THE WHITE HOUSE

WASHINGTON

July 28, 1994

MEMORANDUM FOR THE PRESIDENT

FROM: Jose Cerda JC

THROUGH: Carol H. Rasco CHR

SUBJECT: Drugs: Household Survey Comments

You recently asked why the Household Survey (released 7-2-94) indicated that the number of weekly cocaine users -- or "hard-core" users -- is at its highest level since 1985, as reported in Cabinet Affairs' weekly report. But before answering "why," we must point out that this statement is wrong. The 1993 Household Survey estimate of approximately 500,000 hard-core cocaine users is consistent with -- and down slightly from -- the average of 600,000 or so hard-core users the Household Survey has shown since 1985 (see attached chart).

The real finding in this year's Household Survey is that it confirms the parallel findings of other 1992 and 1993 drug surveys, which signaled an end to the generally declining rates of adolescent drug use. For two years now, several major drug surveys have shown flat or increased drug use among our kids (marijuana, inhalants and LSD) -- as well as an increase in the number of kids who don't view drugs as dangerous.

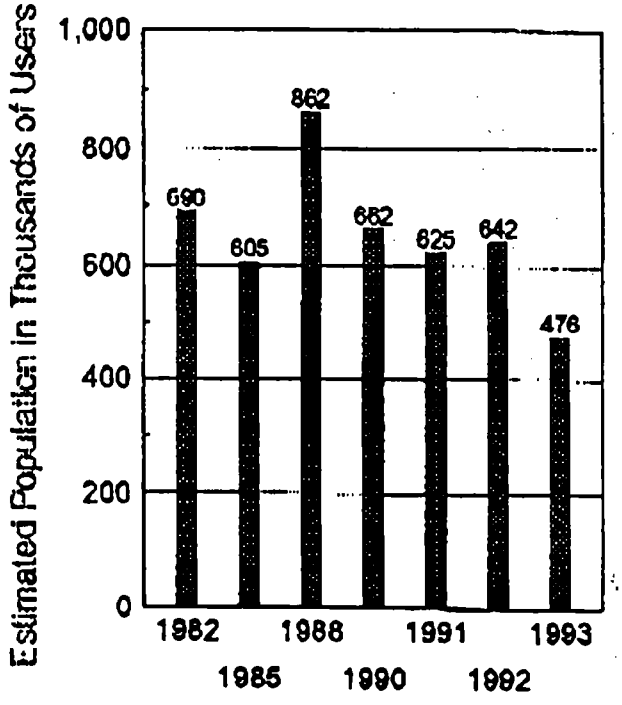
This is not to say, however, that the Household Survey's finding reveal any good news about hard-core drug use. This survey grossly underestimates the number of hard-core cocaine users and does not accurately measure hard-core heroin use at all. What the Household Survey tends to reflect is drug prevalence among casual or intermittent drug users. These are drug users who report drug use within thirty days prior to the survey (current drug use) or within the past year (occasional drug use). By definition the survey excludes homeless people, prisoners, college students and other individuals who do not reside in "households" -- and who are perhaps more likely to use illegal drugs more frequently.

A more accurate hard-core user estimate is the 2.7 million figure developed by the Drug Office (2.1 million who use cocaine and 600,000 who use heroin), which is derived by analyzing several of the major drug indicators. In fact, some drug policy experts argue that even this is a low estimate, and the Drug Office is currently testing a new methodology to better measure hard-core drug use. Despite the problems inherent in measuring hard-core drug use, there is little disagreement that hard-core drug use continues unabated in this country, and the drug indicators due to be released this fall should confirm this. The Drug Abuse Warning Network (DAWN) is likely to show flat to increasing levels of drug-related emergency room episodes, and the Pulse Check will anecdotally confirm that hard-core users have ready access to cheap, high-grade drugs in many of America's cities.

Why then are there still so many hard-core drug users in America -- be that number half a million, 2.7 million or more? Perhaps the best answer is that hard-core users are the most difficult, costly and unpopular population to treat. They are the most difficult users to get into treatment. Many are homeless, in and out of the criminal justice system, sick w/AIDS or Tuberculosis and have little hope of getting a job. Furthermore, hard-core users are much more likely to require long-term residential treatment that costs more and -- by tying up treatment slots for a longer period of slots -- may reduce the availability of treatment to less serious drug users and alcoholics.

Finally, by making hard-core users a priority in the 1994 Drug Strategy, the Administration did a necessary -- but unpopular -- thing. We proposed putting a higher emphasis and spending more money to treat a population that is tied to so many of our social ills -- rising crime, high health care costs, a broken welfare system, homelessness, unemployment, etc. -- but that has been historically neglected by Congress, state drug and alcohol abuse agencies. Through the state planning process required to get block grant monies for treatment, HHS and the Drug Office are trying to get states to focus more on hard-core drug use, but that will take time. We -- as has been the case with past Administrations -- have had less luck in convincing congressional appropriators to make a long-term commitment to fund and promote hard-core drug treatment.

FREQUENT (WEEKLY) USE OF COCAINE



- There were an estimated one-half million weekly cocaine users in 1993.
- This is down (not significantly) from the 600 thousand users on average since 1985.
- The estimated number of weekly cocaine users has not changed significantly since 1985.

Source:
Household Survey

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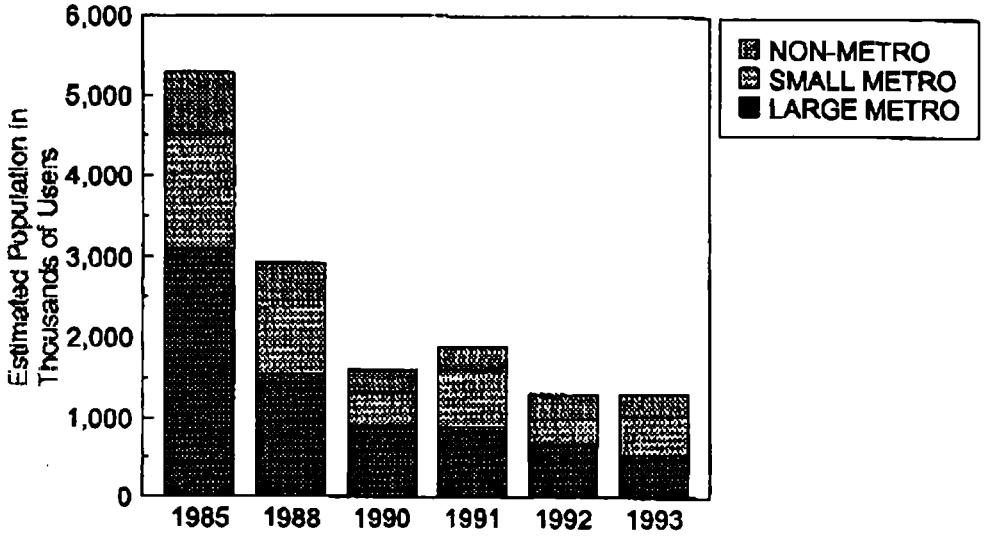
PLANNING AND BUDGET

CURRENT (PAST MONTH) USE OF COCAINE BY POPULATION DENSITY



Source:
Household Survey

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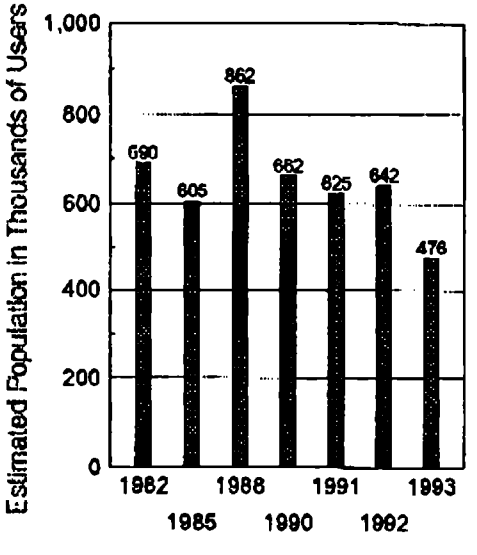
PLANNING AND BUDGET

FREQUENT (WEEKLY) USE OF COCAINE



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- The estimated number of weekly cocaine users has not changed significantly since 1985.

Source:
Household Survey

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Pete

DRAFT #2--DRAFT #2--DRAFT #2--DRAFT #2--DRAFT #2--DRAFT #2
7/13/94

FOR RELEASE:

Contact: James Helsing, SAMHSA
301-443-8956

HHS announced today the results of the 1993 National Household Survey on Drug Abuse which show that:

o No reportable change in the number of Americans using illicit drugs took place between 1992 and 1993, when the number of drug abusers stood at 11.7 million.

o The number of persons who use cocaine weekly persisted at around a half-million in 1993. This aspect of the cocaine problem has shown no signs of abating since 1985.

o Illicit drug use, heavy drinking, and smoking go hand in hand among millions of Americans. Of 11 million heavy drinkers in 1993, 26 percent were also current illicit drug users. Among 50 million current smokers, 1 percent were illicit drug users.

"The 1993 data on overall drug use in the nation reflect the continuing challenge we face in preventing and treating substance abuse," Secretary Shalala said. "We have two tasks that remain urgent. We must find new ways to drive home our prevention messages, especially for young people, and we need to expand treatment opportunities for people who are in serious trouble with drug use. The President has made three significant proposals to expand drug treatment: one in his 1995 budget, a second in his health reform bill, and a third for treatment in the criminal justice system as part of the crime bill. We need to enact all three."

The Survey is carried out annually by the Substance Abuse and Mental Health Services Administration to estimate the prevalence of legal and illegal drug use in the U.S., and to monitor the trends in use over time. It is based on a representative sample of the general U.S. population aged 12 and older, including persons living in households and in some group quarters such as dormitories and homeless shelters. The 1993 survey was conducted from January through December 1993.

Shift in Drug Use to Older Age Groups

Although there was no significant change between 1992 and 1993 in rates of illicit drug use for any age group, the rates of "current" drug use (within last 30 days) have dropped dramatically since 1979 for all groups (12-17, 18-25, and 26-34) except those 35 and older. In 1993, 28 percent of illicit drug users were in the 35 and over group, compared to only 10 percent in 1979. This shift appears to be linked to the aging of the drug using cohorts of the 1970's. (The shift in age composition is also seen in hospital emergency room data collected by DAWN.)

Marijuana

Marijuana was the most commonly used illicit drug among the survey population, which consists of Americans aged 12 and over. Sixty percent of all current illicit drug users used only marijuana, and an additional 16 percent used marijuana plus one

or more other illicit drug. About 5.1 million persons used marijuana weekly, unchanged since 1991 but down from 8.9 million in 1985.

Cocaine

"Current" cocaine users numbered 1.3 million, the same as in 1992, down from a peak of 5.3 million in 1985. "Occasional" users (less often than monthly) numbered 3 million in 1993, down from 8.1 million in 1985. As noted above, there was no significant change in the number of "weekly" cocaine users, which remained stable at around a half million (476,000).

Crack. The estimated number of "current" crack users was less than one-half million, with no indication of increases or decreases since 1991.

Other Drugs

There were no major changes in 1993 in "current" use of inhalants, hallucinogens, or heroin. However, estimates of heroin use from the survey are considered very conservative due to the probable undercoverage of the population of heroin users.

Non-medical use of Prescription Drugs

A significant decrease in the use of tranquilizers for non-medical purposes occurred from 1991 to 1993, but there were no changes in the use of sedatives, stimulants, or analgesics nonmedically in those years.

Cigarettes

Current cigarette smokers declined from 26 to 24 percent of the survey population from 1992 to 1993. Decreases were apparent in every age group but 12-17 year olds, which remained at around 10 percent. The rate of smoking was highest in the 26-34 year age group (30 percent) and among 18-25 year olds (29 percent).

Alcohol

In 1993, approximately 103 million persons were "current" drinkers, and 11 million were heavy drinkers (5 or more drinks on 5 or more days in the past 30 days.) Neither category had changed significantly from 1992. Of the 11 million heavy drinkers, 26 percent also were current illicit drug users.

Gender, Race

Men continued to have a higher rate (7.4 percent) of illicit drug use than women (4.1 percent). The rate of illicit drug use was 6.8 percent for blacks, 6.2 percent for Hispanics, and 5.5 percent for whites. Seventy-four percent of all current illicit drug users were white, 13 percent black , and 10 percent Hispanic.

Education

Illicit drug use rates remain highly correlated with educational status. Among 18-34 year olds in 1993, those who had not completed high school had the highest rate of use, 15.4 percent, while college graduates had the lowest rate, 6.0 percent.

Employment

Current employment status is also highly correlated with rates of illicit drug use, with 11.6 percent of unemployed adults (18 and older) being current drug users in 1993, compared with 6.2 percent of employed adults. However, 71 percent of all current illicit drug users aged 18 and older were employed in 1993.

Perception of Risk, Availability

In addition to data on the use of drugs, the Household survey collects information on the respondents' perceptions of the risk of harm from using various drugs, and on the availability of drugs.

In 1993, only about half of youths 12-17 felt there is great risk in using marijuana occasionally, or in trying cocaine, PCP, or heroin. This represents little change since 1990. Seventy-seven percent of the overall population associated great risk with regular marijuana use, and the majority perceived great risk in even trying cocaine (67%), PCP (71%), or heroin (75%) once or twice.

Fifty-eight percent of the population in 1993 reported that they thought marijuana would be easy for them to get, and 39 percent said the same of cocaine. The percentages saying they believed heroin, LSD, and PCP would be easy to get were 26, 27, 24, respectively.

Nine percent of the population reported having been approached in the past month by someone selling drugs, and 11

percent said they had seen people selling drugs in their neighborhood occasionally or more often. Seven percent of whites, 37 percent of blacks and 21 percent of Hispanics reported observing such drug sales.

Released per Federal comment

Suggested remarks of Donna Shalala to announce the release of the 1993 National Household Survey on Drug Abuse, 20 July 1994, Washington, DC

Good morning and thank you for coming. We are here to announce the results of the 1993 National Household Survey on Drug Abuse and, more importantly, to discuss what the numbers say about America's involvement with mind-altering drugs.

The news from the survey is both good and bad. Good, because the progress we have made in stemming Americans' use of marijuana, cocaine and other illicit drugs has been sustained, even though the numbers did not take another notch down in 1993.

Over the past 14 years, the number of Americans using illicit drugs has been cut in half, from 24 million past-month users in 1979 to less than 12 million in 1993.

But the survey also sounds a warning: since 1979, we have seen the number of current users drop, consistently, year after year. Between 1992 and 1993, we saw no such decrease.

Twenty years ago, President Nixon told the American people we had turned the corner on drug abuse in this country. Well, we have turned many corners and we're still not home.

This Household Survey, supported by the rise in drug-related

emergency room visits documented in our Drug Abuse Warning Network, points out an unavoidable fact: We must enhance and expand treatment options for the so-called "hard core" drug abuser if we expect ever to solve America's drug problem.

The President has made three significant proposals to expand drug treatment: one in his 1995 budget, a second in his health reform bill, and a third for treatment in the criminal justice system as part of his crime bill.

Today we know more about addiction than ever before. Everything we know tells us addiction is a chronic, recurring disease, but also that addiction can be successfully treated.

We need to put that knowledge to use so that severely addicted Americans can get well and have a chance to live a normal life.

But that's not the only message of the new Household Survey. Earlier this year, another HHS survey sounded a warning about the Nation's youth and some increases in drug use by eighth, tenth and twelfth graders. The new Household Survey echoes that warning.

Data in the Household Survey are consistent with those earlier findings, including data that only half of our children ages 12 to 17 think trying cocaine, PCP or heroin might be a very risky

venture.

Today's hard core addict was once a younger person convinced that drugs weren't very dangerous. Even as we push to intervene with the entrenched drug user, we cannot relax our efforts to prevent today's young people from a similar fate.

The third message of this Survey is equally important: illicit drug use, heavy drinking, and cigarette smoking go hand in hand in millions of Americans. Of 11 million heavy drinkers in 1993, 26 per cent were also illicit drug users. And people who smoked cigarettes were three times more likely than non-smokers to also be heavy drinkers and/or illicit drug users.

Unemployment, too, is the common companion of these three public health threats; 11.6 per cent of the adults without jobs in this survey were using illicit drugs, compared with 6.2 per cent of those who were employed.

I want to point out, as well, though, that the survey showed 71 per cent of current adult illicit drug users were employed, making the workplace a prime entry point for needed intervention.

These numbers just emphasize the importance of what HHS has been doing all these years: working to prevent problems. Because when you work very hard to prevent one problem, you may also prevent

others.

It's time for universal action on drug abuse. This Household Survey tells us we have reached a new stage in the fight to save lives. To win this one, we'll need everyone working together.

We'll need this Nation's 400,000 physicians to go beyond their routine and start asking patients about their use of alcohol, tobacco, and illicit drugs.

We'll need our 2 million teachers to talk rationally and accurately about the risks of using drugs -- not for one week set aside each year, but at every opportunity.

We'll need our 266,000 journalists to tell the <u>whole story</u> of drug abuse, not just the dealer involved in a drive-by shooting, but also the mother who has regained her family and gotten a job after treatment.

The President has shown unwavering commitment to stemming drug abuse and the many ills addiction breeds. He understands fully the urgency of such action in relation to both health care reform and welfare reform.

Secretary of Education Riley and Attorney General Reno also have

demonstrated their dedication to ending this plague.

This Secretary is here to say we are going to do what these data tell us we must.

Now I would like to introduce Dr. Lee Brown, the director of the White House Office of National Drug Control Policy, who perhaps foremost among us, is committed to implementing a new national strategy to gain further ground in this new stage of drug abuse in America.

Dr. Brown ...

SAMHSA

FACSIMILE TRANSMISSION COVER SHEET

OFFICE OF COMMUNICATIONS

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

5600 Fishers Lane, Room 13C-05
Rockville, Maryland 20857
Phone: (301) 443-8956 or 443-0746
FAX: (301) 443-9050

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BUILDING/ROOM (OR ADDRESS: _____

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OFFICE/FAX PHONE NUMBER: ( ) - 202-690-6167

FROM: Jim Helsing

REMARKS: Revised per your request

Jose -
They just sent this back
-Jen

THE PRESIDENT HAS SEEN
7/25/94

To the President
FYI on Drug Survey.

THE WHITE HOUSE
WASHINGTON

July 21, 1994

MEMORANDUM FOR LEON PANETTA

FROM: Christine Varney
Jennifer O'Connor

SUBJECT: Household Drug Survey Results Release

I wanted to respond to your inquiry about the strategy around the release of the Household Drug Survey results, which Secretary Shalala and Dr. Brown announced yesterday.

The process for the release of this data mirrored a process we went through in February when the High School Drug Survey results were released. In both instances, White House Communications and policy staff who focus on the drug office were invited to meet with HHS and Office of National Drug Control Policy staff to plan the release.

Jointly, the HHS, ONDCP and White House staff wanted to downplay the February study because it demonstrated that drug use went up among young people from 1992 to 1993, while the President's FY 94 budget proposed a slight decrease in drug control spending. Thus, in February, Secretaries Shalala, Riley and Director Brown held a press conference to emphasize new drug control funds in the FY 95 budget request, and to play up the President's National Drug Control Strategy, which was about to be released.

This time, the departments reasoned that the Household Drug Survey confirmed the earlier findings and thus could be open to the same criticism -- that drug use went up while the President proposed less in funds. To again head off such a charge, the departments crafted a message that the Household Survey confirmed the President's National Strategy, and backed up his call for new funds in his FY 95 budget. It did not occur to them or White House staff to try to include the President in such a press conference, as they were strategizing about how to counter a potential charge that drug use increased on his watch.

As the *New York Times* article demonstrated, there is still a perception among the press, fueled by the President's critics, that this administration cares too little about this issue. This survey release, however, was the least useful vehicle for the President to personally show his commitment because it showed nothing new and did not measure hard core use, the type of use on which the National Drug Control Strategy and the budget are targeted. Given our conversation this morning, I will make sure that the next opportunities for the President's involvement in the release of data on this issue are fully considered among senior staff. Separately, we should discuss other opportunities for visibility for him on this issue.

If we should approve publicly all drug use

Cabinet Affairs Weekly Report 7-15-94

- **Gasoline Suit:** The American Petroleum Institute has informed the Environmental Protection Agency that it intends to challenge the Agency's renewable oxygenate requirement for reformulated gasoline.

Health and Human Services

- **Court of Appeals Orders HHS to Reconsider Waiver:** On July 12, the U.S. Court of Appeals held that the Department failed to comply with the Administrative Procedures Act when, in 1992, it approved a welfare waiver for California. The court ordered the Department to reconsider the proposed demonstration, the core element of which is a 6.3% reduction in AFDC benefits. In addition to the implications with respect to California, the decision is relevant to current deliberations regarding proposed Department policies and procedures for reviewing waiver requests.

- **Household Survey of Drug Abuse Results to be Released:** On July 20, Director Lee Brown and Secretary Shalala will hold a press conference to announce the findings of the Household Survey of Drug Abuse, conducted by the Substance Abuse and Mental Health Services Agency. The survey shows that rate of illicit drug use has remained flat during the 1990s, with roughly 11.7 million Americans reporting use in 1993. However, the number of people who use cocaine on a weekly basis, 500,000, is at its highest level since 1985.

- **Florida Medicaid Waiver:** The Department is in its final stages of negotiations with Florida on their request to implement the Florida Health Security Program through a waiver. Florida's program would provide insurance to 1.1 million uninsured persons at or below 250 percent of the poverty level. Significant remaining issues are budget neutrality and the state's plan to use insurance agents to sell policies:

  - Budget Neutrality: The Department is seeking agreement on a methodology to ensure that Florida spends no more under the waiver than it would have in the absence of a waiver. The Department has been concerned that Florida's estimate of what they would spend in the absence of a waiver is too high and entails a significant budget risk. HCFA and Florida are discussing options and hope to reach an agreement soon.

  - Use of Insurance Agents: Florida plans to use insurance agents to sell health plans under its Florida Health Security program. The Justice Department has indicated that Florida's plan would violate the Medicare/Medicaid anti-kickback statute. There is, however, a Departmental process by which a safe harbor could be created by regulation after a finding that there is no danger of fraud and abuse in the plan. The Department is examining this issue closely.

TALKING POINTS FOR HOUSEHOLD SURVEY/NATIONAL DRUG CONTROL BUDGET

The President has proposed the largest, most innovative drug budget ever; one that for the first time addresses the problem of the hardcore chronic drug user. The Household Survey confirms that the Clinton Administration's National Drug Control Strategy and the President's budget are the right approach to the drug problem. We must focus on the hardcore drug user.

The Household Survey (HHS) measures casual use because it focuses on people who live in houses. By definition it excludes, the homeless, prisoners, many college students; specifically hardcore drug users. The previous Administration's drug control strategy was to reduce casual use. They are easier to reach with traditional prevention messages. HHS shows the success in cutting casual use dramatically--this was the easy step.

This Administration is tackling the hardest part of the drug problem (without ignoring casual use.) The Survey shows that rate of marijuana use among youth 12 to 17 has increased. This is our future. This survey and a recent Rand study, which shows hardcore use has increased, confirm that our Strategy and Budget are right, we must address hardcore drug use.

It is urgent that we heed the warning embodied in the Household Survey and pass the President's budget with the treatment programs, the crime bill will all the treatment and prevention programs and health reform will access to treatment so that we can address this most difficult part of the drug and crime problem.

Prevention
The Administration requested an increase of $191 million for school and community based prevention programs. These programs would enable each student, k thru 12, to receive comprehensive drug and violence prevention education. However, the Congress did not support the Administration's request; rather, it cut the President's request for this critical population in both the House and Senate by $123 million.

Treatment
The Administration requested $355 million to drug treatment for the chronic hardcore user. This would enable an additional 74,000 persons to receive drug treatment services. This population fuses the demand for illicit drugs and is directly responsible for much of the crime and violence that occurs, especially in our cities. The Congress has chosen not to support this priority -- the House has reduced the President's request by an estimated $295 million and the Senate reduced the request by and estimated $290 million. As a result, an estimated 67,000 chronic hardcore users will not receive treatment.

Partnership comments--The President has done a public service

announcement for the Partnership; Dr. Brown and Carol Rasco hosted a lunch for Jim Burke and the Partnership with members of the President's Cabinet. Jim Burke was a guest at the President's announcement of the National Strategy and was introduced by the President.

The New York Times is also wrong -- this President did introduce the National Strategy, Feb. 9, at Prince Georges County Correctional Center.

Potential Questions:

Q: What are the findings in the survey with respect to drug use?

A: The 1993 Household Survey shows no change in drug use between 1992 and 1993. The rate of any illicit drug use, marijuana use, and cocaine use was unchanged in the general household population.

Q: So why should we be worried about drug use?

A: The Household Survey tends to reflect drug prevalence among so-called casual or intermittent drug users. These are drug users who reside in households who report drug use within thirty days prior to the survey (current drug use) or within the past year (occasional drug use). By definition it excludes: homeless people, prisoners, college students -- that is, hardcore drug users who are users that use at least weekly. These are the people who are involved in crime and violenceSome hardcore drug use is measured by the survey: the survey estimates there were about 500,000 hardcore cocaine users in 1993 in households (the 1994 Strategy estimates there are approximately 2.1 million chronic, hardcore users of cocaine).

The Household Survey does not provide reliable estimates of hardcore heroin users (the Strategy estimates there are 600,000 hardcore heroin users).

Q: What does the survey report with respect to youth?

A: The Survey reports that the rate of marijuana use among 12-17 year olds increased (not significantly) from 4.0 percent in 1992 to 4.9 percent in 1993. This increase, while not statistically significant, supports the findings from the 1993 Monitoring the Future Survey for marijuana use among 8th, 10th, and 12th graders.

- The Household Survey also reports that current use of alcohol for 12 to 17 year olds was up from 15.7 percent in 1992 to 18 percent in 1993.

Q: What does the survey mean for the President's National Drug Control Strategy?

A: The 1993 Household survey confirms the approach in the 1994 National Drug Control Strategy.

The Household Survey tends to measure drug use that occurs in the general drug using population. This drug use is referred to in the 1994 Strategy as casual drug use. Casual

drug use tends to be the target of our prevention programs.

However, some chronic, hardcore drug use is also measured by the Household Survey. Chronic, hardcore drug use is the target of our treatment efforts.

Regardless of the nature of drug use, casual and hardcore drug use can be affected by supply reduction efforts. Domestic law enforcement efforts, such as community policing, mitigate drug use by both user groups. Source country programs, interdiction, and other supply control efforts also contribute to the effort to reduce use by limiting illicit drug availability.

Q: How does the Strategy address drug use among youth?

A: The increase in drug use among our youth began in 1992, according to the "Monitoring the Future" Survey, and the Strategy has responded by undertaking three significant actions.

- The first action involves a concerted effort to expand our prevention efforts. The Administration's FY 1995 budget requests $191 million for expansion of two programs at the Department of Education: the Safe and Drug-Free Schools and Communities Program and the Safe Schools Program. This initiative targets children in grades K-12 to receive

comprehensive drug, alcohol, and violence prevention education.

- The second significant prevention action involves reinventing our underlying prevention program. The 1994 Strategy called for a panel of national scholars and experts in substance abuse prevention to review existing prevention efforts for possible areas of improvement. This panel will develop recommendations on how to improve and redirect where necessary existing national prevention efforts.

- The third significant action comes from HHS' National Structured Evaluation. This is a study of more than 2,000 prevention programs that will result in guidelines, benchmarks, and standards for effective prevention programs.

- The clear theme from the 1994 Strategy is that more needs to be done to expand and improve the delivery of prevention programs to our youth. Only then will we see more progress in reducing drug use by this critical population.

STATEMENT BY DR. LEE P. BROWN

DIRECTOR, OFFICE OF NATIONAL DRUG CONTROL POLICY

1993 NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE

July 20, 1994

I am glad to be here with Secretary Shalala to talk about the National Drug Control Strategy and the results of the National Household Survey on Drug Abuse.

The Household Survey confirms that the Clinton Administration's Drug Control Strategy and the President's budget are the right approach to the drug problem. We must focus on the chronic, hardcore drug user.

The Household Survey measures casual drug use because it focuses on people who live in households. By definition it excludes some populations: homeless people, prisoners, many college students, some portions of the military, and others living in institutional settings. Still the Household Survey estimates that there are about 500,000 hardcore cocaine users in 1993 in households. The Survey does not provide reliable estimates of hardcore heroin users. The President's 1994 National Drug Control Strategy estimates there are approximately

2.1 million chronic, hardcore users of cocaine and 600,000 hardcore heroin users.

The focus of the previous Administration's drug control strategy was to reduce casual use. The Household Survey was a prime indicator for the population which were casual users. Casual users are primarily white, middle class and educated. Therefore they are easier to reach with traditional prevention messages. The Household Survey shows the success in cutting casual use dramatically -- this was the easy first step.

Now we have the hard work ahead of us. The Survey shows that the rate of marijuana use among youth 12-17 years old has increased. (Chart 1) This is our future. The Household Survey and the recent Rand study--which shows hardcore cocaine users account for two-thirds of the consumption but are only 20 percent of the drug users--confirm that our Strategy and Budget are right, we must address hardcore drug use. (Chart 2)

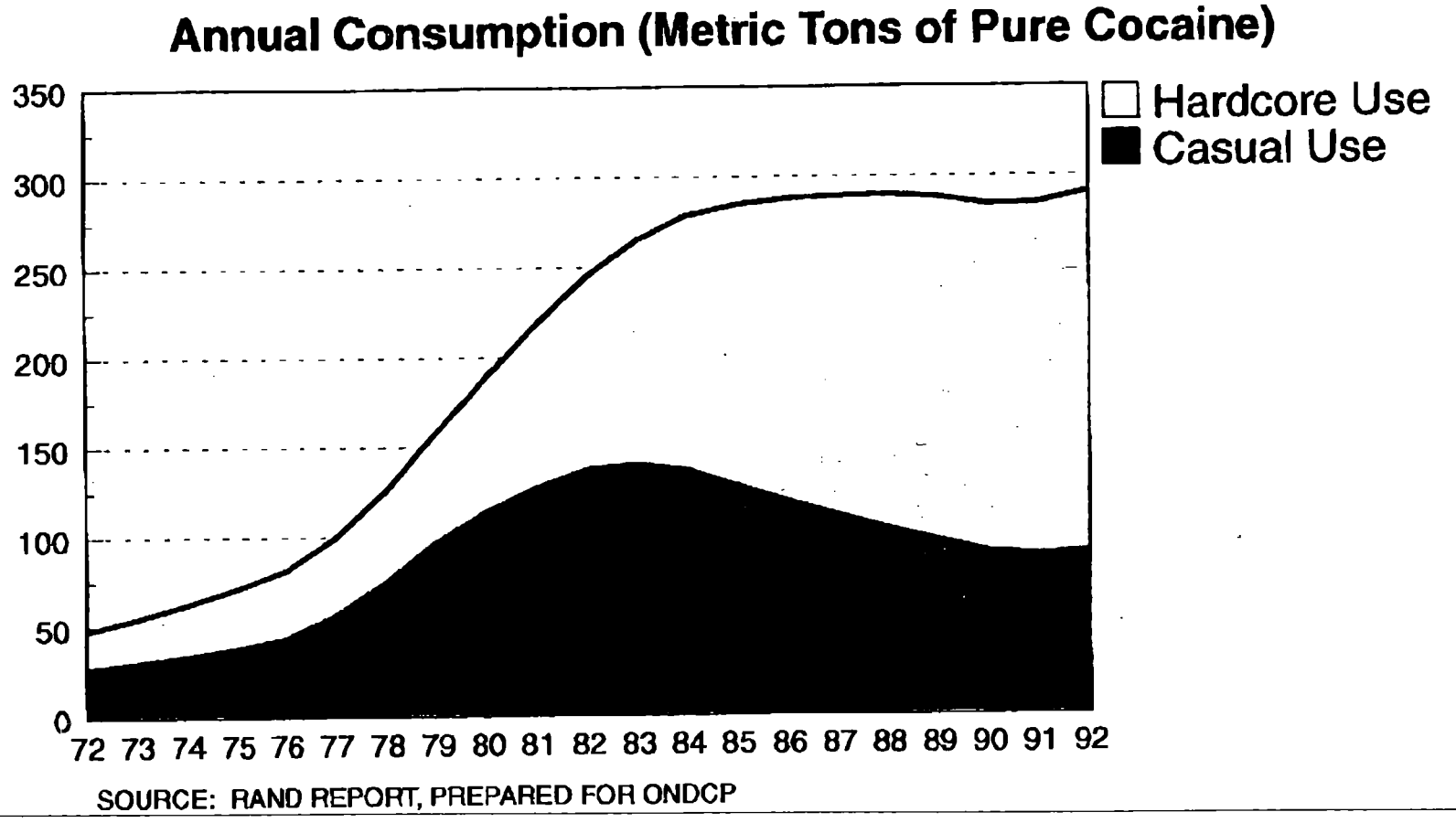
The focus of Clinton Administration National Drug Control Strategy is the hardcore drug user. This is the person most likely to commit crime and be involved in violence. This is the most difficult person to reach and treat. This is the person who we must reach to make a difference.

It is urgent that we heed the warnings embodied in the

trends of the Household Survey. We must pass the President's budget which requested $355 million to fund treatment for hardcore drug user programs. We must pass the Crime bill with all of the prevention programs, and we must pass health reform with access to treatment so that we can address this most difficult part of the drug and crime problem.

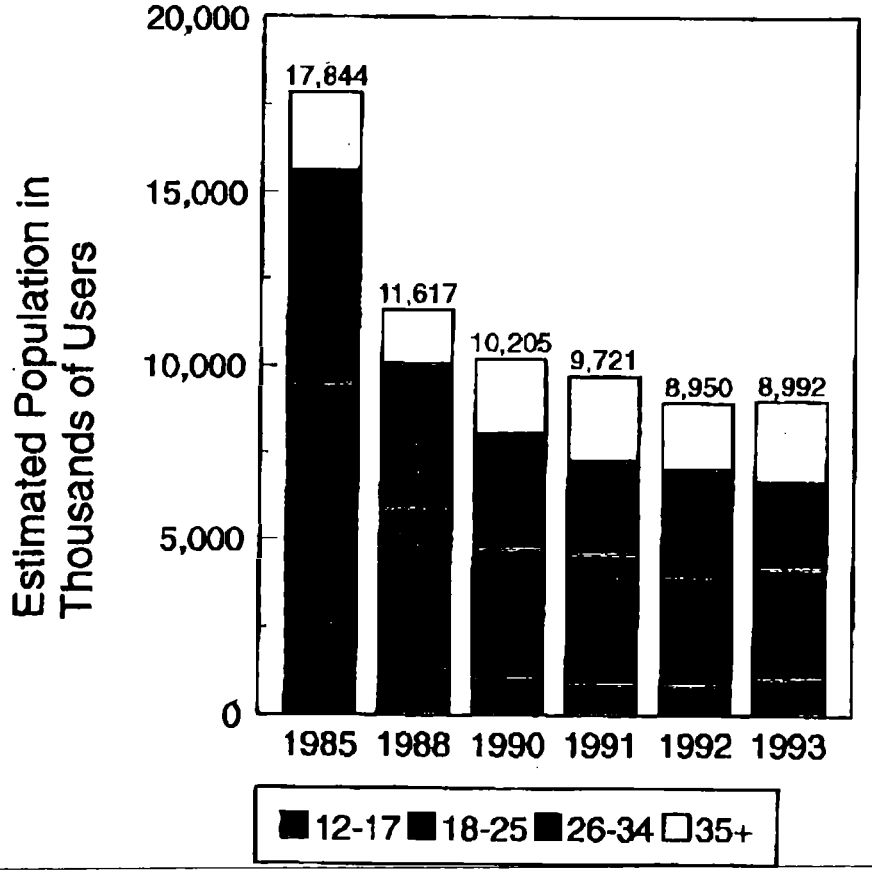
The problem of drugs will never be solved by the government acting alone. We all have a part to play. I urge business, religious organizations, and the media to join us in this fight against drug use. We owe it to ourselves to confront this issue head on; the quality of our lives is at stake.

Drug Consumption By Type of User



SOURCE: RAND REPORT, PREPARED FOR ONDCP

CURRENT (PAST MONTH) USE OF MARIJUANA BY AGE



- Marijuana use is up.
- This is confirmed by findings from the *Monitoring the Future Survey and data from PRIDE.*

Source:
Household Survey

ONDCP
PLANNING AND BUDGET

FOR RELEASE UPON DELIVERY
WEDNESDAY, JULY 20, 1994

*REMARKS BY

DONNA E. SHALALA

SECRETARY OF HEALTH AND HUMAN SERVICES

PRESS CONFERENCE ON THE 1993 NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE

HUBERT H. HUMPHREY BUILDING
WASHINGTON, D.C.

*THIS TEXT IS THE BASIS OF SECRETARY SHALALA'S ORAL REMARKS. IT SHOULD BE USED WITH THE UNDERSTANDING THAT SOME MATERIAL MAY BE ADDED OR OMITTED DURING PRESENTATION.

Good morning and thank you for coming.

Twenty years ago, President Nixon told the American people we had turned the corner on drug abuse in this country.

Well, we have turned many corners, and we're still not home.

That's the message we receive from the results of the 1993 National Household Survey on Drug Abuse.

The news from the survey is both good and bad. Good, because we as a nation have sustained the progress we've made in stemming Americans' use of marijuana, cocaine, and other illicit drugs.

And that progress has been steady -- in the past 14 years, the number of Americans using illicit drugs has been cut in half, from 24 million past-month users in 1979 to less than 12 million in 1993. Many of these were casual users.

But the survey also sounds a warning: since 1979, we've seen the number of current users drop, consistently, year after year. Between 1992 and 1993, we saw no such decrease.

This Administration recognizes that many of these remaining drug users are chronic hard core users, whose addictions are more severe, and who are more difficult to reach and more resistant to change.

The results of this survey point out an unavoidable fact: we must enhance and expand treatment options for so-called "chronic hard core" drug abusers if we are ever going to solve America's drug problem.

These half million Americans are casualties of the epidemic of cocaine use that began in the late 1970s and reached its peak in the mid-80s.

And with the increase in cocaine and other drugs came an upsurge in violence and other crime, community and family disintegration, and many other problems that are sadly still with us.

The President's National Drug Control Strategy contains three significant proposals to expand drug treatment: one is his $355 million special initiative to expand treatment for chronic hard core drug users.

A second is the crime bill -- which expands treatment in the criminal justice system.

And a third is health care reform -- which makes drug treatment available to all Americans, regardless of age, race, or income.

We must enact all three.

Because without these measures we will continue to waste human lives. It is a tragedy that in this country, instead of getting the help they need, thousands of people are languishing on waiting lists for treatment.

I know of a man who was so addicted and so in need of help that he literally knelt down and begged in tears for a bed in a residential treatment program. But he had to be turned away.

I know of a woman who wound up in an emergency room because she couldn't get treatment in a detox center for her severe withdrawal symptoms.

Today, we know more about addiction than ever before. We know it's a chronic, recurring disease.

But we also know it can be successfully treated. And that knowledge must be put to use so that chronic users can get well and have a chance to live normal lives -- and not be turned away.

I can't emphasize this strongly enough: Treatment Works.

Every dollar spent on drug treatment saves four to seven dollars in reduced costs to the public, and yields three dollars in increased productivity.

And that's money well spent.

But that's not the only message of the new Household Survey.

Even as we push to intervene with the entrenched drug user, we cannot relax our efforts to prevent today's young people from a similar fate.

This survey echoes a warning from an earlier HHS survey that showed increases in drug use in eighth, tenth, and twelfth graders.

Only half our children ages 12 to 17 think trying cocaine, PCP, or heroin might be a very risky venture.

We must remember -- today's hard core addict was once a younger person convinced that drugs weren't very dangerous.

And, finally, this survey confirms something we've all suspected for a long time: Illicit drug use, heavy drinking, and cigarette smoking go hand in hand for millions of Americans.

Twenty-six percent of heavy drinkers in 1993 were also illicit drug users.

And people who smoked cigarettes were three times more likely than non-smokers to also be heavy drinkers and/or illicit drug users.

Unemployment, too, is the common companion of these three public health threats.

11.6 percent of the adults without jobs in this survey were using illicit drugs, compared with 6.2 percent of those who were employed.

However, the survey also showed that 71 percent of current adult illicit drugs users were employed, making the work place a prime entry point for needed intervention.

This Household Survey tells us that it's time for universal action on drug abuse.

We have reached a new stage in the struggle to save lives -- and to save our future.

Everyone has a role to play.

We'll need this nation's physicians to start asking patients about their use of alcohol, tobacco, and illicit drugs.

We'll need our teachers to talk rationally and accurately about the risks of using drugs -- not for one week set aside each year, but at every opportunity.

We'll need our journalists to tell the <u>whole story</u> of drug abuse, not just the dealer involved in a drive-by shooting, but also the mother who has regained her family and gotten a job after treatment.

The President has shown an unwavering commitment to stemming drug abuse and its many tragic consequences.

Secretary of Education Riley and Attorney General Reno also have demonstrated their dedication to ending this plague.

And I will continue to apply the full force of my department to address this urgent problem.