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THE WHITE HOUSE

WASHINGTON

May 2, 1985

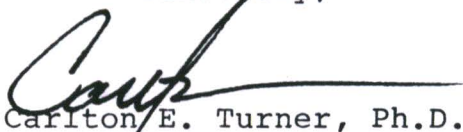
Dear Olivia:

Thank you for your note and for stopping by the office during your recent trip to Washington. I enjoyed seeing you again.

Please keep in touch and let me know of your progress. If there is any way I, or this office, may be of assistance do not hesitate to call.

Give my regards to all.

Sincerely,


Carlton E. Turner, Ph.D.
Deputy Assistant to the President
for Drug Abuse Policy

Mrs. Olivia Gilliam
The American Council for
Drug Education
136 East 64th Street
New York, NY 10021

the American Council for Drug Education

Washington, D.C. Office
6193 Executive Boulevard
Rockville, Maryland 20852
301.984.5700

New York City Office
136 East 64th Street
New York, New York 10021
212.758.8060

April 25, 1985

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Dear Carlton,

Thanks so much for taking the time to meet with me last week to discuss the American Council for Drug Education and how we might more effectively coordinate our efforts with the outstanding work you are doing. I appreciate your suggestions for additions to our Scientific Advisory Board and possible spokespersons, and am especially grateful for your candor concerning problems ACDE may have caused you. While I would like to believe that the latter were inadvertent or the result of misunderstanding, I of course understand and regret the difficulties they did or could have created. What happened in the past is past, however; now I hope it will be possible to move forward on a renewed cooperative basis with you and the White House. With Bob DuPont's departure as our president, the Council is taking a fresh look at its programs and future direction, and your counsel in this regard would be most helpful.

I have relayed to Marion and others your comments on projects we are about to launch, as well as the areas in which you feel we are well equipped to make a contribution. As I discussed, we think it is important to create a basic curriculum for schools -- culling the best from those that exist as well as introducing new ideas -- together with components for teachers' training and policy guidelines for school administrators, all of which could be adapted to local needs. Richard Hawley has agreed to be the key "educator" working with us on the project and is most enthusiastic about its potential. The idea of having parents and PTA groups introduce the program is a grand one (one

to which we had not given enough thought), since they have the clout and usually the insight to convince teachers and administrators of such a program's merit.

The need you mentioned of reaching the 25-to-40-year-old white collar workers who are involved in marijuana and cocaine use and sales appeals to us a great deal. We think it best to address this problem by working through various industries, corporations and unions, and would like to discuss with you at some future date concrete programs and materials we could develop for this group.

I shall take the liberty of keeping you posted on these and other projects and also hope you will consider ways in which we might enhance your own efforts, especially since ACDE is a principal resource for parents, teachers, and professionals. We're all in this together and can only benefit from working in harmony and with mutual support -- the Pharmacist's Guide being a good case in point.

My thanks once again for your help and for clarifying our otherwise puzzling status. I enjoyed, too, that delicious lunch -- what a treat to be introduced to the White House mess! It was good to see you and get caught up on your news. I don't know how you keep your cool with all the pressures you are under but am sure that you find your work gratifying if tough!

Marion joins me in sending our best regards.

Sincerely,

A handwritten signature in cursive script, appearing to read "Olivia".

Olivia L. Gilliam
OLG/nh

The American
Council for
Drug Education

Volume 10/84

Issue 2

The Drug Educator

United Services Life Companies Underwrites DoD Program 'Adopts' D.C. High Schools

United Services Life Companies President Leslie P. Schultz recently announced that his organization will support two new Council prevention initiatives: the provision of drug information to the Department of Defense Dependent School System and ADOPT-A-SCHOOL.

The first vitally important program being sponsored by United Services Life Companies concerns the Department of Defense (DoD) Dependent Schools.

School system officials expressed an urgent need for materials in the elementary and junior high schools in the five DoD regions: Atlantic, Germany, Mediterranean, Pacific and Panama. United Services Life responded by providing 20 copies of the Council's film *Wasted* and 12 copies of our film *Danger Ahead: Marijuana On The Road* as well as 60 library packs and *A School Answers Back: Responding To Student Drug Use* to the regional DoD offices. In turn, the regional offices will circulate the materials to the schools in their area.

continued on page 2

Metropolitan Life Foundation Sponsors Drug Prevention Program For New York City Public Schools

Wasted: A True Story, the American Council for Drug Education's award-winning film, is the centerpiece of an ambitious new drug prevention program for New York City's Public Schools.

Sponsored by the Metropolitan Life Foundation, this school-based program will be launched in October, 1984 in the 5th, 6th, 7th, 8th and 9th grades in all 800 elementary and junior high schools in the New York City School System.

Students will view *Wasted* in the classroom, discuss it under the direction of their teachers, and take home a letter to their parents describing the film and its major themes and encouraging families to discuss it. In addition, each classroom will receive a drug prevention poster and each student will receive a smaller-sized version of the same poster to reinforce the messages conveyed in the film.

The Early Childhood Drug Prevention Program is the result of a collaborative effort between the Council and the Metropolitan Life Foundation. Under the leadership of Sibyl Jacobson, President of the Foundation, the project was conceived by Gloria Blewett, Program Associate at the Foundation, and Ellen Edenburn,

the Council's Director of Development.

In announcing the project, Sibyl Jacobson said, "We are all excited about this project and believe there is potential for replicability in cities across the country." Evaluation cards will be completed in every class where the program is used so that assessment data will be available both for planning purposes and for consideration by other school systems.

REMINDER

Summer is fast approaching. Members of the Morningside, Pennsylvania "Chemical People Task Force" remind parents that parks and recreation facilities can become convenient drug use sites. They suggest we contact our Park and Recreation Directors, educate them about the drug problem, and ask them to pass the word to their staffs.

Parents and other concerned citizens should not hesitate to talk to playground supervisors directly about the drug issue—there is no vacation for drug prevention.

Science Summaries

- A 1983 University of Michigan School of Public Health Study that polled 15 State Drug Abuse Agency Directors and 56 treatment program administrators found the following:

...there have been major changes in drug abuse clients. They report that today's clients are considerably younger and, indeed, more frequently include adolescents and are more likely to be women. All see clients as less likely to be employed (perhaps in part as a function of reduced age). Both groups are almost unanimous in believing that multiple drug use has increased among admissions, and both place substantial emphasis on alcohol and marijuana among current treatment admissions. Both believe that today's drug abuse clients are more "disturbed" in their psychological functioning than were the clients 10 years ago. (National Institute On Drug Abuse Clinical Research Notes 2/84).

- New York Times Health columnist Jane Brody reports that teenagers who contemplate suicide "...may be unable to communicate with their parents, they may have recently suffered a loss, developed problems at school or on the job or become involved with drugs or alcohol... These substances... increase depression and enhance suicidal tendencies." (*Times* 3/7/84).

- The 1983 holiday season was the safest on the Nation's highways in more than 30 years reports *ADAMHA News* (3/84). "According to the National Safety Council, the three-day Christmas holiday weekend death toll was 234, the lowest since 1947 and 82 percent lower than 1982."

- Two eagerly awaited marijuana studies are now being launched by the National Institute On Drug Abuse. The first, to be conducted by the Department of Energy's Oak Ridge National Laboratory in conjunction with the Institute, will provide the information needed to assess the risks of exposure to marijuana smoke. The second study seeks to provide conclusive evidence whether exposure to THC and marijuana over a one-year period produces residual brain damage and whether it is accompanied by behavioral alterations. This effort will be performed by the Food and Drug Administration's National Center for Toxicological Research.

United Services Life Grant from page 1

The films will be used as part of each school's health curriculum and also will be shown at parent meetings and other base-sponsored activities. A discussion guide accompanies each film so that teachers and others can use it to promote discussion and respond to questions. The library packs (consisting of a collection of the Council's monographs) and *A School Answers Back* are being provided to help the Dependent Schools sustain and follow-up on the interest sparked by the films.

ADOPT-A-SCHOOL as its name implies is an information program that links a community sponsor (e.g. a business, civic association, service organization, etc.) with a specific middle school/junior high school or senior high school.

Many schools lack scientifically credible information on drugs that also can be understood by and are meaningful to children. ADOPT-A-SCHOOL eliminates that deficiency by providing age-appropriate materials to a school or schools selected by a particular community sponsor.

United Services Life is participating in the project by providing ADOPT-A-SCHOOL packets to all 24 public senior high schools in the District of Columbia. The individual Senior high package, which has been approved by D.C. School Superintendent Floretta McKenzie, consists of the Council's film "*Danger Ahead: Marijuana On the Road*" and 10 film discussion guides; two school library kits; two *School Answers Back*; two drug digest libraries; and 15 copies of *Marijuana and You: Myth and Fact*. Materials in the high school package are suitable for students, teachers, and guidance counselors.

Ellen Edenburn Joins Staff In Development Role

Ellen E. Edenburn recently joined the Council's staff in the newly created position of Director of Development. In this capacity, Ms. Edenburn is responsible for increasing public sector participation in the Council's activities. The Early Childhood Drug Prevention Program that Ms. Edenburn developed in conjunction with the Metropolitan Life Foundation (see page 1) is an example of the kinds of cooperative projects she hopes to encourage.

A graduate of Fordham University, Ms. Edenburn was formerly National Membership Director of the American Psychological Association and Executive Director of Women In Crisis, Inc. Ellen Edenburn may be contacted at the American Council's New York Office (212/758-8060).

Advisory Board President Nominated for Gov't. Post

Donald Ian Macdonald, M.D., President of the American Council's Scientific Advisory Board, has been nominated to assume leadership of the Alcohol, Drug Abuse and Mental Health Administration within the U.S. Department of Health and Human Services.

Dr. Macdonald is an expert on adolescent drug use who has an in-

depth understanding of its multiple effects on all aspects of a child's life.

Dr. Macdonald's sensitivity, coupled with his ability to see relationships between substance abuse and other mental health problems, promises to facilitate cooperation among all the disciplines that study and treat human behavior. We wish him well.

International Association of Parent Groups Established

As an outgrowth of the recent PRIDE conference, a provisional one-year international association of private sector, parent, family, and voluntary organizations active against drug use around the world was formed.

At a special meeting chaired by American Council Executive Director Lee Dogoloff several initiatives were set in motion. A newsletter with international information and announcements, and an inventory of resources will be prepared to update association participants on each others activities and to foster cooperation. Mr. Jonas Hartelius of the Swedish Carnegie Institute will make his organization's resources available to coordinate these efforts.

Otto Moulton of the Committees of Correspondence in Boston, Massachusetts will serve as the conduit for newsletters from American parent groups to the international organization.

John Keller, Narcotics Coordinator of the U.S. Information Agency, offered the resources of USIA posts to publicize the growing international movement of private sector groups against drug abuse and to ask these posts to encourage such groups in their country to join the movement.

Progress on all these fronts will be assessed in September, 1984 with a final decision on whether to formalize the association expected in the Spring of 1985.

Pharmacists Against Drug Abuse Launched Nationwide

Pharmacists Against Drug Abuse (PADA) is an innovative public service campaign designed to educate the public on the dangers of such commonly abused *gateway* drugs as alcohol, marijuana and cocaine through a previously untapped resource—the local pharmacist.

The American Council for Drug Education prepared the pharmacists' guidebook and public education materials that are the core of the PADA program.

The PADA program positions 120,000 pharmacists across the country as key resources for information, as speakers for school and community groups, and as advisors on the subject of drug abuse.

PADA is sponsored by the Pharmacists Against Drug Abuse Foundation, a foundation created by McNeil Pharmaceutical and the Johnson & Johnson Family of Companies specifically for the program. In addition to endorsements from First Lady Nancy Reagan, PADA has the ongoing support of the White House Drug Abuse Policy office, ACTION, the Federal Volunteer Agency, PRIDE, the National Federation of Parents for Drug-Free Youth, and the American Council.

PADA had been pilot-tested in six New England states with close to 3,000 pharmacists participating.

Pharmacists across the country, through their state pharmaceutical associations, are now receiving PADA materials. A free information brochure *The Kinds of Drugs Kids Are Getting Into* available for distribution to the public is in the package, as well as posters, wall banners, decals and pocket-savers identifying the pharmacy as *This is the Place Where Parents Can Learn About Drug Abuse*. The pharmacists guidebook, *Resources for Community Action*, informs pharmacists of updated facts on street drugs and alcohol abuse, as well as how to effectively market themselves as spokespersons for community, school and parent groups.

In addition to the pharmacy components, a comprehensive television, radio and print public service program, featuring PADA spokesperson Michael Landon, will be made available to all major broadcast and print media outlets nationwide. This will direct the public to their pharmacies for drug abuse information and help ensure the thorough distribution of the PADA message.

Zero Tolerance: A Message From The Council's President

The American Council for Drug Education has focused, since we began in 1979, on the negative health effects of marijuana because that so-called *harmless* drug was the gateway into all illegal drug use. More recently we have targeted a new gateway drug, cocaine, because it, too, is widely and wrongly thought of as *harmless*. The careful, scientifically solid case the American Council has helped build against the use of these two drugs has met with initial success as the trends for drug use have leveled off or even declined slightly in recent years. There is excellent evidence that the reason for this decline is the increasingly widespread awareness of the true dangers posed by these drugs. The drug epidemic still rages, however, with an estimated one million additional American families expected to be jolted by serious drug problems in 1984.

The Council's strategy for drug abuse prevention has now focused on the non-user of drugs on the assumption that the drug-free members of our society are not only more likely to correctly perceive the realities of drug problems, but that their effective action is most likely to end the American drug abuse epidemic which is now nearly two decades old. For this strategy to succeed there must be a strong commitment in families, in schools, and in the workplace. While the families are the first, and best, line of defense against drug problems, the Council's convinced that the greatest promise for the next few years lies in the active support of schools and workplace, sites where Americans of all ages spend a great deal of their time and where the costs of drug dependence extend, clearly, beyond the user to the non-user. For example, drug-using students not only do not learn but they disrupt the learning experience for all students. Similarly, drug-using employees not only harm themselves, but they are less productive, use

more medical care, use more sick leave, and create safety hazards which affect all employees. Drug users in schools and the workplace also spread their drug-using habits to non-users. More than 100 million Americans have paying jobs and more than 60 million Americans are in school.

The biggest barrier today to clear thinking about the best course of action for schools and the workplace is the confusion over *use* and *abuse* and the insistence on the criterion for treatment and punishment being *impairment*. Using this approach, the schools and the workplace can only intervene once there is unmistakable and terrible evidence of full-blown drug dependence as demonstrated by gross performance failures. This is far too late in the drug dependence process to intervene.

There is an effective alternative: Establish a policy of ZERO TOLERANCE. This means that when a student comes to school and when a worker shows up to work, he or she must have no intoxicating drug or drug-product in his body, period. Furthermore, ZERO TOLERANCE means that schools and the workplace should establish mechanisms to identify drug use.

This is a rude shock to many in our society today since they have become accustomed to a far more accepting attitude toward drug use at school and at work.

The experience with highway safety is educational. In the U.S. we have adopted a legal standard for *intoxication* or *impairment* which correlates a certain Blood Alcohol Concentration (BAC) with punishment. The level selected most often is 0.10. To achieve this BAC requires having half a dozen drinks within a two hour period for many drinkers. The facts are that driving is impaired at *any* level of alcohol consumption, and that the impairment rises as the

BAC rises. The only truly effective policy for the highways is to establish the principle that driving and drinking are incompatible. This is the approach now widely followed in Europe.

To establish such a principle in schools and the workplace will require a wrenching readjustment to our thinking about drug dependence. We will have to face the reality of the negative effects of drug use in schools and in the workplace and we will have to work together to achieve the goal of making our schools and our worksites, as well as our highways, drug-free.

As we move toward ZERO TOLERANCE in the workplace, I expect the first employers to take action to be the most vulnerable to drug-caused problems and the most vulnerable to public concern for these problems. Air traffic control and nuclear power plants are good examples. Schools will be more likely to take up this goal if they have a tradition of concern for student health-related behaviors and a concern for good values. Schools which have a more casual attitude toward student behavior will be slower to become involved. Finally, as has been the case in dealing with alcohol-caused problems, personal experiences of high-level individuals can be expected to have a big effect. When the company president's son dies of an overdose or the principal's daughter is lost to drugs, action is more likely.

This is the future of drug abuse prevention. It is a future the Council is committed to achieving, using the same techniques we have used for the last five years: a solid foundation in scientific facts organized to end the drug epidemic. In working toward this goal, the American Council's new priorities are in the areas of the schools and the workplace. We have major new initiatives for 1984 in both areas. Bolstered by growing support for our ideas, once considered shocking, we are looking forward to the challenges ahead.

This column appeared originally in the newsletter printed by DREAM (Drug Research and Education Association in Mississippi). This poignant and powerful account was written by June M. Milam, Director of DREAM. We are sharing it with our readership as a reminder of why we must succeed with our drug abuse prevention efforts.

A CHILD HAS DIED

A 17 year old girl I didn't even know had died and I share her family's grief. But even worse, in some strange and twisted way I feel the responsibility for her death. Yet, I, alone, am not responsible for her death. There are approximately 300 other parents who must also assume this burden of responsibility—Responsibility born of neglect—Responsibility born of indecision—Responsibility born of giving in to pressure.

It was to be "the party of parties". It was billed as "Ye Old Christmas Boog". The idea was to "rally in the Christmas spirit"—true "Baccanian Revelry." Starting as soon as school was out at 12:30 p.m. on Friday, a 24 hour bash was to begin—Forty miles up the Natchez Trace kids from all Jackson area schools sped. How could anyone miss "the party?!" *Everyone* was going to be there. For \$3.00 per person you could get whatever you wanted—the chance to be seen; the chance to dance with someone special; the opportunity to feel included; and for many, the opportunity to get as drunk as you possibly could. Kegs of beer and cases of liquor produced staggering, vomiting kids. But weren't they "having fun!"

By 1:00 a.m. the fun was all over for one promising young girl. Her body lay crushed in the grass where she was thrown from the car in which she was riding. The fun was all over for the 16 year old driver of

the car who was also injured. There was no "Christmas spirit" in the homes of those two girls. Hopefully, there was diminished "Christmas spirit" in the homes of the boys who put together this wonderful bash. I know there was diminished "Christmas spirit" in my home as a result of this tragedy.

Why do I feel responsible? I allowed my daughter to attend that party for an hour and a half. Never mind all the reasons why I felt compelled to let her go even if only for so short a period of time. Never mind that I consulted with the parents of her friends and we collectively came to this conclusion. Never mind that I had a long and mature talk with my daughter and her friends concerning this particular party. Never mind that she obeyed the rules and was even glad that I had asked her to be in earlier than her normal curfew. Never mind that she learned that those "kinds" of parties weren't really that much fun. My husband and I were just plain lucky. It could have been my daughter that was killed that night.

The responsibility for this child's death falls clearly on my shoulders and the shoulders of every other parent for allowing such a party to occur.

We may lament, "Parties like this have been going on for a long time"—"we'd be naive to think that we could stop them!" But we can. Parties like this become much less glamorous if very few people can attend. Parents of those children giving them would be very reluctant to allow it if they realized that they were going to be sued should something like this child's death occur. We owe it to our children to remember that teens, cars and alcohol are lethal! We owe it to our children to stop this kind of revelry.

A child has died and I feel responsible. But I am determined to learn from this experience. For the sake of this child and her family, I hope that all those other parents do the same.

Council Joins Effort For Ban On Radio-TV Ads For Alcoholic Beverages

The American Council for Drug Education has pledged to support the Center for Science In the Public Interest in its efforts to ban radio and television ads for alcoholic beverages or require that equal time be given to health messages about alcohol.

The text of the petition to be sent to the President and Congress of the United States is as follows:

Alcohol abuse and alcoholism are America's No. 1 drug problem, contributing yearly to over one hundred thousand deaths and \$120 billion in economic costs.

Despite massive harm caused by drinking, public airwaves carry over \$1/2 billion in advertising each year. The ads portray alcoholic beverages as an indispensable part of a happy, successful life. Children are exposed to the ads almost from infancy and many ads are aimed specifically at impressionable young people. It is outrageous that most of the information consumers receive about alcohol is in the form of seductive broadcast promotions for its use.

To correct this intolerable situation, WE, THE UNDERSIGNED, CALL UPON THE PRESIDENT AND THE CONGRESS OF THE UNITED STATES TO BAN ALL ADVERTISING FOR ALCOHOLIC BEVERAGES ON RADIO AND TELEVISION OR REQUIRE THE BROADCAST MEDIA TO GIVE EQUAL TIME TO HEALTH MESSAGES ABOUT ALCOHOL.

Order Form

	Qty	Unit Price	Total Cost
Scientific Monographs			
• Cocaine Today		\$2.50	
• Cocaine: A Second Look		\$2.50	
• Marihuana Today: A Compilation of Medical Findings for the Layman		\$3.00	
• Marijuana Smoking and Its Effects on the Lungs		\$2.50	
• Marijuana and Reproduction		\$2.50	
• Marijuana: The National Impact on Education		\$2.50	
• Marijuana and Alcohol		\$2.50	
• Marijuana and Driving		\$2.50	
• Treating the Marijuana-Dependent Person		\$2.95	
• The Marijuana Controversy: Definition, Research Perspectives, and Therapeutic Claims		\$2.00	
• Urine Testing for Marijuana Use: Implications for a Variety of Settings		\$2.50	
• A Pediatrician's View of Marijuana		\$2.50	
• Therapeutic Potential of Marijuana's Components		\$2.50	
• Marijuana and the Brain		\$1.50	
Brochures and Books			
• A School Answers Back		\$5.00	
• Marijuana and You: Myth and Fact		\$.45	
• La Marihuana al Día		\$.50	
• Marijuana; Biomedical Effects and Social Implications, Conference Transcript		\$5.00	
Postage and Handling			
1-5 copies		1.75	Total Cost
6-15 copies		2.50	Postage
Scientific Monographs, Brochures and Reprints			
Totals			
	Qty	Unit Price	Total Cost
Kits			
Physician's Kit		\$15.00	
School Library Kit		\$28.00	
Films			
"Wasted —"		\$395.00	
A True Story" ☐ Purchase ☐ Rental/Five Days		\$25.00	
Preferred Dates for Showing Are:			
First Choice	Second	Third	
"Danger Ahead: Marijuana on the Road"	☐ Purchase ☐ Rental/Five Days		\$250.00
Preferred Dates for Showing Are:			
First Choice	Second	Third	
First Choice	Second	Third	

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