacture and trafficking. For example, clandestine laboratories pose a unique hazard to the environment and to public health -- and in particular the health of law enforcement personnel and others at the lab scene -- that should subject offenders to additional penalties in appropriate

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[18]Although the statute and guidelines set forth a different sentencing scheme for methamphetamine mixtures, most cases are sentenced based on the quantity of pure methamphetamine contained in the mixture.

[19]Should there at any time be any change in the crack sentencing scheme, it is assumed that methamphetamine sentencing would then follow that same change.

cases.[20] Draft legislative language for consideration is attached as Appendix A.

Penalties for trafficking in the precursor chemicals ephedrine and pseudoephedrine, which are today by far the most common precursors in the clandestine manufacture of methamphetamine, are much lower than for trafficking in the finished product. The long drug sentences prescribed in USSG 2D1.1 apply only if the government can show that the offense involved manufacturing or attempted manufacturing of methamphetamine. See USSG 2D1.11(c). Otherwise, a penalty range of 0-10 years applies to possession, distribution or import/export of a listed chemical knowing, or having reasonable cause to believe, that it will be used in the illicit manufacture of a controlled substance. See 21 U.S.C. §§ 841(d) and 960(d). The highest sentencing guideline offense level for trafficking in ephedrine, pseudoephedrine or any listed chemical is level 28 (78-97 months for a first offense), which applies to offenses involving 20 kilograms or more. See USSG § 2D1.11.

Figure 12

	Five-Year Minimum	Ten-Year Minimum
Methamphetamine	10 grams (pure) [5 grams (pure) -- proposed]	100 grams (pure) [50 grams (pure) -- proposed]
Ephedrine/ Pseudoephedrine	6 kilos (produces 3+ kilos of meth)	N/A [Guideline for 20+ kilos is 78-97 months]

While higher yields are theoretically possible, in practice clandestine lab operators are able to convert one kilogram (1,000 grams) of ephedrine or pseudoephedrine to about 0.50 to 0.70 kilograms (500-700 grams) of methamphetamine. The illicit sale of 200 grams of ephedrine, which could produce at least 100 grams of pure methamphetamine -- corresponding to the present 10-year mandatory minimum penalty -- yields an offense level of 18 (27-33 months). The 20 grams of ephedrine needed to yield 10 grams of

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[20] Senator Slade Gorton introduced a bill in 1991 that proposed increased sentences and fines for laboratory operators failing to comply with environmental laws to pay for cleanup and restoration of the laboratory sites. See the "Violent Crime and Law Enforcement Control Act of 1991," Sec. 1621. We also propose to include a criminal fine as part of the penalty; however, it is our observation that defendants in clandestine laboratory cases who are sentenced to lengthy prison terms are generally not in a position to pay the assessed fines.

methamphetamine (which at present carries a 5-year mandatory minimum) corresponds to a level 12 offense (10-16 months, with the possibility of a split sentence). On the other hand, the quantity of ephedrine or pseudoephedrine necessary to trigger a 5-year mandatory penalty (level 26) is 6 kilograms, which is 600 times greater than the 10 grams of methamphetamine that triggers the same penalty. Six kilograms of ephedrine can produce, with simple processing and not much skill or education, at least three kilograms of methamphetamine, the sale of which would yield an offense level of 34 (151-188 months for a first offense).

B. **Strategy; Implementation Items**

- Penalties for methamphetamine manufacture and trafficking must appropriately reflect the acute threat to the public and the seriousness of the offense. Methamphetamine mandatory minimum terms must be raised to better reflect its severe destructive impact. The sentencing Guidelines must be adjusted accordingly to reflect this destructive effect.

- Statutory penalties and Guidelines sentences for trafficking in precursor chemicals should be significantly increased to better reflect their relative harm, based on the ease of conversion to controlled substances and the quantity ratio of controlled substances produced.

- The statutory maximum for trafficking in the precursor chemicals should be changed as follows: where the Government can prove that the trafficker knew or had reason to know that the chemicals were being used for the unlawful manufacture of methamphetamine (or other controlled substance), the penalty should be equal to that of trafficking in the quantity of methamphetamine (or other controlled substance) that could have been manufactured (where such corresponding quantity can be determined) from the quantity of chemicals proven. It is noted that prosecutors have the option, presently, to charge such trafficking as attempt to manufacture a controlled substance, under 21 U.S.C. §§ 841(a) and 846; however, the proposed legislative change would strengthen the alternative charging option set forth in § 841(d).

  Note: The much lower penalties for illegal importation of precursor chemicals than finished methamphetamine have caused Mexican polydrug organizations operating in the United States to minimize their risk by importing precursor chemicals from Mexico for processing into methamphetamine in the Western United States. While it is not proposed that penalties for ephedrine and pseudoephedrine be made equivalent to methamphetamine, it should be noted that increased penalties for precursor importation and distribution may lead the source organizations to produce incrementally more methamphetamine in Mexico, smuggling the finished product into the United States. A collateral effect would be to remove the serious dangers of explosions and environmental degradation from clandestine methamphetamine labs from the this country, but the same hazards would be transferred to Mexico.

- Additional consecutive penalties for improper storage, release, disposal, transport or other handling of toxic, ignitable, explosive and hazardous chemicals used to manufacture methamphetamine in clandestine settings should be imposed to appropriately reflect the unique public health hazards -- including danger to law enforcement officers and others at the scene -- and environmental degradation wrought by this form of drug crime. A proposed legislative text is attached as Appendix A.

- The Attorney General's authority to suspend domestic shipments of regulated chemicals and to seek injunctions to prevent shipments of all chemicals (whether or not regulated) should be expanded. See Section III.B, above.

- The Attorney General can issue regulations narrowing the exemptions for drug products containing ephedrine and pseudoephedrine. While legislation to narrow these regulatory "loopholes" is also an option, the use of regulations permits greater flexibility.

VI. Training of Investigators and Prosecutors

A. Analysis of Current Situation

Clandestine laboratory and methamphetamine investigations and prosecutions pose some unique issues from the perspective of hazardous situations at clandestine lab sites, the violent proclivities of methamphetamine users and proof problems at trial of offenders. In particular, investigators face significant dangers due to the toxicity and flammability of the chemicals used in the process. Similar problems complicate seizure and forfeiture of property. Real property may be contaminated to the extent that its cleanup costs exceed its value.

The primary toxic gases generated during the manufacture of methamphetamine are hydriodic acid vapors and phosphine gas. Prolonged exposure can cause internal chemical burns and permanent respiratory damage. Lab sites such as hotels or apartment buildings can use centralized air ventilation systems, endangering innocent individuals should poisonous vapors, gases or smoke from chemical fires travel freely from room to room.

At the DEA conference held in February 1996, 83% of law enforcement personnel responding to a survey expressed the view that training is needed to alert officers to the dangers of clandestine laboratories. DEA reports that while 60% of those surveyed claimed their agencies are having difficulty meeting federally mandated training requirements, 71% indicated that officers in their jurisdictions have experienced health problems arising from exposure to hazardous chemicals found at seized methamphetamine labs. Other dangers await the officers responding to clandestine labs: 78% said firearms are typically present at these sites and 45% said booby traps have been encountered.

Discarded liquid waste -- primarily sodium hydroxide -- contaminates soil and ground water, posing an environmental threat for years. Abandoned dump sites continue to hold red phosphorus, which remains highly combustible. Even the attempts to unearth or clean up the site can create enough friction to ignite the red phosphorus, causing chemical fires. Each of these environmental issues requires training, for the protection of the public, the environment and the physical safety of law enforcement officers.

While Federal law enforcement agencies are fully capable of searching and seizing these laboratory sites and arresting those responsible, they have limited chemical/environmental decontamination capabilities. Accordingly, Federal law enforcement agencies have requested the assistance of the Department of Defense in chemically decontaminating ever-increasing numbers of these sites to ensure the public's health and safety and to protect the environment. DOJ has requested a $20 million appropriation in support of this effort.

Additional personal safety issues are posed by violent users, to the public and law enforcement community, but also to the user in situations where law enforcement employs traditional methods of restraint. Dr. Michael Abrams, of the Broadlawn Medical Center in Des Moines, Iowa, provides treatment in hospital and prison settings. He reports danger of heart attack and stroke in prisoners controlled by handcuffs and leg restraints while in a methamphetamine chemically-induced rage. He urges the law enforcement and medical communities to research together appropriate methods for protection of officers and prisoners.

For prosecutors, methamphetamine cases sometimes involve unique proof problems. For example, where a lab is raided before "cooking" has begun -- or more likely between cooking episodes, but after the last batch has been removed -- there may be no methamphetamine seized to introduce as evidence. Prosecutors should be aware of the federal and applicable state regulatory controls on precursor and essential chemicals, and may wish to include chemical trafficking counts along with conspiracy to manufacture methamphetamine counts in the indictment. They also should be aware of applicable environmental laws and regulations. Reference also should be made to the analogous body of prosecutions involving clandestine cocaine laboratories, particularly in the Southern District of Florida, which posed similar investigative and prosecutive issues.

B. Strategy; Implementation Items

- The law enforcement training academies will develop curricula addressing the physical dangers posed by the chemicals encountered at clandestine laboratories and chemical dump sites, including the use of protective clothing and equipment. Proposed safety training programs should include the 40-hour initial training program required by OSHA, the 8-hour refresher training, baseline and annual medical examinations, acquisition of protective equipment, record keeping, and on-the-job training. Specialized training should include the identification and dismantling of trap devices found at clandestine lab sites.

- The training academies will also develop instructional materials on statutory and regulatory requirements and responsibilities associated with the cleanup and remediation of chemical disposal sites.

- Educational material (pamphlets and videos) should be prepared to alert field personnel, management and administrators to actual and possible hazards of clandestine labs. Topics should include federal regulations concerning safety clothing, equipment and medical evaluations, as well as civil liability and the obligations of supervisors and administrators.

- The law enforcement and corrections communities will combine with the medical/mental health/addiction communities to exchange information regarding safety issues associated with the violent behavior of methamphetamine users and addicts.

- DEA, EOUSA and DOJ/NDDS, California BNE and other State and local law enforcement agencies will identify as participants in a training team the most knowledgeable and experienced analysts, investigators and prosecutors. We will draw from the list in our training and regularly will update the list and make it available to other jurisdictions upon request.

- DEA, EOUSA and DOJ, California BNE and other State and local law enforcement agencies will collaborate to develop a practical, case-oriented training curriculum and materials.

- DEA, USCS, EOUSA and DOJ/NDDS, California BNE and other State and local law enforcement agencies will identify the regions where training is most needed, and the training team will make presentations in those regions.

- Formulation of training schedules, course materials, presenters and identifications of first tier training locations were discussed at the February 1996 meeting of prosecutors and investigators in Arlington, Virginia.

VII. Treatment, prevention and education & Research

A. Current Programs

As the Attorney General stressed in Miami in early December, the young people of this nation must be convinced that drug use is not attractive or cool or safe, but illegal and unwise and dangerous. Methamphetamine is not a benign substance -- it is physically and psychologically destructive. ~~The treatment community must begin to study deficiencies in traditional drug treatment over the long term~~. Some clinicians have observed that ~~m~~Methamphetamine users show markedly different behavior after 30 days of abstinence (severe, crippling depression) than do individuals treated for the abuse of other substances; withdrawal, as such, may not even set in until 30 days after use. Thus, it is anticipated that the treatment community will have to recognize and/or develop regimens of long-term treatment and short-term interventions specific to methamphetamine use.

Matching specific and effective treatment programs with methamphetamine abusers is critical to the successful recovery of those drug abusers. When these individuals encounter the criminal justice system as a result of their destructive behavior, several programs help to identify the drug use and channel individuals toward appropriate interventions. ~~The Office of Justice Programs (OJP) and DEA initiatives have very strong structures to support drug treatment, prevention and educational components. Several k~~Key programs authorized by the Violent Crime Control and Law Enforcement Act of 1994 (VCCLEA) ~~are being brought to bear on addressing~~ address drug use behavior, including methamphetamine abuse. Drug Courts, residential substance abuse treatment, bootcamps, post-conviction drug testing and supervision of federal offenders, for example, all help offenders get and stay drug-free. Aftercare and long-term followup are especially necessary when dealing with methamphetamine abuse and relapses.

[HHS to provide additional information]

Drug courts contribute to reduction of the demand for illicit drugs, including methamphetamine, by mandating offenders stay drug-free and if necessary coercing abstinence through testing, treatment and graduated sanctions. The link between drug use and criminal activity has been well-documented, and drug treatment has been shown to reduce both the drug use and the criminal activity of drug-involved offenders.

In addition, the corrections programs authorized by the VCCLEA address Goal 2 in the 1995 National Drug Control Strategy, which is to:

> Expand treatment capacity and services and increase treatment effectiveness so that those who need treatment can receive it. Target intensive treatment services for hardcore drug-using populations and special populations, including adults and adolescents in custody or under the supervision of the criminal justice system, pregnant women and women with dependent children.

The Crime Act establishes programs that provide funds to State and local governments, all or part of which may be used to provide substance abuse treatment to inmates under correctional supervision. In FY95, five grants were awarded for the implementation of new drug courts and eight grants were awarded for the improvement and enhancement of established drug courts. Drug court implementation awards were given to localities to serve juveniles, women with children, as well as adult males. Enhancement awards will enable on-going programs to improve their effectiveness through the use of automated information systems, vocational/educational services and upgraded treatment and sanction systems.

In FY95, OJP implemented the Corrections Boot Camp Initiative under the $24.5 million Violent Offender Incarceration Program appropriation, which was limited to use for the planning, construction and renovation of boot camps. OJP funded 44 boot camp projects that will be implemented at the State and local levels. All of these boot camps will include drug treatment and intensive, coordinated aftercare components.

In the State systems, the Residential Substance Abuse Treatment for State Prisoners Program provides formula grants to states to develop and implement residential substance abuse treatment programs within state and local correctional and detention facilities in which inmates are incarcerated for a period of time sufficient to permit substance abuse treatment.

OJP has engaged in extensive planning to facilitate the immediate and effective implementation of the Residential Substance Abuse Program and treatment components of the other correctional programs as soon as the FY96 appropriation is enacted. OJP is developing program guidelines and an extensive technical assistance program to dispel commonly held beliefs among many policy-makers that treatment does not work for offenders and to assist State and local governments in implementing effective treatment programs which reduce drug use and criminal behavior. The guidelines and technical assistance are being developed in conjunction with and are based on recent research conducted by the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the National Institute on Drug Abuse and others. Technical assistance will be provided through national and regional workshops, as well as on-site assistance to address site specific needs.

Through the technical assistance program, OJP encourages state and local policy-makers to reassess the importance of substance abuse treatment for offenders and to develop and implement comprehensive treatment programs, including intensive aftercare components. A consortium of federal agencies -- led by the Office of the Director of National Drug Control Policy and including the National Institute of Justice (NIJ), the Bureau of Justice Assistance (BJA), the National Institute of Drug Abuse (NIDA), the Center for Substance Abuse Treatment (CSAT) and the Drug Courts Program Office of the Office of Justice Programs -- is developing a multi-year demonstration program to test the effectiveness of a system-wide criminal justice intervention with drug addicted offenders.

This demonstration project is called Breaking the Cycle (BTC). The major objectives are reduced recidivism/criminal behavior and reduced substance abuse among adult offenders who abuse drugs; improved social function indicators in the subject population; and improved resource utilization, particularly detention capacity, throughout the criminal justice system. Intermediate objectives include increasing the population's exposure to drug treatment; improving the match between the type of treatment and user needs; and increasing delivery of social services to the population.

The Drug Use Forecasting (DUF) program has begun to analyze methamphetamine use (the result of pilot projects conducted over the past seven years), and the NIJ reports that it is assessing the importance of testing for methamphetamine use, even though historically the use of methamphetamine rates have been low in many DUF cities. Figure 13 depicts the 1994 results of urinalysis of arrestees across the United States in the selected DUF cities.

The President's Executive Memorandum on drug testing recognizes the importance of taking full advantage of the unparalleled power of the criminal justice system to coerce offenders coming under its supervision into becoming and staying drug-free. The Attorney General's plan will urge the States to adopt a universal policy of drug testing before a hearing on pretrial release in order to identify drug users to the court. Subsequently, the court can issue appropriate conditions of release, apply a graduated series of sanctions for failing to meet those conditions, and channel those drug users in need into treatment. The process can coerce some users to abstain and others to get the most cost-effective treatment during incarceration or probation. Effective treatment will enable many to become productive citizens upon release from jail or prison and help to break the cycle of drugs and crime.

The President's directive requires the Attorney General to encourage States to expand or initiate drug testing programs. The Federal government will develop program guidance, supply technical assistance, facilitate related technological development and conduct rigorous evaluations of pilot and demonstration programs while providing a range of incentives and encouragement to states for expanding the use of these methods throughout their criminal justice systems. The steps necessary to fully implement this initiative are still under development.

B. <u>Strategy; Implementation Items</u>

- Implement President Clinton's directive to develop a plan for appropriate drug testing and treatment interventions for abusers under the supervision of the criminal justice system.

- Work with ONDCP and the array of Federal, State and local agencies and private entities to help develop a targeted and effective prevention and education campaign to combat methamphetamine use by youth and other particularly vulnerable population groups.

- Test a demand reduction strategy to reduce methamphetamine use in selected communities. Target eight areas (four active/four control) and conduct a combination of media campaigns (produced in combination with public interest groups) with extensive drug testing of arrestees who are subject to graduated sanctions for failed drug tests. The relative impacts of these programs will inform our future public awareness campaigns.

- Increase public awareness of the dangers of methamphetamine, with a national media campaign targeting young people, adults, parents, employers and educators. Possible topics include the dangers of methamphetamine abuse, violence and the environmental harm caused by clandestine laboratories. Through our State and local counterparts, we should encourage community groups to schedule local events that bring together experts from a full range of disciplines to discuss and educate the community on the dangers of methamphetamine.

- Use DUF data to help direct high intensity public awareness efforts to market areas of emerging use patterns.

- Coordinate with the Office of National Drug Control Policy to ensure that methamphetamine is given increased emphasis in this year's National Drug Control Strategy.

Appendix A

LEGISLATIVE AND REGULATORY PROPOSALS

1. To subject persons and firms who sell chemicals to clandestine laboratories to civil penalties:

Commentary: This provision imposes stiff civil penalties on persons and firms which, after being put on notice by DEA, persist in supplying chemicals and other materials to clandestine drug and chemical laboratories. This proposed language broadly implements elements of Senator Feinstein's proposal for a "civil three strikes" provision: "strike 1" (warning) is implicit as one prerequisite for the violation, but alternatively, the government could attempt to show that the person or firm actually knew that chemicals it supplied were going to clandestine labs; "strike 2" is the significant fine of $100,000 per violation for individuals, $250,000 for firms (higher than the $25,000 civil penalty for other violations of this section); "strike 3" (shutdown of the business) would be achieved through the injunction process provided for in legislation proposed elsewhere in this Strategy.

The fines collected would be directed to Federal, state and local agencies, as appropriate, for cleanup of methamphetamine and other clandestine drug laboratories and chemical storage sites.

Criminal penalties are explicitly excluded for violations of this provision because (1) the "knowingly" element of § 842(c)(2)(A) is implicit in the required prior notification of the violator by the Attorney General (in practice the DEA) and (2) prosecution of similar conduct is provided for elsewhere in Title 21, including, inter alia, at 21 U.S.C. §§ 843(a)(6), (7), (8), and (9), 841(d) and (g), and 960(d).

* * * * *

Amend 21 U.S.C. § 842 by:

Adding the following as new 21 U.S.C. § 842(a)(11) to make it unlawful for any person:

> to sell or otherwise distribute a laboratory supply to a person who uses or attempts to use the laboratory supply to manufacture a controlled substance or listed chemical in violation of this subchapter or subchapter II of this chapter; provided, that the person or firm has been notified by the Attorney General or otherwise had actual knowledge that a laboratory supply sold or otherwise distributed by the person has been found at the site of a clandestine laboratory for the unlawful production of a controlled substance or listed chemical, or has been found in the possession of a person who intends to use or furnish the

laboratory supply to such a clandestine laboratory, As used in this paragraph, the term "laboratory supply" means a listed chemical or any chemical or chemical product, drug or drug product, material, preparation, or equipment which may be used to manufacture a controlled substance or listed chemical, including in a clandestine setting.

Adding the following language to the penalty provisions of 21 U.S.C. § 842(c) as a new subparagraph (c)(2)(C):

In addition to the penalties set forth elsewhere in this subchapter or subchapter II of this chapter, any person who violates paragraph (11) of subsection (a) of this section shall, with respect to any such violation, be subject to a civil penalty of not more than 100,000 if the violator is an individual, and not more than $250,000 if the violator is other than an individual, but shall not be subject to criminal penalties for such act under this section.

Adding the following language to 21 U.S.C. § 842(c) as a new paragraph (c)(4):

All amounts received from the enforcement of the civil penalties under subparagraph (c)(2)(C) shall be directed for use by Federal, State and local agencies for the environmental cleanup of clandestine laboratories and chemical storage sites used, or intended or attempted to be used, to manufacture methamphetamine or other clandestinely produced drug.

2. To grant authority to seek injunctive relief against the sale of chemicals under specified circumstances:

Commentary: This would create the authority to enjoin the sale of chemicals, whether or not they are regulated per se under the CSA, by making violation of 21 U.S.C. §§ 843(a)(7) enforceable by means of injunctive relief (subjecting a violator to potential imprisonment for contempt). The greater flexibility and lower standard of proof to obtain a civil injunction could be a useful tool to prevent imminent suspicious transactions. In the alternative, this change could be made as part of a broader amendment to permit enforcement of all of §§ 842 and 843, which set forth the more minor and essentially regulatory violations of the CSA, through civil injunctive relief.

* * * * *

Alternative Civil Injunctive Measures

Offered as a new subsection to 21 U.S.C. § 843(f):

In addition to or in lieu of the foregoing penalties, the Attorney General is authorized to commence a civil action for appropriate relief, including a permanent or temporary injunction, where there is a reasonable basis to believe that a violation of this section or section 842 of this subtitle will occur. Any action under this subsection may be brought in the district court of the United States for the district in which the defendant is located or resides or is doing business, and such court shall have jurisdiction to restrain such violation.[21]

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[21] Existing injunction provisions of the CSA require a conviction prior to their issuance. The suggested language is adapted from 33 U.S.C. § 1319(c), which provides for injunctive relief to enforce certain DEA compliance orders.

3. To grant authority to suspend suspicious (domestic) chemical transactions:

Commentary: The proposed legislation would establish a procedure, with appropriate due process safeguards, whereby DEA can instruct a firm not to engage in a particular chemical transaction with another firm. In other words, DEA should have the authority to suspend a sale of chemicals domestically parallel to its authority to interdict an import or export under 21 U.S.C. § 971(c). Under current law, there are times when DEA develops information on suspicious domestic sales, e.g., to pharmacies that divert chemicals out the "back door," but cannot act on the information. See e.g., Chemicals for Research and Industry v. Thornburgh, 762 F. Supp. 1394 (N.D. Cal. 1991).

* * * * *

Suspension of Suspicious Chemical Transactions

Adding a new subsection, 21 U.S.C. § 830(c):

(1) The Attorney General may order the suspension of any transaction involving a listed chemical, where there is a reasonable basis to believe that the transaction will facilitate the unlawful manufacture of a listed chemical or controlled substance. From and after the time when the Attorney General provides written notice of the order to the regulated person (including the basis for the legal and factual basis for the order), the regulated person shall not carry out the transaction.

(2) Upon written request to the Attorney General, a regulated person to whom an order applies under paragraph (1) is entitled to an agency hearing, on the record, in accordance with subchapter II of chapter 5 of Title 5. The hearing shall be held on an expedited basis and not later than 45 days after the request is made, except that the hearing may be held at a later time, if so requested by the regulated person.[22]

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[22] This amendment impels deletion, as obsolete, of the following language from 21 U.S.C. § 830(b)(1): "A regulated person may not complete a transaction with a person whose description or identifying characteristic is furnished to the regulated person under subparagraph (B), unless the transaction is approved by the Attorney General."

4. To extend the controls on pseudoephedrine products:

Commentary: The DEA Proposed Rule published in the October 31, 1995 Federal Register would remove the regulatory exemption for certain pseudoephedrine products. Because pseudoephedrine is an ingredient in many legitimate over-the-counter drugs, the proposed rule generally regulates only products in which pseudoephedrine is the sole active ingredient, or is combined with other active ingredients such that pseudoephedrine can be readily recovered.[23] The threshold of 24 grams pseudoephedrine base corresponds to a 120-day supply at the maximum adult daily dosage established by the FDA. Significantly, a waiver ensures that the approximately 750,000 retail distributors of pseudoephedrine will remain exempt, unless they engage in sales of above-threshold quantities.[24]

* * * * *

After due consideration of public comments, follow through on the current proposed rule to impose regulatory controls on those products in which pseudoephedrine is the only active ingredient or can be readily recovered.

Proposed Rule -- Pseudoephedrine Regulation

> Due to the large scale utilization of over-the-counter (OTC) pseudoephedrine products for the clandestine manufacture of controlled substances, the DEA has determined that certain products should be subject to recordkeeping, reporting, registration and notification requirements of the CSA to prevent their diversion. Such products include OTC tablets, capsules and powder packets containing pseudoephedrine alone or in combination with antihistamines, guaifenesin or dextromethorphan. This action also proposes that the threshold for pseudo-ephedrine be reduced to 24.0 grams pseudoephedrine base. Such a threshold is sufficient to permit the purchase of up to a 120 day supply of pseudoephedrine without the application of regulatory requirements.

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23 60 Fed. Reg. 55,348 (Oct. 31, 1995). The newly regulated combination products are tablets, capsules, and powder packets containing pseudoephedrine and antihistamines, guaifenesin or dextromethorphan. 60 Fed. Reg. at 55,350.

24 "Retail distributor" is defined as one "selling only personal use quantities to walk-in customers" 21 CFR 309.02. Thus, the seller <u>to</u> a pharmacy is required to report, the pharmacy is not.

To further ensure the availability of pseudo-ephedrine products to legitimate consumers at the retail level, this action also proposes to waive the registration requirement for retail distributors of regulated pseudoephedrine products." 60 Fed. Reg. 55,348 (Oct. 31, 1995).

5. Consideration of a regulatory change to impose greater control over appropriate ephedrine combination products, particularly ephedrine with guaifenesin and other products from which the ephedrine can be readily retrieved by clandestine methamphetamine lab operators.

Commentary: Further consideration of such extended regulatory control will benefit from consultations with the pharmaceutical industry and business associations, as well as the law enforcement and diversion specialist.

6. To address the problem of diversion of "combination" drug products including the precursor chemicals ephedrine, pseudoephedrine phenylpropanolamine:

Commentary: *This provision reverses the current legislative presumption that lawfully manufactured chemical products are exempt* unless *the DEA finds a need to control them because of their diversion. The law would now presume that such drug products, if they contain ephedrine, pseudoephedrine, or phenylpropanolamine, are subject to diversion* unless *specifically exempted. (Either way, the DEA generates and publishes long lists of drug products that are, or are not, being found to be diverted.) There is already ample evidence that ephedrine and pseudoephedrine products are being diverted; newer evidence points up a trend by clandestine manufacturers to use phenylpropanolamine products to make amphetamine.*

* * * * *

Proposed legislative language would read as follows:

DEFINITION. Section 102(39)(A) of the Controlled Substances Act (21 U.S.C. 802(39)(A) is amended in paragraph (iv)(I)(aa) --

(a) by striking from "as" to the semicolon at the end; and

(b) by inserting in its place ", pseudoephedrine or its salts, optical isomers, or salts of optical isomers, or phenylpropanolamine or its salts, optical isomers, or salts of optical isomers unless otherwise provided by regulation of the Attorney General issued pursuant to section 204(e) of this title;".

EXEMPTIONS. Section 204 of the Controlled Substances Act (21 U.S.C. 814) is amended by adding at the end the following new subsection --

(e) The Attorney General may by regulation reinstate the exemption with respect to a particular ephedrine, pseudoephedrine or phenylpropanolamine drug product if the Attorney General determines that the drug product is manufactured and distributed in a manner that prevents diversion. In making this determination the Attorney General shall consider the factors listed in subsection (d)(2) above. Any regulation issued pursuant to this subsection may be amended or revoked based on the factors listed in subsection (d)(4) above.

7. Legislative proposal to provide for the seizure and forfeiture of regulated chemicals in appropriate cases:

<u>Commentary</u>: *For technical reasons discussed in Part III (see p. 16 and fn. 14), the DEA's legal authority to seize and forfeit precursor chemicals is not clear. By making possession of the chemicals themselves illegal under certain circumstances, this amendment provides a technical "fix" to the problem.*

* * * * *

(a) SIMPLE POSSESSION AMENDMENT. Section 404 of the Controlled Substances Act (21 U.S.C. 844) is amended --

(1) in paragraph (a)--

(A) by inserting the following text after "of this chapter" in the first sentence: "or to possess any list I chemical obtained pursuant to or under authority of a registration issued to that person under section 303 of this title or section 1008 of title III if that registration has been revoked or suspended, if that registration has expired or if the registrant has ceased to do business in the manner contemplated by his registration"; and

(B) by inserting "or chemical" after "drug or narcotic"; and

(2) in paragraph (c) --

(A) by inserting "or chemical" after "drug or narcotic"; and

(B) by inserting "or which is a listed chemical or a chemical controlled under state law" after "this subchapter".

(b) FORFEITURE AMENDMENT. -- Section 511(a) of the Controlled Substances Act (21 U.S.C. 881(a)) is amended --

(1) in paragraph (2) by inserting "or listed chemical" after "controlled substance";

(2) in paragraph (6) by inserting "or listed chemical" after "controlled substance"; and

(3) in paragraph (9) by deleting "a felony provision of".

(c) SEIZURE AMENDMENT. -- Section 607 of the Tariff Act of 1930 (19 U.S.C. 1607) is amended by --

(1) in paragraph (a)(3), inserting "or listed chemical" after "controlled substance"; and

(2) by amending paragraph (b) to read as follows:

"(b) As used in this section, the terms "controlled substance" and "listed chemical" have the meaning given these terms in section 102 of the Controlled Substances Act (21 U.S.C. 802).".

8. To provide for long-arm jurisdiction which would reach activities with listed chemicals outside of the United States, including illegitimate ephedrine and pseudoephedrine suppliers in Mexico.

(a) Section 1009(a) of the Controlled Substances Import and Export Act (21 U.S.C. 959(a)) is amended --

(1) by inserting "or listed chemical" after "schedule I or II"; and

(2) by inserting "or chemical" after "substance" in subparagraphs (1) and (2).

(b) Section 1010(d) of the Controlled Substances Import and Export Act (21 U.S.C. 960(d)) is amended --

(1) by deleting "or" at the end of paragraph (5);

(2) by inserting "or" at the end of paragraph (6); and

(3) by adding a new paragraph (7) as follows:

"(7) contrary to section 1009 of this title, manufactures, possesses with intent to distribute , or distributes a listed chemical;".

9. To criminalize the dangerous handling of listed chemicals:

Commentary: As noted in the Strategy, clandestine methamphetamine "cooks" use little care in storing, using or disposing of the ignitable, corrosive, reactive and toxic chemicals they use to manufacture methamphetamine. Fires and explosions at clandestine laboratory sites often lead to their discovery. A special law should separately punish lab operators who flaunt environmental laws and create unsafe conditions, thus posing a great danger to the environment and the health and safety of law enforcement officers.

§ 864. Dangerous Handling of Listed Chemicals

(a) **Offense.** It is unlawful for a person --

(1) to generate, transport, treat, store, dispose of, use, possess, distribute, import or export a listed chemical, as defined in this Subchapter, or the waste from the use of such chemical,

(2) in the manufacture or attempted manufacture of a controlled substance, or with the knowledge or intent that such listed chemical will be used in the illegal manufacture of a controlled substance, including but not limited to the clandestine laboratory setting,

(3)(A) in violation of --

(i) 42 U.S.C. § 6928(d) or (e) (handling hazardous wastes in a manner inconsistent with federal or applicable state law);

(ii) 42 U.S.C. § 9603(b) (failure to notify of a the release of a reportable quantity of a hazardous substance under the Comprehensive Environmental Response, Compensation, and Liability Act).

(iii) 33 U.S.C. §§ 1311(a), 1317(d), 1319(c)(2) and (3), and 1321(b)(3) (unlawful discharge of pollutants or hazardous substances; operation of a source in violation of a pretreatment standard); or

(iv) 49 U.S.C. § 5124 (violations of laws and regulations enforced by the Department of Transportation with respect to transportation of hazardous material); or

(B) in any manner posing an imminent danger to the health and safety of another person, including any federal, state or local law enforcement official lawfully present at the site.

(b) **Penalties.** (1) A person who violates this section shall be subject to a fine up to $250,000 and shall be sentenced to the greater of:

(A) imprisonment for two to four years; or

(B) in the case of knowing endangerment, as set forth under 42 U.S.C. § 6928(e) and 33 U.S.C. § 1319(c)(3), imprisonment for five to fifteen years and up to twice the fine; or

(C) if death or serious bodily injury[1] results from the person's handling of listed chemicals in violation of this section, imprisonment for ten to fifteen years and up to twice the fine; or

(D) if after a prior conviction for a felony drug offense, including an offense under this section, twice the penalty otherwise applicable in (1)(A), (B) or (C) of this subsection.

(2) Notwithstanding any other provision of law, the court shall not suspend the sentence of any person convicted of a violation of this section, nor shall the term of imprisonment imposed under this section run concurrently with any other term of imprisonment, including that imposed for the manufacture or attempted manufacture of controlled substances for which listed chemicals were used in violation of this section.

(3) This section is not intended to preclude prosecution under the environmental and transportation provisions cited herein, or under any other law.

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[1] Definitions of various terms can be found in other environmental protection statutes. For example, "serious bodily injury" is used in used in both 21 U.S.C. § 802(25) and 42 U.S.C. § 6928(f)(6) and 33 U.S.C. § 1319(c)(3)(B)(iv), and "imminent danger" is used in and interpreted in the case law of the Federal Mine Safety and Health Act. <u>See</u> 30 U.S.C. § 802(j); <u>United States v. Protex Industries</u>, 874 F.2d 740 (10th Cir. 1989).

10. Mandatory minimum sentencing:

Methamphetamine Penalty Amendments

(a) Section 401(b)(1)(A)(viii) of the Controlled Substances Act (21 U.S.C. § 841(b)(1)(A)(viii)) is amended by striking "100 grams or more of methamphetamine," and inserting in its place "50 grams or more of methamphetamine,".

(b) Section 401(b)(1)(B)(viii) of the Controlled Substances Act (21 U.S.C. § 841(b)(1)(B)(viii)) is amended by striking "10 grams or more of methamphetamine," and inserting in its place "5 grams or more of methamphetamine,".

(c) Section 1010(b)(1)(H) of the Controlled Substances Import and Export Act (21 U.S.C. § 960(b)(1)(H)) is amended by striking "100 grams or more of methamphetamine," and inserting in its place "50 grams or more of methamphetamine,".

(d) Section 1010(b)(2)(H) of the Controlled Substances Import and Export Act (21 U.S.C. § 960(b)(2)(H)) is amended by striking "10 grams or more of methamphetamine," and inserting in its place "5 grams or more of methamphetamine,".

OVERVIEW OF THE NATIONAL METHAMPHETAMINE STRATEGY

The trafficking and abuse of methamphetamine -- an enormously destructive, addictive and violence-prone synthetic drug -- is a growing national problem. Until recently, methamphetamine was largely associated with motorcycle gangs who supplied users in the western states. In the last few years, available data shows that methamphetamine abuse has risen significantly in the West and Southwest, is threatening the Midwest and has begun to spread eastward. Well-organized, Mexico-based drug organizations have seized control of methamphetamine trafficking, using sophisticated chemical procurement, manufacturing and transportation techniques.

The National Methamphetamine Strategy assesses the threat, identifies the issues, and draws an action plan for future efforts to avert the spread of this sinister drug. In so doing, it recognizes that tackling the problem will require approaches in diverse disciplines, including legislation, law enforcement, training, chemical regulation, international cooperation, environmental protection, education and addictions treatment. Following is a summary of the issues and approaches suggested in the Strategy.

Penalties. Penalties for trafficking in methamphetamine and its precursor chemicals, from which persons with little training produce methamphetamine in makeshift labs, ought to reflect their relative harm. Further, we should specially punish lab operators who mishandle ignitable, corrosive, reactive and toxic chemicals so as to pose a risk to public safety and the environment. The Strategy therefore recommends:

- Increasing the mandatory minimum sentences for methamphetamine to better reflect its destructive effects;

- Significantly raising penalties for trafficking in precursor chemicals to reflect the conversion ratio of chemicals to methamphetamine; and

- Adding special penalties, in appropriate cases, for improper storage, use or other handling of the dangerous chemicals used in the clandestine manufacture of methamphetamine.

Law Enforcement and Training Initiatives. Law enforcement agencies should continue to develop intelligence on clandestine laboratories and trafficking organizations, and select and pursue appropriate targets. The ignitable and toxic properties of methamphetamine labs pose special health risks to law enforcement agents, and trials pose unique technical issues for prosecutors. Therefore, the Strategy recommends:

- That each U.S. Attorney coordinate a multi-disciplinary effort to assess and address the methamphetamine problem in his/her judicial district;

- Devoting more investigative and prosecutive resources, especially along the Southwest Border and in rural areas;

- Training appropriate officials in the risks encountered at clandestine laboratories and chemical dump sites, and in health, safety and environmental protection measures; and

- Forming teams and training investigators and prosecutors in regions where it is most needed.

Regulatory Controls. Because methamphetamine must be synthesized from chemicals, regulatory control of a select group of chemicals can impede clandestine production of the drug. At the same time, the law enforcement need for chemical control must be balanced against the legitimate needs of the chemical, health care and pharmaceutical industries. The Strategy recommends the following measures, among others:

- Subjecting persons and firms who sell chemicals to clandestine labs to significant civil penalties;

- Imposing tighter regulatory controls on drug products containing the precursor chemicals ephedrine and pseudoephedrine; and

- Permitting the DEA to order firms to stop suspicious shipments of chemical precursors, and providing authority to seek injunctions against such shipments.

International Efforts -- Focus on Mexico. Mexico-based organizations are now predominant in methamphetamine trafficking; most chemicals used to make methamphetamine are imported to the U.S. Thus, we must address the international component of the problem. Among other actions, the Strategy calls for:

- Advising and training foreign counterparts, particularly in Mexico, and securing their support to (a) curb methamphetamine trafficking and (b) implement meaningful controls to prevent chemical diversion; and

- Establishing an operational binational (US/Mexican) chemical control task force.

Prevention, Education and Treatment. An effective strategy must incorporate the "demand side" of the equation. Education campaigns, in the media and elsewhere, should provide accurate information focused on at-risk persons. The treatment community should develop regimens for methamphetamine abuse that recognize the long withdrawal period. The Strategy recommends:

- Working with ONDCP and the array of Federal, State and local agencies and private entities to develop a targeted and effective prevention and education campaign to increase public awareness and combat methamphetamine use by youth and other particularly vulnerable population groups.

National Methamphetamine Strategy - Components

- Methamphetamine Threat:

  ▸ Produces violent behavior -- chemically generated -- in the user. This is unlike most other drugs and it endangers the user, the law enforcement community, emergency room personnel, the community and the family.

  ▸ Has severe destructive health consequences, including prolonged psychosis and paranoid schizophrenic behavior, within a very short period of usage.

  ▸ Contributes to HIV transmission.

  ▸ Environmental hazards: flammable and explosive chemicals used in makeshift laboratories; toxic gases and fumes generated; discarded waste contains toxic liquids and chemicals, endangering soil and ground water.

  ▸ Costs associated with cleanup are immense and funding sources must be identified.

- **Component:** Stricter Penalties

  ▸ Tougher penalties for precursor chemicals. [DOJ-OLA]

  ▸ Mandatory minimums reflecting the destructive effect of the drug. [DOJ-OLA]

  ▸ Criminal penalties for creating a hazard to the environment and to public health. [DOJ-OLA (CRM-ENV)]

- **Component:** Operational Enforcement Activities (Domestic)

  ▸ Partnership with State and local law enforcement agencies to develop additional intelligence, to identify trafficking organizations and to monitor shipments of methamphetamine and precursor chemicals. [DEA/FBI]

  ▸ Place special emphasis on major violent methamphetamine trafficking organizations. [DOJ/DEA/FBI]

  ▸ Intensify use of existing task forces, particularly in rural areas in need of additional resources. [DOJ/DEA/FBI]

- <u>Component: International (Focus on Mexico)</u>

  ▶ Devote investigative and prosecutive resources in the Southwest Border Initiative, to attack the methamphetamine production and chemical supply operations of the Mexican trafficking organizations. [**SWB Council (US Attorneys/ CrimDiv/DEA/FBI/USCS)**]

  ▶ Advise, train, coordinate with foreign counterparts -- particularly in Mexico -- at both policy and operational levels concerning the problem and consequences of chemical diversion and the legal, administrative and practical means to prevent/detect diversion. [**DOJ-CrimDiv/DEA/State**]

- <u>Component: Regulatory Controls and Legislation</u>

  ▶ Strengthen regulation of precursor chemicals, both by pursuing current proposals to control products in which pseudoephedrine is the only active ingredient and by undertaking regulation of appropriate ephedrine and phenylpropanolamine combination products. [**DEA/DOJ-CrimDiv**]

  ▶ Amend the Controlled Substance Act to add the authority to suspend suspicious transactions of chemicals and to enjoin "rogue" chemical suppliers; impose civil penalties on knowing suppliers; permit seizure of regulated chemicals where suspicious transactions or regulatory violations are detected. [**DOJ-OLA**]

- <u>Component: Training</u>

  ▶ Develop curricula addressing the physical risk posed by the chemicals encountered at clandestine laboratories and chemical dump sites, including the use of protective clothing and equipment. [**DOJ-CrimDiv/EOUSA/DEA/FBI**]

  ▶ Develop instructional materials on statutory and regulatory requirements and responsibilities associated with the cleanup and remediation of chemical disposal sites, including actual and possible hazards of clandestine labs. [**EPA/DOJ-CrimDiv/EOUSA/DEA/FBI**]

  ▶ Provide instruction in federal regulations concerning safety clothing, equipment and medical evaluations, and civil liability and the obligations of supervisors and administrators. [**EPA/DOJ-CrimDiv/EOUSA/DEA/FBI**]

  ▶ Coordinate the law enforcement, corrections and medical/mental health/addiction communities to exchange information regarding safety issues associated with the violent behavior of methamphetamine users and addicts. [DOJ/ONDCP/HHS]

- <u>Component: Treatment, Prevention and Education</u>

  ▸ Implement President Clinton's directive to develop a plan for universal drug testing of all federal arrestees. [DOJ-OPD]

  ▸ Work with ONDCP and the array of Federal, State and local agencies and private entities to help develop a targeted and effective prevention and education campaign to combat methamphetamine use by youth and other particularly vulnerable population groups. [DOJ-OPD/ONDCP/HHS]

  ▸ Increase public awareness of the dangers of methamphetamine, with a national media campaign targeting young people, adults, parents, employers and educators. Possible topics include the dangers of methamphetamine abuse, violence and the environmental harm caused by clandestine laboratories. Through our State and local counterparts, we should encourage community groups to schedule local events that bring together experts from a full range of disciplines to discuss and educate the community on the dangers of methamphetamine. [DOJ-OPA/HHS/ONDCP]

  ▸ Coordinate with the Office of National Drug Control Policy to ensure that methamphetamine is given increased emphasis in this year's National Drug Control Strategy. [DOJ-CrimDiv,OPD/ONDCP]

Appendix B

METHAMPHETAMINE CONFERENCE REPORT

METHAMPHETAMINE

Q: What does the 1995 Household Survey tell us about methamphetamine use?

A: There was no significant change between 1994 and 1995 in the number of Americans who have tried methamphetamine at some point in their lives. In 1995, an estimated 4.7 million Americans (2.2 percent of the population) had tried methamphetamine at least once in their lifetime.

BURRELLE'S NEWSEXPRESS
MIAMI HERALD
DATE: MAR 25 1997

'Speed': South Florida's next drug epidemic

By DAVID LYONS
Herald Staff Writer

10

Years ago, police dubbed illicit methamphetamines as the "poor man's speed." It was cheaper than cocaine, snubbed by the monied addicts and an infrequent cause of serious conflict among drug peddlers.

Now, it's the source of bloodletting in Mexico, environmental poison in California and more than a little angst among drug agents in Florida.

Surveying the vast landscape of the illegal narcotics trade he must soon try to combat as the Drug Enforcement Administration's top man in Miami, William Mitchell predicts that it may not be long before speed makes a South Florida appearance in big doses.

Classified as an illegal controlled substance, like cocaine, the drug has already surfaced in Orlando, Tampa and Clearwater, where it is being imported, traded and consumed in large quantities.

"It's much worse than crack in terms of the effect it can have on the individual's body," Mitchell said. "What we hope doesn't happen here in Florida is meth labs springing up. That is an entirely different ballgame. We're kind of gearing up for that in the northern part of the state."

Mitchell is well-schooled in the problem.

As chief of the DEA office in San Francisco, where he is packing his bags to come to Miami in June, Mitchell has seen control of the methamphetamine trade shift from bikers to Mexicans, people killed in territorial disputes, and the environment badly polluted by lab operators who chuck toxic byproducts willy-nilly over the countryside.

"A year and a half ago, 92 percent of all of the methamphetamines seized throughout all of the country emanated in California," he said. "That has changed, because Mexico has gone into supplying it."

James Milford, the DEA's No. 2 man in Washington who is Mitchell's predecessor in Miami, said the speed trade has seeped as far south as Orlando, Tampa and Clearwater, where agents have been known to seize 20 pounds at a time. Dressed in space age protective suits, they have also seized labs filled with volatile chemicals — enough to level a block or blow up an unsuspecting neighborhood.

"We've seized millions of dollars' worth up there," he said. "It's trendy. It's cheaper than cocaine, and it's a major, major problem. It's marketed mainly by Mexican traffickers."

How dangerous is the speed trade?

In Riverside, Calif., one lab exploded last year, blowing up a house trailer and killing two children inside.

In California's Napa Valley, winemakers have become unnerved by widespread toxic dumping.

"The worst thing is the chemical sludge that is left behind," Mitchell said. "It's being dumped into the countryside. It really is toxic waste alongside some of the vineyards. People who like wine are very upset."

The waste comes from what Mitchell characterized as "Beavis and Butt-Head" labs, or "mom and pop" labs.

DRUG SEIZURES

Seizures of methamphetamine in Florida by the Drug Enforcement Administration jumped dramatically last year.

- 1994: 8.5 pounds.
- 1995: 5.8 pounds.
- 1996: 50.6 pounds.

Dennis —
Meth no longer West Coast drug
Jen

METH

Quick and easy

Mixing is as easy as it is dangerous. All a home chemist needs is a small working area such as a bathroom, motel room or mobile home, a heating mechanism and chemicals such as ephedrin.

The labs pop up as quickly as they are shut down.

'People who use and cook [speed] are very dangerous. When people use it over a number of days, they become paranoid psychotic and very violent.'

STAN VEGAR
DEA spokesman in San Francisco

Last year, federal agents and local and state police in California seized more than 700 labs. They hauled away 8,000 pounds of the drug. In 1994 and 1995, they confiscated 13,000 pounds. They can't explain the reason for the decline.

"The majority of these labs are big producing labs," said Stan Vegar, the DEA spokesman in San Francisco. "We do quite a business."

Agents keep busy because the price has dropped over the years while the quality has gone up.

"Six or seven years ago, a pound of crank was $10,000," Vegar said. "Now it's dropped to an average of $2,500 a pound."

Prescription needed

While methamphetamines can be obtained legally, they cannot be purchased without a prescription from a doctor. Once used up, the prescription may not be refilled. The physician must write a new one.

Methamphetamines carry a stimulative effect that is "approximately equal to or greater than that of amphetamines," according to the Drug Information Center at the Veterans Administration Hospital in Miami.

Members of the amphetamine family belong to a group of medicines called central nervous system stimulants. Among other things, they are used by doctors to treat attention-deficit disorders. They decrease restlessness in patients who are overactive, easily distracted and have unstable emotions.

They are also used to treat narcolepsy, which is an uncontrolled desire for sleep.

Potential health hazard

Small doses carry a pronounced effect on the nervous system without substantial side effects. But in larger doses, they can produce a sustained rise in blood pressure.

Doctors warn against their use for weight loss or to compensate for the lack of rest. Ingested for those purposes, the drug is a potential health hazard.

Psychological problems can also develop from improper use. The drug can produce nervousness, insomnia, irritability, dizziness and headaches.

Its volatility is what concerns law enforcement authorities the most.

"This one cuts across most social and economic classes," said Vegar, the DEA spokesman. "It's the scariest one from the law enforcement perspective: The labs are volatile. One in five are found because they've exploded."

Moreover, the people who produce the stuff typically use it.

"People who use and cook are very dangerous," Vegar said. "When people use it over a number of days, they become paranoid psychotic and very violent."

Source of violence

The economics of speed is also an apparent source of violence.

Like the Colombian cocaine cowboys who shot their way through South Florida in the early 1980s, rival Mexican gangs are resorting to murder, kidnapping and extortion in attempts to control the speed business in the border town of Tijuana.

Agents are also witnessing more finished product coming across the border from Mexico, Vegar said.

For now, agents are still trying to identify trafficking patterns in and out of Florida.

"We're not really certain how much of the meth throughout the state is coming from Mexico, or coming from California," Mitchell said. "No matter how we react, we just can't stop this stuff. We'll see what we can do."

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LOS ANGELES TIMES

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Methamphetamine Now Races Through the Heart of America

■ **Crime:** It's now the drug of choice in the Midwest, where it's cheap and easily produced. Scourge spawns new tales of death, desperation.

By SHARON COHEN AP
ASSOCIATED PRESS

BENTON, Mo.—It might seem a supernatural force has seized this remote county of two-lane blacktops and white oak forests. It can be found in the surge in crime. And in the inexplicable behavior.

With terrible suddenness, a flash fire erupts and then a blast shatters a trailer, the flames engulfing one man. A strange scene follows: The victim's friends dash outside to bury a skillet and a blender as police arrive.

A desperate young thief steals a pickup, a car and a Harley Davidson—all in a single night.

Over the course of a month, rampaging teens burn a church, a machine shed and railroad crossing signs and rip through ravines, ditches and a golf course, with the damage reaching nearly $1 million.

Odd and terrifying, these episodes are not the work of the occult. Authorities have a more prosaic explanation: methamphetamine.

A potent and popular, destructive and sometimes deadly synthetic drug, long a scourge in the West, methamphetamine has invaded America's heartland.

Users can become walking zombies, fueled by paranoid fantasies as they go days without sleep or food, only craving more of the drug.

Methamphetamine has ruined lives, filled jails, flooded courts and frustrated police.

"Years ago, I predicted it would be the biggest problem we had . . . but I still didn't realize what it would turn out to be," says Scott County Sheriff Bill Ferrell, who has reigned over this corner of southeast Missouri for 20 years. "It snowballs, but it's underground and you don't know what you've got until it's too late."

Please see METH, A29

Methamphetamine, also known as meth, crank, ice or crystal, has cut a wide swath through middle America, surpassing the popularity of crack and other drugs in many communities.

Its tentacles reach from backwoods barns in southeast Missouri's Bootheel to desolate Indian reservations in North Dakota and South Dakota to caravans of illegal immigrants who blend in with others who come looking for work in meatpacking plants in Nebraska and Iowa.

"We're in the middle of a meth epidemic," says Ken Carter, director of the Iowa Division of Narcotics Enforcement. "This state has a tremendous appetite for that stuff. . . . It's from high school all the way up to the age people should know better."

Meth Arrests Are Skyrocketing

Iowa's meth arrests—based on reports covering most of the state—accounted for 47% of drug activity in 1995, compared with less than 5% four years earlier. And Nebraska police recently seized the largest shipment of the drug ever in the state, recovering 34 pounds, worth $1.5 million, in February.

These increases are part of a broader trend.

Officials at the Drug Enforcement Administration region that covers five Midwest states and southern Illinois say meth arrests skyrocketed in a five-year period ending in 1996—from 47 to 424. Those numbers don't include hundreds of people nabbed by local and state authorities.

And in fiscal 1996, the DEA seized 303 meth labs in the Midwest, compared with just six four years earlier. The bulk of them—250—were here in Missouri.

"We, in effect, have become the source country in the Midwest for meth," says Stephen Hill, the U.S. attorney in Kansas City, whose office has been overwhelmed by these cases.

Long a problem in the West and Southwest—especially California, where 789 meth labs were seized in 1996—the drug has spread to the heartland partly because it's so easy to make, partly because there's so much money to be made.

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"You don't have to go to Mexico," says Farrell, the Scott County sheriff. "You don't have to transport it from Colombia. This is something you can make with stuff you can buy from the local hardware store."

Methamphetamine, which can be smoked, snorted, swallowed or injected, normally contains ephedrine or pseudoephedrine, found in over-the-counter cold medications. Depending on the recipe, other ingredients used in the cooking are the stuff of skull-and-crossbones labels: lye, rat killer, battery parts and various chemicals.

It's a highly volatile mix. Police blotters are filled with horror stories of meth "cooks" who have severely burned themselves—or even died—from explosions or caustic fumes.

Many meth labs are mom-and-pop operations, modern-day versions of the moonshine still. The drug can be made with a skillet and stove, in a bathtub, even a car trunk with a plastic drinking cup. And the recipe is just a click away on the Internet.

It's lucrative too. A $1,000 investment, police say, can reap a $20,000 profit.

But its consequences often are tragic.

In South Dakota, a man awakened by his girlfriend from a binge grabbed his handgun, wounded her and killed two people before turning the weapon on himself. In Missouri, a 17-year-old was convicted of murdering another teen in what prosecutors called a meth deal gone bad. And in Nebraska, a teen died after collapsing at his high school prom; toxicology reports indicate he had taken meth.

Still, many remain unfazed.

"It's a cheap man's high," explains Robin Mesey, 40, who admits to using the drug but denies charges he faces in Missouri that he attempted to manufacture it. "It's longer-lasting. Price-wise, it's the best."

Police say $100 can buy a cocaine user a 20-minute high; the same amount can keep a meth user buzzed for a day or two.

"You learn to depend on it. It becomes more important than everything in life," says Mesey, tattooed arms crossed casually as he sits in the Butler County Jail, calmly describing how meth has ruined him.

"I try to keep my sense of humor," he says, a smile underneath a scraggly mustache. "That's the only thing I have left. I've given away everything else."

Still, Mesey adds, chances are good he'll use it again if he remains in the county.

"It takes five minutes to have all the dope I want," he says, "and it doesn't cost me a dime because I know so many people."

Their Families, Bodies Fall Apart

That doesn't surprise Kevin Glaser, a narcotics officer for the Missouri State Highway Patrol, who arrived at a house trailer fire last year as some of the burn victim's buddies were scrambling to bury cooking utensils commonly used to manufacture meth.

"It's hard to imagine a drug controlling you the way it does," Glaser says. "They see their family falling apart, their bodies falling apart, but the only thing that matters to them is the dope."

Methamphetamine trafficking in the Midwest once was almost the exclusive business of biker gangs.

Now, it's everywhere.

"The meth trade is probably different from any other drug trade," says Sgt. Russ Underwood of the Des Moines Police. "Instead of going to some dark corner of the city, you might be able to get some from your co-worker or the person next door in the suburbs. You don't have to put your life in peril to go into the inner city . . . where someone might shoot you."

Unlike Missouri, most of the drug is imported to Iowa; some has been transported by illegal immigrants.

Since June 1995, a federal drug task force has seized 60 pounds of meth and arrested 45 illegal aliens in Iowa and Nebraska, says Jerry Heinauer, Omaha district director of the Immigration and Naturalization Service.

"Illegals are coming up and selling this stuff, melting within the community where there are meatpacking plants," Heinauer says.

In another twist on smuggling, North Dakota authorities recently arrested six people—three of whom already have been convicted—for participating in a sophisticated ring that used illegal aliens as "mules" to haul meth on Greyhound buses from the Southwest to North Dakota and South Dakota. It was then carted off to safe houses rented on remote Indian reservations, where there's little police scrutiny.

All this activity has taxed the courts.

In western Missouri, which includes Kansas City, federal prosecutor Hill says 80% of narcotics cases his office saw three years ago involved crack or powder cocaine; now, 90% are methamphetamine.

He speculates 400 to 500 clandestine labs may be seized in Missouri this year and worries, too, about the aftermath: Carcinogenic cooking residue is sometimes dumped in streams or along roadsides.

"We're talking about people trashing the environment, trashing themselves and eventually putting poison out on the streets," he says.

Glaser, the narcotics officer, says he shuts down a lab every week or so. But others open up.

"It's like the Dutchman sticking his finger in the dike," he says. "You plug one hole, then another hole pops up somewhere else. We're as busy today as we were a year ago. I don't see any letup in the near future. We've just got too many people trying to do it."

212

Ideas & Trends

THE NEW YORK TIMES, SUNDAY, MARCH 16, 1997

Way Out West and Under the Influence

By CAREY GOLDBERG

SPOKANE, Wash.

IT was like the buzz of 1,000 cups of coffee, Joy said. It kept her up for days at a time, and set her to cleaning the house like the old white tornado commercials for Ajax. It whisked away her postpartum depression and made staying slim a breeze.

The only problem, said Joy, who asked that her last name not be used, was that it wrecked her life, costing her custody of her 3-year old son Conor (she is now fighting to get him back) and it proved so hard to kick that she went through four in-patient programs to get to the point where she is now, with six drug-free months behind her.

"I was a garbage pit," she said.

The illegal drug that seduced and almost destroyed Joy is methamphetamine — also known as crank, speed or meth.

Its growing popularity, almost entirely in the West and Midwest, has brought warnings from Federal officials that it could become the 1990's version of crack cocaine. It is easy to make, cheap, powerfully addictive and so long-lasting that $25 can buy a four-day high.

From Crack to Crank

The biggest difference between crack and crank, experts say, is the constituency: Crank users are mainly white and come from rural or suburban areas.

And crank appears to be popular among women in unheard-of proportions.

At a recent regional conference on methamphetamine held in San Francisco, researchers from the National Institute of Justice, a Federal research center, reported that crank users in their 20's were likelier to be women then men. In eight Western cities, they said, methamphetamine was found more often in bloodstreams of women than in men who had been arrested, and women were likelier to use it than any other drug.

The statistics are still preliminary, researchers say, and it's not yet established why women are especially drawn to it. Popularized by bikers and truckers as long ago as the 1950's and nicknamed crank because it was often hidden in their crankcases, it was also once known as "blue-collar cocaine." Later it became popular among gay men.

But now, said Gen. Barry McCaffrey, director of drug policy for the Clinton Administration, "women are testing positive at a higher rate than men, and that's the first time we've seen that on any drug.

"There may be a piece of it related to weight loss," he said, and "a piece of it related to enabling prostitution — it's a drug that allows you to deal with your feelings of remorse."

The spread of methamphetamines also fits into a broader picture of rising drug use among women, he said. Last summer the National Center on Addiction and Substance Abuse at Columbia University issued a report showing that 3.1 million American women regularly used illegal drugs, that 40 percent of crack addicts were women and that among teen-agers, girls and boys were equally likely to have used drugs.

Mr. McCaffrey said he found the spread of methamphetamines among women especially scary because crank users, like crack users, are prone to violence and child abuse. It is, he said, one of the few things "powerful enough to shatter a mother's love for her child."

Speaking at the San Francisco conference, Senator Dianne Feinstein of California noted that in one Sacramento hospital, there are now more babies addicted to methamphetamines than to crack.

Spokane, a regional center of 400,000 on the sparsely settled eastern edge of Washington state, typifies the kind of territory where methamphetamine use is increasing rapidly. Barb Richey, an outreach worker who helps mainly pregnant women on drugs, said that many women have gotten hooked on crank — which can be smoked, injected or snorted — as a weight-loss drug. Of the 335 pregnant women she has helped get into drug treatment since November of 1995, she said, about 40 percent of them were on crank.

"Eight years ago I thought injectable cocaine was the worst drug in the world," said Lynn Everson, who staffs a needle exchange program in Spokane. "Six years ago I thought crack was the worst and now I think it's crank."

Joy said the drug is readily available at bars or through small groups of casual friends. Users don't often have to deal with violent gangs to get it, because small-time manufacturers and distributors abound.

That is part of its appeal to women and other users, said Thomas Constantine, head of the Federal Drug Enforcement Agency, in an interview at the San Francisco conference. "It can be bought in rural and suburban areas, without venturing into a high-crime area," he said.

The prevalence of women on crank also seems to hark back to old patterns. Women, who suffer disproportionately from anxiety and depression, have long been prone to abusing prescription tranquilizers, anti-depressants and weight loss pills, researchers say. The only difference is that crank, which delivers a much more potent and long-lasting high, is illegal.

Mother's Little Helper

Crank "is kind of a drug of the times in that it's a drug for people who don't have enough time," said Michael Gorman, a University of Washington researcher running a study of methamphetamine use in Seattle. "You have the sense that it's moms trying to juggle jobs and three kids and day care, and women working as waitresses on their feet for 12 hours a day. And it's truck drivers, carpet layers, people who work long hours doing tedious, repetitive tasks."

Dr. Gorman's research has focused mainly on crank's prevalence among gay men who sometimes use it to enhance sex. But he said it was clear that among women, the weight-loss component of crank was also very strong. In Hawaii, where "ice" — a smokeable form of methamphetamine — has been in wide use since the late 1980's, doctors and the police have become much more familiar than their mainland colleagues with its effects on users, and have noticed a peculiar difference between the sexes.

Dr. Tom Leland, a psychiatrist at Queens Hospital in Honolulu, said one can often tell where ice is being smoked, because the woman in the house will be a compulsive cleaner, and the place will be spick-and-span. The man, meanwhile, will have become what police officers call a "tweaker," overcome with a manic urge to take things apart, and so car and machine parts will often be scattered on an immaculate lawn.

That urge to clean is what Joy, a 36-year-old janitorial supervisor, experienced in her Spokane home, where she tended her tiny garden and cleaned compulsively.

"Things got done," she said. "It's not like cocaine where you use it and automatically you're out looking for more."

For days at a time, she said, she would be gloriously numb, able to forget all her troubles. But whenever she would stop using it, she would be forced to face "the wreckage of the last 15 or 17 days."

Joy, who weighed 130 pounds on crank, is now at 200 pounds and struggling toward recovery, thankful she was never arrested and trying to win custody of her son from her mother.

But she knows she is fighting the odds: "They say that with crank, there's such a high rate of recidivism they just about write you off," she said.

THE NEW YORK TIMES NATIONAL SUNDAY, MARCH 16, 1997

Drug Arrests Rise 18% on Major College Campuses, Survey Finds

By WILLIAM H. HONAN

Drug arrests on major college campuses climbed by almost 18 percent in 1995, according to the annual survey of campus crime by The Chronicle of Higher Education. Some college officials attributed the rise to stricter enforcement of drug laws rather than to increased drug use.

The survey, appearing in the March 21 issue, reported reductions in other crimes, in line with national trends. The number of murders was down to 15, from 16, robberies were down to 1,038, from 1,157, and burglaries were down to 16,011, from 16,789.

But forcible sex offenses were up to 973, from 955 in 1994.

There were 6,797 arrests for drug violations in 1995, up from 5,764 the previous year. The largest increase was reported at Northern Arizona University, with 133 drug arrests in the 1995-96 academic year, up from 78 the previous year.

Ten other institutions reported more than 100 drug arrests in 1995: Arizona State University, Michigan State University, Rutgers University, San Jose State University in California, the University of Arizona, the University of California at Berkeley, the University of Maryland at College Park, the University of Michigan, the University of North Carolina at Greensboro and the University of Wisconsin at Madison.

Colleges and universities that receive Federal money are required by law to make yearly reports on crimes committed on their campuses and to make these reports available to students and employees. The Chronicle survey covered all 490 four-year colleges and universities enrolling 5,000 students or more. Only Yeshiva University declined to supply data to the newspaper.

While the survey highlights the rise in drug arrests, college health specialists said alcohol abuse posed a far greater problem. The survey found 15,208 arrests for liquor-law violations, up from 15,027. And, added Steve Lustig, executive director of University Health Services at the University of California at Berkeley, "Almost all of the sexual assaults here last year were alcohol-related."

At Rutgers, Dr. Robert H. Bierman, director of the Student Health Service, said he was unaware of any increase in drug use on campus and attributed the increase in arrests to aggressive enforcement. He said Rutgers's alcohol and drug programs were regarded as models.

"Our Adaps housing program — it stands for Alcohol and Other Drug Assistance Program for Students — has become nationally recognized," Dr. Bierman said. "It places recovering students together in a part of a dormitory where they can support each other. People from around the country come here to study this program."

Dr. Bierman cited a number of other Rutgers programs that he said were highly effective, including a program called Substance Free Housing, in which students renounce the use of alcohol, drugs and tobacco.

"Rutgers has 48,000 students," Dr. Bierman said. "This is a city, and a city composed of people mostly 17 to 26 years old. You have to expect some things."

The Chronicle cautioned that the crime reports were not necessarily complete. Crimes involving students at an urban campus, for example, might be handled by the local police, not campus agencies, and thus not be included in the data. Further, colleges with a professional police force, not a campus judicial system, may show higher crime rates because of more aggressive enforcement.

And not all the crimes involve students. At Berkeley, for example, Patrick Carroll, a captain in the campus police department, said that 90 to 95 percent of those arrested on drug charges by his officers were people not affiliated with the university.

U.S. Drug Agents Want Mexico to Ease 'Rules of the Game'

By SAM DILLON

HOUSTON, March 15 — In his years as an American drug agent in Mexico, Wilburn Sears almost never traveled by plane, chosing to drive to meetings even when it meant a 1,000-mile round trip.

Mr. Sears had no qualms about Mexico's airlines. But they do not permit passengers to take weapons aboard, and the drug agent refused to go anywhere without his gun.

In arming himself against what he said were several credible death threats, Mr. Sears was acting with the approval of his supervisors at the Drug Enforcement Administration and of the American Ambassador in Mexico. But he was also violating a Mexican Government rule that forbids American agents to carry guns.

That restriction is one of the "rules of the game" for the 39 D.E.A. agents in Mexico that American officials say help make the country one of the most daunting assignments anywhere. This week the House of Representatives approved a bill that would impose sanctions on Mexico in 90 days unless it takes "concrete measures" to combat corruption and relaxes some of the rules.

American officials, worried about the increasing threat posed by violent Mexican traffickers, have pressed Mexico to allow the agents to carry firearms. Mexican officials have refused to grant the request or to otherwise relax the rules that regulate the agents' behavior.

"North American drug officials say to us, 'Just let us alone to do whatever we want in Mexico,'" a senior Foreign Ministry official said. "That's ridiculous. We're not going to allow a bunch of Rambos to overrun our country."

Although the question of drug agents' carrying guns remains at an impasse, the two countries are weighing the first significant increase in the number of agents in Mexico since the Mexican Government capped their number at 39 and imposed strict rules of conduct in 1992, Mexican and American officials said.

EX-OFFICIAL'S MILLIONS TIED TO DRUGS

A civil jury in Houston found that $8 million seized from Mexico's former top anti-drug official could be traced to bribes from traffickers. *Page 10.*

According to a Drug Enforcement Administration official, the United States has asked Mexico to permit 12 more agents to be assigned to the American Embassy, six from the F.B.I. and 6 from the agency.

The United States has also asked than an 23 more agents be permitted to work in the twin border cities of Tijuana-San Diego, Ciudad Juárez-El Paso and Matamoros-Brownsville, Tex., the official said. The new agents, some from the Drug Enforcement Administration and others from Customs and other agencies, would work under the same Mexican rules that apply to the D.E.A. agents now there. Mexico has requested a reciprocal increase in the number of Mexican officers permitted in the United States.

The American agents are supposed to provide tactical intelligence and behind-the-scenes leadership for the anti-drug fight. But they are overwhelmingly outnumbered by the dozens of trafficking organizations operating across Mexico, where the drug industry earns some $10 billion annually and plows $6 billion of it back into bribes.

"The police officers you work with are often on the traffickers' payroll," said Doug Wankel, who retired recently as chief of operations of the Drug Enforcement Administration. "So you're left on your own, and you worry about your family, you worry about the safety of the informants you recruit, and you end up wondering, whom can I trust? These guys and women have a lot to contend with."

For a decade after the Drug Enforcement Administration first began operating in Mexico in the early 1970's, drug agents worked there, as in most countries of the world, without formal regulation other than their own agency's guidelines. The potential dangers became real in February 1985 when traffickers kidnapped and tortured to death Enrique Camarena, an agent based in Guadalajara.

American officials accused Humberto Álvarez Machain, a Guadalajara gynecologist, of injecting Mr. Camarena with stimulants to keep him conscious during his final interrogation. Frustrated by Mexico's failure to arrest Dr. Álvarez Machain after his indictment in Los Angeles, American officials paid Mexican bounty hunters to kidnap him and take him to El Paso in 1990. That aroused a furor, but there was even more outrage in Mexico when the United States Supreme Court ruled in June 1992 that the abduction did not violate American law.

"That seemed to us like a blank check to carry out kidnappings," recalled a Mexican official.

In 1992 the Government of President Carlos Salinas de Gortari imposed what American officials said were the first written regulations that the anti-drug agency had faced anywhere in the world.

The rules capped the number of agents in Mexico, designated a half-dozen cities in which they must live, prohibited them from traveling without written Government permission, denied them diplomatic immunity from prosecution and stipulated that all useful intelligence information "must be immediately transmitted to the competent Mexican authorities." They also prohibited weapons.

In the years since, personal security has been a consistent worry of the American agents, and officials from both countries say that the Americans have largely ignored the rules prohibiting weapons and that the Mexican Government has winked at the practice.

"The D.E.A. does not operate in Mexico without guns," an American drug official said recently. "But if they get into trouble carrying their weapon, they could be kicked out of the country."

Actually, according to the Mexican rules American agents could face worse than expulsion: they could be put on trial.

They do not have diplomatic immunity, which would protect them from prosecution in Mexico even if accused of serious crimes, officials said. Instead, they have a lower form of accreditation called consular immunity, under which Mexican authorities would be required to turn an agent accused of a serious crime over to the custody of American officials, but could prosecute him and imprison him if convicted.

On a daunting assignment in the drug war, the rule is 'No arms.'

Mr. Sears, the Drug Enforcement Administration's agent in charge in Sonora, the Mexican state that borders Arizona, from 1991 until his retirement in December 1994, said that his responsibilities often required him to travel to the border cities of Tijuana and Ciudad Juárez and that he drove the 1,000-mile round trips so he could take his gun.

American officials say the situation in Mexico has grown increasingly tense since Mr. Sears left three years ago. "In my view we are facing an emergency situation," Gen. Barry R. McCaffrey, director of the Office on National Drug Control Policy, wrote to Foreign Minister Ángel Gurria on Sept. 30.

But the Mexican Government has not changed its position. "Permission for these agents to carry arms has not been granted," Mr. Gurria told the Mexican Congress recently.

BARRY MCCAFFREY The Washington Times SUNDAY, MARCH 16, 1997

Getting a fix on U.S. drug use history

Recent calls for legalization as the panacea for the nation's drug ills should be taken with the salt of history. The tendency to forget much of America's experience with addictive substances goes to the very nature of drugs and the culture they spawn. A drugged society suffers from long-term memory loss to the point of amnesia.

The lure of illegal drugs involves a desire for intense pleasure and instant reward. Drug users crave out-of-body joy and peace at the drop of a pill, in a few breaths, or within minutes of injection. Lost in the self and the present, the person on drugs is neither preparing for the future nor learning from the past. The drug culture nods in the "now"; its orientation is ahistorical. Yet history has much to teach us about the problems of substance abuse, which we ignore at our peril.

America's confrontation with dangerous drugs dates back to the 19th century when over-the-counter syrups were heavily laced with morphine; Coca-Cola and other beverages contained cocaine; and Bayer Pharmaceutical Products introduced heroin — touted as "non-addictive" and sold without prescription (one year before Bayer offered aspirin). At the turn of the century, opium dens catered to communities throughout the United States.

We do not have to speculate about what would happen if addictive drugs were legal without prescription. Our country already tried that route, suffered, and roundly rejected the scourge of drugs on our communities, schools, workplaces and families.

By popular demand, the Food and Drug Act of 1906 required that all ingredients in products and medicines be revealed to consumers, many of whom had become addicted to substances falsely marketed as safe.

In 1909, the Smoking Opium Exclusion Act banned the importation of smokable opium — providing the first national anti-drug legislation. Five years later, the Harrison Narcotic Act implemented even broader and more effective drug control laws. In 1911, the first International Conference on Opium convened in The Hague to control narcotics trafficking. By the 1920s, doctors in America were prohibited from prescribing opiates for nonmedical purposes, including the treatment of addicts.

Problems with cocaine addiction plagued Hollywood in the '20s to the point where movie mogul Louis B. Mayer complained: "If this keeps up, there won't be any motion picture industry."

In response to popular outrage over depictions of drug use in film, 37 states passed censorship bills by 1922. The drug problem did not first hit the United States in the 1960s, as is often thought. An earlier drug epidemic raged between 1885 and 1925, followed by a resurgence from 1950 to 1970 when heroin poured into America from Turkey by way of France. Ten years later, a third and incredibly destructive wave of drug abuse brought havoc to our shores as Colombian cartels flooded our streets with cocaine.

The tendency to underestimate the hazards of drug use has been made in successive generations. We forget what has been painfully demonstrated in years past. The seductive quality of drugs fooled many professionals and laymen. The father of modern psychiatry, Sigmund Freud, initially thought cocaine was non-addictive and relatively harmless — a mistake made in the mid-1880s that was repeated nearly a hundred years later. Leading universities hosted professors infatuated with psychedelics in the 1960s and '70s or stimulants and narcotics in the '80s and '90s.

Many physicians and researchers grossly underestimated drug dangers. Dr. Morris Manges of Mount Sinai Hospital wrote, in an 1898 issue of the New York Medical Journal, about treating coughs with heroin: "apparently, there was no habituation to the drug." By 1900, Dr. Manges released a second glowing report for heroin based on a survey of 141 doctors. The author noted only a small number of cases where addiction was observed. But three years later, Dr. George Pettey voiced unequivocal alarm in "The Heroin Habit: Another Curse," published in the Alabama Medical Journal. Dr. Pettey realized that heroin produced "what is for all intents and purposes the opium habit."

With respect to cocaine, the absence of heroin-type withdrawal symptoms tricked some researchers into missing this drug's addictive quality, which is based on reward, according to Dr. Robert Dupont, a former head of the National Institute of Drug Abuse. In 1979, Dr. Robert Byck of Yale Medical School warned about the devastation caused by smoked coca paste used in Peru — this before crack ominously captured so many Americans.

Wooed into a false sense of security by the supposed benign quality of smoked marijuana, unwitting victims of crack cocaine wrongly concluded that smoking this substance — unlike injecting it — would be a safe route of administration. (Dr. David Musto highlights a parallel misconception a century earlier when physicians and patients alike mistakenly concluded that the use of a syringe with pure morphine, which reduced the quantity of drugs needed to produce the same effect, would limit rather than expand the likelihood of addiction.)

Actually, crack cocaine made heroin "look like the good old days," according to historian Dr. Jill Jonnes. The advent of crack houses and crack babies (the NIDA National Pregnancy and Health Survey estimated 1.5 percent to 2 percent of American infants in 1992 had been exposed to cocaine in utero) marked a new and terrible stage in the history of drug abuse.

In 1986 — the same year the military reported cutting drug use by half — the deaths of basketball star Len Bias and football star Don Rogers demonstrated to the public that one dose of cocaine could prove lethal even to healthy young athletes. Had anyone bothered to consult the research, they would have discovered that this fatal syndrome was identified decades ago. In addition, the historical experience of cultures as different as China, Egypt and Japan confirmed that no society could prosper while tolerating addictive drugs.

Drug use cannot be considered in a vacuum. We must understand it within the context of crime, violence, corruption, prostitution, multinational cartels, adverse health consequences, enormous cities. Drug use is not limited to one area of the country or social class but permeates suburban and rural areas as well as urban locations.

On an international scale, narco-terrorists use the illegal drug trade as a means to other ends. Arms deals fueled by drug capital are part of the deal. On the other side of the drug register are young consumers. Youths are particularly vulnerable to the allure of drugs and to the damage toxic substances cause developing bodies and minds.

The drug problem has personal, psychological dimensions, but it is also a social, medical, communal, economic, and global problem that involves larger systems — beginning with the family and reaching to the nation and hemisphere.

America always has been a forward-thinking, optimistic country oriented toward the present and future. In an age of electronic communication and computers, instant transmission of information compounds the tendency to value what is news right now as opposed to yesterday. But ignorance of the past condemns us to repeat errors unnecessarily. An antidote to arrogance, memory is the key to education and collective progress. The history of illegal drugs informs the present.

Illegal drugs are a byproduct of an industrial society that has led us to tamper — for better and for worse — with the body's inner environment. The United States has one of the worst addiction problems of any country in the developed world in part because of our wealth. Now we must focus our resources, including the intelligence of our greatest minds, to solve this problem.

We can lead the world in controlling illegal drugs — primarily through prevention and treatment — just as we made great strides in guarding consumer safety and cleaning up the outer environment. From seat belts to sewage disposal, America has used the law to protect citizens. The ill-termed "war on drugs" is another such effort. We must free all people besieged by the tyranny of drug dependence.

Barry R. McCaffrey is director of the Office of National Drug Control Policy.

THE NEW YORK TIMES **OP-ED** MONDAY, MARCH 17, 1997

In America

BOB HERBERT

Killer Cop

From Iowa City, Iowa, comes a case that would have sent chills up the spines of the Founding Fathers.

Eric Shaw, a 31-year-old sculptor, was alone in his studio between 11:30 and midnight on Aug. 29. The weather was warm and Mr. Shaw had left the door to the studio ajar, hoping to catch a breeze. He had taken a break from work and was sitting at his desk, just a few feet from the door, talking to his best friend on the telephone. The friend was trying to console Mr. Shaw, who was unhappy over a recent breakup with his girlfriend. Mr. Shaw had no idea that while he was talking officers of the Iowa City police were gathering outside.

The police would say later that there had been several burglaries in the neighborhood in which Mr. Shaw's studio was located. When they saw Mr. Shaw's door ajar, they drew certain conclusions.

Police Officer Jeffrey Gillaspie, a three-year veteran of the force, pulled his 40-caliber semiautomatic service revolver, pushed Mr. Shaw's door the rest of the way open, and without uttering a single word, without so much as a nod in the direction of civil rights or civil liberties, shot Mr. Shaw in the heart. Mr. Shaw screamed, and then died.

Here was a man who was on his own premises, minding his own business, violating no law whatsoever, and suddenly he is dead at the hands of the police. If this doesn't strike you as an incredible outrage, imagine that you and your family are quietly watching television and a cop comes into your living room and, without opening his mouth, kills one of you. No difference.

Officer Gillaspie, who was 26, never offered a reasonable explanation for shooting Mr. Shaw. There was no verbal exchange between the two men. There was no threat to the officer. Initially Mr. Gillaspie said he thought the telephone in Mr. Shaw's hand was a gun, but he retreated from that position. Later he would say that he just flinched and fired.

The Iowa City police could offer no reasonable explanation for invading the studio. Perhaps they had seen too many Dirty Harry movies, and attended too few classes on civil liberties and proper police procedures.

The killing upset many of Iowa City's 60,000 residents, but it has never been properly investigated. The Johnson County Prosecutor, Patrick White, should have taken the lead, but he made up his mind early on that the shooting was merely an error in judgment, an overreaction by Officer Gillaspie. Mr. White acknowledged that the killing of Mr. Shaw was wrong, but he has so far refused, despite great pressure, to open a grand jury investigation of the matter. And he thwarted an attempt by grand jurors to launch an investigation on their own.

Officer Gillaspie was allowed to resign from the police force. No charges were brought against him. The city quickly agreed to pay Mr. Shaw's parents, Jay and Blossom Shaw, $1.5 million to ward off a wrongful death suit.

Nevertheless, the demand for a complete investigation continues. Osha Gray Davidson, a writer and former member of the Iowa City Human Rights Committee, is leading a group called Citizens for Justice and Accountability in the Death of Eric Shaw. The group, which has the support of the Shaw family, is not asking that Mr. Gillaspie be fed to the wolves, just that a proper investigation be conducted.

An artist is shot to death in his studio.

"The public has received only dribs and drabs of information about what happened that night," said Mr. Davidson. "What we are saying is let a grand jury investigate. If the grand jury chooses not to indict, we would be satisfied."

The concerns faced by Iowa City residents upset by the shooting are the same as those faced in communities across the country when improper police behavior occurs. If no serious action is taken, if no one is held accountable, then the belief grows in the minds of residents and, more important, in the minds of police officers that a badge and a gun confer upon the police the freedom to behave irresponsibly, wantonly, even murderously.

Two weeks ago a District Court judge in Johnson County ordered that a grand jury be convened to investigate Mr. Shaw's death. Judge William R. Eads declared that "it is in the interest of the public that a disinterested body" examine the case.

The next move is up to Mr. White. He has previously said that even if a grand jury recommended that action be taken against Mr. Gillaspie, he would not prosecute ...

THE WALL STREET JOURNAL MONDAY, MARCH 17, 1997

LEGAL BEAT

Concerns Rise On Laundering Money On-Line

By ANN DAVIS
Staff Reporter of THE WALL STREET JOURNAL

Digital cash is being hyped as a high-tech improvement over credit cards and cash.

But in postings on the Internet, computer gurus are already discussing ways criminals might use the new technology to launder illegal profits. "It can be set up anywhere and [can] even be done anonymously," claims one posting on a discussion group called the Cypherpunks Archive.

As electronic-money products proliferate, concerns are mounting among regulators, who fear that digital cash could roll back decades of progress in the fight against money-laundering. Now, some of them are asking what can be done to track cyberspace's elusive transactions.

The Financial Action Task Force, a Paris-based group of 26 countries fighting money-laundering, warns in a new report that the "speed, security and anonymity" of new Internet payment systems could render obsolete existing techniques to track tainted money, which center on monitoring bank transactions. Private and government investigators say such systems, which can be used to move funds across borders, could become more appealing to criminals than smuggling cur-

The U.S. Treasury Department's Financial Crimes Enforcement Network and Rand Corp., a think tank, are so concerned that they have invited computer and banking experts to sessions this spring to determine how criminals might use "e-money" in money-laundering schemes.

Until now, "our primary focus has been on banks as the linchpin of any effective anti-money-laundering strategy," says Stanley E. Morris, director of the Treasury's financial crimes unit. "If technology permits anonymous transactions outside the regulated banking sector, our efforts to make money-laundering riskier and costlier may go out the door."

Even some digital-cash providers admit electronic money has risks. David Chaum, founder of Amsterdam-based DigiCash Inc., acknowledges that his company has already received requests from individuals who want to convert offshore bank accounts to digital money, or vice versa. But, he adds, "We have consistently turned such inquiries away."

Still, regulators say they aren't ready even to recommend any new rules. Few countries have settled on policies for regulating Internet commerce, and rules on money-laundering itself vary widely.

Currently, a handful of digital-cash providers have a few thousand customers in the U.S., but there are many more in Europe. E-money systems generally allow customers to store funds on computer-chip cards or on computers. The accounts can be set up with funds electronically deducted from bank accounts or charged to credit cards. In some cases, people can use cash to buy limited amounts of electronic money, stored on "smart" cards.

They can then transfer the e-money to merchants, banks or other individuals.

For example, a customer who wants to buy clothing from a retailer may go to the retailer's World Wide Web page, click on a box for buying merchandise and insert a smart card into a reader attached to his computer. The money then will be transmitted to the merchant.

Regulators worry that criminals could use e-money to escape bank reporting laws. Some kinds of digital cash can bounce between multiple intermediaries before re-entering the banking system, making funds hard to trace. Because e-money is encrypted to prevent counterfeiting and theft, law-enforcement authorities can have difficulty reconstructing transactions. DigiCash, for example, says its encryption technology makes transactions so private that it can't track how customers spend their money. Using a method called "one-way privacy," the system only records the origin of money that comes in, not the path of money when it goes out.

Under the U.S. Bank Secrecy Act, banks are required to report suspicious account activity. Banks and other financial institutions must also report deposits and withdrawals above $10,000 in cash and keep records of certain smaller transactions.

However, it is unclear whether the law governs Internet payment systems, says the Treasury Department's Mr. Morris. The American Bankers Association wants e-money providers to at least be subject to the same laws and record-keeping requirements as financial institutions. "Bankers want to see some assurance that if we're told we have to do certain things that our other competitors do, too," says John Byrne, senior counsel at the trade group.

Mr. Morris says: "Our goal is to try to nudge the industry in a direction that does not mandate any new regulatory scheme." Regulators are in talks with industry leaders to come up with solutions that would likely provide less anonymity than most current systems.

Some providers say they already can keep track of their electronic cash. Citibank NA, a unit of Citicorp, and other banks developing their own e-money say they plan to keep detailed records. "Our system traces the transactions so that after the fact, information is available to detect counterfeiting and potential money laundering," says Sholom Rosen, Citibank's vice president of emerging technologies.

Other digital-cash providers insist that criminals can't abuse their systems, in part because most banks that transfer cash into digital money systems limit the amount to a few hundred dollars. One company, CyberCash Inc. of Reston, Va., says one of its main businesses is "micropayments," the transfer of a few cents or dollars to pay for downloading articles and photographs off the Internet. The money is then withdrawn from a pooled company bank account, subject to regular reporting requirements, says CyberCash general counsel Russell Stevenson.

But Kawika Daguio, an electronic-money specialist at the American Bankers Association, says sophisticated computer users could set up an automated system with dozens or hundreds of accounts or cards and move large amounts of money through a virtually untraceable maze.

Robert Caplehorn, general counsel of Mondex International Ltd., a London-based company that recently franchised its e-money computer-card technology to eight U.S. banks and corporations, questions whether criminals will go to such trouble. "At the end of the day, is it really going to be convenient for a criminal to have hundreds and hundreds of cards?" he asks. "He might as well have hundreds and hundreds of dollar bills."

THE WALL STREET JOURNAL MONDAY, MARCH 17, 1997

INTERNATIONAL

Mexico Ex-Drug Czar Loses U.S. Trial

Jury Says $7.9 Million Held By Ruiz Massieu Came From Narcotics Bribes

By PETER FRITSCH
And LAURIE HAYS
Staff Reporters of THE WALL STREET JOURNAL

HOUSTON-The U.S. government scored a legal victory against former Mexican Deputy Attorney General Mario Ruiz Massieu, in a high-profile civil trial that could set the tone for future U.S. investigations into Mexican drug corruption.

A jury determined Saturday that almost $7.9 million in a Texas Commerce Bank account belonging to Mr. Ruiz Massieu came from bribes paid by drug traffickers. The ruling in federal district court here allows the U.S. government to keep the money, pending the outcome of an appeal planned by Mr. Ruiz Massieu's attorneys. The jury also voted to return to Mr. Ruiz Massieu $1.1 million – an amount his 84-year-old father testified came from the 1992 sale of a Pacific coast beach house.


Mario Ruiz Massieu

Ex-Police Aides Testified

The six-day civil case made Mr. Ruiz Massieu, who served as a coordinator of Mexico's antidrug war in 1993 and 1994, the most senior Mexican official ever accused in the U.S. of complicity in the narcotics trade. The government managed to sway the jury with several witnesses who had been former Mexican police officials and were able to give specific testimony about how Mexican law enforcement and the drug traffickers conspired to protect each other. After federal Judge Nancy Atlas ruled there was probable cause to believe such a conspiracy, Mr. Ruiz Massieu lost because he couldn't prove another source for earning most of his money.

Mr. Massieu's loss shows that future cases against Mexican officials, while difficult, aren't impossible for the government to prove. Foremost, there appears to be no shortage of potential witnesses who, in exchange for a promise of a green card and protection for their families, will be willing to testify against them. The government was able to find a credible witness in Raul Macias, a former bodyguard to a Mexican police chief, who said he put suitcases of money in Mr. Ruiz Massieu's car.

Prosecutors in New York and Switzerland are gearing up to show that the family of former President Carlos Salinas de Gortari also took drug payoffs. Investigators have said that based on sealed testimony by confidential informants they have more reason than ever to believe that Mr. Salinas's brother, Raul Salinas de Gortari, derived some of his fortune of more than $120 million from drug procedes.

Citicorp's Citibank, where Mr. Salinas put $80 million, is under investigation for potential money-laundering charges as part of that case. Citibank and Raul Salinas have denied any wrongdoing. Carlos Salinas hasn't been charged with any crime.

The problem for the government is using witnesses that a jury will believe and aren't compromised too badly by crimes they may have committed. At least two witnesses in the case here were expected to testify that Mr. Ruiz Massieu was part of a drug-protection racket that included Raul Salinas and others. Raul Salinas is currently in jail in Mexico, facing charges of orchestrating the 1994 assassination of Mr. Ruiz Massieu's older brother.

But the expected witnesses, including one Magdalena Ruiz Pelayo – convicted of cocaine trafficking in 1992 in Newark, N.J., along with a cousin of President Salinas – backed out after a Mexican news magazine leaked word of their planned testimony, according to U.S. prosecutors.

The witnesses "would have given us more direct evidence about [drug] payments," said Assistant U.S. Attorney Jesse Rodriguez, who prosecuted the case. "It would have been juicier, no doubt, but they were scared." He declined to comment further.

Credibility Is Questioned

Just how juicy is unclear. J.A. Canales, an attorney for Mr. Ruiz Massieu, said the witnesses who failed to testify were far from credible. "We were more than ready for them," he said. Ms. Ruiz Pelayo, for one, claimed in pretrial statements to prosecutors to have worked as a secretary to the former president's father, Raul Salinas Lozano. No evidence has emerged to support that claim and Mr. Salinas Lozano denies having known her.

Unlike the civil case tried last week – where the burden was on Mr. Ruiz Massieu to show by a preponderance of the evidence that the money deposited in Houston was legally derived – that burden would shift in a criminal case to the prosecution, which would also face the tougher challenge of proving its case beyond a reasonable doubt.

Mr. Rodriguez declined to comment on the possibility of criminal charges against Mr. Ruiz Massieu.

In May, Mr. Ruiz Massieu faces deportation proceedings in Newark, where he was arrested in 1995 for failure to declare U.S. currency in excess of $10,000. The U.S. government is pursuing the deportation at the request of the Mexican government, which wants Mr. Massieu on corruption charges. Mr. Ruiz Massieu so far has won four extradition hearings.

SUNDAY, FEBRUARY 9, 1997 The Washington Times

Unabated methamphetamine abuses

CARSON NIGHTWINE/ROWAN KELLY

President Clinton signed the Comprehensive Methamphetamine Control Act on Oct. 3, 1996. This new law attacks precursor chemicals and establishes new penalties for trafficking in chemicals and the possession of equipment needed to manufacture methamphetamines.

Mr. Clinton said, "I am particularly pleased we are acting before this epidemic spreads." Mr. Clinton added, "We have to stop 'meth' before it becomes the crack of the 1990s. And this legislation gives us a chance to do it." Unfortunately "meth" is not a new problem in the United States. Methamphetamine, which is known on the street as "speed," "crank," or "ice," is a powerful stimulant. So powerful in fact, that the Drug Enforcement Administration (DEA) has called it the most lethal substance to hit the streets during the entire 35-year war on drugs.

Methamphetamine use has spread to all areas of the United States and continues to be on an upswing. Estimates from the Drug Abuse Warning Network (DAWN) indicate that methamphetamine-related emergency room episodes increased 346 percent from 1991 to 1995.

Like other illegal drugs, methamphetamine can be administered in a variety of ways. It can be snorted, injected, smoked, or taken orally. No matter how it is administered, methamphetamine is instantly mind-altering. Users typically experience increased alertness, decreased fatigue, and an overall feeling of euphoria. This euphoria, however, conceals a host of dangers faced by individual methamphetamine abusers. According to the Center for a Drug Free Workplace, prolonged methamphetamine abuse causes "severe depression, weight loss, rapid mood changes, hallucinations, and permanent brain, heart, and lung damage." Intravenous methamphetamine users face the further risk of acquiring HIV/AIDS.

A methamphetamine-induced "high" artificially boosts self-confidence, many users are overcome by a so-called "superman syndrome." In this state, methamphetamine abusers ignore their physical limitations and attempt tasks which they are normally incapable of performing.

Methamphetamines can be produced virtually anywhere. Motel rooms, trailer parks, and suburban homes can all be turned into of producing substantial quantities of the drug. The technical know-how needed to produce methamphetamines can easily be found on the internet. These peculiarities make the production of methamphetamine unique, and especially difficult to control. Recent analyses have indicated that methamphetamine from these labs can be as high as 97-99 percent pure.

About the only thing that stands in the way of widespread production and distribution of methamphetamine is the limited availability of the chemicals required to make it. Ephedrine and hydriotic acid, two components of methamphetamine, are tightly controlled in the United States. Yet the recent surge in methamphetamine use suggests that drug traffickers are finding ways around this impediment.

In the past the methamphetamine problem was centered in the southwestern United States. The DEA even identified California as a "source country" of methamphetamine because of the hundreds of illicit drug labs throughout the state. More than 1,800 deaths were caused by methamphetamine abuse from 1992-1994 — a 145 percent increase in just two years. The majority of these cases occurred in the four western cities of Los Angeles, San Francisco, San Diego and Phoenix. California emergency room admissions related to methamphetamine abuse increased by more than 366 percent from 1983 to 1993. (Methamphetamine Control Act of 1996) The recent surge in methamphetamine abuse can be attributed to the growth and influence of the U.S.-Mexican drug connection.

Although the precursor chemicals may be effectively regulated in the United States, in Mexico they are not. Highly organized Mexican drug trafficking syndicates have taken advantage of their country's lenient regulatory practices to dominate the United States methamphetamine trade. Utilizing the same trafficking routes through which up to 70 percent of the cocaine arriving in the United States now passes, the Mexican trafficking organizations have been able to deliver the chemicals needed to produce methamphetamine to associates living in the United States. These associates then "cook-up" and distribute the final product. In addition to this practice of illicit chemical diversion, these criminal groups also smuggle methamphetamine produced in Mexico to the United States.

It is this "Mexican Connection" that makes methamphetamine a particularly ominous threat. Operating with impunity south of the U.S.-Mexico frontier, the Mexican trafficking organizations are now in a position to expand the methamphetamine market in the United States. With their cocaine and marijuana businesses already booming, we can expect these organizations to market methamphetamine alongside their cache of other illegal substances in more and more cities across America.

Carson A. Nightwine, Jr. and Rowan B. Kelly are research assistants at the National Defense Council Foundation.

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Fact Sheet - Status Report on National Methamphetamine Strategy

Background on the Methamphetamine Drug Problem.
A synthetic drug, methamphetamine is a stimulant that can be snorted, smoked, injected or ingested orally. It is cheaper than cocaine (at ½ price) and creates a longer high (hours versus minutes). It is a dangerous drug that creates extreme paranoia and aggressiveness. Users go for days without sleep or food. The clandestine labs that produce the drug pose an extreme environmental risk as toxic wastes are dumped on grounds or in waterways. Cleanup costs run into several thousand dollars. Use of the drug is concentrated in the west/southwest, gained popularity in the midwest and is moving eastward. Two developments that appear responsible for the resurgence of meth are: a) the development of efficient manufacturing processes at the domestic level and b) the entry of Mexican drug trafficking organizations in distribution of the drug. Meth abuse has the potential to become the "crack epidemic" of the 90's. The need for a national strategic response is clear.

Action Taken. DOJ and ONDCP released the National Methamphetamine Strategy in April of 1996. The Strategy assessed the threat and outlined an action plan for future efforts to reduce the spread of this dangerous drug. The Strategy focused on several areas: legislation, law enforcement, training, chemical regulation, international cooperation, environmental protection, prevention, education and treatment.

Current Status on Strategy Implementation.

Legislation. The Comprehensive Methamphetamine Control Act of 1996 was signed into law October 3, 1996. The law establishes new controls over precursor chemicals and strengthens criminal penalties for possession and distribution of methamphetamine.

Law Enforcement. As of September 1996, all USAs provided district plans for implementation of the Strategy which includes: a) a current threat assessment and b) mechanisms for law enforcement coordination and liaison to medical, education and business community leaders. DOJ also initiated two DEA special enforcement operations, increased lab training schools, and increased resources devoted to meth trafficking.

Prevention and Education. US Department of Education continues to conduct meetings to assess the need for a prevention and education strategy on meth. The key decision is whether to develop a specific initiative on meth or simply integrate meth into other drug education programs.

Treatment. Currently, there is no treatment protocol for meth. NIDA held a research conference in June 1996 and continues to conduct research to develop a specific protocol.

Office of National Drug Control Policy

PULSE CHECK: Special Edition

Methamphetamine Trends in Five Western States and Hawaii

Executive Office of the President
Office of National Drug Control Policy
Barry R. McCaffrey, Director

January 1997

Table of Contents

Foreword

The *Pulse Check*, published by the Office of National Drug Control Policy (ONDCP), is a series of regular reports on drug use across the nation. Its name captures its purpose: to provide a quick sense of what is happening with regard to drug abuse and drug markets across the country. In the four years the *Pulse Check* has been conducted, it has provided valuable descriptions of the drug scene that inform researchers and policy makers in a timely manner. However, *Pulse Check* is not a population-based survey and should not be considered a substitute for such surveys.

The *Pulse Check* is conducted periodically[1] by Dr. Dana Hunt of Abt Associates. Data are collected through telephone conversations with 15-20 drug ethnographers and epidemiologists, 10-20 law enforcement agents, and 40-50 drug treatment providers all over the country. The ethnographic and law enforcement sources are chosen to represent various areas of the country, and are generally the same for each round of calls. Treatment providers are drawn randomly from a national listing of small and large treatment programs. Thus, the *Pulse Check* provides a blend of information and perspectives on the state of drug abuse in America.

One important element of the *Pulse Check* program is the additional capability it provides to perform quick turnaround, special studies of emerging problems, special populations, or certain geographical areas. The current situation surrounding methamphetamine trafficking and use is of considerable concern for policy makers at all levels, so is an appropriate topic for a special edition of the *Pulse Check*. Unlike the regular *Pulse Check*, this special edition focuses only on six States and on the problems associated with methamphetamine abuse.

[1]Since 1992 *Pulse Check* has been conducted on a quarterly basis; however starting with this edition, it will be conducted bi–annually.

Introduction

Methamphetamine, a powerful central nervous system stimulant, has been part of the drug culture for many years. It was developed early in this century from its parent drug amphetamine and was originally used in nasal decongestants, bronchial inhalers, and in the treatment of narcolepsy and obesity. Legally produced by pharmaceutical houses, amphetamine and methamphetamine were widely available in the 1950s and '60s through prescriptions as well as from a booming black market. The Food and Drug Administration estimated in 1962 that over 8 billion tablets were legally produced each year with as much as half of that production going to unauthorized users.[2] In the 1970s methamphetamine became a Schedule II drug; that is, a drug with little medical use and a high potential for abuse.

Almost from their first appearance, amphetamine and methamphetamine were abused. Valued for the ability to keep a user awake for long periods of time and producing a false sense of energy and enhanced physical and mental performance, these drugs were used in the 1950s and early 1960s among groups such as students, long distance truckers, and sports figures. In addition to the tablet form, in the late 1960s methamphetamine in crystal or liquid form suitable for injection became popular and the terms "crystal," "speed" and "speed freak" became part of the drug vernacular.

Increased Federal regulation of these drugs produced important changes in their availability, and the 1970s saw a marked decline in their use. Often, what was sold on the street as methamphetamine was actually another stimulant like caffeine or ephedrine. Illegal dealers began to rely on domestic illegal laboratories to manufacture supplies for distribution. Highly dangerous, both because of the highly volatile chemicals used in the manufacturing process and the high potential for explosions and fire, methamphetamine production and distribution in the 1970s came to be dominated by outlaw motorcycle gangs operating out of mobile clandestine operations in the California and the Pacific Northwest. Methamphetamine use declined nationwide throughout the 1970s, concentrated in a few cities or regions. However, beginning in the late 1980s it appeared to be spreading from these isolated areas to other new markets and gaining popularity among a larger number of users.

Methamphetamine is a unique drug. In its conventional form, it can be snorted, injected or even eaten. It can also be processed into a potent smokeable form known as "ice," which, starting in Hawaii, gained popularity in recent years in other areas. Methamphetamine is both domestically produced and imported into the U.S. in already processed form. Once dominated by local producers in remote areas of California and the Northwest, the market now includes both locals and, increasingly, Mexican sources providing finished product to stateside distributors. For the local producers the processing required to make methamphetamine from precursor substances is not only easier than it once was, but also more accessible. There are literally thousands of recipes and discussions concerning how to make batches of methamphetamine on the Internet. These entries range from fairly simplistic recipes to highly technical and detailed instructions written by experts.

[2] For a complete discussion of the history of amphetamine use see Grinspoon and Hedblom *The Speed Culture: Amphetamine Use and Abuse in America*, Cambridge MA., Harvard University Press, 1975.

Sources for this Report

Since its first publication in 1992, the *Pulse Check* has reported the rise in methamphetamine use in the West and Southwest and the increasing mention of its use in other parts of the country. This special edition of the ONDCP *Pulse Check* looks at methamphetamine use in six States—New Mexico, Arizona, California, Washington, Oregon and Hawaii—those States which appear to be the hardest hit by the reappearance of methamphetamine.

For this report, a random sample of treatment providers from the National Drug Abuse Treatment Unit Survey was taken, and a brief telephone interview with them conducted during the third and fourth weeks of December 1996. A total of 115 treatment providers were interviewed. The geographic distribution of those providers is illustrated in Figure 1. In addition; drug ethnographers, researchers and law enforcement officials in each State were interviewed. These sources are listed in the Appendix. The interview covers topics such as: who is using the drug; how is it used; what other drugs dominate the area; the price of methamphetamine; how is the drug manufactured and sold.

Each State has a unique experience with the re-emergence of methamphetamine. In the sections which follow, we summarize the results of the study by State.

Methamphetamine in Selected States

CALIFORNIA

For many years methamphetamine abuse was highly localized in specific areas of California, notably San Francisco and San Diego County. In 1990 reports to the Community Epidemiology Work Group, methamphetamine was the most commonly abused drug in the population of persons entering treatment in San Diego. According to the San Diego researcher, in 1996, 45 percent of treatment admissions were due to methamphetamine. In addition, in 1995 arrestees in San Diego represented proportionately more methamphetamine users than at any other Drug Use Forecasting (DUF) site. In San Francisco over the past five years, methamphetamine has been consistently the third most commonly abused drug of clients admitted to treatment (behind heroin and cocaine) in the five counties that make up San Francisco; much of the abuse in the past was concentrated among the male gay community. Increases in other areas and among a wider spectrum of users has continued to the present. For example, Los Angeles, not associated with methamphetamine abuse in the past, currently reports that methamphetamine ranks second after cocaine as the primary drug of abuse at admission to treatment and is second nationwide in the number of emergency room mentions related to methamphetamine.

Methamphetamine use in California is still concentrated in some areas, though surveys of treatment providers show a far wider dispersion of the drug's reach than ever before. The mode of ingestion (snorting and smoking versus injection) and the level of involvement of non-local manufacturers and distributors also differs significantly from the northern to the southern parts of the State.

The prevalence of methamphetamine reported by all California sources reached for this report is consistent with recent DAWN data which places San Diego, San Francisco, and Los Angeles in the top five cities nationwide in emergency room mentions for methamphetamine in 1995. These three cities also lead the nation in the number of medical examiner reports (deaths) related to methamphetamine. There are interesting differences in route of administration reflected in DAWN data between these cities.[3] In San Francisco almost two-thirds of the methamphetamine mentions involve injection, whereas in the other two cities only 10-12 percent of mentions involve injection.

Ethnographic and epidemiologic sources in Los Angeles, San Diego and San Francisco substantiate the DAWN reports. In San Francisco, ethnographic sources report that methamphetamine, while once most popular in the gay community, is now increasingly used by blue collar workers, young professionals, and college students. Putting methamphetamine into coffee in what is termed "biker's coffee" is reported as popular among young professionals interested in the drug's energizing and appetite suppressant effects, but not interested in snorting or injecting the drug. There are reports that in some segments of the gay community use of methamphetamine is related to "marathon sex," often unprotected, where the drug allows the user to stay awake for long stretches of time. As the DAWN data indicate, in this area it is often injected, doubling the risk of transmission of blood borne viruses and sexually transmitted diseases.

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[3] These data should be interpreted with caution as they have problems due to large numbers of unspecified answers.

With the wider variety of users now evident, there is also a wider variety of sellers and distributors. While supplies had previously been part of a "close distribution network" when motorcycle clubs dominated production, there are now different kinds of distributors targeting each of the user populations (college students, young professionals, blue collar workers, and the gay and club communities).

In Southern California, methamphetamine continues to be the number one or two drug problem. DUF data indicate that after a slight drop in the number of arrestees testing positive for methamphetamine in San Diego in 1995, use rose again in 1996, particularly among women and juveniles. In August 1996, 41 percent of women arrested tested positive for methamphetamine. In September 1995, 5 percent of juvenile male arrestees tested positive for methamphetamine. By September 1996 that number had more than doubled to 13 percent. There is also increasing use among Hispanics in this area.

Methamphetamine in the San Diego area comes from two sources: some "Mom and Pop" operations out in rural areas of the county and, more commonly, from Mexican nationals bringing already manufactured methamphetamine across the border. The drug is typically sold in 1/4 gram ($20-25), gram ($50-75) and 1/8 ounce ($140-180) units though larger amounts are available. In this area, sources estimate that less than 10 percent of users inject, most preferring snorting or smoking the drug.

Methamphetamine appears to be second only to crack cocaine in popularity in the Los Angeles area. As in San Diego, there is a growing use among Hispanics, though the majority of users are white males. Methamphetamine is available from individual, local manufacturers in inland areas like Riverside, but the market is increasingly dominated by established Mexican Nationals with more efficient, well-organized distribution routes. In Los Angeles, methamphetamine is most often smoked or snorted rather than injected.

Treatment providers from across the State uniformly report that methamphetamine is one of their most serious problems. Treatment admissions in 1995 for methamphetamine abuse San Francisco, for example, were double the 1992 level. In our survey of providers, 57 percent of programs report that it is continuing to rise in their area; 25 percent feel that it has stabilized and 7 percent report it declining. While methamphetamine is a commonly reported drug, it may not be the primary drug problem which brings their clients to treatment. 39 percent of programs report alcohol as the most common problem among clients at entry into treatment, followed by opiates (18%), methamphetamine (18%), cocaine (14%) and marijuana (11%). However, on average 38 percent of treatment admissions are abusers of methamphetamine. Some programs, like one Northern California adolescent program, report far higher figures: 50 percent of the adolescent clients enter with methamphetamine as their primary drug of abuse and 80 percent report that they regularly use it.

Who is using methamphetamine? There are two basic profiles of users reported by treatment providers:

1) students, both high school and college age, males and females, and

2) white, blue collar workers or unemployed persons in their twenties.

Several providers in Southern California also mention an increase in the number of Hispanic methamphetamine users, though whites still appear to dominate this user group. They are also likely to be users of alcohol and marijuana along with methamphetamine rather than users of drugs like heroin. For example, two methadone programs reported that less than 10 percent of their clients enter treatment reporting that they use methamphetamine. In contrast, programs where alcohol or marijuana are the primary drugs of abuse at entry report that as many as 70-80 percent of their clients also use methamphetamine. 61 percent of treatment providers also felt that there was some substitution of methamphetamine for the less accessible and more expensive cocaine, but many also noted that methamphetamine has a clear following of its own.

What prompts methamphetamine users to enter treatment? Methamphetamine can cause a variety of mental, physical, and social problems which may prompt entry into treatment. Though it is not as expensive as heroin or cocaine, its cost might also produce financial problems for users and prompt them to seek help. Because so many clients in treatment for methamphetamine abuse are also unemployed, one might assume that it could eventually produce difficulties on the job. It is interesting to note, however, that the most commonly reported reason methamphetamine clients enter treatment is trouble with the law. 46 percent of programs report that legal problems are the most common reasons for entry; 29 percent report mental or emotional problems most common and 14 percent report problems on the job or at school.

Several providers also describe methamphetamine abusers as "the hardest to treat." They are often overly excitable and "extremely resistant to any form of intervention once the acute effects of meth use have gone away," e.g., malnourishment, depression, chronic sleeplessness, headaches.

WASHINGTON STATE

For the information concerning methamphetamine in Washington State, two law enforcement officials, a drug researcher at the University of Washington, and a random sample of 16 treatment providers around the State were interviewed.

In addition, we reviewed 1995 DAWN data, available only for Seattle. DAWN data indicate a 7 percent increase from 1994-1995 in the number of medical examiner mentions for Seattle, about 4 percent of all ME deaths reported for 1995. Of the 10,729 ER mentions for Seattle in 1995, approximately 3 percent involved methamphetamine.

All sources describe a rising trend in methamphetamine availability and use, though problems with heroin and cocaine are still dominant in the urban areas of the State. Epidemiologic data indicate that there has been a 252 percent increase in the number of treatment admissions with methamphetamine as the primary drug of abuse between 1992 and 1995. The overwhelming majority of methamphetamine admissions are of whites (almost 90%); 40 percent are in their late twenties and early thirties and 37 percent are injecting the drug.

Epidemiologic sources point out that while the majority of users continues to be rural bikers and blue collar workers, there are also a number of other groups now using. For example, it is reported that the drug is becoming increasingly popular among street youth, among Native American populations and among Hispanic immigrants. This source describes this as a diffusion from rural to urban, from gay populations to heterosexuals and from white to minorities.

Sellers and manufacturers in Washington State, including both local residents and Mexican Nationals, are reported to be increasing in number. One Seattle law enforcement source describes the increase in distribution and use as "remarkable in the last 18 months." The increase in the number of prosecutions from seven in 1991 to 52 in 1995 indicate the growth in the sheer number of dealers. Labs are reported as springing up in a variety of places: hotels, motels, backrooms of other facilities. DEA sources report that, as in California, Mexican meth dealers are using the same routes and distributors for meth as they use or have used for heroin and cocaine. This source also reports the practice of "eating" meth; that is, putting it on paper or food and chewing it, though injecting and snorting are the most common modes of ingestion.

Among **treatment providers** interviewed around the State, 94 percent reported that methamphetamine use is increasing in their area. The remaining 6 percent report that it has stabilized. Though no programs reported that methamphetamine use was the primary drug of abuse for most of their clients at treatment entry, on average, approximately 30 percent of those in treatment use the drug. As is reported in California, the most common reason cited for meth using clients to seek treatment is trouble with the law (50%), followed by mental and family problems.

There is a wider variety of methods of using methamphetamine in the Washington area than in some of the other States. Providers report that clients are equally likely to smoke, inject, or snort it. 81 percent of Washington treatment providers also reported that methamphetamine is substituting for the more expensive and far less accessible cocaine. Almost 70 percent reported that use is up because methamphetamine is cheap and/or readily available throughout the State. Methamphetamine, like marijuana, is considered a "local" or "homemade" drug.

Who is using meth in Washington State? The typical user is described as white, high school educated, in his or her twenties and thirties, and a blue collar or service worker. Several providers stress that this is not someone who also uses heroin and cocaine. Two directors of Seattle programs which serve heroin users state that less than 5 percent of their clients use methamphetamine. Most often the companion drugs used by methamphetamine users are alcohol and marijuana. As one provider comments, "It is the alcohol that brings them in here. Once in treatment, we see the problems with speed, pot, and hallucinogens."

OREGON

All sources describe methamphetamine as a "continuing problem" in Oregon. Methamphetamine has been part of the drug scene there since the 1960s—a part that did not disappear completely as it did in many other areas of the country. Oregon has also been one of the States with steady activity in the production of methamphetamine and distribution to other areas of the West. Whereas other States may report only a handful of laboratory busts or supply seizures over the last twenty years, Oregon law enforcement reports consistent activity surrounding the drug.

DAWN data from medical examiners in Portland indicates a decline in deaths due to methamphetamine from 1994-1995. Similarly, data gathered from police sources in Eugene, regional DEA agents and treatment providers indicates that, while there may be some stabilization, methamphetamine use is still a major drug problem in the State.

Law enforcement sources report that methamphetamine continues to plague the area. July of 1995 brought one of the largest laboratory busts in an area of rural Oregon where manufacturers were producing as much as 100 pounds of methamphetamine per batch. This bust led to related police action involving distributors across the Canadian border. While a portion of the drug is still produced locally, police sources report that currently the bulk of the supply now comes from California and Mexico. Production of methamphetamine is described as having "always been around" in rural Oregon. However, it is now no longer just a local operation managed by a handful of producers in small labs.

Treatment providers throughout the State describe methamphetamine as a problem. 47 percent of those interviewed reported that methamphetamine is the primary drug of abuse of their clients, followed by 40 percent reporting alcohol and 13 percent reporting marijuana as the primary problem. A average of 52 percent of clients across all programs use methamphetamine. In one small rural Oregon town, the treatment director commented that these are areas where "people don't use cocaine—wouldn't think of it—but speed is widely accepted, particularly among 18-25 year olds." Another program which dealt only with adolescents reports that only 10 percent come into treatment with meth as the primary problem (that is usually alcohol or marijuana), but 70-80 percent use it. Many providers also commented on its availability due to "homemade" sources. 80 percent of providers reported the prevalence of meth in their area as due primarily to its low cost and/or wide availability.

Who is using meth in Oregon? The typical Oregon user is quite similar to that reported in other States: white, often male, a blue collar worker now unemployed, in his/her twenties and early thirties. Adolescent programs also report methamphetamine use among students, sometimes as young as ninth graders. The most common reason for treatment entry is legal troubles. The most common method of ingestion in this area is snorting, followed by injecting and, to a far lesser degree, smoking.

ARIZONA

Like Southern California, Arizona has reported problems with methamphetamine use and trafficking for several years. Sitting at the southwest border, Arizona has been struggling with the traffic in what one source described as "first the makings for the cake (chemicals) and now the cake itself (processed methamphetamine)" for many years.

DAWN data indicate that Phoenix ranks third nationwide in the number of methamphetamine ER mentions in 1995 with 732 mentions, about 10 percent of all Phoenix ER mentions, though this number has been decreasing over the last few years. Medical examiner data from Phoenix is also somewhat encouraging, indicating a substantial decline (29%) in the number of deaths attributable to methamphetamine. Approximately 42 percent of these mentions involve smoking of the drug, the most common method reported in the State by all sources.

Ethnographic sources report that methamphetamine in both urban and rural areas is a widely prevalent, and may be increasingly popular among young users where "it has not received the attention cocaine has; does not have the 'mystique' cocaine has." Users tend to be either White, rural blue collar workers who have used the drug for many years or urban cocaine users who are switching to methamphetamine. The latter users are described as people who can not get cocaine and/or those who burn out on the drug and "need the stronger, longer lasting and cheaper high meth can provide." The problem noted by this source is that users burn out even faster often developing even higher levels of paranoia or other dysfunctional behavior than they experience with cocaine.

Law enforcement sources in Phoenix report that methamphetamine continues as the "drug of choice" in Arizona, the number one street trafficking drug problem. Though this source describes adult use as stabilizing somewhat, like the ethnographic source, he feels that adolescent use appears to be increasing as adolescents "feel more confident of its safety," perceiving it safer than cocaine. These users are more likely to snort the drug, though some are injecting.

Street level trade in methamphetamine is brisk in Phoenix. Prices range from $20–$25 for a 1/4 gram unit to $160-$180 for 1/8 ounce. Sellers tend to be U.S. citizens selling their own local product or Mexican nationals selling methamphetamine produced across the border. Many local labs continue to spring up in the area and it is estimated that police uncover one or even two a week.

Of the 24 Arizona **treatment providers** interviewed, 71 percent felt that methamphetamine use was up in their area, overwhelmingly (72%) because it is cheap and/or available. While alcohol (46%) and cocaine (17%) are the primary drugs of abuse at entry in most programs, methamphetamine (13%) ranks third. In addition, these programs report an average of 40 percent of their clientele using methamphetamine at entry. Smoking and snorting the drug are most common routes of administration.

As in other States, providers in Arizona report troubles with the law (63%) as the most common catalyst to treatment entry, followed by family problems (21%) and financial problems (8%). Most of the clients they see who are abusing methamphetamine are young (twenties) and either unemployed or employed in a blue collar occupation. While the typical user is still currently white, several providers noted the increase in methamphetamine abuse among young Hispanics and Native American populations. Urban areas like Phoenix and Tucson also reported the popularity of methamphetamine among the gay population due its image as an enhancer of sexual stamina.

NEW MEXICO

Law enforcement sources in New Mexico report that methamphetamine is readily available in that State, both from heavy trafficking across the border and from the local operations which spring up, particularly in rural or remote areas. Though there are many "match book" or "do-it-yourself" operations in the area, the bulk of the supplies to New Mexico come from the larger and more efficient Mexican based producers. The number of seizures of methamphetamine has increased dramatically since the early 1990s, including an almost 700 pound seizure in New Mexico in 1994.

The demand is both the traditional older "biker" users as well as former cocaine and crack users switching to the cheaper, longer lasting high. When cocaine is available, it is preferred by many of these users. This source reports that in fact, many users buy methamphetamine marketed as cocaine.

Half of the 16 **treatment providers interviewed** report that methamphetamine use has increased in the past year, while 44 percent report that it has stabilized in their areas. Three-fourths of the programs report that the primary drug of abuse at entry for most of their clients is alcohol, followed by opiates (13%). No program reported that the majority of their clients report methamphetamine as the primary drug problem, and the average proportion of clients using meth at entry is 27 percent.

Several providers report that the stabilization in use is due to crackdowns on local labs in their area as well as a rise in the popularity of heroin in the State. Methamphetamine is described as widely available, however. As one provider commented, "They think they won't become addicted and it is cheaper than anything but pot." Programs in remote or very rural areas of the State often report users who value the drug for its ability to keep them working on farms or in oil fields for long periods of time allowing them to accumulate extra or overtime pay. Too often, that pay is spent on the common companion or primary drug problem, alcohol.

The typical users in New Mexico are white, unemployed, and in their twenties. They are as likely to snort the drug as they are to inject it. As in the other States, the most common reason for seeking treatment among meth abusers is trouble with the law. One provider describes a male client who abuses alcohol and methamphetamine and routinely gets into brawls as a result. The aggression produced by inebriation, heightened by the paranoia and sense of physical prowess produced by methamphetamine, combine to make him a regular with the local authorities. Methamphetamine also, however, makes him a difficult arrestee to manage in small facilities.

HAWAII

Sources in Hawaii report the greatest prevalence of methamphetamine use and the widest range in types of users of all the States surveyed. Most often in the smokeable crystalline form called "ice" in the mainland but a number of other names in Hawaii, methamphetamine is reported among whites, Asians, males and females, students, blue collar workers, and professionals. It is smoked in expensive glass pipes, mixed with tobacco, or even in pipes made from soda cans.

Drug research sources in Honolulu report that while methamphetamine has wide appeal in that area, it is also associated with violent episodes and difficulty in successful treatment. In a study in the early 1990s, 40 percent of prisoners admitted to local facilities had used methamphetamine. Sources of the drug are both local and from other areas in the Pacific, though the drug is distributed and readily available through local dealers of other drugs like cocaine and heroin.

69 percent of **treatment providers** interviewed felt that methamphetamine use had increased over the past year and 25 percent felt it was stabilizing. It is the primary drug of abuse at entry for 38 percent of programs interviewed, second only to alcohol (44%) and followed by marijuana (19%). An average of 55

percent of the clients at entry use methamphetamine, and, as in other States, it is trouble with the law which prompts them to seek treatment most of the time (44%). Several providers receive clients through employee assistance programs which refer employees who have exhibited inappropriate or aggressive behavior on the job or chronic absenteeism.

The typical user profile is harder to draw for Hawaii. While many programs report that users are young (teens and twenties), there is a range of jobs, ethnicities, and education levels reported. No program reports that clients inject; users either smoke methamphetamine (81%) or inhale it (25%). A commonly reported problem in treating these clients is that they "rarely admit to methamphetamine abuse. They will tell you about "huffing" (inhalant abuse) if they are kids or about alcohol if they are adults, but fail to mention the meth until you ask them." Methamphetamine users do, however, need extended treatment, according to several treatment providers, particularly if they have been smoking for a year or more.

SUMMARY

Methamphetamine abuse is a continuing problem in these Western states and in Hawaii. While the drug has been used in these States for many years by a small number of users, it has gradually become the drug of choice and primary drug of abuse at entry to treatment in many areas, even overtaking the more common drug problems of heroin and cocaine in treatment populations. Even in areas where alcohol is cited as the most common treatment problem, methamphetamine is often the companion drug, along with marijuana, in anywhere from 25 to 80 percent of the cases.

Methamphetamine is a drug with particular appeal to students and to blue collar workers, using it for recreation, to increase job or school performance, or simply to stay energized for long periods of time. It is cheaper and more accessible than cocaine and appears not to have the same stigma associated with it. As one ethnographer comments, "These users are too young to remember the 'Speed Kills' campaigns of the late 60s and early 70s, and seem to think it is pretty harmless." It can be injected, snorted, smoked or even eaten, making it more versatile drug to administer. However, it is also a drug which has high burnout potential. Treatment providers in all States report users enter treatment more rapidly with methamphetamine than with either heroin or cocaine.

One particularly interesting finding from these surveys is the uniformity of response in terms of why users decide to enter treatment. Over 50 percent of providers in each State cited legal problems as the catalyst for most of their methamphetamine clients' entry into treatment. These legal problems are described as aggressive behaviors like fighting or bizarre or inappropriate behaviors which prompt others to call the police. Police sources also note that arrestees under the influence of methamphetamine are some of the most difficult to manage due to high levels of hostility, paranoia and agitation.

This report also finds that methamphetamine is readily available in these six States. It is both locally manufactured by small producers operating in a variety of places and using recipes widely circulated in the drug culture and, increasingly (on the U.S. mainland), manufactured and distributed by Mexican nationals through local networks already established in the distribution of other drugs. This more efficient routing may be in part responsible for its increased popularity in many areas.

CITIES REPRESENTED IN SAMPLE OF TREATMENT PROVIDERS

Washington

Kirkland
Seattle
Wenatchee
Spokane
Yakima
Everett
Longview
Pasco
Tacoma

Arizona

Phoenix
Tempe
Tucson
Holbrook
Kingman
Chinle
Chandler

New Mexico

Albuquerque
Carlsbad
Alamogordo
Hobbs
Santa Fe

Hawaii

Honolulu
Kailua
Wahiawa
Waianae
Lihue
Pearl Harbor
Ewa Beach
Makawao
Wailuku

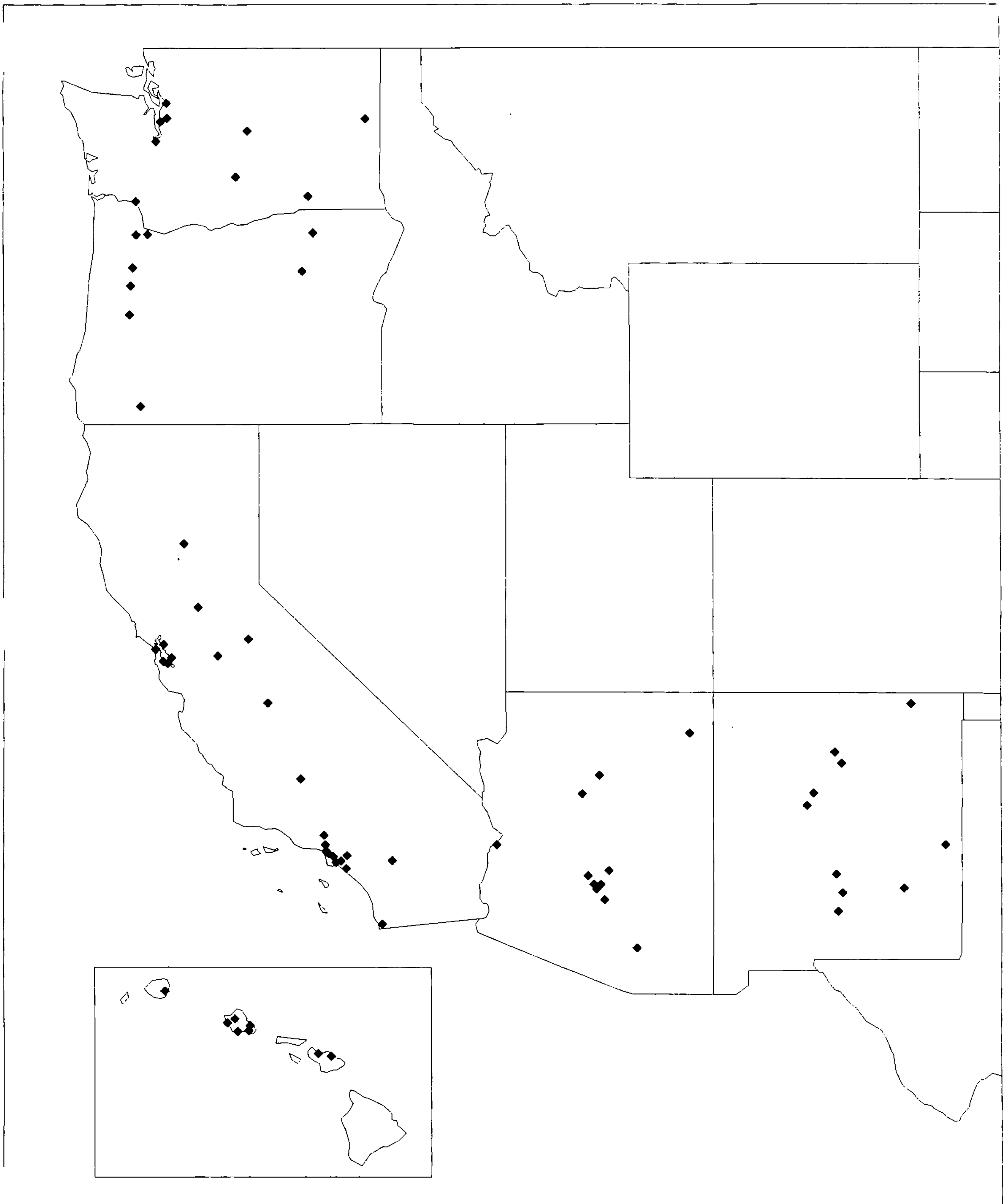
Oregon

John Day
Eugene
Medford
Portland
Pendleton
Albany
Salem
Hillsboro

California

Desert Hot Springs
Fresno
San Francisco
Los Angeles
Hawaiian Gardens
Berkeley
Chico
Hayward
Bakers Field
Modesta
Sacramento
Redwood City
Culver City
Bellevue
Canoga Park
San Mateo
Compton
Cypress
Long Beach
Chula Vista
Inglewood
Costa Mesa
Sonora

Sample Treatment Provider Locations



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March 13, 1997

Send to Dennis & Marcia.

The Honorable Rahm Emanuel
The White House
First Floor, West Wing
1600 Pennsylvania Ave., N.W.
Washington, D.C. 20530

Dear Rahm:

I have read recently that the President and Administration will host in the near future a forum to discuss youth and drugs. I would strongly encourage you and the Administration to consider discussing the growing methamphetamine drug problem, particularly in California and the Midwest. Several trends of this drug use suggest the importance of its discussion:

1) Three years ago we seized 6 labs where this dangerous drug process was underway. Last year we seized approximately 400 labs in Missouri where the drug was made. Conservative estimates this year suggest that we will seize nearly 500 of these labs for the state.

2) Two recent drug busts by federal law enforcement suggest that the problem is getting much worse. In the past, many of these labs produced enough drugs for the manufacturer and close acquaintances to use. Two recent labs suggest that lab production in a few cases has increased somewhere between 100-500 times previous capacity. This suggests a growing sophistication among the manufacturers and unfortunately a growing market for the drug.

3) The drug lab sites are typically mini-environmental disasters with the toxic chemicals used to do the drug often poured into plumbing, common waterways and on bare soil after their use. A conservative estimate of $5,000 in clean up per site could quickly bankrupt small towns and communities in the midwest.

4) It is not uncommon that children are found eating, sleeping and playing in or around these drug sites.

5) The drugs and their processing represents a triple threat, the drug itself, the process resulting in environmental consequences, and the highly dangerous manufacturing process that often leads to explosions.

6) Finally, the drug itself we believe will result in a higher number of cases of domestic violence and violent crime.

The Administration and General McCaffrey's office are working very hard to fight this problem at the grass roots, but I think that it would be very useful to shine some additional attention on the problem at any national forum. The drug has huge consequences in California, the southwest border and more and more in midwestern states like Missouri, Iowa, Nebraska, Kansas and nearby states like Arkansas.

If I can provide additional information to you or your staff about this serious problem, please do not hesitate to contact me. I hope this information is of some use to you for planning purposes.

Sincerely,

Stephen L. Hill, Jr.
United States Attorney

cc: Mike Hinkle
Midwest HIDTA Executive Director

Tom Monaghan
U.S. Attorney, District of Nebraska

EXECUTIVE OFFICE OF THE PRESIDENT
OFFICE OF MANAGEMENT AND BUDGET
Washington, D.C. 20503-0001

LRM NO: 5462

FILE NO: 2783

9/3/96

LEGISLATIVE REFERRAL MEMORANDUM

Total Page(s): 37

TO: Legislative Liaison Officer - See Distribution below:

FROM: James JUKES (for) Assistant Director for Legislative Reference

OMB CONTACT: Ronald JONES 395-3386 Legislative Assistant's Line: 395-3454
C=US, A=TELEMAIL, P=GOV+EOP, O=OMB, OU1=LRD, S=JONES, G=RONALD, I=E
jones_re@a1.eop.gov

SUBJECT: OMB Request for Views RE: HR3908, Comprehensive Methamphetamine Control Act

DEADLINE: FYI ONLY AT THIS TIME --- SEE COMMENTS ,

In accordance with OMB Circular A-19, OMB requests the views of your agency on the above subject before advising on its relationship to the program of the President.

Please advise us if this item will affect direct spending or receipts for purposes of the "Pay-As-You-Go" provisions of Title XIII of the Omnibus Budget Reconciliation Act of 1990.

COMMENTS: The attached bill will be the subject of a House Judiciary Committee hearing, and possibly a markup, on Thursday, September 5th. We expect a DEA witness will testify. That testimony will be circulated to you when we receive it.

LEGISLATIVE REFERRAL MEMORANDUM
Distribution List

LRM NO: 5462

FILE NO: 2783

SUBJECT: OMB Request for Views RE: HR3908, Comprehensive Methamphetamine Control Act

AGENCIES:

25-COMMERCE - Michael A. Levitt - 2024823151
30-EDUCATION - Jack Kristy - 2024018313
33-Environmental Protection Agency - Chris Hoff - 2022605414
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61-JUSTICE - Andrew Fois - 2025142141
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114-STATE - Julia C. Norton - 2026474463
117-TRANSPORTATION - Tom Herlihy - 2023664687
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Lisa Fairhall

RESPONSE TO
LEGISLATIVE REFERRAL MEMORANDUM

LRM NO: 5462
FILE NO: 2783

If your response to this request for views is short (e.g., concur/no comment), we prefer that you respond by e-mail or by faxing us this response sheet.
If the response is short and you prefer to call, please call the branch-wide line shown below (NOT the analyst's line) to leave a message with a legislative assistant.

You may also respond by:
(1) calling the analyst/attorney's direct line (you will be connected to voice mail if the analyst does not answer); or
(2) sending us a memo or letter.
Please include the LRM number shown above, and the subject shown below.

TO: Ronald JONES 395-3386
Office of Management and Budget
Fax Number: 395-3109
Branch-Wide Line (to reach legislative assistant): 395-3454

FROM: ______________________________ (Date)

______________________________ (Name)

______________________________ (Agency)

______________________________ (Telephone)

SUBJECT: OMB Request for Views RE: HR3908, Comprehensive Methamphetamine Control Act

The following is the response of our agency to your request for views on the above-captioned subject:

______ Concur

______ No Objection

______ No Comment

______ See proposed edits on pages __________

______ Other: ______________________________

______ FAX RETURN of ____ pages, attached to this response sheet

104TH CONGRESS
2D SESSION

H. R. 3908

To prevent the illegal manufacturing and use of methamphetamine.

IN THE HOUSE OF REPRESENTATIVES

JULY 26, 1996

Mr. FAZIO of California introduced the following bill; which was referred to the Committee on the Judiciary, and in addition to the Committee on Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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A BILL

To prevent the illegal manufacturing and use of methamphetamine.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Comprehensive Methamphetamine Control Act of 1996".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

TITLE II—PROVISIONS TO CONTROL THE MANUFACTURE OF METHAMPHETAMINE

TITLE III—INCREASED PENALTIES FOR TRAFFICKING AND MANUFACTURE OF METHAMPHETAMINE AND PRECURSORS

TITLE IV—LEGAL MANUFACTURE, DISTRIBUTION, AND SALE OF PRECURSOR CHEMICALS

TITLE V—EDUCATION AND RESEARCH

SEC. 2. FINDINGS.

The Congress finds the following:

(1) Methamphetamine is a very dangerous and harmful drug. It is highly addictive and is associated with permanent brain damage in long-term users.

(2) The abuse of methamphetamine has increased dramatically since 1990. This increased use

has led to devastating effects on individuals and the community, including—

(A) a dramatic increase in deaths associated with methamphetamine ingestion;

(B) an increase in the number of violent crimes associated with methamphetamine ingestion; and

(C) an increase in criminal activity associated with the illegal importation of methamphetamine and precursor compounds to support the growing appetite for this drug in the United States.

(3) Illegal methamphetamine manufacture and abuse presents an imminent public health threat that warrants aggressive law enforcement action, increased research on methamphetamine and other substance abuse, increased coordinated efforts to prevent methamphetamine abuse, and increased monitoring of the public health threat methamphetamine presents to the communities of the United States.

TITLE I—IMPORTATION OF METHAMPHETAMINE AND PRECURSOR CHEMICALS

SEC. 101. SUPPORT FOR INTERNATIONAL EFFORTS TO CONTROL DRUGS.

The Attorney General, in consultation with the Secretary of State, shall coordinate international drug enforcement efforts to decrease the movement of methamphetamine and methamphetamine precursors into the United States.

SEC. 102. PENALTIES FOR MANUFACTURE OF LISTED CHEMICALS OUTSIDE THE UNITED STATES WITH INTENT TO IMPORT THEM INTO THE UNITED STATES.

(a) UNLAWFUL IMPORTATION.—Section 1009(a) of the Controlled Substances Import and Export Act (21 U.S.C. 959(a)) is amended—

(1) in the matter before paragraph (1), by inserting "or listed chemical" after "schedule I or II"; and

(2) in paragraphs (1) and (2), by inserting "or chemical" after "substance".

(b) UNLAWFUL MANUFACTURE OR DISTRIBUTION.—Paragraphs (1) and (2) of section 1009(b) of the Controlled Substances Import and Export Act (21 U.S.C.

959(b)) are amended by inserting "or listed chemical" after "controlled substance".

(c) PENALTIES.—Section 1010(d) of the Controlled Substances Import and Export Act (21 U.S.C. 960(d)) is amended—

(1) in paragraph (5), by striking "or" at the end;

(2) in paragraph (6), by striking the comma at the end and inserting "; or"; and

(3) by adding at the end the following:

"(7) manufactures, possesses with intent to distribute, or distributes a listed chemical in violation of section 959 of this title.".

TITLE II—PROVISIONS TO CONTROL THE MANUFACTURE OF METHAMPHETAMINE

SEC. 201. SEIZURE AND FORFEITURE OF REGULATED CHEMICALS.

(a) PENALTIES FOR SIMPLE POSSESSION.—Section 404 of the Controlled Substances Act (21 U.S.C. 844) is amended—

(1) in subsection (a)—

(A) by adding after the first sentence the following: "It shall be unlawful for any person knowingly or intentionally to possess any list I chemical obtained pursuant to or under authority of a registration issued to that person under section 303 of this title or section 1008 of title III if that registration has been revoked or suspended, if that registration has expired, or if the registrant has ceased to do business in the manner contemplated by his registration."; and

(B) by striking "drug or narcotic" and inserting "drug, narcotic, or chemical" each place it appears; and

(2) in subsection (c), by striking "drug or narcotic" and inserting "drug, narcotic, or chemical".

(b) FORFEITURES.—Section 511(a) of the Controlled Substances Act (21 U.S.C. 881(a)) is amended—

(1) in paragraphs (2) and (6), by inserting "or listed chemical" after "controlled substance" each place it appears; and

(2) in paragraph (9), by—

(A) inserting "dispensed, acquired," after "distributed," both places it appears; and

(B) striking "a felony provision of".

(c) SEIZURE.—Section 607 of the Tariff Act of 1930 (19 U.S.C. 1607) is amended—

(1) in subsection (a)(3), by inserting "or listed chemical" after "controlled substance"; and

(2) by amending subsection (b) to read as follows:

"(b) As used in this section, the terms 'controlled substance' and 'listed chemical' have the meaning given such terms in section 102 of the Controlled Substances Act (21 U.S.C. 802).".

SEC. 202. STUDY AND REPORT ON MEASURES TO PREVENT SALES OF AGENTS USED IN METHAMPHETAMINE PRODUCTION.

(a) STUDY.—The Attorney General of the United States shall conduct a study on possible measures to effectively prevent the diversion of red phosphorous, iodine, hydrochloric gas, and other agents for use in the production of methamphetamine. Nothing in this section shall preclude the Attorney General from taking any action the Attorney General already is authorized to take with regard to the regulation of listed chemicals under current law.

(b) REPORT.—Not later than January 1, 1998, the Attorney General shall submit a report to the Congress of its findings pursuant to the study conducted under subsection (a) on the need for and advisability of preventive measures.

(c) CONSIDERATIONS.—In developing recommendations under subsection (b), the Attorney General shall consider—

(1) the use of red phosphorous, iodine, hydrochloric gas, and other agents in the illegal manufacture of methamphetamine;

(2) the use of red phosphorous, iodine, hydrochloric gas, and other agents for legitimate, legal purposes, and the impact any regulations may have on these legitimate purposes; and

(3) comments and recommendations from law enforcement, manufacturers of such chemicals, and the consumers of such chemicals for legitimate, legal purposes.

SEC. 203. INCREASED PENALTIES FOR MANUFACTURE AND POSSESSION OF EQUIPMENT USED TO MAKE CONTROLLED SUBSTANCES.

(a) IN GENERAL.—Section 403(d) of the Controlled Substances Act (21 U.S.C. 843(d)) is amended—

(1) by striking "(d) Any person" and inserting "(d)(1) Except as provided in paragraph (2), any person"; and

(2) by adding at the end the following:

"(2) Any person who, with the intent to manufacture or facilitate to manufacture methamphetamine, violates paragraph (6) or (7) of subsection (a), shall be sentenced to a term of imprisonment of not more than 10 years, a fine of not more than $30,000, or both; except that if any person commits such a violation after one or more prior convictions of that person—

"(A) for a violation of paragraph (6) or (7) of subsection (a);

"(B) for a felony under any other provision of this subchapter or subchapter II of this chapter; or

"(C) under any other law of the United States or any State relating to controlled substances or listed chemicals,

has become final, such person shall be sentenced to a term of imprisonment of not more than 20 years, a fine of not more than $60,000, or both.".

(b) SENTENCING COMMISSION.—The United States Sentencing Commission shall amend the sentencing guidelines to ensure that the manufacture of methamphetamine in violation of section 403(d)(2) of the Controlled Substances Act, as added by subsection (a), is treated as a significant violation.

SEC. 204. ADDITION OF IODINE AND HYDROCHLORIC GAS TO LIST II.

(a) IN GENERAL.—Section 102(35) of the Controlled Substances Act (21 U.S.C. 802(35)) is amended by adding at the end the following:

"(I) Iodine.

"(J) Hydrochloric gas.".

(b) IMPORTATION REQUIREMENTS.—(1) Iodine shall not be subject to the requirements for listed chemicals provided in section 1018 of the Controlled Substances Import and Export Act (21 U.S.C. 971).

(2) EFFECT OF EXCEPTION.—The exception made by paragraph (1) shall not limit the authority of the Attorney General to impose the requirements for listed chemicals provided in section 1018 of the Controlled Substances Import and Export Act (21 U.S.C. 971).

SEC. 205. CIVIL PENALTIES FOR FIRMS THAT SUPPLY PRECURSOR CHEMICALS.

(a) OFFENSES.—Section 402(a) of the Controlled Substances Act (21 U.S.C. 842(a)) is amended—

(1) in paragraph (9), by striking "or" after the semicolon;

(2) in paragraph (10), by striking the period and inserting "; or"; and

(3) by adding at the end the following:

"(11) to distribute a laboratory supply to a person who uses, or attempts to use, that laboratory supply to manufacture a controlled substance or a listed chemical, in violation of this title or title III, with reckless disregard for the illegal uses to which such a laboratory supply will be put.

As used in paragraph (11), the term 'laboratory supply' means a listed chemical or any chemical, substance, or item, on a special surveillance list published by the Attorney General, which contains chemicals, products, materials, or equipment used in the manufacture of controlled substances and listed chemicals. For purposes of paragraph (11), there is a rebuttable presumption of reckless disregard at trial if a firm distributes or continues to distribute a laboratory supply to a customer where the Attorney General has previously notified, at least two weeks before the transaction(s), the firm that a laboratory supply sold by the firm, or any other person or firm, has been used by that customer, or distributed further by that customer, for the unlawful production of controlled substances or listed chemicals."

(b) CIVIL PENALTY.—Section 402(c)(2) of the Controlled Substances Act (21 U.S.C. 842(c)(2)) is amended by adding at the end the following:

"(C) In addition to the penalties set forth elsewhere in this title or title III, any business that violates paragraph (11) of subsection (a) shall, with respect to the first such violation, be subject to a civil penalty of not more than $250,000, but shall not be subject to criminal penalties under this section, and shall, for any succeeding violation, be subject to a civil fine of not more than $250,000 or double the last previously imposed penalty, whichever is greater.".

SEC. 206. INJUNCTIVE RELIEF.

(a) TEN-YEAR INJUNCTION MAJOR OFFENSES.—Section 401(f) of the Controlled Substances Act (21 U.S.C. 841(f)) is amended by—

(1) inserting "manufacture, exportation," after "distribution,"; and

(2) striking "regulated".

(b) TEN-YEAR INJUNCTION OTHER OFFENSES.—Section 403 of the Controlled Substances Act (21 U.S.C. 843) is amended—

(1) in subsection (e), by—

(A) inserting "manufacture, exportation," after "distribution,"; and

(B) striking "regulated"; and

(2) by adding at the end the following:

"(f) INJUNCTIONS.—(1) In addition to any penalty provided in this section, the Attorney General is authorized to commence a civil action for appropriate declaratory or injunctive relief relating to violations of this section or section 402.

"(2) Any action under this subsection may be brought in the district court of the United States for the district in which the defendant is located or resides or is doing business.

"(3) Any order or judgment issued by the court pursuant to this subsection shall be tailored to restrain violations of this section or section 402.

"(4) The court shall proceed as soon as practicable to the hearing and determination of such an action. An action under this subsection is governed by the Federal Rules of Civil Procedure except that, if an indictment has been returned against the respondent, discovery is governed by the Federal Rules of Criminal Procedure.".

SEC. 207. RESTITUTION FOR CLEANUP OF CLANDESTINE LABORATORY SITES.

Section 413 of the Controlled Substances Act (21 U.S.C. 853) is amended by adding at the end the following:

"(q) The court, when sentencing a defendant convicted of an offense under this title or title III involving the manufacture of methamphetamine, may—

"(1) order restitution as provided in sections 3612 and 3664 of title 18, United States Code;

"(2) order the defendant to reimburse the United States for the costs incurred by the United States for the cleanup associated with the manufacture of methamphetamine by the defendant; and

"(3) order restitution to any person injured as a result of the offense as provided in section 3663 of title 18, United States Code.".

SEC. 208. RECORD RETENTION.

Section 310(a)(1) of the Controlled Substances Act (21 U.S.C. 830(a)(1)) is amended by striking the dash after "transaction" and subparagraphs (A) and (B) and inserting "for two years after the date of the transaction.".

SEC. 209. TECHNICAL AMENDMENTS.

Section 102 of the Controlled Substances Act (21 U.S.C. 802) is amended—

(1) in paragraph (34), by amending subparagraphs (P), (S), and (U) to read as follows:

"(P) Iso safrole.

"(S) N-Methylephedrine.

"(U) Hydriodic acid."; and

(2) in paragraph (35), by amending subparagraph (G) to read as follows:

"(G) 2-Butanone (or Methyl Ethyl Ketone).".

TITLE III—INCREASED PENALTIES FOR TRAFFICKING AND MANUFACTURE OF METHAMPHETAMINE AND PRECURSORS

SEC. 301. TRAFFICKING IN METHAMPHETAMINE PENALTY INCREASES.

(a) CONTROLLED SUBSTANCES ACT.—

(1) LARGE AMOUNTS.—Section 401(b)(1)(A)(viii) of the Controlled Substances Act (21 U.S.C. 841(b)(1)(A)(viii)) is amended by—

(A) striking "100 grams or more of methamphetamine," and inserting "50 grams or more of methamphetamine,"; and

(B) striking "1 kilogram or more of a mixture or substance containing a detectable amount of methamphetamine" and inserting "500 grams or more of a mixture or substance containing a detectable amount of methamphetamine".

(2) SMALLER AMOUNTS.—Section 401(b)(1)(B)(viii) of the Controlled Substances Act (21 U.S.C. 841(b)(1)(B)(viii)) is amended by—

(A) striking "10 grams or more of methamphetamine," and inserting "5 grams or more of methamphetamine,"; and

(B) striking "100 grams or more of a mixture or substance containing a detectable amount of methamphetamine" and inserting "50 grams or more of a mixture or substance containing a detectable amount of methamphetamine".

(b) IMPORT AND EXPORT ACT.—

(1) LARGE AMOUNTS.—Section 1010(b)(1)(H) of the Controlled Substances Import and Export Act (21 U.S.C. 960(b)(1)(H)) is amended by—

(A) striking "100 grams or more of methamphetamine," and inserting "50 grams or more of methamphetamine,"; and

(B) striking "1 kilogram or more of a mixture or substance containing a detectable amount of methamphetamine" and inserting "500 grams or more of a mixture or substance containing a detectable amount of methamphetamine".

(2) SMALLER AMOUNTS.—Section 1010(b)(2)(H) of the Controlled Substances Import

and Export Act (21 U.S.C. 960(b)(2)(H)) is amended by—

(A) striking "10 grams or more of methamphetamine," and inserting "5 grams or more of methamphetamine,"; and

(B) striking "100 grams or more of a mixture or substance containing a detectable amount of methamphetamine" and inserting "50 grams or more of a mixture or substance containing a detectable amount of methamphetamine".

SEC. 302. PENALTY INCREASES FOR TRAFFICKING IN LISTED CHEMICALS.

(a) CONTROLLED SUBSTANCES ACT.—Section 401(d) of the Controlled Substances Act (21 U.S.C. 841(d)) is amended by striking the period and inserting the following: "or, with respect to a violation of paragraph (1) or (2) of this subsection involving a list I chemical, if the government proves the quantity of controlled substance that could reasonably have been manufactured in a clandestine setting using the quantity of list I chemicals possessed or distributed, the penalty corresponding to the quantity of controlled substance that could have been produced under subsection (b).".

(b) CONTROLLED SUBSTANCE IMPORT AND EXPORT ACT.—Section 1010(d) of the Controlled Substance Import and Export Act (21 U.S.C. 960(d)) is amended by striking the period and inserting the following: ", or, with respect to an importation violation of paragraph (1) or (3) of this subsection involving a list I chemical, if the government proves the quantity of controlled substance that could reasonably have been manufactured in a clandestine setting using the quantity of list I chemicals imported, the penalty corresponding to the quantity of controlled substance that could have been produced under title II.".

(c) DETERMINATION OF QUANTITY.—

(1) IN GENERAL.—For the purposes of this section and the amendments made by this section, the quantity of controlled substance that could reasonably have been provided shall be determined by using a table of manufacturing conversion ratios for list I chemicals.

(2) TABLE.—The table shall be—

(A) established by the United States Sentencing Commission based on scientific, law enforcement, and other data the Sentencing Commission deems appropriate; and

(B) dispositive of this issue.

SEC. 303. ENHANCED PENALTY FOR DANGEROUS HANDLING OF CONTROLLED SUBSTANCES: AMENDMENT OF SENTENCING GUIDELINES.

(a) IN GENERAL.—Pursuant to its authority under section 994 of title 28, United States Code, the United States Sentencing Commission shall determine whether the Sentencing Guidelines adequately punish the offenses described in subsection (b) and, if not, promulgate guidelines or amend existing guidelines to provide an appropriate enhancement of the punishment for a defendant convicted of such an offense.

(b) OFFENSE.—The offense referred to in subsection (a) is a violation of section 401(d), 401(g)(1), 403(a)(6), or 403(a)(7) of The Controlled Substances Act (21 U.S.C. 841(d), 841(g)(1), 843(a)(6), and 843(a)(7)), in cases in which in the commission of the offense the defendant violated—

(1) subsection (d) or (e) of section 3008 of the Solid Waste Disposal Act (relating to handling hazardous waste in a manner inconsistent with Federal or applicable State law);

(2) section 103(b) of the Comprehensive Environmental Response, Compensation and Liability Act (relating to failure to notify as to the release of a reportable quantity of a hazardous substance into the environment);

(3) section 301(a), 307(d), 309(c)(2), 309(c)(3), 311(b)(3), or 311(b)(5) of the Federal Water Pollution Control Act (relating to the unlawful discharge of pollutants or hazardous substances, the operation of a source in violation of a pretreatment standard, and the failure to notify as to the release of a reportable quantity of a hazardous substance into the water); or

(4) section 5124 of title 49, United States Code (relating to violations of laws and regulations enforced by the Department of Transportation with respect to the transportation of hazardous material).

TITLE IV—LEGAL MANUFACTURE, DISTRIBUTION, AND SALE OF PRECURSOR CHEMICALS

SEC. 401. DIVERSION OF CERTAIN PRECURSOR CHEMICALS.

(a) IN GENERAL.—Section 102(39) of the Controlled Substances Act (21 U.S.C. 802(39)) is amended—

(1) in subparagraph (A)(iv)(I)(aa), by striking "as" through the semicolon and inserting ", pseudoephedrine or its salts, optical isomers, or salts of optical isomers, or phenylpropanolamine or its salts, optical isomers, or salts of optical isomers

unless otherwise provided by regulation of the Attorney General issued pursuant to section 204(e) of this title;"; and

(2) in subparagraph (A)(iv)(II), by inserting ", pseudoephedrine, phenylpropanolamine," after "ephedrine".

(b) LEGITIMATE RETAILERS.—Section 102 of the Controlled Substances Act (21 U.S.C. 802) is amended—

(1) in paragraph (39)(A)(iv)(I)(aa), by adding before the semicolon the following: ", except that any sale of ordinary over-the-counter pseudoephedrine or phenylpropanolamine products by retail distributors shall not be a regulated transaction (except as provided in section 401(d) of the Comprehensive Methamphetamine Control Act of 1996)";

(2) in paragraph (39)(A)(iv)(II), by adding before the semicolon the following: ", except that any sale of products containing pseudoephedrine or phenylpropanolamine, other than ordinary over-the-counter pseudoephedrine or phenylpropanolamine products, by retail distributors shall not be a regulated transaction if the distributor's sales are limited to less than the threshold quantity of 24 grams of

pseudoephedrine or 24 grams of phenylpropanolamine in each single transaction'';

(3) by redesignating paragraph (43) relating to felony drug abuse as paragraph (44); and

(4) by adding at the end the following:

"(45) The term 'ordinary over-the-counter pseudoephedrine or phenylpropanolamine product' means any product containing pseudoephedrine or phenylpropanolamine that is—

"(A) regulated pursuant to this title; and

"(B)(i) except for liquids, sold in package sizes of not more than 3.0 grams of pseudoephedrine base or 3.0 grams of phenylpropanolamine base, and that is packaged in blister packs, each blister containing not more than two dosage units, or where the use of blister packs is technically infeasible, that is packaged in unit dose packets or pouches; and

"(ii) for liquids, sold in package sizes of not more than 3.0 grams of pseudoephedrine base or 3.0 grams of phenylpropanolamine base.

"(46)(A) The term 'retail distributor' means—

"(i) with respect to an entity that is a grocery store, general merchandise store, or drug store, a distributor whose activities relating to pseudoephedrine or phenylpropanolamine products are limited almost exclusively to sales, both in number of sales and volume of sales, directly to walk-in customers; and

"(ii) with respect to any other entity, a distributor whose activities relating to ordinary over-the-counter pseudoephedrine or phenylpropanolamine products are limited primarily to sales directly to walk-in customers for personal use.

"(B) For purposes of this paragraph, sale for personal use means the sale of below-threshold quantities in a single transaction to an individual for legitimate medical use.

"(C) For purposes of this paragraph, entities are defined by reference to the Standard Industrial Classification (SIC) code, as follows:

"(i) A grocery store is an entity within SIC code 5411.

"(ii) A general merchandise store is an entity within SIC codes 5300 through 5399 and 5499.

"(iii) A drug store is an entity within SIC code 5912.".

(c) REINSTATEMENT OF LEGAL DRUG EXEMPTION.—Section 204 of the Controlled Substances Act (21 U.S.C. 814) is amended by adding at the end the following new subsection:

"(e) REINSTATEMENT OF EXEMPTION WITH RESPECT TO EPHEDRINE, PSEUDOEPHEDRINE, AND PHENYLPROPANOLAMINE DRUG PRODUCTS.—The Attorney General shall by regulation reinstate the exemption with respect to a particular ephedrine, pseudoephedrine, or phenylpropanolamine drug product if the Attorney General determines that the drug product is manufactured and distributed in a manner that prevents diversion. In making this determination the Attorney General shall consider the factors listed in subsection (d)(2). Any regulation issued pursuant to this subsection may be amended or revoked based on the factors listed in subsection (d)(4).".

(d) REGULATION OF RETAIL SALES.—

(1) PSEUDOEPHEDRINE.—

(A) LIMIT.—

(i) IN GENERAL.—Not sooner than the effective date of this section and subject to the requirements of clause (ii), the Attorney General may establish by regulation a single-transaction limit of 24 grams of pseudoephedrine base for retail distributors. Notwithstanding any other provision of law, the single-transaction threshold quantity for pseudoephedrine-containing compounds may not be lowered beyond that established in this paragraph.

(ii) CONDITIONS.—In order to establish a single-transaction limit of 24 grams of pseudoephedrine base, the Attorney General shall establish, following notice, comment, and an informal hearing that since the effective date of this section there are a significant number of instances where ordinary over-the-counter pseudoephedrine products as established in paragraph (45) of section 102 of the Controlled Substances Act (21 U.S.C. 802 (45)), as added by this Act, sold by retail distributors as established in paragraph (46) in section 102 of the Controlled Substances Act (21 U.S.C. 802(46)), are being used as a significant source of precursor chemicals for illegal manufacture of a controlled substance in bulk.

(B) VIOLATION.—Any individual or business that violates the thresholds established in this paragraph shall, with respect to the first such violation, receive a warning letter from the Attorney General and, if a business, the business shall be required to conduct mandatory education of the sales employees of the firm with regard to the legal sales of pseudoephedrine. For a second violation occurring within 2 years of the first violation, the business or individual shall be subject to a civil penalty of not more than $5,000. For any subsequent violation occurring within 2 years of the previous violation, the business or individual shall be subject to a civil penalty not to exceed the amount of the previous civil penalty plus $5,000.

(2) PHENYLPROPANOLAMINE.—

(A) LIMIT.—

(i) IN GENERAL.—Not sooner than the effective date of this section and subject to the requirements of clause (ii), the Attorney General may establish by regulation a single-transaction limit of 24 grams of phenylpropanolamine base for retail distributors. Notwithstanding any other provision of law, the single-transaction threshold quantity for phenylpropanolamine-containing compounds may not be lowered beyond that established in this paragraph.

(ii) CONDITIONS.—In order to establish a single-transaction limit of 24 grams of phenylpropanolamine base, the Attorney General shall establish, following notice, comment, and an informal hearing, that since the effective date of this section there are a significant number of instances where ordinary over-the-counter phenylpropanolamine products as established in paragraph (45) of section 102 of the Controlled Substances Act (21 U.S.C. 802(45)), as added by this Act, sold by retail distributors as established in paragraph (46) in section 102 of the Controlled Substances Act (21 U.S.C. 802(46)), are being used as a significant source of precursor chemicals for illegal manufacture of a controlled substance in bulk.

(B) VIOLATION.—Any individual or business that violates the thresholds established in this paragraph shall, with respect to the first such violation, receive a warning letter from the

Attorney General and, if a business, the business shall be required to conduct mandatory education of the sales employees of the firm with regard to the legal sales of pseudoephedrine. For a second violation occurring within 2 years of the first violation, the business or individual shall be subject to a civil penalty of not more than $5,000. For any subsequent violation occurring within 2 years of the previous violation, the business or individual shall be subject to a civil penalty not to exceed the amount of the previous civil penalty plus $5,000.

(3) DEFINITION OF BUSINESS.—For purposes of this subsection, the term "business" means the entity that makes the direct sale and does not include the parent company of a business not involved in a direct sale regulated by this subsection.

(4) JUDICIAL REVIEW.—Any regulation promulgated by the Attorney General under this section shall be subject to judicial review pursuant to section 507 of the Controlled Substances Act (21 U.S.C. 877).

(c) EFFECT ON THRESHOLDS.—Nothing in the amendments made by subsection (b) or the provisions of subsection (d) shall affect the authority of the Attorney General to modify thresholds (including cumulative thresholds) for retail distributors for products other than ordinary over-the-counter pseudoephedrine or phenylpropanolamine products (as defined in section 102(45) of the Controlled Substances Act, as added by this section) or for non-retail distributors, importers, or exporters.

(f) EFFECTIVE DATE OF THIS SECTION.—Notwithstanding any other provision of this Act, this section shall not apply to the sale of any over-the-counter pseudoephedrine or phenylpropanolamine product initially introduced into interstate commerce prior to 9 months after the date of enactment of this Act.

SEC. 402. MAIL ORDER RESTRICTIONS.

Section 310(b) of the Controlled Substances Act (21 U.S.C. 830(b)) is amended by adding at the end the following:

"(3) MAIL ORDER REPORTING.—(A) Each regulated person who engages in a transaction with a nonregulated person which—

"(i) involves ephedrine, pseudoephedrine, or phenylpropanolamine (including drug products containing these chemicals); and

"(ii) uses or attempts to use the Postal Service or any private or commercial carrier;

shall, on a monthly basis, submit a report of each such transaction conducted during the previous month to the Attorney General in such form, containing such data, and at such times as the Attorney General shall establish by regulation.

"(B) The data required for such reports shall include—

"(i) the name of the purchaser;

"(ii) the quantity and form of the ephedrine, pseudoephedrine, or phenylpropanolamine purchased; and

"(iii) the address to which such ephedrine, pseudoephedrine, or phenylpropanolamine was sent.".

TITLE V—EDUCATION AND RESEARCH

SEC. 501. INTERAGENCY METHAMPHETAMINE TASK FORCE.

(a) ESTABLISHMENT.—There is established a "Methamphetamine Interagency Task Force" (referred to as the "interagency task force") which shall consist of the following members:

(1) The Attorney General, or a designee, who shall serve as chair.

(2) 2 representatives selected by the Attorney General.

(3) The Secretary of Education or a designee.

(4) The Secretary of Health and Human Services or a designee.

(5) 2 representatives of State and local law enforcement and regulatory agencies, to be selected by the Attorney General.

(6) 2 representatives selected by the Secretary of Health and Human Services.

(7) 5 nongovernmental experts in drug abuse prevention and treatment to be selected by the Attorney General.

(b) RESPONSIBILITIES.—The interagency task force shall be responsible for designing, implementing, and evaluating the education and prevention and treatment practices and strategies of the Federal Government with respect to methamphetamine and other synthetic stimulants.

(c) MEETINGS.—The interagency task force shall meet at least once every 6 months.

(d) FUNDING.—The administrative expenses of the interagency task force shall be paid out of existing Department of Justice appropriations.

(e) FACA.—The Federal Advisory Committee Act (5 U.S.C. App. 2) shall apply to the interagency task force.

(f) TERMINATION.—The interagency task force shall terminate 4 years after the date of enactment of this Act.

SEC. 502. PUBLIC HEALTH MONITORING.

The Secretary of Health and Human Services shall develop a public health monitoring program to monitor methamphetamine abuse in the United States. The program shall include the collection and dissemination of data related to methamphetamine abuse which can be used by public health officials in policy development.

SEC. 503. PUBLIC-PRIVATE EDUCATION PROGRAM.

(a) ADVISORY PANEL.—The Attorney General shall establish an advisory panel consisting of an appropriate number of representatives from Federal, State, and local law enforcement and regulatory agencies with experience in investigating and prosecuting illegal transactions of precursor chemicals. The Attorney General shall convene the panel as often as necessary to develop and coordinate educational programs for wholesale and retail distributors of precursor chemicals and supplies.

(b) CONTINUATION OF CURRENT EFFORTS.—The Attorney General shall continue to—

(1) maintain an active program of seminars and training to educate wholesale and retail distributors of precursor chemicals and supplies regarding the identification of suspicious transactions and their responsibility to report such transactions; and

(2) provide assistance to State and local law enforcement and regulatory agencies to facilitate the

establishment and maintenance of educational programs for distributors of precursor chemicals and supplies.

SEC. 504. SUSPICIOUS ORDERS TASK FORCE.

(a) IN GENERAL.—The Attorney General shall establish a "Suspicious Orders Task Force" (the "Task Force") which shall consist of—

(1) appropriate personnel from the Drug Enforcement Administration (the "DEA") and other Federal, State, and local law enforcement and regulatory agencies with the experience in investigating and prosecuting illegal transactions of listed chemicals and supplies; and

(2) representatives from the chemical and pharmaceutical industry.

(b) RESPONSIBILITIES.—The Task Force shall be responsible for developing proposals to define suspicious orders of listed chemicals, and particularly to develop quantifiable parameters which can be used by registrants in determining if an order is a suspicious order which must be reported to DEA. The quantifiable parameters to be addressed will include frequency of orders, deviations from prior orders, and size of orders. The Task Force shall also recommend provisions as to what types of payment practices or unusual business practices shall constitute prima facie suspicious orders. In evaluating the proposals, the Task Force shall consider effectiveness, cost and feasibility for industry and government, and other relevant factors.

(c) MEETINGS.—The Task Force shall meet at least two times per year and at such other times as may be determined necessary by the Task Force.

(d) REPORT.—The Task Force shall present a report to the Attorney General on its proposals with regard to suspicious orders and the electronic reporting of suspicious orders within one year of the date of enactment of this Act. Copies of the report shall be forwarded to the Committees of the Senate and House of Representatives having jurisdiction over the regulation of listed chemical and controlled substances.

(e) FUNDING.—The administrative expenses of the Task Force shall be paid out of existing Department of Justice funds.

(f) FACA.—The Federal Advisory Committee Act (5 U.S.C. App. 2) shall apply to the Task Force.

(g) TERMINATION.—The Task Force shall terminate upon presentation of its report to the Attorney General, or two years after the date of enactment of this Act, whichever is sooner.

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COMMUNICATIONS STRATEGY -- METHAMPHETAMINE

GOALS

1. National recognition that meth is worse than crack.
2. National recognition that the Administration is leading an effort to head off the meth crisis and a public mandate to do more.
3. Regional recognition that federal law enforcement is leading local law enforcement efforts to fight methamphetamine.
4. Regional recognition of how communities, families and individuals can help.

CORE MESSAGE

- Meth is coming and it could be worse than crack.
- This Administration is getting ahead of the problem.
- Communities can help fight back and prevent a meth epidemic.

STEP ONE: NATIONAL KICK-OFF WITH WHITE HOUSE EVENT

- Show foresight and leadership with a Presidential announcement of a meth strategy, signing of an executive order, announcement of other steps, and call for any necessary legislation. Follow up with radio address.
- Energize subaudiences by insuring that attendees and participants include law enforcement, scientists, chemical reps, and other subgroups (domestic violence, child abuse, doctors, AIDS groups, environmentalists).
- Feed national media by offering Reno, McCaffrey and maybe other cabinet members to do interviews on the threat and our initiatives and follow up with op-eds in national papers. Round up footage of visuals -- i.e., lab sites (environmental damage, lab equipment, booby traps), cops in protective enviro outfits, arrests.
- Feed local media with U.S. attorney events to show local leadership, and cabinet regional satellite and phone interviews where meth is bad or a growing threat. Mail out packet to national ed boards and follow up with calls from cabinet and subcabinet members.

STEP TWO: SUSTAINED NATIONAL AWARENESS CAMPAIGN

- Reach public directly by taping TV and radio PSAs with President and/or cabinet members, highlighting at White House, and distributing them and other educational materials nationwide.
- Highlight link to "shaken baby syndrome" by having President or First Lady visit a hospital where case was treated. Collect and distribute information on meth-related

cases to national press. Offer First Lady or Attorney General to magazine shows, medical conventions and journals, and parental magazines for features on meth involvement in syndrome.

- Continue President profile with Presidential event that includes meth as a message at least once a month (e.g., National Drug strategy, unveiling PSA, chemical execs promise to help).
- Reach out to national press with McCaffrey National Press Club speech to talk about meth.
- Organize professional campaign by creating a National Methamphetamine Awareness Council (including OJP and non-profits) to press dangers nationwide.
- Press legislation by having cabinet members do Capitol Hill Event.
- Highlight enforcement by having AG announce creation of USA-led task forces around country with supporting local events by USAs.
- Work with Mexican press as appropriate by having AG/McCaffrey do roundtables to show how grave the problem is to Mexico's people and environment, that U.S. will offer assistance and expects cooperation.
- Make the Internet part of the story by highlighting monitoring initiative, coupled with outreach on internet and to net-related public figures about dangers of meth and how to spot net traffic that could be abetting meth manufacturing and dealing.
- Showcase results with a "white paper" to the President three months later highlighting successes in enforcement, regulation, training, programs and awareness.

STEP THREE: REGIONAL FOLLOW-UP

- Show people how meth is affecting their communities by collecting and using local data and anecdotes on meth use, arrests, and consequences.
- Follow up PSAs with letters from Reno and McCaffrey to urge station managers to run them.
- Continue outreach to editorial boards with cabinet and subcabinet members.
- Use McCaffrey and Reno's credibility by having them "tour" together on drug use issues, especially methamphetamine.
- Energize communities with town meetings with the President, VP and cabinet members to talk about dangers and what communities and individuals can do.
- Highlight enforcement success and strategies with visits to arrest sites, former labs, sites of notorious crimes, and cleaned up areas. Collect case info to issue regular "meth enforcement updates." Have U.S. Attorneys hold events when signing cooperation agreements with local law enforcement.
- Highlight Southwest Border Initiative with events to mark roll-out of new DEA agents, equipment, and extra visibility for big busts.
- Tailor strategy by region: Hardest hit areas (LA, SD, SF, Seattle, Denver, Dallas, border); growing threat (IA, KS, MO, MN, WI), act now before it arrives (OH, DC, NY, PA, MA, FL).

STEP FOUR: FOLLOW UP WITH SUBAUDIENCES

- Chemical Industry: President meets with chem executives or visits major company to call on industry to exercise responsibility; cabinet members follow up with visits to chemical headquarters around the country.
- Domestic Violence: First Lady, AG and Bonnie Campbell attend conventions and do interviews on the growing threat that meth poses as a domestic violence problem.
- Medical Community: Direct media interest to doctors who we work with. Submit articles and letters to medical publications on how to look for meth use, victims of meth users, and what they can do besides treat patients.
- Environmental: Browner and AAG Lois Schiffer travel to polluted sites and do outreach to environmental press and groups on the problem and our strategy.
- Law Enforcement: President, McCaffrey and AG work with national groups, kick off regional meth training conferences, and visit busted labs with local cops.
- Hispanic Awareness: Warn of increasing use among hispanic community.
- Youth: Have President, cabinet and subcabinet visit schools and campuses to educate and urge young people to stay away from drugs and especially meth. Organize op-eds and letters to the editor in college publications.
- Drug Treatment Community: Bring successful treatment graduates to White House or Justice Department for event to announced OJP grants or program. Send people to conferences, organize op-eds and get into treatment publications.

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METHAMPHETAMINE STRATEGY IMPLEMENTATION
SUGGESTED FUNDING LEVELS -- $35 million

1. Methamphetamine/Chemical Control Center. ($5 million)
   - Establish Center within DEA with remote, secure, electronic access established from domestic and bi-national task forces, regional state and local enforcement offices, U.S. border enforcement points and DEA country offices in major chemical source and transit countries
   - Establish standardized database and reporting protocol
   - Facilitate information exchange related to international monitoring and control of diverted chemicals
   - Facilitate information exchange with State and local enforcement authorities

2. Domestic Enforcement Operations. ($12 million)
   - Domestic task force augmentation (additional personnel overtime expenses for State and local participation)
   - Additional chemical detection/protection/decontamination equipment for enforcement personnel
   - Clandestine laboratory site decontamination/restoration

3. Training. ($9 million)
   - Domestic law enforcement and medical personnel training and cross-training ($5.5M)
   - Domestic injunctive enforcement ($.5M)
   - Domestic environmental enforcement ($.5M)
   - Domestic border enforcement ($.5M)
   - International training for bi-national task force personnel and enforcement personnel from chemical producing countries ($1M)
   - Development of exportable, bi-lingual training materials for use by domestic enforcement personnel and agencies ($1M)

4. U.S./Mexico Bi-National Task Force. ($4 million)
   - Personnel selection and vetting
   - Basic Task Force facilities, equipment, and travel

5. Treatment, Prevention and Education. ($5 million)
   - Establish treatment information clearinghouse
   - Develop exportable educational package for use in public school systems
   - Develop and disseminate mass media public awareness materials for use in electronic and print media public service announcements

DOJ Supplemental Budget Request
March 14, 1996

METHAMPHETAMINE STRATEGY IMPLEMENTATION
SUGGESTED FUNDING LEVELS
TOTAL: $15 MILLION

1. Methamphetamine/Chemical Control Center. ($3 million)

   - Establish Center within DEA
   - Establish standardized database and reporting protocol
   - Facilitate information exchange related to international monitoring and control of diverted chemicals
   - Facilitate information exchange with State and local enforcement authorities

2. Domestic Enforcement Operations. ($4 million)

   - Additional chemical detection/protection/decontamination equipment for enforcement personnel
   - Domestic task force augmentation (additional personnel overtime expenses for State and local participation)

3. Training. ($2.5 million)

   - Domestic injunctive enforcement ($.25M)
   - Domestic environmental enforcement ($.25M)
   - Domestic border enforcement ($.25M)
   - International training for bi-national task force personnel and enforcement personnel from chemical producing countries ($.75M)
   - Development of exportable training materials for use by domestic enforcement personnel and agencies ($1M)

4. U.S./Mexico Bi-National Chemical Control Task Force. ($2.5 million)

   - Personnel selection and vetting
   - Basic Task Force facilities and equipment for collection, analysis, and international communication of chemical supply and diversion data

5. Treatment, Prevention and Education. ($3 million)

   - Establish treatment information clearinghouse
   - Develop exportable educational package for use in public school systems
   - Develop mass media public awareness materials for use in electronic and print media public service announcements

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