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5-25-1971

## Floor Statement on Drug Problems

Edmund S. Muskie

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### Recommended Citation

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SPEECH BY SENATOR EDMUND S. MUSKIE  
ON DRUG PROBLEMS  
FOR DELIVERY ON SENATE FLOOR

TUESDAY, MAY 25, 1971

Mr. President, narcotics addiction in America has reached epidemic proportions. It affects all areas and segments of our society, the urban and the rural, the affluent and the poor, the young and the middle-aged. It leads to increasing crime, terrorizing our citizens. It has destroyed thousands of our youth and ruined the lives of hundreds of thousands more.

We need now an effective program to end this scourge. At a time when Washington, D. C. drug addicts steal between \$300 and \$500 million each year to maintain their habits, at a time when 1,000 babies are born addicted to heroin each year in New York because of their mothers' addiction -- certainly it is time to examine our efforts to deal with the problem, to determine why we have failed to stop this epidemic and to propose methods of ending this threat to our nation.

Review of present federal efforts to control drugs reveals them to be fragmented, underfunded, and too frequently poorly led. This is not a failure of any one Administration but a national failure.

One study has preliminarily estimated that of the \$134,066,000 the federal government will spend in fiscal 1971, over \$62,000,000 -- or very nearly one half -- will be spent on law enforcement. Increased funds for law enforcement are necessary, but law enforcement will never totally eliminate the supply of narcotics in this country. There are literally thousands of places on ships, on planes, and in cars to hide heroin and it is impossible to inspect all of these places, given the 65 million cars and trucks, 360,000 planes, and 156,000 ships which enter this country each year.

Moreover, once within this country, the large sums of money at stake -- thousands of dollars worth of pure heroin can be hidden in a lipstick container -- virtually guarantee the availability of individuals ready, willing, and able to take whatever risks necessary to supply the demand.

Remaining federal expenditures are directed towards three types of programs designed to reduce demand -- education, research, and treatment and rehabilitation.

Over \$7 million will be expended for education and prevention. Education is necessary, but once again, there is the question of what we are, in fact, achieving. What, if any, education programs actually work? Do some educational programs do more harm than good? These are the kinds of questions that money alone will not answer.

Nearly \$20 million will be spent by the federal government on medical and law enforcement research in fiscal 1971. Much of the medical research suffers from a lack of a sense of urgency. Apart from some truly dedicated individuals, our best scientific minds are not willing to undertake subsidized drug research. We need to know more about drugs themselves and their effects. We urgently need to discover better antagonist drugs. We must have accurate and precise information about the character of drug abusers and we need scientific evaluations of various treatment modalities. Yet, we have no over-all plan of research which takes into account what we already know, what we need to know, and who, if anyone, can be persuaded to undertake the required research.

Treatment and rehabilitation expenditures of \$43 million account for the remaining federal effort. Despite this relatively large expenditure, the number of addicts receiving treatment is miniscule when one considers that the National Institute of Mental Health estimates that there are 200 to 250 thousand addicts in this country.

Titles I and II of the Narcotic Addict Rehabilitation Act (NARA) of 1966 provide for the civil commitment of addicted federal offenders, either voluntarily or in lieu of prosecution. Under these two titles, the National Institute of Mental Health treated only 1,119 patients in fiscal 1970 -- at a cost of approximately \$10,000 per person in treatment per year!

Under Title II of the NARA, which provides for the treatment of addicts who have been sentenced to prison, 754 persons were committed for treatment between March 15, 1968, and July 31, 1970. Of these, only 494 -- or 65% -- were accepted. And as of July 31, 1970, 312 were still in treatment.

Under the amendments to the Community Mental Health Centers Act, NIMH funds a number of community treatment centers, and it will spend \$9.9 million for this purpose in fiscal 1971. As of June 30, 1970, 15 of these centers were operational and were treating only 3,165 patients.

The Veterans Administration has estimated that 25% of the addicts in this country are veterans. While all of these individuals are not eligible for VA benefits -- due to the previous practice of the Armed Services giving less than honorable discharges to drug abusers -- clearly the VA effort is inadequate. There are only five drug treatment units in the VA hospital system, with an average of 15 beds each. Current plans of the VA involve the establishment of an additional 12 units in fiscal 1972 and a further 13 units in fiscal 1973. Given the recent change in Department of Defense regulations to encourage the services to grant discharges to drug abusers which will not render them ineligible for VA benefits, and given the fact that a House subcommittee has indicated that as many as 10% of the men in Vietnam could be users of hard drugs, the VA effort must be expanded several-fold.

This brief description of the federal effort to solve the problem clearly indicates a three-fold need. First, there is an obvious and immediate need for coordination. A mere listing of the agencies involved in the drug abuse effort demonstrates this fact graphically. The Bureau of Narcotics and Dangerous Drugs (BNDD), the Bureau of Customs, and the Law Enforcement Assistance Administration (LEAA), are just three of the federal agencies engaged in law enforcement. The National Institute of Mental Health, the Office of Education, the Bureau of Narcotics and Dangerous Drugs, and the Department of Defense are involved in education and prevention. The Office of Economic Opportunity, the Social and Rehabilitation Service, the Department of Defense, the National Institute of Mental Health, and the Veterans Administration are involved in treatment and rehabilitation. Finally, the Law Enforcement Assistance Administration, the National Institute of Mental Health, and the Bureau of Narcotics and Dangerous Drugs are all involved in some form of research.

This scattershot, fragmented federal effort causes duplication, failure to do the things which should be done, an inordinate amount of "buck-passing," and an inefficient allocation of resources. The efforts of all these agencies must be coordinated, monitored, and woven into an effective and disciplined attack upon the problem.

In my discussion of the fragmented Federal anti-drug effort, I have not even touched upon the fragmentation and lack of coordination in the efforts to control drug abuse by State and local governments.

During the past few years, many State and local governments have made laudable beginnings toward coming to grips with the drug crisis. Several States have created drug abuse authorities. Local governments have instituted treatment and prevention programs. But the efforts of one State or one city are not coordinated with the efforts of a neighboring State or city, and the efforts of State and local governments are not coordinated with the efforts of the Federal Government.

Clearly, there is need for coordination of the anti-drug effort at and among all levels of government.

A second and related need is for comprehensive planning and leadership. At present, no one is in charge of designing a comprehensive, integrated program for dealing with drug abuse. Some Federal agencies are engaged in activities which logically fall within the competence of other parts of the federal government. Other agencies possess the expertise and authority to do more than they are now doing. Still others are not involved in combatting drug abuse, despite their obvious ability to do so. Finally all too often the federal government does not consider the impact of its programs on State and local programs. Some form of comprehensive planning is required to rectify this situation.



A third and final need is perhaps the most important. We must have leadership. We need someone to mobilize public opinion and direct it to constructive channels. We need someone who can convert the public anger, fear, anxiety, and passion which surround this issue and into a sense of urgency in the governmental bureaucracy. We need someone to assume responsibility and "take charge."

To meet this three-fold need, I am today introducing legislation entitled "The Intergovernmental Drug Abuse Control Coordination Act of 1971" to coordinate intergovernmental attack on drugs and to establish an Office of Drug Abuse Control within the Executive Office of the President. This legislation, is similar to legislation introduced in the House of Representatives by James H. Scheuer (D-N.Y.) and 60 of his colleagues, and is designed to provide the leadership, coordination, and planning we so urgently require.

The Office which would be established by the legislation would be specifically directed to coordinate Federal anti-drug efforts with those of State and local governments and to develop a multi-faceted, multi-disciplinary program involving research, education, domestic and foreign law enforcement, crop diversification programs abroad, and treatment and rehabilitation. The Office would possess its own budget and its own appropriation. The Director would report both to the President and to the Congress. He would possess the authority to employ experts required, either from the private sector or by loan from federal departments or agencies.

One of the most important features of the legislation empowers the Director to make recommendations to the President with respect to the expenditure of funds by federal departments or agencies for programs related to drug abuse control, including programs located in the Departments of Defense, Agriculture, Labor, Commerce, Justice, Treasury, Health, Education, and Welfare, Housing and Urban Development, and State. This budgetary power will guarantee the ability of the Director to influence the programs conducted by these departments and will thus insure his ability to develop a coordinated, comprehensive, and truly effective program.

Creation of this office would also allow us to make a much more substantial, coordinated, and imaginative effort at international control and even the elimination of drugs.

Narcotics addiction is not just an American problem. Indeed, most hard narcotics are produced abroad and smuggled into the United States. Opium and its derivatives are used by addicts all over the world, and in other areas more extensively per capita than in the United States. Opium and its derivatives are smoked, eaten, sniffed, or injected in Iran, Hong Kong, India, Burma, Laos, Thailand, West Germany, Singapore, and virtually every other country in the world.

As long as poppy is grown to supply addicts and users in these countries, some opium will be available and will be utilized to supply the demand for opiates in this country. Thus, if the United States is to control, if not eliminate narcotics addiction in this country, we must be prepared to participate, in a meaningful way, in an international effort to control opium production wherever it exists.

This fact was recognized as long ago as 1907 when, at the suggestion of President Theodore Roosevelt, the first international conference on opium was convened. Virtually all international efforts to control opiate addiction can be traced to that date and the treaty which resulted in 1912.

Today, the major international treaty on the subject is known as the Single Convention on Narcotic Drugs of 1961. This convention is primarily designed to control the production of opium for legitimate medicinal uses -- that is, for the production of the pain killer morphine and the antitussive codeine. The 1961 Single Convention is supervised by the International Narcotics Control Board which reports to the Economics and Social Council of the United Nations.

In one sense, the 1961 Single Convention must be considered a great success. Opium grown in India, Turkey, and the USSR for world-wide medicinal use does not enter the illicit market once it is collected by the governments concerned. International controls on the growth of opium and the manufacture of morphine and codeine are very strict and effective and virtually none of

these opiates can be said to "leak" out of legal channels into the illegal market.

The problem then is not with opium that is legitimately produced for medicinal purposes. Rather, the problem lies in opium which is produced illegally or which never finds its way into legal channels. This is the opium which finds its way into the hands of addicts all over the world.

Due to soil and climatic requirements and to the labor-intensive character of poppy culture, most of the world's supply of opium, legal and illegal, is produced within a zone extending from the Turkish Anatolian Plain to Yunnan Province in China.

Some experts have estimated that as much as 80% of the illegal heroin which reaches this country originates as opium produced in Turkey. This opium is produced by Turkish farmers in the same manner as opium which they produce to supply some 20% of the world's requirements for medicinal opiates. However, unlike the opium which is collected by the Turkish government and which thus enters legal channels, this opium is illegally diverted into the hands of the men who supply the illicit demand for narcotics in the United States, Iran and some other countries.

There are at least two ways of controlling the illegal production of opium in Turkey. The first is to guarantee, by some means, that all the opium that is grown in Turkey enters legal channels.

An initial step in this process involves a reduction in the number of provinces in which poppy culture is permitted. The Turkish government has, in fact, reduced the number of provinces from 21 in 1967 to seven in 1971. In June, the number of provinces is expected to be further reduced to four. By reducing the number of provinces and by confining the provinces which are permitted to grow poppy to those which are located away from Turkish borders, surveillance of poppy culture is facilitated and production is more easily controlled.

In addition, the Turkish government should develop an efficient collection procedure, including the offer of a price for opium to the farmers which is competitive with the price offered by the illegal market. The United States has recently announced that it will provide the Turkish government with an estimated \$5 million for this purpose.

In the final analysis, though, the total elimination of Turkish production is the only method of preventing Turkish opium from entering illegal channels. Thus, the solution to the problem of illegal Turkish production lies in economic development and crop substitution and the new Turkish government has indicated a willingness to embark upon such a policy.

The elimination of illegal Turkish production will not guarantee an end to the availability of illegal drugs.

Most of the world's supply of illegal opium is produced in the Far East, with other areas tending to rank in descending order of importance as one moves westward. Thus, Burma, Laos, and Thailand account for more than half of the estimated world illicit production of 1,250 to 1400 tons, with Burma alone accounting for nearly 30%. The Afghanistan-Pakistan region is in second place with an output on the order of 300 tons, and India is in third place with estimated production of 175 to 200 tons.

Dealers in illicit drugs have demonstrated a remarkable flexibility in replacing sources of supply that have been eliminated. For example, the cessation of opium production in Iran in 1955, coupled with the sharp reduction of illicit cultivation in South China upon the accession of the Communist government, led to the development of and a steady increase in production in Afghanistan - Pakistan, India, Turkey, as well as Burma, Laos and Thailand. The elimination of illegal production in Turkey will only lead to an increased importance of other areas as sources of supply. In fact, there are already indications that production in these areas is increasing in anticipation of production control in Turkey.

The elimination of opium production in Burma, Laos, Thailand and Afghanistan-Pakistan will no doubt prove even more difficult than elimination of Turkish production.



Most of the production in these countries, although illegal, occurs in remote areas over which the central government lacks enough administrative control to enforce the law.

Moreover, in most of these areas, opium production represents the only cash crop which can be grown and transported to market. For example, one expert has estimated that if one village in the Far East substituted potatoes for opium, it would occupy all the village's 52 horses for four months in order to net the potatoes to market -- a distance of 25 kilometers.

Obviously, an effort to eliminate production in these areas may require resources beyond those possessed by the countries involved. When the United Nations Commission on Narcotics Drugs -- an organ of the Economic and Social Council -- considered the problem, it noted "in virtually every case, the countries where (illicit opium) production took place were developing countries, and the areas within their territory where there was such narcotics cultivation were usually the more under-developed and poorer parts of the whole national territory. It must be recognized that the governments concerned, with their limited financial resources and many imperative claims of high national priority on their budget, required substantial outside assistance in order to create the conditions under which the population involved could adopt other means of livelihood than the cultivation of narcotic crops."

Any effort to eliminate illegal opium production in these areas will thus require funds for crop substitution programs, economic development, and law enforcement.

Moreover, an effort will be required to reduce the demands for these drugs. As long as there is a substantial addict population in the Far East, it will be profitable to produce opium, and as long as opium is produced, some narcotics will find their way into this country.

The United Nations has already recognized the need for a world-wide effort of the type which I have outlined. In October 1970, at the urging of our State Department, the United Nations established a Special Fund for Drug Abuse Control. This fund, run by international civil servants and financed by voluntary contributions from governmental and private sources, is designed to finance the development of a program for the elimination of the international traffic in illegal opium and its derivatives. The Director of the Fund has been appointed and the Secretary General has begun to solicit voluntary contributions.

The United States must make a substantial contribution, both alone and in concert with other countries and international institutions, to the effort to control illicit opium production.

Accordingly, I am today introducing legislation to establish a separate foreign aid program which will enable the United States to assume a leadership role in the international effort to control poppy culture. The bill which, again, is similar to a bill introduced in the House by Representative Scheuer, would enable the United States to undertake bi-lateral assistance programs and to make contributions to international organizations, such as the Special Fund, for the law enforcement assistance, research programs, treatment and rehabilitation centers, and crop substitution -- economic development programs which will be required in order to bring illicit opium production under control.

This bill is also similar to a title of a bill introduced by Senator Mondale. Senator Mondale's bill also proposes the denial of United States aid to countries producing illicit opium, but by introduction of this bill, I wish to call attention to the possibility of crop substitution as the long-term answer to the international drug problem. Of course, there are many unanswered questions about such a program, and it is my hope that the Congress will be able to consider in a series of hearings, not only crop substitution programs, but all of the United States' present and possible future international efforts in controlling drugs.

Mr. President, as I have noted, the problem of drug abuse is not solely an American problem. It affects countries all over the world, developed as well as under-developed.

Moreover, a solution to the problem will not be found through American actions alone. A true solution to the problem will be reached only through international cooperation involving the support of both producing and consuming countries.

Accordingly, hearings into the entire subject of international action to control drug abuse would be extremely helpful. One of the first areas explored would involve a consideration of proposals to amend the Single Convention on Narcotic Drugs of 1961.

The United States has recently proposed several amendments to the 1961 Single Convention designed to strengthen the treaty and the International Narcotics Control Board, the enforcement body established by the Convention. These proposals are designed to improve the treaty's coverage of the illegal traffic in opium. Congress could investigate these proposals, determine their adequacy, and estimate the possibilities of their adoption. Congress could also investigate the activities of the newly established United Nations Special Fund for Drug Abuse Control.

The United States has pledged a \$2 million contribution for the operation of the Fund during 1971, and recently, Ambassador Bush presented the Secretary General with a \$1 million letter of credit as our initial payment. This development is encouraging but far from satisfactory.

As a general rule of thumb, the United States contributes 35% of the budgets of international organizations. Other governments utilize this rule of thumb in determining their own contributions to international organizations. The small \$2 million pledge of the United States will thus result in an initial funding of the Special Fund at a level of approximately \$5 million.

Congress should investigate what level of U.S. funding is really necessary to make the Special Fund a truly effective weapon in the fight against drugs.

Congress also should investigate the activities of other international organizations which are or should be making a contribution to the fight against drug abuse.

Interpol, the international crime information center, could make a valuable contribution in the fight against international drug traffic. Yet, the organization has a budget of less than \$1 million and a senior member of the Swedish police board, Esbjorn Esbjornsson, has been quoted as saying, "Interpol has not changed its working methods to any appreciable extent since 1946. You could describe it as little more than a post office. It takes no initiatives of its own."

The Congress could investigate the activities of Interpol, estimate its potential, and attempt to determine why the United States is in arrears in its dues.

There are many other international organizations that the Congress could review to determine if the United States is doing all it can to combat drugs.

The Food and Agricultural Organization of the United Nations has approximately 2,300 agents in the field who possess substantial credibility in the underdeveloped countries and who possess great expertise in the field of crop substitution. The Congress could investigate the potential utility of the FAO in the part that crop substitution can play in eliminating illegal opium production and attempt to determine the reason for the fact that, as of 1970, FAO has no program or allocation for narcotics control.

The World Health Organization of the United Nations can and does perform a useful research in the field of drug control. In fact, during the calendar year of 1970, the organization planned to undertake the following activities:

- (1) to keep under review the situation in the use and abuse of dependence-producing drugs;
- (2) to foster the development of research on the epidemiology and prevention of drug dependence and the treatment of persons dependent on drugs;
- (3) to promote the development of treatment resources and programs for drug-dependent persons;



- (4) to evaluate the abuse liability of drugs and formulate decisions and recommendations on the classification of dangerous drugs under the relevant international treaties;
- (5) to advise the United Nations Commission on Narcotics Drugs and the International Narcotics Control Board, as well as governments, on all aspects of drug dependence and abuse;
- (6) to arrange technical assistance activities and seminars in the field of drug abuse, and, where appropriate, to do so in conjunction with corresponding activities of other international agencies.

For these purposes, the organization planned an expenditure of only \$47,200, a slight increase of \$1,525 over 1969.

The Congress could investigate the adequacy of the WHO program, determine the role it could play in an international program of drug abuse control, and the resources it should receive to accomplish its objectives.

The Committee on Social and Health Questions of the Consultative Assembly of the Council of Europe has considered the problem of drug abuse in the past. The Congress could investigate the activities of this committee and should attempt to determine its potential contribution to the problem of drug abuse control.

In mid-February, a United Nations Conference adopted a draft convention on psychotropic substances -- the hallucinogens, such as LSD and mescaline; the central nervous system stimulants ("pep pills"), and central nervous system depressants (sleeping pills of the barbiturate type and tranquilizers) which are being increasingly used and abused in many parts of the world. The United States played a leading role in this Conference, and our delegation signed the draft treaty.

The Congress could investigate the adequacy of this treaty, in light of the extensive and increasing abuse of these drugs.

Finally, the Congress should investigate all elements of an international program for the control of opium production. In addition to an exploration of the law enforcement, drug abuse prevention, research, and treatment and rehabilitation aspects of such a program, the Congress should investigate the feasibility of crop substitution as a means of inducing poppy farmers to switch to other cash crops. In particular, the Congress could investigate the successful Yugoslavian program of inducing poppy farmers to switch to melons and vegetables, the prospects of inducing Lebanese farmers to switch from the production of hashish to the production of sunflower seeds and oil, and the prospects of switching Pakistani and Indian farmers to varieties of Mexican or other wheat.

Mr. President, a mere enumeration of the subjects of possible investigation by the Congress clearly indicates the relatively long-term nature of any program to control opium production. But, we must start such a program now if we are to save the more than 250,000 addicts in the United States from a life of degradation and crime and our citizens from the ravages produced by the crimeogenic effects of addiction. Hopefully, such hearings as I have indicated will provide us with the sound factual basis upon which we can rapidly build an effective approach to this most terrible epidemic.

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