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Collection Name TURNER, CARLTON: FILES

Withdrawer

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File Folder [CHRON FILE 1986 I] (1)

FOIA

F06-0060/01

Box Number 23

POTTER

9

| Doc No | Doc Type | Document Description | No of Pages | Doc Date | Restrictions |
|---|----------|---|-------------|-----------|-----------------------|
| 1 | MEMO | FREDERICK RYAN TO DONALD REGAN RE PRIVATE SECTOR INVOLVEMENT IN DRUG INITIATIVE | 2 | 8/13/1986 | open 11/2/09 KU |
| THE ABOVE DOCUMENT IS PENDING REVIEW IN ACCORDANCE WITH E.O. 13233 | | | | | |

Freedom of Information Act - [5 U.S.C. 552(b)]

- B-1 National security classified information [(b)(1) of the FOIA]
- B-2 Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- B-3 Release would violate a Federal statute [(b)(3) of the FOIA]
- B-4 Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- B-6 Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- B-7 Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- B-8 Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

TV Reminders

Nothing is off the record.

Make every second count. Answer the question as soon as it is asked.

Be yourself. Don't suddenly dress differently, adapt a different style of speech, or get a new haircut.

Do not use jargon. Remember, TV - even Face the Nation - is watched by people with differing educational levels.

The Sunday morning talk shows often create Monday morning newspaper headlines. If you say something new, clarify something or express a strong opinion, look for it in the Washington Post and the NY Times.

If you cannot answer a question, say so. And quickly consider if you can use that moment to say what you have not yet said.

If the question is nasty or negative, answer it - then use the moment to continue on and say what you want to say on a more positive aspect.

Be prompt. This will allow time for makeup, sizing up the studio, etc.

Do not drink too much coffee before the program.

Smile, be conversational.

What to wear - medium shades, like grey, often are best for a suit. No patterns. Wear an interesting though not intrusive tie. A simple stripe is good. Very pale blue or off-white shirt is best. No stripes. No items that will reflect light, such as a collar pin.

And remember - you know more about the subject than the interviewer.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

August 1, 1986

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

*file -
AIDS*

NOTE TO CARLTON TURNER

Please find enclosed materials which you requested from NIDA via ADAMHA. I hope our response meets your needs. Please don't hesitate to call me if you need additional information.

Elaine

Elaine Johnson
at home: 301/744-0086 (Baltimore)

ACQUIRED IMMUNODEFICIENCY SYNDROME

Relationship Between Intravenous Drug Use and AIDS

The linkage between AIDS and intravenous drug use is clearly established. The human immunodeficiency virus (HIV), the virus that causes AIDS, is transmitted among intravenous drug users primarily through shared use of needles and other paraphernalia used in the injection of drugs.

Intravenous drug users constitute one of the two groups at highest risk for AIDS in the United States. Of the 22,000 cases of adult AIDS reported to date, individuals with a history of intravenous drug use comprise approximately 25 percent. Intravenous drug use is the only risk factor for 17 percent, and an additional 8 percent are homosexual or bisexual males who also admit to intravenous drug use.

There is considerable geographic variability in the extent to which AIDS cases are related to intravenous drug use. For example, over half of all AIDS patients in New Jersey are intravenous drug users, compared with 35 percent of AIDS cases in New York State and 12 percent of AIDS cases in California. Similarly, there is considerable variability in the extent to which intravenous drug users have been infected with the AIDS virus. Research funded by the National Institute on Drug Abuse (NIDA) found that over 50 percent of a sample of opiate addicts in treatment in New York City were positive for HIV. In a study conducted by the National Cancer Institute and NIDA in New Jersey, 56 percent of a sample of addicts in treatment within five miles of lower Manhattan/Jersey City were positive, compared with 2 percent of addicts living more than 100 miles from there. Also, NIDA-funded research in New Orleans found minimal levels of infection.

While rates of infection can be expected to vary geographically due to differences in needle-sharing practices, much of the geographic variation in AIDS and HIV prevalence appears to be related to historical factors--how recently the virus has been introduced into the communities. As more communities are exposed to the virus, rates of infection and disease among intravenous users can be expected to increase across the United States.

How Is AIDS Spread?

The AIDS virus is spread through the exchange of blood, semen, and, perhaps, breast milk. Sexual contact is the primary mode of transmission. HIV infection can be transmitted homosexually between men and heterosexually from men to women and from women to men. In addition to transmission through shared intravenous drug injection equipment, other major modes of transmission include transfusions with contaminated blood or blood products and perinatal infection from mother to child.

While spread of infection among drug users through needle-sharing is one public health issue, also of concern is the transmission of infection from intravenous drug users to the general population. Infected intravenous drug users can transmit AIDS to their sexual partners. Over 75% of the cases of heterosexually transmitted AIDS are sexual partners of intravenous drug users. This potential danger for transmission to the general population is heightened since many female intravenous users are prostitutes. In addition, AIDS can also be transmitted perinatally, and the majority of pediatric AIDS cases involve mothers who are intravenous drug users or whose heterosexual partners use drugs intravenously.

Drugs and Immunity

AIDS is an acquired immunodeficiency disease, and there is evidence linking marijuana, opiates, alcohol, and nitrites with immunity. Also, the rates of non-intravenous drug use (marijuana, alcohol, inhalants) are unusually high among AIDS patients. Whether the relationship between AIDS and the use of various substances is real or spurious is now unclear, and additional research is needed to clarify this issue. Both the possible role of drug use in increasing risk of infection with the AIDS virus and the possible role of drug use in the development of AIDS among infected individuals must be explored. Related to the second point is the possible role of drug use in determining risk for specific AIDS-related diseases. For example, several studies suggest that the inhalant butyl nitrite may be a cofactor in the development of Kaposi's Sarcoma, a cancer associated with AIDS. Whether or not there is a direct relationship between non-intravenous drug use and AIDS, there does appear to be an association between the action of psychoactive drugs as disinhibitors of a constellation of behaviors, including sexual practices, that are particularly dangerous to the individual and might foster the spread of the virus to others.

How can we channel intravenous drug users into treatment?

The importance of treatment to reducing intravenous drug use, and therefore the risk of AIDS transmission is strongly supported by the literature on treatment effectiveness. Three major conclusions emerge from these studies: (1) the majority of addicts in community-based treatment dramatically reduce their drug use after treatment, (2) for those addicts having legal status (charges, parole, probation), both retention in treatment and large reductions in narcotic use are associated with supervision, and (3) retention in treatment beyond 90 days leads to substantially better outcomes.

Many addicts are forced into treatment primarily through the criminal justice system, usually when there is the actual or potential threat of incarceration as an alternative. Examples of such "forcing" are civil commitment, as practiced under the civil commitment provisions of the Narcotic Addict Rehabilitation Act (NARA), diversion into community-based treatment programs through sentencing provisions, and pre-trial diversion

through organized programs--e.g., Treatment Alternative to Street Crime (TASC). Longer treatment tenure has also been shown to produce better treatment outcomes, with 90 days to be the apparent minimum period for substantial benefit from treatment. Thus, while short-term detoxification has some clear utility, clients should be encouraged to remain in treatment at least 90 days. Increasing retention should be considered. In methadone maintenance, for example, individualized dosage is likely to be more useful than a standardized low-dose which is common in many jurisdictions.

Intravenous drug users could be channeled into treatment by: enhancing linkages between probation/parole authorities and drug abuse treatment programs; using some variant of the civil commitment process; expanding treatment in correctional facilities; linking civil advantages to drug-free status; (e.g., fines, suspension of automobile registration) for possession of small quantities; and/or referring drug abusing employees or students into treatment.

2508m:8/1/86

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Attached is a copy of the Coolfont Planning Conference, which reviewed the current state of the AIDS epidemic, projected its course through 1991, and recommended action in a number of areas including prevention of intravenous drug use transmission. Also attached is a draft copy of a panel report which NIDA convened to advise the Institute on AIDS programmatic directions. In addition, a draft summary of NIDA's priorities is attached.

2508m:8/1/86



THE UNDER SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

20 NOV 1986

NOV 20 1986

3896

Carlton E. Turner, Ph.D.
Deputy Assistant to the President
for Drug Abuse Policy
The White House, Room 424
Old Executive Office Building
Washington, D.C. 20500

Dear Dr. Turner: *Carlton*

The President's Initiative for a Drug Free Federal Workforce will be the topic of an important meeting for senior level executives on **Monday, November 24, from 2:00-4:30 p.m.** The briefing will take place in the small auditorium, Lobby Level, of the Hubert H. Humphrey Building at 200 Independence Avenue, S.W. I am inviting you to attend this critical briefing. The agenda is enclosed.

An overview will be given on national scientific and public health issues relevant to drug abuse in the workplace as well as current trends on urine testing in both the public and private sector. The experience in development and implementation of one program in the Federal government will be discussed. Following the individual presentations, a panel discussion will enable the audience to raise questions and concerns relevant to their individual agencies.

This briefing will provide you with the most current information on this important issue. We need to be familiar with all steps in developing and implementing a fair and well-managed system for our employees while reaffirming the President's desire for a drug free workplace.

You are encouraged to bring your key staff to this briefing. Please confirm your availability to attend, as well as those members of your staff, by calling Michael Walsh, Ph.D., at 301-443-1263. Attendees should bring their government I.D. for admittance to the building.

I look forward to seeing you on November 24.

Sincerely,

Don M. Newman
Under Secretary

Enclosure

AGENDA

Senior Level Briefing on President's Drug Free Federal Workforce

November 24 - 2:00 - 4:30 p.m.

Auditorium, HHH Building

Opening Remarks

Don M. Newman
Under Secretary
Department of Health and Human Services

Session Chairman

Donald Ian Macdonald, M.D.
Administrator
Alcohol, Drug Abuse, and Mental Health Administration

Issues in Drug Testing

Robert E. Willette, Ph.D.
President, Quattro Associates

Strategies for Success

Admiral Paul Mulloy
Director, Quattro Associates

Panel Discussion

Mr. Don Newman
Donald Macdonald, M.D.
Charles Schuster, Ph.D.
Michael Walsh, Ph.D.
Robert Willette, Ph.D.
Admiral Paul Mulloy

MANATOS & MANATOS, INC.

1750 NEW YORK AVENUE, NORTHWEST

SUITE 210

WASHINGTON, D.C. 20006

(202) 393-7790

5 NOV 1986
3801

November 4, 1986

Dr. Turner,

Attached is the page that my son Nick would like to put in an envelope going to each high school in the country. They would like to send it soon while football season is still on and their credibility still high.

Sincerely,



Andrew E. Manatos

Why did they send to me-
FYI on to they use
Active

NATIONAL ASSOCIATION OF HIGH SCHOOL FOOTBALL CAPTAINS

President -- Nick Manatos, Walt Whitman High School, Bethesda, MD

Vice President -- Tom Gladden, New Trier High School, Winnetka, ILL

Secretary -- Kevin Eison, Lowell High School, San Francisco, CA

Purpose

To use the influence of high school football captains on their peers for beneficial purposes such as discouraging the use of drugs and also drunk driving.

1986-87 Program

To have football captains in all 25,873 high schools across the United States:

1. Present our anti-drug message to every student in their school over the public address system.
2. Present our anti-drug message to the youth in each area through their television in cooperation with our local broadcasters and the National Association of Broadcasters.

Also, our Association president assisted U.S. Congressman Mike Barnes in securing adequate co-sponsors for the enactment of a Congressional resolution in the U.S. House of Representatives which established the National Drunk and Drugged Driving Awareness Week for 1987.

1985-86 Program

Under the Montgomery County Football Captains Club, we had the football captains in all 24 Montgomery County, Maryland high schools:

1. Present our anti-drugged and drunk driving message to every student in the school over the public address system.
2. Present our anti-drugged and drunk driving message to the youth in our area through television in cooperation with some local broadcasters.

Also, our president assisted Congressman Mike Barnes to secure adequate co-sponsors to enact a Congressional resolution in the U.S. House of Representatives to establish the National Drunk and Drugged Driving Awareness Week for 1986.

PLEASE GIVE THIS IMPORTANT PAPER TO THE FOOTBALL CAPTAIN OF YOUR SCHOOL

Dear Captain:

High school football captains across the country are reading this important drug message to the students in their schools and the general public on television.

Please: (1) ask permission to read the following drug message over your school's public address system and (2) on November ____, wear your football jersey to the television station closest to your school as soon as possible at the end of the school day and ask to read the drug message into the camera. Some television stations will tape their high school football captains that day, others will arrange for a taping in the future. The National Association of Broadcasters will have notified all stations of your plans to visit them.

Sincerely,

NATIONAL ASSOCIATION OF HIGH SCHOOL FOOTBALL CAPTAINS

By

Nick Manatos, President
(Walt Whitman High School, Bethesda, MD)

Tom Gladden, Vice President
(New Trier High School, Winnetka, IL)

Kevin Eison, Secretary
(Lowell High School, San Francisco, CA)

FOOTBALL CAPTAIN'S 30-SECOND DRUG MESSAGE

"The high school football captains across the country have asked me to pass on to you some important new information that could literally save your life or your friend's life.

"Doctors have learned recently that the same amount of drugs that got you high last night can kill you tonight. Many people are not alive today because they thought only an "overdose" could kill them. Remember what got you high last night can kill you tonight.

"Thank you."



Note to Carlton

Attached is a background memo outlining our full proposal for the 8.3% solution outlined in Don Newman's memo to you. Do you think the 8.3% title is too close to the 7% Sherlock Holmes book theme?

Also, note wire story on the Bank of Boston.

Public
Private
Sector
Partners



September 8, 1986

MEMORANDUM

To : The Under Secretary

Thru: Stephanie-Lee Miller *SLM*
Assistant Secretary for Public AffairsFrom: Neil Romano *R*
Special Assistant to the SecretaryRe : The 8.3 Percent Solution -- A proposal to extend HHS' public information efforts on the adverse health effects associated with illegal drug use.

The use of illegal drugs is the leading social problem in America today. Every segment of society is affected by the harmful consequences of use. Hence, every segment of society must join the fight against drugs. Our goal, if we are to be successful, must be to attempt to reach every American.

Incumbent with this goal must be the realization that our success will depend on identifying the proper vehicle or vehicles to reach each and every citizen.

The most obtainable vehicle within our grasp is the multi-billion dollar field of advertising and, tangentially, the vast resources of those who purchase large blocks of advertising time.

This proposal is an attempt to engage both the advertising agencies and their largest clients in our information dissemination efforts to highlight the health risks associated with illegal drug use.

BACKGROUND

In early April the Office of the Secretary contacted Major League Baseball (MLB) to assist us in the "Cocaine: The Big Lie" campaign.

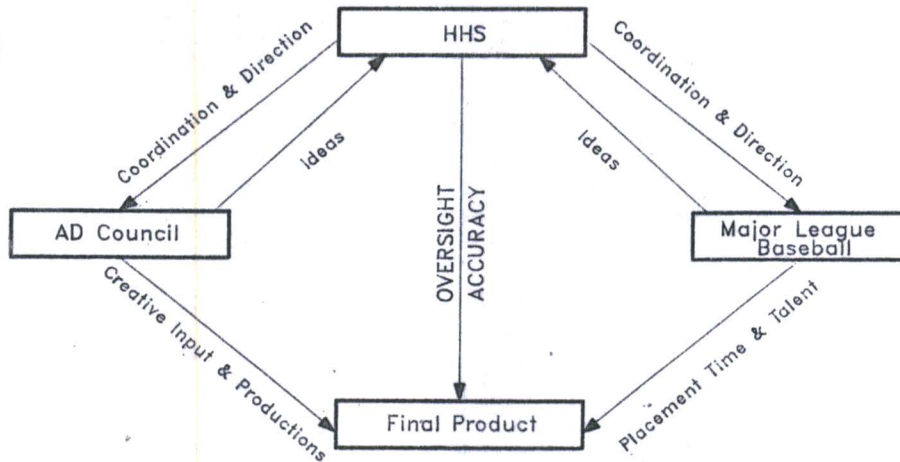
MLB was very responsive to our request, donating the equivalent of more than 25 percent of its national advertising time. This amounted to over \$2 million for the current year, and will grow to a projected \$10 million next year.

Our experience with Major League Baseball (MLB) demonstrates that solid planning, public/private sector cooperation and a strong determination by the Department to win the war against drugs can effectively initiate new avenues of private action.

All of this took place in a relatively short space of time.

The Department acted as a conduit for ideas and a focal point for coordination between MLB and our partner in the anti-cocaine campaign, the Ad Council. This relationship allowed us to monitor the progress of MLB's efforts and help guarantee an accurate and clear message for the general public.

Figure 1



PROPOSAL FOR THE 8.3 PERCENT SOLUTION

Using MLB as a model, this proposal would attempt to replicate this partnership with the top 100 advertisers in the country.

In the United States the top 100 advertisers are responsible for \$13,463,000,000 in advertising yearly (This figure reflects actual measured advertising payments for all mediums: print, cable, radio, television, and out-of-doors). It does not include unmeasured costs, such as direct mailing, product sampling and other such items. All such costs added together exceed \$22.5 billion for the top 100 advertisers.

Dollar Amount Spent in the Various Mediums (Electronic and Print) by the Top One Hundred Advertisers

Figure 2

| | | |
|---------------------|----|----------------|
| NEWSPAPERS _____ | \$ | 986,000,000 |
| MAGAZINES _____ | | 2,210,000,000 |
| NETWORK CABLE _____ | | 184,000,000 |
| SPOT T.V. _____ | | 2,695,000,000 |
| NETWORK T.V. _____ | | 6,462,000,000 |
| SPOT RADIO _____ | | 485,000,000 |
| OUTDOOR _____ | | 270,000,000 |
| FARM PUBS _____ | | 28,000,000 |
| TOTAL _____ | \$ | 13,463,000,000 |

Creative work is also not included in the measured costs.

This measured advertising permeates every segment of American society -- from Wall Street Executives to housewives in Colorado to farmers in Iowa. It crosses all strata of society -- children to adults; racial and religious groups; and all economic classes.

For example, the top advertiser, Proctor and Gamble makes extensive use of TV and magazine advertisements, reaching into every home, while Du Pont, farther down on the list, uses the bulk of its advertising budget for ads in professional journals in an attempt to target more educated and specialized buyers.

If these 100 companies were asked to designate the equivalent of one month's advertising space over the course of a year to help fight drugs, that figure would equal approximately \$1,117,429,000, or 8.3 percent of their combined measured yearly budgets (hence, the name of this proposal). To place this figure in perspective, 8.3 percent is more than the yearly measured advertising figure for McDonalds, Coca-Cola and Eastman Kodak combined.

Dollar Amount Targeted As A
Median Percentage Of Average
Gross Corporate Income

Dollar Amount Targeted As A
Percentage Of Advertisers
Expenditures 1/12 The Yearly
Advertising Budget or 8.3%

Figure 3

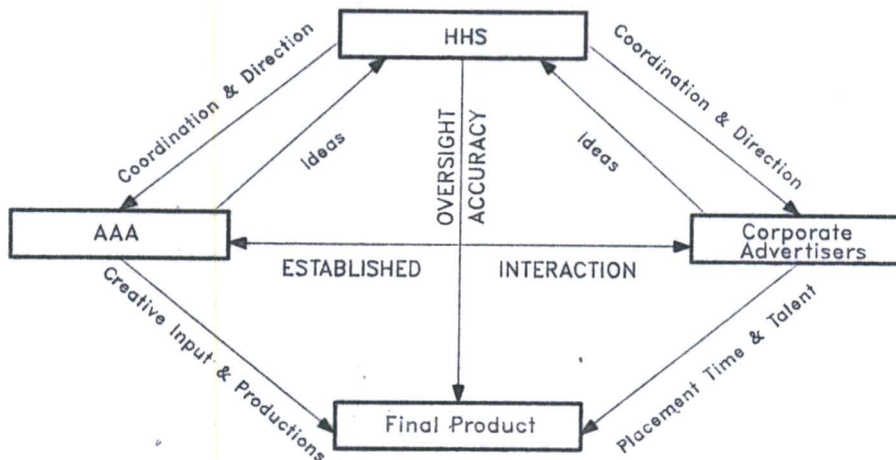


Parenthetically, the American Association of Advertising Agencies (AAAA) has already committed to a three year plan for donating \$500 million a year in free advertising for anti-drug spots. However, they have not decided on particular spots at this point in time, and they have asked the Department for direction. We could couple this program with the 8.3 Percent Solution.

Therefore, using the MLB model, the elements of this program would be for the Department to:

- o Ask the top 100 advertising corporations all over America to give one month's worth of advertising to drug education;
- o Ask the AAAA to provide creative input and material to companies that agree to our proposal, similar to that given by the Ad Council for the "Cocaine: The Big Lie" campaign; and NO
- o Establish an HHS liason to act as an adviser and consultant to help the advertisers and AAAA formulate clear, accurate messages and programs, and provide creative oversight. who

Figure 4



ADVANTAGES

There are several major advantages to this program.

First, each company would receive good public relations for participating in this campaign. Each company would be allowed the freedom to create the message in any form they like. They could prominently display their logos and company names, and they could end each segment with a corporate message, such as "An important message brought to you by Mattel Toys."

Second, the Department will tap into a credible and proven information network. In fact, this would be the most massive ad campaign in history. These companies would have the ability to spread out their contribution over the space of one year, in effect devoting more than a billion dollars to re-enforce extensive and clear messages against drugs.

Third, this would provide a clear focus for the projected contribution of \$500 million by the AAAA. Currently, they are looking for guidance in the creation of their messages and the proper way to disseminate those messages. This is a possible avenue. We could marry them to this effort, utilizing their close relationship with, and employment by, many of these same companies.

Fourth, this campaign will help highlight other important anti-drug messages and events. We can encourage companies to coordinate their messages with major events on television, in other mediums, or in the news. Obviously, this is in their best interest, and helps to spotlight programs and events which should be viewed by the American public.

Fifth, we will reach every segment of society with our anti-drug messages in a way no other Federal agency has ever been able to do.

Sixth, we will increase the private sector contribution levels for our war against drugs. In fact, any contribution level equals an aggregate success over the absence of this program. We do not have to get the complete 8.3 percent. Rather, any amount redirected toward drugs represents an aggregate advantage. Of course, 8.3 percent is only a goal. But it would serve as a standard which is more of a target figure than a requirement.

Seventh, this will cost the Department practically nothing, and it will not increase production or creative costs for the participating companies. They can use their same personnel, working almost every case with the same advertising firms, to develop commercial and advertising spots which carry the message of the company, and a message against drugs. We are not asking for the expenditure of new dollars.

Eighth, a tremendous talent pool would be available for this use. Many of these corporations have talent under contract which would be used in these spots. For instance, TEXACO has Bob Hope under contract, ATT has Cliff Robertson and General Foods has Bill Cosby. Usually, the talent pool is comprised of the biggest stars in America, and we could encourage their use in the spots developed against drugs because of the impact "stars" tend to have as role models.

Ninth, we are advantageously placed to administer this program. For example, the AAAA would be hard-pressed to ask a corporate client to donate time which might interfere with their previous arrangement. However, because we represent the Administration we can ask for such actions as a public service. Also, because we have our expertise, we can capably provide accurate and clear information about drug use and its eradication.

ACTION REQUIRED

As I mentioned above, three actions are required:

- o Contact the top 100 advertisers concerning participation in this program. One way to do this might be to arrange a media event with the White House to publicize this campaign. The President could convene a meeting of the heads of these 100 companies, asking them to come to the White House to solicit their support and participation. If this course is not acceptable we can contact them individually, as we did with MLB.
- o Set up a meeting or series of meetings with the AAAA to determine their willingness to go along with this plan. Because they have requested direction from us, and because this plan will give them an opportunity to work within familiar parameters they should be very open to our ideas. However, if the AAAA does not wish to comply, their members could be asked individually. Their membership equals the top twenty advertising agencies who handle 70 percent of the corporations we are targeting for participation. The complete membership of the AAAA represents virtually every organization that advertises in America.
- o Designate a liason within HHS to coordinate this program and work with the corporations and their ad companies to develop these messages. The Department would also work on the publicity for the program, releasing information in a timely manner to the press. We would also publicize the names of companies as they join in the effort. The press, in turn, would then be able to keep a score card of the companies that are serious about fighting drugs.

cc Donald Ian Macdonald

File Fred Ryan

THE WHITE HOUSE
WASHINGTON

Date: 9/2/86

TO: Jack Swahn

FROM: FREDERICK J. RYAN, JR.
Director
Presidential Appointments and
Scheduling

Can we discuss when
you have a moment?

Fred

Rec. 9/2/86

8/24

TO: Fred

FROM: DONALD T. REGAN
CHIEF OF STAFF

Try to work this idea
in with the work being
done by Jack Swaha
and Carlton Turner -
discuss with them
I like a p time #1

DJR

THE WHITE HOUSE

WASHINGTON

August 13, 1986

MEMORANDUM FOR: DONALD T. REGAN
FROM: FREDERICK J. RYAN, JR. *FJR*
SUBJECT: Private Sector Involvement in Drug Initiative

As the press and public await the unveiling of the President's Drug Initiative, the big question appears to be that of cost. His dedication to the issue and perceived likelihood of success are going to be judged in part by the eventual "price tag" of the Drug Initiative.

We must shift the debate from the cost that the federal government is willing to pay, to an emphasis on the role that all Americans must play. To do this, I feel that a very strong element in the program should be an organized private sector effort. I suggest the following two options:

OPTION I

Presidential Commission for a Drug Free America

The President could appoint a group of approximately twenty-five high visibility leaders from a cross section of the Private Sector. He would challenge this commission with leading the private sector in creating a Drug Free America.

The following are potential members of the Commission (although there may not be the specific individuals we want to pursue, they are the types I am suggesting):

| | |
|-------------------------------|---|
| <u>Chairman</u> | -James Burke |
| <u>Media</u> | -The heads of all four networks -Publishers of the <u>New York Times</u> , <u>Washington Post</u> , <u>L.A. Times</u> |
| <u>Advertising Industry</u> | -Ed Ney, Harold Burson |
| <u>Business</u> | -David Rockefeller, etc -John Phelan |
| <u>Entertainment Industry</u> | -Steven Spielberg -Jack Valenti |
| <u>Education</u> | -Derek Bok -Principal from a "Drug Free School" |

Youth

-High school and college associations

Labor

-Lane Kirkland

Sports

-Peter Ueberroth

-Pete Rozelle (NFL)

-David Stern (NBA)

Hoc key?

By establishing this private sector group, the President would be able to emphasize the critical role that all sectors of our society must play in fighting drug abuse.

Additionally, by appointing specific individuals to this commission, we would be able to create credible "surrogates" who could be speaking on the drug initiative at times and places where the President's schedule would not permit.

And, by creating this group, we would have an entity that could be called upon to meet at various locations across the country as forums for Presidential events.

The President could call upon each Governor to follow his example by establishing a similar commission at the state level (i.e. Commission for a Drug Free Ohio) and each Mayor to establish a commission at the local level (i.e. Commission for a Drug Free Cleveland).

P-24-86

DK Approve

_____ Disapprove

OPTION II

Drug Initiative Committee of the President's Board of Advisors on Private Sector Initiatives

Our office works very closely with the Presidential Board of Advisors on Private Sector Initiatives headed by John Phelan. This influential group of twenty-five business and civic leaders from across the country has been involved in a wide variety of issues ranging from education to low income housing.

If you prefer not to establish a separate commission for a Drug Free America, we could establish a separate committee of the PSI Board of Advisors to focus on private sector involvement in the Drug Initiative. It could perform the same functions mentioned above, but obviously without the high visibility of a separate commission.

_____ Approve

_____ Disapprove