AMERICA'S HEROIN CRISIS, COLOMBIAN HEROIN, AND HOW WE CAN IMPROVE PLAN COLOMBIA

HEARING

BEFORE THE

COMMITTEE ON GOVERNMENT REFORM

HOUSE OF REPRESENTATIVES

ONE HUNDRED SEVENTH CONGRESS

SECOND SESSION

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AMERICA'S HEROIN CRISIS, COLOMBIAN HEROIN, AND HOW WE CAN IMPROVE PLAN COLOMBIA

THURSDAY, DECEMBER 12, 2002

HOUSE OF REPRESENTATIVES,
COMMITTEE ON GOVERNMENT REFORM,
Washington, DC.

The committee met, pursuant to notice, at 11 a.m., in room 2154, Rayburn House Office Building, Hon. Dan Burton (chairman of the committee) presiding.

Present: Representatives Burton, Gilman, Mica, Norton, Tierney, and Schakowsky.

Staff present: Kevin Binger, staff director; David A. Kass, deputy chief counsel; Marc Chretien, senior counsel; Kevin Long and Gil Macklin, professional staff members; Blain Rethmeier, communications director; Allyson Blandford, assistant to chief counsel; Robert A. Briggs, chief clerk; Robin Butler, office manager; Joshua E. Gillespie, deputy chief clerk; Michael Layman, legislative assistant; Nicholis Mutton, deputy communications director; Leneal Scott, computer systems manager; Corinne Zaccagnini, systems administrator; T.J. Lightle, systems administrator assistant; Tony Haywood, minority counsel; Ellen Rayner, minority chief clerk; and Jean Gosa and Earley Green, minority assistant clerks.

Also present: Ambassador Anne Patterson.

Mr. BURTON. Good morning. A quorum being present, the Committee on Government Reform will come to order. I ask unanimous consent that all Members' and witnesses' written and opening statements be included in the record, and without objection, so ordered. I ask unanimous consent that all written questions submitted to witnesses and answers provided by witnesses after the conclusion of this hearing be included in the record, and without objection, so ordered. And I ask unanimous consent that all articles, exhibits and extraneous or tabular material referred to be included in the record, and without objection, so ordered.

First of all, I would like to congratulate Mr. Cummings, who's not here today. He's been very deeply involved in the drug issues since he's been in Congress and he's one of those people that really, really has been concerned about problems of more heroin and cocaine and other drugs coming into this country. Mr. Cummings has told this committee a number of times about the heroin epidemic that has besieged his congressional district. This week he was elected to be the new chairman of the Black Caucus and I wish he was here so I could congratulate him. It's great to see some of our

Members moving up the ladder, as others of us are moving down the ladder.

I'd also like to thank my vice chairman, Mr. Barr, and Chairman Gilman, who proposed holding this hearing. Unfortunately, Mr. Barr got stuck in Monaco. That's a tough place to be stuck, don't you think? And this is an issue that they care a lot about. They've done excellent work and we're going to miss them in the next Congress.

I also want to thank my colleague, Mr. Mica, who's been very active on this issue for some time, and Ms. Schakowsky. She's interested in this as well as a number of things we've been working on for some time. This is an issue that we all care a lot about and hopefully there'll be some resolution of some of these problems.

We're holding today's hearing to explore the damages that Colombian heroin is wreaking on our society. Statistics show more than 20,000 Americans died last year from drugs and drug-related violence. Other estimates go as high as 50,000. And when we talk about our prisons and having to build new prisons all the time to take care of criminals, we find that over 70 percent of all the people who are incarcerated are incarcerated in one way or another in some nefarious activity that's been related to drugs.

And so the drug problem here reaches all across the spectrum and it costs this country billions and billions and billions of dollars. Conservatively, the 20,000 Americans that died last year, that's about seven times as many as died in the tragedy on September 11th. Nationally, drug-related deaths surpassed homicides for the first time in 1998 and that trend has continued.

According to a graph I'd like to show right now from ONDCP, heroin is the most addictive substance after nicotine, and that's pretty startling when you look at those figures. There are a number of different ways to attack this problem and focusing too heavily on one to the detriment of the other will only result in overall failure. We spent most of the Clinton administration focusing too heavily on treatment and too little on eradication and interdiction, and the result has been a dramatic increase in drug production in Colombia. Law enforcement has said it is nearly impossible to stop drugs after they enter the stream of commerce and repeatedly have told us the best place to stop them is in the poppy fields or the coca labs in Colombia before they begin their voyage to the United States.

Our borders are extremely porous, as everybody knows. We've got almost a 2000-mile border between us and Mexico. We've got the Gulf of Mexico, the East and West Coasts and the huge border in Canada, and so the problem is very, very bad.

The message our first panel of witnesses is going to deliver will come as no surprise to those of us who followed this onslaught for the past 6 years. We predicted that it was going to happen and we acted by providing the right equipment and guidance to the State Department in an effort to stop the flow of heroin before it reached the United States.

Many of us, including Chairman Gilman, Speaker Hastert, Mr. Mica, Mr. Barr and others, began pressing the previous administration to deliver mission specific equipment. The mission of eradicating opium poppy was critically important. We pressed a reluc-

tant administration to deliver much needed equipment and helicopters to our allies in General Serrano's Colombian National Police starting in 1996.

It was not easy. It took constant pressure to pry each and every helicopter out of the Clinton administration. And I don't want to knock them too much because we've done enough of that in the past. But the problem is we needed equipment down there and the equipment wasn't getting there as rapidly as it should have and when it did get there many times it was outdated, outmoded and didn't have the proper protections. Even when congressionally directed assistance arrived, it required constant oversight by this committee and the International Relations Committee to attempt to get the U.S. Embassy to use and maintain the aid as Congress intended. At nearly every turn the Embassy and the State Department chose to ignore congressional direction.

In 2000, we saw initial success with the heroin strategy. Our allies in the Colombian National Police eradicated 9,200 hectares of opium poppy plants in Colombia's high Andes Mountains. This put a serious dent into the supply of heroin coming into the United States. It was then that the State Department chose to stop opium eradication to, as Ambassador Patterson put it, to take advantage of a historic opportunity to eradicate coca. And the only problem is Colombia's cocaine is now increasingly headed in another direction, to Europe. And the opium poppy used to make more deadly Colombian heroin is almost exclusively headed for the United States of America and our East Coast. We're facing a tidal wave of the purest, most deadly and most addictive heroin in the world. Under those circumstances, you would think that eradicating heroin would be a top priority. We need to know why this decision to cut back poppy eradication was made, and that's one of the reasons we're having this hearing today.

This decision to focus almost solely on coca eradication at the expense of opium eradication has clearly had unforeseen consequences. The result has been an increase in Colombian heroin available in the United States, an increase in hospital administrations for overdoses and an increase in overdose deaths in nearly every big city and small town east of the Mississippi.

Now, I understand that the State Department is now increasing the spraying of poppy fields, and that's good news. In my view it should have never been decreased. The spraying that's been done in the last 2 years has been a fraction of what was accomplished in 2000, and I don't understand why it was decreased and why that happened. What I hope to hear today from the State Department and the Drug Czar's office is that there is a strategy in place for a concerted effort to eradicate opium poppies in Colombia and that this is going to be a top priority.

I want to thank all of our witnesses for being here today. I was hoping that we would be able to have Ambassador Patterson to testify, but we weren't able to work that out. However, as I understand it, she will be here, or she is here and if we have to confer, if one of the witnesses has to confer with her they can do that. We do have Assistant Secretary Simons here to testify and Ambassador Patterson is here to advise him. And I was also hoping that the Drug Czar, Mr. Walters, could be here but his schedule wouldn't

allow it. And I'm sure that they're not avoiding us, because the war against terrorism and the attention the administration is paying to that right now requires a lot of the top executives in the administration to be elsewhere. But nevertheless I appreciate those who are here for being here, and I want to thank Deputy Director Crane for being here in the place of the Drug Czar. I also want to thank Mr. Guevara from the DEA and the four dedicated law enforcement officers we have on our first panel. We have one law enforcement officer, as you know, who's encased in this cubicle, and the reason for that is because he's doing very important work and there may be some danger to him if he were to testify in public.

And with that, Ms. Schakowsky, do you have an opening statement you'd like to make?

[The prepared statement of Hon. Dan Burton follows:]

Chairman Dan Burton

Government Reform Committee
December 12, 2002
"America's Heroin Crisis, Colombian Heroin,
and How We Can Improve Plan Colombia"

First I would like to extend my congratulations to my colleague from Baltimore, Mr. Cummings. He has been deeply involved with the drug issue since he has been in Congress. He has told this committee a number of times about the heroin epidemic that has besieged his Congressional district. This week he was elected to be the new chairman of the Congressional Black Caucus, so, congratulations Mr. Chairman.

I would also like to thank my Vice Chairman, Mr. Barr, and Chairman Gilman who proposed holding this hearing. This is an issue that they care a lot about. They've done excellent work, and we're going to miss them in the next Congress.

We are holding today's hearing to explore the damage that Colombian heroin is wreaking on our society. Statistics show more than 20,000 Americans died last year from drugs and drug-related violence – other estimates go as high as 50,000. Conservatively, that's seven times as many as died on 9/11/01. Nationally, drug-related deaths surpassed homicides for the first time in 1998, and that trend has continued. According to this graph from ONDCP, heroin is the most addictive substance after nicotine.

There are a number of different ways to attack this problem, and focusing too heavily on one to the detriment of the other will only result in overall failure. We spent most of the Clinton Administration focusing too heavily on treatment and too little on eradication and interdiction, and the result has been a dramatic increase in drug production in Colombia. Law enforcement has said it is nearly impossible to stop drugs after they enter the stream of commerce, and repeatedly have told us the best place to stop them is in the poppy fields and coca labs in Colombia, before they begin their voyage to American and European shores.

The message our first panel of witnesses is going to deliver will come as no surprise to those of us who have followed this onslaught for the last six years. We predicted it and we acted by providing the right equipment and guidance to the State Department in an effort to stop or slow the flow of heroin before it reached American shores.

Many of us, including Chairman Gilman, Speaker Hastert, Mr. Mica, Mr. Barr, and others began pressing the previous administration to deliver mission-specific equipment. The mission of eradicating opium poppy was critically important. We pressed a reluctant administration to deliver much-need equipment and helicopters to our allies in General Serrano's Colombian National Police starting in 1996.

It was not easy. It took constant pressure to pry each and every helicopter out of the Clinton Administration. Even when Congressionally-directed assistance arrived, it required constant oversight by this committee and the International Relations Committee to attempt to get the U.S. Embassy to use and maintain the aid as Congress intended. At nearly every turn, the Embassy and the State Department chose to ignore Congressional direction.

In 2000, we saw initial success with the Republican heroin strategy. Our allies in the Colombian National Police eradicated 9,200 hectares of opium poppy plants in Colombia's high Andes mountains. This put a serious dent into the supply of heroin coming into the United States. It was then that the State Department chose to stop opium eradication to, as Ambassador Patterson put it, "take advantage of a historic opportunity to eradicate coca." The only problem is, Colombia's cocaine is now increasingly headed to Europe. The opium poppy used to make deadly Colombian heroin is almost exclusively headed for America's east coast. We are facing a tidal wave of the purest, most deadly, and most addictive heroin in the world. Under those circumstances, you would think that eradicating heroin would be a priority. We need to know why this decision to cut back poppy eradication was made. That's one of the reasons we're having this hearing today.

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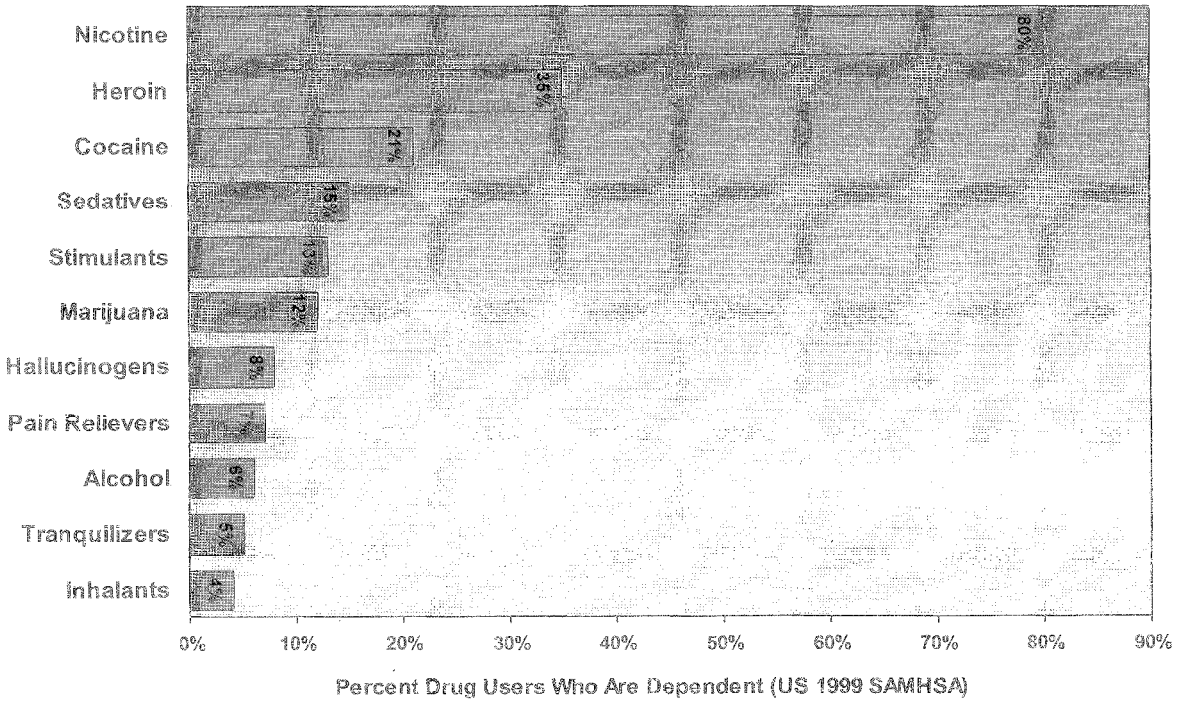
I want to thank all of our witnesses for being here today. I was hoping that we would be able to have Ambassador Patterson testify today, but we weren't able to work that out. We do have Assistant Secretary Simons here to testify, and Ambassador Patterson is here to advise him. I was also hoping that the Drug Czar, Mr. Walters could be here, but his schedule wouldn't allow it. I want to thank Deputy Director Crane for being here in his place. I also want to thank Mr. Guevara from the DEA, and the four dedicated local law enforcement officers we have on our first panel.

Risk For Dependence After Sampling Drug



Ms. SCHAKOWSKY. Yes, I do. Thank you, Mr. Chairman. I want to tell you how much I appreciate your making time in the last month of your tenure as head of this committee to focus attention on the growing heroin crisis in America as well as our country's severely flawed policy in Colombia. I understand this is the third hearing that you've had in this last week of your tenure and I want to just tell you what a privilege it has been to serve with you as chairman and I want to thank you for your leadership on this and so many issues that affect Americans.

The heroin crisis in America does need urgent attention. This problem is unlike other substance abuse cases in that heroin is more addictive, as you pointed out, Mr. Chairman, more lethal in small doses and at times easier to obtain by teenagers than any other form of intoxicant.

I welcome our law enforcement witnesses and look forward to hearing their views on how we can best address the subject. That being said, however, as will be clearly evident during today's hearing, there is not agreement among Members on how the heroin problem in America can be best addressed. I strongly oppose much of the policies put into place by Plan Colombia and the Andean Region Initiative because they have in my view been too heavily weighted toward supply side reduction, a strategy that has not worked to reduce substance abuse in the United States, coca or heroin. The policy so far has largely disregarded concerns about several important issues, including human rights abuses, committed by corrupt forces within the Colombian military, the plight of Colombia's internally displaced population, and alternative development, human and environmental health concerns related to the campaign of aerial fumigation of coca, as I said a campaign that has failed to achieve its goals, corruption within Colombia, mismanagement of U.S. taxpayer dollars and a failure by our Embassy and State Department officials to enforce U.S. laws and a failure of the Colombian government, its Attorney General in particular, to pursue cases against known human rights offenders.

New concerns have been raised by many human rights advocates and Members of Congress about the changing nature of our mission in Colombia. Congress this year authorized funds previously appropriated for counternarcotics operations in Colombia to be used for counterinsurgency. The administration has a plan to provide to Colombia and to Occidental Petroleum, for starters, over $100 million from U.S. taxpayers to protect a portion of the Cana-Limon oil pipeline. I oppose our mission shift in Colombia and I oppose the administration's pipeline protection program. This mission shift will put U.S. personnel directly into Colombia's decades old civil war. The pipeline program is a giveaway to an incredibly wealthy corporation from the U.S. Government and we have no guarantee of a return on our investment, not even a deal for a discount on Occidental oil.

I want to move on and discuss what I believe to be the best way we can improve our Colombia policy, and that is to uphold U.S. principles and laws, and I want to use an example to underscore the failure of our officials posted in Colombia to demonstrate leadership on this subject.

On December 13, 1998, in a Colombian village called Santo Domingo, 17 civilians, including six children, were killed when Colombian military helicopters provided to Colombia by the United States dropped what the FBI later certified was U.S. made bombs on the community. This appeared to many of us, including Senator Leahy, to be a clear violation of the Leahy law, which requires that U.S. aid be cutoff to Colombian military units, "credibly alleged to have committed gross violations of human rights," until the perpetrators are brought to justice.

While some actions were taken, investigations were opened and closed and reopened, the United States failed to show a commitment to the law over the course of this case. Meanwhile, troubling information came out in the testimony of witnesses and the press. Colombian personnel directly involved in the operation over Santo Domingo have testified that they were given the coordinates to drop the bombs on Santo Domingo by a U.S. contractor called Air Scan. Air Scan was under contract to provide security to Occidental oil.

Over 2 years after the bombing and almost 2 years ago I met with U.S. Ambassador to Colombia Ann Patterson. I raised the case of Santo Domingo. Ambassador Patterson urged me to be patient. She acknowledged that she was on, "thin ice on this one," and that very soon she hoped there would be major progress on this case. That was in February 2001. Ambassador Patterson waited 1 year and 9 months from then and almost 4 years from the time of the attack on Santo Domingo to recommend to the State Department that the Leahy law be invoked and aid to the Colombian Air Force unit implicated in the case be suspended. That is her recommendation. I don't know yet if that has been followed through on. Granted, even if she wanted to do so sooner, she may have been prevented from taking action because of the Bush administration's disinterest in this case.

I challenge any Member and any representative of the State Department to say that this is an example of leadership and a commitment to human rights and upholding U.S. laws. We are rewarding an oil company that hired a contractor to work with a corrupt military by providing that same company with over $100 million in security aid and, according to the Secretary of State, we are rewarding the military involved in this case and countless other massacres of innocent civilians with additional U.S. aid.

This case is an embarrassing and shameful blemish on the United States. To me it symbolizes all that is wrong with our policy and our priorities in Colombia. I think it's too bad that Ambassador Patterson, who I do have a great deal of respect for, but I'm sorry that she's not here to answer questions on this important case.

Mr. Chairman, these are just some of the important issues today's hearing should be considering. I intend to use my time for questions on these issues, and I welcome our witnesses, look forward to their testimony, and appreciate your indulgence in allowing me to make this lengthy opening statement. Thank you.

[The prepared statement of Hon. Janice D. Schakowsky follows:]

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9TH DISTRICT, ILLINOIS

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Statement of the Honorable Jan Schakowsky
Government Reform Hearing on
"America's Heroin Crisis, Colombian Heroin, and How We Can Improve Plan Colombia"
December 12, 2002

Thank you, Mr. Chairman. I appreciate your making time in the last month of your tenure as head of this Committee to focus attention on the growing Heroin crisis in America, as well as our country's severely flawed policy in Colombia. The Heroin crisis in America does need urgent attention. This problem is unlike other substance abuse cases. Heroin is more addictive, more lethal in small doses, and at times easier to obtain by teenagers than any other form of intoxicant. I welcome our law enforcement witnesses and look forward to hearing their views on how we can best address this subject.

However, as will be clearly evident during today's hearing, there is not agreement among members on how the Heroin problem in America can be best addressed. I strongly oppose much of the policies put into place by Plan Colombia and the Andean Region Initiative because they have been too heavily weighted toward a supply-side reduction, a strategy that has not decreased substance abuse in the United States. The policy so far has largely disregarded concerns about several important issues including: human rights abuses committed by corrupt forces within the Colombian military; the plight of Colombia's internally displaced population; alternative development; human and environmental health concerns related to the campaign of aerial fumigation of coca—a campaign that has failed to achieve its goals; corruption within Colombia; mismanagement of U.S. taxpayer dollars; and failure by our embassy and State Department officials to enforce U.S. law, and a failure of the Colombian Government—its Attorney General in particular—to pursue cases against known human rights offenders.

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I challenge any member and any representative of the State Department to say that this is an example of leadership and a commitment to human rights and upholding U.S. laws. We are rewarding an oil company that hired a contractor to work with a corrupt military by providing that same company with over $100 million in security aid. And, according to the Secretary of State, we are rewarding the military involved in this case, and countless other massacres of innocent civilians, with additional U.S. aid.

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Mr. Chairman, these are just some of the important issues today's hearing should be considering. I intend to use my time for questions on these issues. I welcome our witnesses and I look forward to their testimony.

Mr. BURTON. Thank you. Although I agree with a great deal of your statement and disagree with some of it, I think since you're so conversant with the issue it's worth it to listen to what you have to say.

Mr. Gilman.

Mr. GILMAN. Thank you, Mr. Chairman. I want to thank you for arranging this important hearing today. I think it's very timely as we discuss where we stand on Colombian heroin and our U.S. aid problems which our CODEL covered on a recent visit to that beleaguered nation. Colombia's capital is only 3 hours from Miami, and what happens there, of course, impacts all of us.

Mr. Chairman, I ask unanimous consent that my October 1st letter to ONDCP Director John Walters on the heroin crisis in America be included in the record——

Mr. BURTON. Without objection, so ordered.

[The information referred to follows:]

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Congress of the United States
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October 1, 2000

The Honorable John Walters
Director
Office of National Drug Control Policy
750 17th Street, N.W., Eighth Floor
Washington, D.C. 20503

Dear Mr. Director:

Permit me to take this opportunity to write to you about Colombian heroin. It has become a serious problem across New York State, as well as a growing problem up and down the east coast of our nation, and is moving ever further west. For the last several years, House Committee on Government Reform Chairman Dan Burton and I, along with others in the Congress, have signaled deep concern about the Colombian heroin crisis. We have tried to warn the Administration, with little response.

Recent media reports point out our concerns, noting the soaring Colombian heroin seizures. For example, there was an alarming, nearly 50 percent increase in heroin seizures in New York between the years 2000 and 2001. In a recent *New York Times* account of a major Colombian heroin ring bust, the U.S. Attorney in New York said :***"Heroin is back in New York, and it is back with a vengeance."***

Members of the Government Reform Committee staff recently returned from a staff trip to Colombia. They reported that DEA officials talked of a ***"tidal wave"*** of Colombian heroin coming to and spreading all across America. More and more cities such as Houston, New Orleans, Dallas and even Chicago are facing the heroin onslaught that we have seen on the east coast. More Colombian cocaine, in turn, is headed for Europe.

The staff delegation saw these trafficking trends firsthand after meeting with Colombian drug police at the airport in Bogota and U.S. Customs officers in Miami. They learned heroin

seizures from couriers headed for the United States are increasing, while trends show there is ever more cocaine transiting to Europe from Colombia.

We have been fighting this current war through a nearly total emphasis on coca eradication in Colombia, while ignoring opium growth and its elimination. This means that more and more heroin is headed for the streets of the United States from nearby South America, and Colombia in particular. As a result, more needless deaths and senseless tragedies will occur in our communities and among our families from heroin entering the United States.

One doesn't have to look far to fix blame for the Colombian-driven heroin crisis the U.S. faces today. The blame lies squarely at the feet of our State Department's International Narcotics and Law Enforcement Bureau (INL) for its tragic failure to eradicate opium crops in recent years and to eliminate deadly heroin production at its very source in the high Andes of Colombia.

We provided the State Department with high-altitude Black Hawk helicopters and funds for new spray planes to eliminate Colombian opium, and they still have not done the job. For example, only 1880 hectares have been eliminated so far this year. There should be change in the top of the leadership of INL, and at the U.S. embassy in Bogota as well, for the sake of our children and communities in America. Heroin is deadly, and few addicts ever recover.

In 2000, we had nearly eliminated Colombian opium, the source of our deadly heroin epidemic. By working side by side with the effective anti-drug police in Colombia, who were given the right tools, we eradicated 9,200 hectares (out of total crop of 10,000 hectare – comprised of two crops of 5000 hectares a year). The State Department inexcusably dropped the ball last year when we witnessed a 75 percent reduction in this vital opium eradication at the source in Colombia.

For 2002, opium eradication in Colombia will not be much more effective, at best just half of the 2000 levels. This is inexcusable and very tragic. We witness the effects everyday here in the United States, as Colombian heroin trafficking to this country has soared. We can no longer tolerate such gross incompetence and mismanagement of our anti-drug programs abroad. We need your effective leadership now.

The Congress in 2000, as I have noted, gave the anti-drug police in Colombia Black Hawk helicopters to reach opium growing in the high Andes mountains, and also defensive weapons with which to fight with appropriate firepower when attacked during aerial eradication. The Congress expected the small production of two crops of 5000 hectares of opium a year would soon become a thing of the past in Colombia. We were wrong.

Unlike coca leaf production, at more than 130,000 hectares in Colombia, the opium crop is very small for eradication purposes. In small mom and pop labs, it is made into heroin using very few precursor chemicals. It is often trafficked in small, hard-to-interdict single kilos, all of which are difficult to impact by law enforcement efforts.

We all feel that opium eradication is one of the most effective means of curtailing the flow of heroin when laboratory production cannot be interrupted or heroin interdicted. The DEA, FBI, and U.S. Customs consensus on a Colombian heroin strategy is eradication of opium and they have continually informed Congress of this since 1998. Regrettably, people responsible for implementing this strategy have not paid attention, and now we are paying the price under a "tidal wave" of Colombian heroin.

The State Department has other poorly informed views, and the opium eradication drop of more than 75 percent shows it has no business leading the fight against illicit drugs abroad. The INL, even with large amounts of drug-fighting funds and high-altitude Black Hawks on hand, has failed to provide the Colombian police with needed spray planes in a timely manner. It also did not provide the vital supply-line planes needed by the police to support and complement the high-performance utility Black Hawks during opium eradication.

We have heard many excuses about opium eradication failures, such as bad weather, bankrupt spray plane manufacturers, Plan Colombia coca goals and targets, and other pressing priorities. None of these arguments are persuasive and all reflect an essential lack of strong will. If there is bad weather one day, efforts should be made to go back the next day and for as many days as needed to eliminate opium and help end this tidal wave of Colombian heroin. Efforts must be sustained to have impact. All of these excuses are of no value to those who have lost a child to a 90 percent-pure, deadly Colombian heroin overdose.

The INL took its eye off opium eradication to justify the expenditure of massive U.S. aid to the Colombian army. As a result, the citizens and children of America are paying the price through the vastly increased import of Colombian heroin. This failure is inexcusable and unfortunate, especially when Congress gave INL the tools and monies to do this job. These excuses won't fly, and the Administration should be held accountable. I have witnessed fewer, more egregious failures of leadership than this in all my years combating illicit drug trafficking.

Heroin indicators continue to rise in such heavily populated places as New York, Minneapolis, Chicago, Miami, and Philadelphia. Younger age groups in both suburban and center city areas continue to initiate heroin use, resulting in the tragedy that is impacting our young people and their families.

As our newest drug czar, you need to formulate a comprehensive, coordinated federal drug strategy to combat illicit drug production and distribution, not only for Latin American heroin, but for illicit drugs throughout the world. We need your leadership and visibility to call on the international community to make a commitment to wage war against this scourge to all of mankind.

We look forward to hearing from you on your plans to help eliminate Colombian heroin through eradication before even more innocent lives are lost here at home.

With best wishes, I remain

Sincerely,

BENJAMIN A. GILMAN
Chairman Emeritus

BAG:mco

Mr. GILMAN [continuing]. Which notes failures of his office, the INL Bureau at the State Department and the U.S. Embassy in Bogota in tackling the Colombian heroin problem before it gets out of control.

Today we'll be learning firsthand from our local police, and we welcome them and we thank them for being here, the grave dimension of the Colombian crisis. There's going to have to be accountability for this mess at the Federal level. Regrettably our government has failed to use the equipment that Congress previously provided to eliminate the Colombian opium long before we have the heroin that it creates flowing into our Nation where it's difficult and nearly impossible to interdict. ONDCP states it's about 10 percent at best.

Permit me to summarize our findings from our recent CODEL visit to Colombia. The findings offer an excellent and a practical solution to the Colombian heroin crisis now before our communities and our young people here at home are destroyed, notwithstanding that ONDCP and INL figures downplay this threat.

With regard to our findings, we found that the major illicit drug crops of concern to our Nation in Colombia consist of coca and cocaine production and opium and heroin production. The Colombian coca crop is the most extensive, employing about 130,000 hectares, more or less. And the annual opium crop is much smaller, only 5- to 6,000 hectares at most. And yet today, that limited Colombian opium crop is supplying nearly 60 percent of the heroin in our Nation, replacing Asian heroin. It's the cheapest, most addictive, and deadliest that we've seen. It's resulting in numerous heroin-related deaths as it spreads across our Nation. It's already or soon will be the major illicit drug in many States across the Nation and has the highest risk of all drugs because of its dependence.

Newest trafficking trends show more and more Colombian cocaine is headed for Europe while all of the deadly Colombian heroin is coming here, creating havoc in our Nation. The media recently reported that the son of a major Cali cocaine cartel kingpin was just arrested for possession, not of cocaine but for substantial amounts of Colombian heroin.

With regard to the coca crop, that crop has to be eradicated throughout the year since it is produced four times per annum. Opium, on the other hand, produces only two small crops each year, which is up in the high Andes, primarily, Huila, Tolima, Cauca, departments in the south and also the Cesar area in the north. When opium is eradicated in the mountains, the loss to the drug traffickers is much greater than with coca since they've expended extensive funds and energy in climbing the mountains to plant, preserving their expensive, profitable but small opium crop. A kilo of heroin in the United States on our streets is worth nearly six times more than a kilo of cocaine on our streets.

The past experience of the anti-drug Colombian National Police that have done such an outstanding job demonstrates that you can simultaneously eradicate both coca and opium and still produce good results on both of those fronts without having to sacrifice taking down one crop for another as we regrettably did during the past 2 years. Since coca is produced year round in the bigger quan-

tities, it's necessary to stay at it all year to sustain eradication in order to get a net overall coca crop reduction.

However, the same is not true for opium. According to the CMP experts, opium, like coca, is only a twice a year crop, grown in small amounts in the mountainous regions. It can and should be sprayed just before harvest time. In 48 hours the poppy flower wilts, unlike the coca leaf which takes much longer to eliminate. The opium harvest time eradication maximizes the impact and loss of revenue for the drug traffickers, while in the interim it would be possible to eradicate the bigger coca crop all year round.

You know, we should be able, Mr. Chairman, to walk and chew gum at the same time. This CMP's insightful experience is based on their enforcement theory and explains why in both 1999 and in the year 2000 there was good eradication results of 80 to 90 percent of the opium crop was eliminated while continued strides were also made against the coca crop all at the same time. If we only had sustained the opium eradication effort over the past 2 years, combined with DEA's excellent efforts with the CMP going after the Colombian heroin dealers and infrastructure, we would not be faced with the Colombian heroin crisis which we're facing today.

So Mr. Chairman, I ask unanimous consent that the Miami Herald series in early November of this year on the Colombian heroin crisis here at home be included in the record at this point in the record. It deserves our attention.

Mr. BURTON. Thank you, Mr. Gilman. Without objection, so ordered.

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Posted on Sun, Nov. 10, 2002

Colombian drug gangs are smuggling ever purer and cheaper heroin to...

BY TIM JOHNSON
tjohnson@herald.com

LATROBE, Pa. - Colombian drug gangs are smuggling ever purer and cheaper heroin to the United States, igniting small but raging heroin epidemics in pockets of New England and the Mid-Atlantic states.

In places like this town in the Allegheny foothills, home to Rolling Rock beer and the birthplace of golfer Arnold Palmer, law enforcement officials voice astonishment at the impact.

"It's hitting our area harder than crack cocaine did," said veteran Westmoreland County vice detective Tony Marcocci.

It's also leaving a death toll. Eleven people have died from heroin overdoses this year in surrounding Westmoreland County. Heroin overdoses have contributed to the deaths of at least 80 people in the entire area of southwest Pennsylvania, including Pittsburgh.

The sudden arrival of heroin has alarmed law enforcement authorities up and down the Eastern Seaboard because it could portend a new wave of crime that extends from the inner cities to the suburbs. Heroin use is traditionally associated with criminal lifestyles as desperate addicts go to any length to satisfy their needs.

Meanwhile, the profitability of heroin -- especially at street-level retail prices -- means that U.S. counter-drug efforts face an uphill battle against Colombian traffickers.

"They can sell two kilograms of heroin for $80,000 each. They'd have to get rid of 20 kilos of cocaine to get the same profits," said Felix Jimenez, who recently retired as head of the Drug Enforcement Administration office in New York City.

The swiftness with which heroin has hit some areas has made it a bedeviling issue on Capitol Hill, where a handful of U.S. legislators have suggested that the Bush administration is focusing too heavily

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billion in U.S. counter-drug assistance since 2000, and neglecting combat against the heroin trade.

"The stuff is coming in so strong and so pure," lamented Westmoreland County Coroner Kenneth A. Bacha.

Since Colombian narcotics traffickers aggressively entered the heroin business in the early 1990s, they have forced down prices, upending the heroin market in the United States. Between 1990 and 2001, the average purity of retail heroin has doubled and prices have dropped by more than half, the DEA says.

"The Colombians developed a market strategy," said Jimenez, ``and they have implemented that strategy. There's no one in the world who can compete with them."

Along the way, heroin seems to have shed its skid-row image. Instead of injecting heroin, new users -- and a parade of young Hollywood celebrities and musicians -- have found that they can inhale it because of its greater purity.

ASIAN SUPPLIERS UNDERCUT

Colombian traffickers began turning to heroin because it is four to five times more profitable than cocaine at wholesale prices. In recent years, Colombians have successfully undercut the prices of traditional heroin suppliers from Southeast and Southwest Asia, federal officials say. Slowly and steadily, Colombians have worked with Dominican distribution networks to capture the market east of the Mississippi River, where they now supply 93 percent of all heroin.

Repercussions now ripple throughout the Northeast and the mid-Atlantic region, where heroin has moved from cities to towns, and even to rural areas.

Heroin has already surpassed cocaine as the biggest narcotics threat to the states of Delaware, Maryland, Massachusetts, New Hampshire and Vermont, and the National Drug Intelligence Center, a division of the Justice Department, says it may soon add New Jersey and Pennsylvania to the list.

"We have never seen in the '90s the amount of heroin that we are seeing now from Colombia," Jimenez said. ``I'm telling you, it's readily available in any town in the Northeast corridor."

Heroin is swiftly arriving in areas that never saw the narcotic before.

"It is an epidemic, really," said police Lt. Dennis Passmore in Augusta, Maine. ``For the last year, it seems to be the drug of choice."

Lt. Karl Hitchens, a paramedic and heroin expert with Delaware's New Castle County Police Department,

» WI PA
» TH PA
» FR PA
» SA PA

In Pennsylvania, which has struggled with a heroin problem in Philadelphia and Pittsburgh for a generation, heroin now pervades nearly every corner of the state.

"Cocaine is getting harder to get. Heroin is everywhere," said Robin Boggio, the Pennsylvania intelligence analyst for the National Drug Intelligence Center.

"You could gradually see it coming, town to town. Now, we have a problem," said Police Chief Charles Huska of Latrobe, population 9,000, which sits in rolling hills about an hour east of Pittsburgh.

"It costs 10 bucks, less than a case of beer," Huska adds.

Bacha, the county coroner, said the heroin surge has hit a cross-section of his community.

"It's rural. It's trailer parks out in the country, private homes scattered about -- just average American people," Bacha said.

Heroin off the street comes in glassine envelopes like those that protect postage stamps, and each purchase is known as a "stamp bag." Distributors commonly place an ink seal "brand" on each envelope. In Pennsylvania, common seals include "Amadeus," "Murder One," "Brain Damage," "Home Run," and ``Mambo Kings."

"It's in almost all the high schools and in some of the middle schools," said Marcocci, the county detective. "I've talked to school officials who say they've seen `stamp bags' empty at their schools."

`FACES HAVE CHANGED'

In other states, experts are seeing a marked shift in the demographics of heroin use.

"The faces have changed," said James Harrison, a director of Brandywine Counseling in Wilmington, Del. ``Before it was a lot of 25- and 30-year-old black males. Now, you're seeing a lot of 20-year-old white females."

Even in states such as Connecticut, where heroin has been present in cities for decades, its recent spread to virtually every town has been shocking.

Junkies openly shoot up in the quaint gazebo of the town green in Willimantic, population 15,823, The Hartford Courant reported last month. The paper, which published a series chronicling heroin's spread through the state, called Willimantic "small, rural, open, friendly -- and hooked." The textile mill town in the eastern part of the state has between 200 and 300 addicts.

Retail street heroin with purity as high as 80 to 90 percent -- the kind that can be inhaled -- appeals to a sector of young people unaware of the ravages that heroin addiction inflicted on cities in the

"They are seldom in contact with people living on the street in boxes trying to get their next fix," said Samuel Segal, Connecticut's state policy director for addiction services. ``They see all the stars, the generation ahead, actors like Robert Downey. It has some level of danger and glamour for them."

Drug dealers are pulling in "young women [and] young men in high school who would never think of putting a needle in their arm for the first time or, you know, putting a rubber band around their arm to make their veins pop out, which they find grotesque," Sen. Joseph Biden, D-Del., said at a hearing in mid-September.

The heroin abuse rate in Delaware among young adults now nearly rivals that for alcohol.

A national survey released in June by the Centers for Disease Control and Prevention said 3.1 percent of high school students questioned in 2001 reported using heroin during their lifetime.

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Mr. GILMAN. Overall, what the CODEL discovered on our recent visit is the lack of any political will, the lack of leadership, the lack of strategic thinking by the Drug Czar and the lack of long-range planning by the State Department and by our Embassy leadership in Bogota. All of them sorely need to sustain these past efforts to eliminate opium, to thwart—to be able to thwart the heroin crisis. If sustained, along with our excellent DEA efforts, we could have nearly eliminated Colombian opium and avoided the heroin crisis we're now facing in our Nation that originates in nearby Colombia.

Without that small opium crop there'd be no Colombian heroin of course. It's that simple and very easy to comprehend. But regrettably our Federal Government has failed to comprehend that. The CMP Deputy Director says this job of eliminating Colombia opium can still be done in just 3 months, Mr. Chairman, and that's what this important hearing's all about. We need some credible explanations why it hasn't been done and why there should be no excuses of why it can't be done.

Coca eradication takes years and the net benefits are far less beneficial than with opium eradication in the high Andes. Since the Colombian anti-drug police now have the Blackhawks which we—this committee has helped them obtain and the spray planes to do the job, our executive branch should now lead, should be held accountable for the carnage which we're going to be hearing about from our local police.

The opium elimination results fell off in the year 2001 by more than 70 percent. Let's find out why. Let's ascertain who is responsible and then find out how we can reverse that figure and hold people accountable.

With regards to the excuse that we hear about with weather, bad weather conditions, we often heard from the Embassy and ONDCP those excuses. The police say this is nothing new in Colombia, especially in the opium mountainous regions. We should wait, wait it out, as did the CMP, and go back a day or a week later when the weather clears in the high mountains and obtain the kind of eradication results we need. The CNP's past experience, which we learned of in our visit, fully answers the erroneous U.S. Government and Embassy Bogota excuses, which included that there's often bad weather and that they can't find the opium and if they do eradicate it it's just replanted. I think all of those excuses, Mr. Chairman, ring hollow.

In summary, what's needed now is strong leadership of political will at the top so the Colombian opium and in turn Colombian heroin now destroying our youth here in our country can become a thing of the past.

Mr. Chairman, we thank you again for conducting these hearings. I'm certain these things can and must change and when the American people know what can and must be done and demand that their Federal Government do the job of protecting them from illicit drugs from abroad, and in this case Colombian heroin, it's going to happen. Our local police departments, from whom we're

about to hear from, can't do this eradication job at the source in Colombia. But we and our Federal Government can and should do the job.

Thank you, Mr. Chairman.

[The prepared statement of Hon. Benjamin A. Gilman follows:]

Statement of Rep. Ben Gilman, Government Reform Hearing on Problems With Plan Colombia
December, 12 2002

Mr. Chairman. Thank you for arranging this timely hearing on Colombian heroin, and the U. S. aid problems, which Codel Barr uncovered on our recent visit to that beleaguered nation. Colombia's capital is but three hours from Miami; what happens there, impacts us all here.

I request unanimous consent that my October 1st letter to ONDCP Director John Walters on the heroin crisis in America be included in the record. It notes the failures of his office, the INL Bureau at the State Department, and the U.S. Embassy Bogota in tackling the Colombian heroin problem before it got out of control.

We will learn first hand today from our local police departments, the grave dimension of the Colombian heroin crisis. There must be accountability for this mess at the federal level.

Our government has failed to use the equipment Congress previously provided to eliminate the Colombian opium long before we have the heroin it creates, flowing into our nation, where it is difficult and nearly impossible, to interdict. (ONDCP 10% at best).

Permit me to summarize my findings from our recent Codel visit to Colombia. The findings also offer an excellent and practical solution to the Colombian heroin crisis now destroying our communities and our young people here at home; notwithstanding ONDCP and INL figures downplaying the threat to the contrary.

Our Findings :

The major illicit drug crops of concern to the U.S. in Colombia consist of coca (with regard to cocaine production), and opium (with regard to heroin production). The Colombian coca crop is the most extensive (130,000 plus hectares), and the annual opium crop is very much smaller (5000-6000 hectares at most).

Yet today, that limited Colombian opium crop supplies nearly 60% of the heroin in the U.S., replacing Asian heroin. It is the cheapest, most addictive, and deadliest we have seen, and is resulting in numerous heroin related deaths, as it spreads across America. It is already, or soon will be, the major illicit drug in many states across America, and has the highest risk of all drugs for dependence.

Newest trafficking trends, show more and more Colombian cocaine headed for Europe, while all of the deadly Colombian heroin is coming here, creating havoc in our nation. I note that the media recently reported that the son of a major Cali cocaine cartel kingpin, was just arrested for possession of substantial amounts of Colombian heroin, not cocaine.

With regard to the coca crop it must be eradicated throughout year as it is produced four (4) times per annum. Opium on the other hand, only produces two (2) small crops per year, which is in the high Andes mountains (primarily Huila, Tolima and Cauca Departments in the south; and also the Cesar area in the north)

When opium is eradicated in the mountains, the loss to the drug traffickers is much greater than with coca, since they have expended energy and monies to climb the mountains, plant, and in preserving the expensive, profitable, but small opium crop. (A kilo of heroin in the U.S. is worth nearly 6 times more than a kilo of cocaine on our streets).

The outstanding anti-drug Colombian National Police (CNP) unit's past experience, demonstrates that you can simultaneously eradicate both coca and opium, and produce good results on both of these fronts, without having to sacrifice taking down one crop for another, as we regrettably did during the last two years. Since coca is produced year round and in bigger quantities, you must stay at it all year to sustain eradication to get a net overall crop reduction. Secretary Powell just admitted as yet we are not keeping up with the growth of coca in Colombia.

However, the same is *not* true of opium according to the CNP experts. Opium, unlike coca, is only a twice a year crop, grown in small amounts in the mountainous regions,. It can and ought to be sprayed *just before harvest time* (in 48 hours the poppy flower wilts, unlike coca leaf which takes much longer to eliminate).

The opium harvest time eradication maximizes the impact and loss of revenue for the drug traffickers, while in the interim it would be possible to eradicate the bigger coca crop all year round. We should be able to walk and chew gum at the same time.

This CNP insightful, experience based enforcement theory, explains why in both 1999 and 2000 there were good eradication results-80-90% of the opium crop was eliminated-while continued strides were also made against the coca growth.

If we only had sustained that opium eradication effort over the past 2 years, combined with DEA's excellent efforts with the CNP going after the Colombian heroin dealers and infrastructure, we would not be in the Colombian heroin crisis which we face today.

I ask unanimous consent that the Miami Herald series in early November of this year on this Colombian heroin crisis here at home be included in the record. Its deserves action.

Overall, what the Codel discovered is the lack of any political will, leadership, and any strategic thinking by the drug czar, by the State Department (INL), and by our Embassy leadership in Bogota. All of them sorely need to sustain these past efforts to eliminate opium and thwart the heroin crisis. If sustained, along with our excellent DEA efforts, it could have nearly eliminated Colombian opium, and avoided the heroin crisis we now face in America originating in nearby Colombia.

Without that small opium crop, there would be no Colombian heroin; its that simple, and very easy to comprehend; but regrettably our federal government has failed to comprehend it.

The CNP Deputy Director (#2 man) says this job of eliminating Colombian opium can still be done in just three months, and that is what this important hearing is all about.

We need some credible explanations why it wasn't done before, and why there should be no excuses of why it cannot be done. Coca eradication will take years, and the net benefits are far less beneficial than with opium eradication in the high Andes.

Since the Colombian anti-drug police now have the Black Hawks and the spray planes to do the job, our executive branch should now lead, and be held accountable for the carnage we will hear about today.

The opium elimination results fell off in 2001 by more than 70%. We must learn why, ascertain who was responsible, and then find out how we can reverse it, and hold people accountable.

As to the excuse of bad weather conditions, we often heard from the embassy and ONDCP, the police say that this is nothing new in Colombia, and especially in the opium mountainous regions. We should wait it out as did the CNP, and go back in a day or week later when the weather clears in the high mountains, and obtain the needed eradication results.

This CNP past experience which we learned of, fully answers the erroneous U.S. government and embassy Bogota excuses, which included that there is often bad weather, that they can't find the opium-and if they do eradicate it, they just replant it. All of those excuses ring hollow.

In summary, what is needed now is strong leadership and political will, so that Colombian opium, and in turn, Colombian heroin, now destroying our youth here in the USA, will become a thing of the past.

Mr. Chairman thank you for conducting these hearings. I am certain that these things can and must change. When the American people know what can and must be done and demand that their federal government do the job of protecting them from illicit drugs from abroad, and in this case Colombia heroin, it will happen.

Our local police departments from whom we will hear from today can't do this eradication job at the source in Colombia, but our federal government can and must.

Thank you.

Mr. BURTON. Thank you, Mr. Gilman.

Mr. Tierney.

Mr. TIERNEY. Thank you, Mr. Chairman. I thank you first of all for holding these hearings and for the great work that you've done as committee Chair, particularly over the last year where we've really addressed a number of issues that were important to the American people, and I look forward to your continued efforts in that regard with whatever subcommittee chairmanship you get after we reorganize.

I want to in large part associate my remarks with those of Ms. Schakowsky, who I think went into greater length than I am going to go into, but certainly was on point with much of what she had to say.

The Andean Country Initiative and the Plan Colombia are not the best of plans that we could put forth to do what we need to do in this country in terms of eliminating the drugs that are coming into the United States. Spraying, while, Mr. Chairman, you may think it's good news that they're spraying, many people obviously don't think it such good news when it turns out they have a huge internal displacement causing probably more internal refugees than anywhere else in the world, and we need to go at this in a little bit of a wiser situation. We have alternative development issues that need to be addressed. If people are going to have their crops eradicated and be moved on, then there has to be something for them to go to. We should be concentrating more on building a civil society in Colombia. They need a much strengthened judiciary, a much improved police organization, a much improved military. We also need to know that their military right now is not of the nature that it should be.

We're sending down a substantial amount of money from the United States and now sending our men and women there only to find out that if you have enough wealth and if you have enough education in Colombia, then you need not serve in the Colombian military forces, and I think that's something that has to be addressed by President Uribe before we keep sending our money down there.

The fact is that every time we succeed or think we're succeeding in eradicating either poppy or cocaine, coca, it's just moving. We did a relatively good job we thought in Peru and in Bolivia and it moved to Colombia. And we're now making efforts in Colombia and the fears are that it's moving back to Peru, back to Bolivia and maybe into Ecuador. So that we have to do much more and we have to come at this from more than one direction, and I think that we can do that.

I'm always dismayed that we really don't sink our teeth into issues that would really make a difference, as difficult as they may be for people in political life up here. First and foremost on that list I put money laundering. If we really concentrated on going after the money, I think we'd make the jobs of the witnesses in front of us a lot easier on that. Let's go where it is.

It's the toughest thing politically perhaps to be done in this country, Colombia and the other countries involved, but let's go at the source. Let's go at the arms transfers and sales. The number of arms shipments going into Colombia and other countries that are

manufacturing these drugs is outrageous. Yet the United States is the singular most important country that withdrew from the small arms discussions that were going on in the international community, and that's a disgrace.

Let's talk about interrupting the precursor chemicals that go into the production and manufacture of these drugs. You know, these people are making money. This is a business. And we sit here looking like the only thing we can do is eradicate crops of poor peasants, making them internal refugees running around their country looking for food, looking for a place to settle down, looking for a way to be safe. And the only people that can go after money laundering, arms transfers and sales, interruption of precursor chemicals really is the United States taking the leadership. And where are we on that, Mr. Chairman? Just where is the courage of this body of Congress? And where is the courage of other people in going where it really makes a difference?

We're just going to keep pushing this ball around the park from Peru to Colombia to Ecuador and back if we don't start going at the source of the root of that issue. And we can do a lot more in terms of having treatment on demand in this country. As much as supply is, and let's not fool ourselves, demand is an even larger issue. The price for these drugs has not gone down one iota in all the time that we've spent trying to address this issue. No matter how much we move it from Peru to Bolivia to Colombia to Ecuador or any place else, go overseas, the fact of the matter is the price on the streets of this country remains the same.

So we're not having the impact that we think we're doing. We're spending huge amounts of money. We're spending a lot of money on military products. I'm sure somebody here is making a buck on that. We're not going after where the real issue is and we're displacing hundreds of thousands of people and not bringing them any more safety or human rights or protection in their country at all.

Mr. Chairman, we've got a formula to move on this, and some of it is what we've been doing now, but unfortunately not an awful lot. We need to be working at the infrastructure, the civil infrastructure in Colombia. We need to be making sure President Uribe has his people joining their military, buffing up their police department so that it actually is an effective police department, doing something about the paramilitaries as well as the guerillas so that people have confidence in their own law enforcement and their military mechanisms, and then making sure that we do the things that could make the largest difference of all, taking on the money launderers, the arms transfers and salespeople, the precursor chemical manufacturers, producers, shippers and doing something about demand in this country.

This isn't some squishy liberal answer to this problem. This is a part of a serious business of going after the problems where the roots are, and we should get over this nonsense about you're not being tough enough, you're being too tough, and get down to where it really makes a practical difference and go right at the heart of the problem.

We're spending $411 million in fiscal 2002, the third largest amount of U.S. foreign aid of any country in the world, and we're

not having much success except to ruin the lives and further exacerbate the suffering of people in Colombia.

Mr. Chairman, I hope as we go forward that if you have the committee that deals with this issue, or whoever has it, we start dealing with the real things that will make a real difference as hard as they may be politically.

Thank you.

The CHAIRMAN. Thank you, Mr. Tierney.

Mr. Mica.

Mr. MICA. Thank you, Mr. Chairman, and I thank you again for holding this hearing, one in a series, to address what unquestionably is our most challenging and serious social problem in this Nation, and that's the problem of narcotics use and abuse. And we're particularly concerned about the continuing problem we're having in heroin production. This isn't rocket science. We know where the heroin's coming from. We can do chemical analysis and even trace it to the fields and we know it's coming from Colombia. We know that in 1992 there was almost zero heroin produced in Colombia. I had the opportunity to serve as your Chair of the Criminal Justice, Drug Policy Subcommittee and looked at that issue during my tenure, some 2 years ago, worked on it back in the 1980's, Chief of Staff for Senator Hawkins. And the problem can be resolved if you have the will and you have a plan.

We put together a plan. I was pleased to participate with you and others in developing Plan Colombia. Now the challenge is executing Plan Colombia. It's true that some of the traffic does move. Mr. Gilman and I and others were involved back in the 1980's and the 1990's and we worked with Bolivia and Peru. We eradicated a tremendous percentage of the cocaine and heroin coming from those countries in a very cost effective manner. We know where the drugs are. It's cheap to eradicate them and eradicate their production. It does take the will, both of the United States and the host country. We now know that we've made progress in cocaine and coca eradication in Colombia. We could do the same thing with heroin.

We played games in the 1990's, unfortunately, under the Clinton administration and under the guise of human rights and protecting the peasants and all of the other things you've heard paraded today. President Pastrana attempted to negotiate with terrorists, and there's not any way you can negotiate with terrorists. You need to eliminate terrorists, create stability. And fortunately President Bush has that plan, is willing to put the military resources to stop the slaughter of people. And they love to bring up isolated cases of terrorism, and there is terrorism and destruction of life on both sides. The paramilitary, the FARC guerilla. But what you need is an end to that terrorism and you need to use whatever military means or enforcement to stop that. And the United States can provide those resources, should, and I believe will, and that will bring stability.

If you want to trace the money in this, it's not that difficult. The money is provided by the drugs to terrorists who are committing terrorist acts and I don't care what side it is. They've slaughtered tens of thousands of people, not 17 in some isolated incident using U.S. arms. That's not the question here.

So you have to have stability and you have to have a plan. And that will, folks, respect human rights. The rights of tens of thousands of Colombians have been violated. And they're not being displaced because of some crop eradication program. I spray crops in my backyard—or weeds in my backyard with defoliants that are stronger than what they're using in Colombia. That's another bogus argument. They're being displaced because of one of the worst civil wars and terrorist wars in the hemisphere.

The demand—it's nice to talk about demand and treatment and treatment on demand. And we've tried that. We spent tens of billions of dollars on social programs in jail and everything else. I have friends who have kids that are hooked on drugs. I have friends who are hooked on drugs, and unfortunately, only about a third of those programs have any success. Addiction is a very difficult problem. And we've tried education and we're working on that. That program was screwed up in the last administration. But it takes, as we've learned, a combination of all of these things.

So we've got to get Plan Colombia fully executed. And part of that is eradication of heroin. This isn't rocket science. And there's no excuse for an increase of 62 percent, which we'll hear testimony in a few minutes, I believe, increase in heroin production in Colombia. That's not acceptable. That's not going to be acceptable to this committee. So you've got to have the will. You've got to eradicate those drugs and use whatever means necessary to create stability and use all means to fight this scourge on all fronts.

Finally, Plan Colombia does have a good plan. It has eradication, it has stabilization, which is so necessary to that region. And we even have an alternative crop development program and economic assistance. But we've got to restore our shoot down policy, our information policy, our micro herbicide policy, things that have been studied for too long and need to be put into action to eliminate this problem. So we can do it, and we know how to do it. We just need the will to do it.

Thank you, Mr. Chairman.

Mr. BURTON. And thank you, Mr. Mica, for the work you've done on this in the past. We'll now hear from our first witness panel. Agent Felix Jiminez, Detective Tony Marcocci, how do you pronounce that? Marcocci? Thank you, Tony. Detective Sergeant Scott Pelletier. I'm getting close. Tom Carr. I can get that one without any trouble, Tom. And the undercover narcotics detective who's in the cubicle.

Would you please stand and raise your right hand?

[Witnesses sworn.]

Mr. BURTON. Let the record reflect the witnesses responded in the affirmative. And I appreciate you all being here today.

Do any of you have opening statements you'd like to make? How about you, Mr. Jiminez. We'll start with you. And if you could keep your statements to around 5 minutes I'd really appreciate it. And can you pull the mic close to you because we don't pick that up sometimes. You'd better turn the mic on.

STATEMENTS OF FELIX J. JIMENEZ, RETIRED SPECIAL AGENT IN CHARGE, DEA, NEW YORK FIELD DIVISION, SPECIAL AGENT IN CHARGE, TRANSPORTATION SECURITY ADMINISTRATION, NEW YORK FIELD DIVISION; DETECTIVE TONY MARCOCCI, WESTMORELAND COUNTY, PA, DISTRICT ATTORNEY'S OFFICE; DETECTIVE SERGEANT SCOTT PELLETIER, PORTLAND, ME, POLICE DEPARTMENT, HEAD, PORTLAND POLICE DEPARTMENT-MAINE DRUG ENFORCEMENT ADMINISTRATION HEROIN TASK FORCE; TOM CARR, DIRECTOR, BALTIMORE-WASHINGTON HIGH INTENSITY DRUG TRAFFICKING AREA [HIDTA]; AND MR. X, UNDERCOVER NARCOTICS DETECTIVE, HOWARD COUNTY, MD, POLICE DEPARTMENT

Mr. JIMENEZ. Chairman Burton and members of the committee, good morning. I would like to begin by thanking the committee for the opportunity to appear before you today. I commend the committee for their unwavering support in the fight against illegal drug trafficking. As a former Special Agent in Charge of the New York Field Office of the Drug Enforcement Administration, and with over 30 years of drug law enforcement experience, I would like to provide the committee with an overview of South American heroin trafficking and the distribution and its effects to the New York geographic area.

Heroin traffickers from South America are bringing some of the world's purest heroin into New York. Of the world's four major heroin sources areas, South America, Southeast Asia, Southwest Asia and Mexico, heroin from South America is the most frequently trafficked and widely available in the New York area. During my tenure as the Chief of the Heroin Desk in DEA headquarters in the late 1980's and early 1990's, DEA began developing intelligence that drug traffickers based in Colombia were cultivating opium poppies and seeking to develop a heroin processing capability. Significant shipments of South American heroin began arriving in New York in 1991. By applying the same trafficking expertise used by their peers to dominate the cocaine trade, and by significantly reducing prices and increasing purity, South American heroin traffickers were able to dominate New York's heroin market by the mid 1990's.

Unlike the cocaine kingpins and cartels of the 1980's, South American heroin organizations are generally loose confederations of several organizations and entrepreneurs who realize that a high profile is counterproductive and dangerous. Originally relying on relatively small heroin conversion laboratories in Colombia producing a few kilograms of heroin, traffickers today utilize laboratories capable of producing significantly greater quantities.

South American heroin traffickers originally smuggled their heroin into New York in relatively small amounts primarily using couriers internally carrying up to a kilogram of heroin or flying on direct commercial aircraft to JFK Airport from Colombia. Over the time South American heroin organizations grew in number size and experience. These organizations' methods and tactics continually evolved, becoming more sophisticated and difficult to counter.

Reacting to an increased rate of interdiction for direct flights from Colombia, smugglers began transiting through secondary

countries and changing methods of conveyance. In addition to the direct flights couriers now flew to the U.S. airports often from secondary countries, such as Venezuela, Brazil, Ecuador, Argentina, Chile, as well as from intermediate stops in Central America, the Caribbean and Mexico. In one of the first counter moves made by the South American heroin traffickers, they began routing heroin couriers to the United States through Argentina, Brazil and Chile, traditionally not identified as source countries.

Additionally, the traffickers aggressively sought out citizens of these countries to become couriers, as they do not need a tourist visa to enter the United States, reducing the scrutiny given to these potential couriers. As a result, South American heroin smuggled into the United States by the Chileans, the Brazilians and especially Argentinian couriers sharply escalated. Regardless of the route chosen, the nationality of the courier and the nationality of the person who recruited the courier, Colombian traffickers remained the leader and controllers of the South American heroin trade in New York.

Traffickers began using more sophisticated methods, smuggling heroin in luggage, postal shipments and container cargo. Soon virtually all the methods utilized for smuggling cocaine were adopted for heroin smuggling. Additionally, smuggling methods became more sophisticated.

The volume smuggled increased. For the last half the 1990's heroin shipment per courier averaged about one to three kilograms of heroin. Starting around 1999, authorities began interdicting larger shipments. The average amount smuggled by couriers is presently between five to eight kilograms a shipment, either hidden in a combination of luggage, strapped to the courier, and/or swallowed by the courier. Ever expanding, South American——

Mr. BURTON. Mr. Jimenez. If you could try to sum up, we would appreciate it. I know you have a very lengthy statement and it will be put in the record so we can read all of it, but we want to make sure we have time for everybody to be questioned properly.

Mr. JIMENEZ. OK.

Mr. BURTON. Thank you, sir.

Mr. JIMENEZ. Well, in a nutshell we have more heroin available in the United States. It's more pure and more cheaper than ever. And about 90 percent of the heroin available here in the United States is from Colombian origin.

That's my summation to the problem that we're facing in this country.

[The prepared statement of Mr. Jimenez follows:]

Statement of

Felix J. Jimenez

Former Special Agent In Charge
New York Division
Drug Enforcement Administration

On

South American Heroin

Before the

Committee on Government Reform

U.S. House of Representatives

Hon. Dan Burton
Chairman

December 12, 2002

Chairman Burton and Members of the Committee, I would like to begin by thanking the Committee for the opportunity to appear before you today. I commend the Committee for their unwavering support in the fight against illegal drug trafficking. As the former Special Agent in Charge of the Drug Enforcement Administration's New York Division with over 30 years of drug law enforcement experience, I would like to provide the Committee with an overview of South American heroin trafficking and distribution as it affects the New York geographic area.

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During my tenure as the Chief of the Heroin Desk in DEA Headquarters in the (late 1980s), DEA began developing intelligence that drug traffickers based in Colombia were cultivating opium poppies and seeking to develop a heroin processing capability. Significant shipments of South American heroin began arriving in New York in 1991. By applying the same trafficking expertise used to by their peers to dominate the cocaine trade, and by significantly reducing prices and increasing purity, South American heroin traffickers were able to dominate New York's heroin market by the mid-1990s.

Unlike the cocaine kingpins and cartels of the 1980s, South American heroin organizations are generally loose confederations of several organizations and entrepreneurs who realize that a high profile is counterproductive and dangerous. Originally relying on relatively small heroin conversion laboratories in Colombia, producing a few kilograms per operation, traffickers today utilize laboratories capable of producing significantly greater quantities.

South America heroin traffickers originally smuggled their heroin to New York in relatively small amounts, primarily using couriers internally carrying up to a kilogram, flying on direct commercial air flights to JFK Airport from Colombia. Over time, South American heroin organizations grew in number, size, and experience. These organizations' methods and tactics continually evolved, becoming more sophisticated and difficult to counter. Reacting to an increasing rate of interdiction for direct flights from Colombia, smugglers began transiting through secondary countries and changing methods of conveyance. In addition to direct flights, couriers now flew to other United States airports, often from secondary countries such as Venezuela, Brazil, Ecuador, Argentina, Chile, as well as from intermediate stops in Central America, the Caribbean, and Mexico.

In one of the first countermoves made by South American heroin traffickers, they began routing heroin couriers to the United States through Argentina, Brazil, and Chile,

traditionally not identified as source countries. Additionally, the traffickers aggressively sought out citizens of these countries to become couriers, as they do not need a tourist visa to enter the United States, reducing the scrutiny given to these potential couriers. As a result, South American heroin smuggled into the United States by Chilean, Brazilian, and especially Argentinean couriers sharply escalated.

Regardless of the route chosen, the nationality of the courier, and the nationality of the person who recruited the courier, Colombian traffickers remain the leaders and controllers of the South American heroin trade into New York.

Traffickers began using more sophisticated methods, smuggling heroin in luggage, postal shipments, and containerized cargo. Soon, virtually all the methods utilized for smuggling cocaine were adopted for heroin smuggling. Additionally, as smuggling methods became more sophisticated, the volume smuggled increased. For the last half of the 1990s, heroin shipments per courier averaged about one to three kilograms. Starting around 1999, authorities began interdicting larger shipments. The average amount smuggled by courier is presently five to eight kilograms a shipment, either hidden in a combination of luggage, strapped to the courier, and/or swallowed by the courier.

Ever expanding, South American heroin traffickers developed and now heavily utilize air, rail, and land routes through Arizona, Texas, and Florida for heroin destined for New York. In the Caribbean, traffickers most often use Aruba, Haiti, Trinidad, and Puerto Rico.

One of the most sophisticated and effective methods of smuggling drugs, and the one that requires the most logistical expertise, is the use legitimate cargo vessels and aircraft. South American heroin traffickers have also developed this expertise, as evidenced by one of the largest South American heroin seizures made in the United States. This occurred in May 2001, when DEA New York seized a containerized cargo shipment of 54 kilograms of heroin in Staten Island, New York.

The latest trend in South American heroin smuggling is liquid heroin soaked into clothing, which is then smuggled by couriers. This method, which requires special preparations and special extraction procedures, is very difficult to detect. There are numerous cases submitted to DEA's Northeast Regional Laboratory since the beginning of this year documenting this method.

The increasing sophistication of South American heroin trafficking networks is evidenced by the recent dramatic increase in heroin seizures by DEA New York. During Fiscal Years 1997 through 2000, DEA New York heroin seizures were relatively stable at about 90 kilograms per year. However, heroin seizures for FY 2001 doubled to 199 kilograms, remaining at this high level for FY 2002, with 200.3 kilograms seized.

Within New York, Colombian traffickers, using the cocaine networks already in place, began and continue to supply established Dominican and other distributors who control much of the lower wholesale and retail market. In one example in 1996, a DEA

enforcement group served a search warrant on an active heroin "cutting mill." Couriers had smuggled the heroin into New York sewn into winter coats. Workers in the cutting mill were taking the heroin out of the coats, cutting it slightly, and filling the retail level "dime bags" for street level sales. In effect, the street dealer was only one level away from the importer, making this and numerous similar organizations very difficult to systematically target and dismantle.

The result of the increase in South American heroin trafficking and distribution is much higher purity at the street level. The high purity of South American heroin allows a user to snort the heroin rather than inject it. This opened heroin abuse to a much broader cross section of potential users who were leery of using a needle. Emergency rooms soon witnessed a dramatic increase in heroin related admissions. According to Drug Abuse Warning Network estimates, during calendar year 2001, New York City had over 29 heroin related emergency room visits per day, exceeded only by cocaine visits with 38 visits.

South American heroin traffickers, combined with their established smuggling and distribution operations, ability to innovate and adapt to changing conditions, will likely remain a significant threat and dominant the heroin market in New York for the foreseeable future.

I would be pleased to answer any questions the Committee may have.

Mr. BURTON. Thank you so much. We really appreciate the hard work.

Mr. JIMENEZ. My pleasure, Your Honor.

Mr. BURTON. Mr. Pelletier. Is that—was I closer that time?

Mr. PELLETIER. That was correct, Mr. Burton. Thank you.

Mr. Chairman and members of the committee, I'd like to first thank you for my—this opportunity to testify before you. My name is Scott Pelletier. I was born and raised in Portland, Maine. I'm presently a Detective Sergeant with the Portland Police Department, and I'm assigned to the State task force, which is Maine Drug Enforcement Agency. I have been with—in law enforcement for over 15 years. I've worked a number of different types of jobs from the regular street beat patrol officer all the way to investigations from everything from theft to homicide, and the majority of my time has been with drug-related investigations. Since 1999, I've been assigned to the Portland office of the Maine Drug Enforcement Agency as a Supervisory Special Agent. The MDEA is a multi-jurisdictional task force that has six offices statewide.

In the State of Maine there are 16 counties. Maine has a population of approximately one and a quarter million people. For that amount of people there are only 34 drug agents assigned to MDEA. Twenty-seven of those agents are federally Byrne grant funded. Without their funds we'd essentially have no drug agents other than local police officers. My offices consist of myself and four other agents and we're located in the city of Portland, and we're responsible for all the drug investigations within Cumberland County, Cumberland County being the largest county in the State, with approximately a quarter of a million people and it expands about 853 square miles.

Last year, in my office alone 38 percent of our total arrests were heroin related, for either its sale or possession. The city of Portland may be considered a small city compared to other cities in America, but like many of those larger cities I can tell you with complete confidence heroin is the single largest drug threat to our area.

Many people believe that heroin is making a comeback. I'm here to tell you that it essentially has never left. There have been significant changes, however, in heroin trends due in large part to Colombian cartels aggressively adding heroin to their supply of available drugs being marketed throughout the United States. Once the Colombians decided to market their heroin it became cheaper and more pure.

I've witnessed firsthand how heroin's increased availability has impacted the city of Portland. The most significant trend has been due to this increased availability. In Maine, during our fiscal year 2001, seizures of heroin rose 171 percent over fiscal year 2000, and a dramatic 622 percent over fiscal year 1999. In 2002 there was a 56 percent increase in heroin seizures over fiscal year 2001. And in addition, heroin arrests in 2001 rose 50 percent over 2001 and 110 percent over the previous year of 1999.

There has historically been a problem in Maine with heroin but over the past 5 years it has become nothing short of epidemic. During my 15 years in law enforcement, I personally witnessed a devastation that heroin has inflicted on countless families within my community, not to mention throughout the State. The increased

availability of heroin is the single most contributing factor when accounting for the State's dramatic increase in heroin-related incidents, including its sale, use, arrests and, sadly, deaths.

During the nineties, I was assigned to conduct numerous undercover operations where I would personally purchase heroin from in-state and out-of-state suppliers. During that time, a heroin bag or one single dose cost approximately 35 to $50 a bag for a single dose with a purity level between 10 and 30 percent. At that time it was approximately a dose of heroin weighed one-tenth of a gram.

Within the city of Portland I knew almost all the addicts by name. They tended to be poor, uneducated, middle-age people who were in their stages—late stages of substance abuse.

Today a bag of heroin, the same bag of heroin costs between 15 and $25 a bag in southern Maine, and the purity levels are consistently in the 80th percentile if not more pure than that.

Today with the higher purity levels, a bag of heroin contains now 1 one-hundredth of a gram of the highly addictive drug. If I could for a moment—I believe you'll find a packet of Sweet and Low before you—give you this visual demonstration. Most people, we understand these numbers, but if you take a Sweet and Low package, they're measured out in 1 gram. In you were to open that package and pour it in front of you and separate that 1 gram into 100 equal parts, if you can do it—it's very difficult to do—once you get around 10, there is just so little of the drug there, or if that was the drug.

The shipments into the United States are in the kilos, 1,000 grams to a kilo. That translates into 100,000 doses, single doses of this highly addictive drug. It's no wonder why our young people feel immune that such a small, minute piece, little bit of white powder, could ever affect them.

Today a single dose of heroin can be purchased for $4 a bag. That's less than you could purchase a happy meal or a convenience meal at any of our local restaurants. Obviously the increased availability of this drug, along with the simultaneous decrease in its price, has created a market that makes this drug attractive to younger people who oftentimes may become addicted after using it only one time. The drug is made even more attractive to young adults who believe they cannot become addicted to heroin if they only snort or smoke it rather than inject it. This myth is quickly dispelled, however, after the first use, first or second use of this incredibly addictive drug.

This dire problem is a direct result of the Colombians intentionally flooding their established cocaine markets with a stronger, cheaper heroin. We can no longer wonder if our children will be exposed to heroin. Now we must wonder when will they be exposed and pray that they choose not to experiment with it.

Today I can only estimate the number of addicts in Portland alone is between 12- and 1500, and I no longer know them all by name. I do however know, based on our arrests, that the average user of this heroin is no longer a late-stage substance abuser; they are teenagers, young adults, college students, and high school graduates from every walk of life. It is no longer exceptional for law enforcement to have contact with an 18- or 19-year-old heroin user who is already into their first or second year of substance abuse.

Mr. BURTON. Mr. Pelletier.

Mr. PELLETIER. This translates into younger addicts committing crimes such as robberies, thefts——

Mr. BURTON. If you could sum up, we'd appreciate it, sir.

Mr. PELLETIER. Certainly I will. It has often been said, as Maine goes, so goes the Nation. In this case I hope that is not true. I urge you to make it a priority to assist officials here in the United States and abroad who desperately want to keep heroin out of the country by eradicating heroin at its source. Our children are our future. We must afford them every opportunity to succeed in life and reduce the likelihood of experiencing the death and despair that comes with heroin addiction. Thank you.

[The prepared statement of Mr. Pelletier follows:]

Angus S. King, Jr.
Governor

STATE OF MAINE
Department of Public Safety
MAINE DRUG ENFORCEMENT AGENCY
PORTLAND TASK FORCE OFFICE
565 Congress Street Suite 300
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Michael F. Kelly
Commissioner
Roy E. McKinney
MDEA Director

My name is Scott J. Pelletier, I am 41 years old, and I was born and raised in Portland, Maine. After graduating High School in 1979, I entered the United States Army where I served as a Military Policeman for over seven years. After Honorably Discharging from the military I joined the Portland Maine Police Department. I am presently a Detective Sergeant with the Portland, Maine Police Department and have been with the Portland Police Department for fifteen years. During this time I have worked as a patrol officer, patrol supervisor, and a detective assigned to investigate crimes ranging from Thefts to Homicides. Since 1999, I have been assigned to the Portland office of the Maine Drug Enforcement Agency (MDEA) as a Supervisory Special Agent. Prior to my current assignment, I was assigned to the MDEA as a Special Agent, a detective assigned to investigate drug cases.

The MDEA is a Multi-Jurisdictional Drug Task Force with six offices statewide. There are 16 counties in Maine, with a population of approximately 1,275,000 people. There are 34 drug agents assigned to the MDEA, 27 of which are federally funded through a Byrne Grant. MDEA is the sole, primary agency tasked with investigating drug crimes in our state. To break it down even further, my office consisting of myself, and four agents, is located in the City of Portland. We are responsible for drug

investigations within Cumberland County. Cumberland County has an area population of 243,135 the largest in Maine, and is approximately 853 square miles in size.

Last year, in fiscal year 2002, 38% of my office's total arrests were heroin related, either for its sale or possession. The city of Portland, Maine may be considered small compared to other cities in America, but like many of those larger cities, I can tell you with complete confidence that heroin is the single largest drug threat to our area.

Many people believe that heroin is making a come back within the state, when in fact it had never left.

There have been significant changes in heroin trends, due in large part to Colombian Cartels aggressively adding heroin to their supply of available drugs being marketed throughout the United States. Once the Colombians decided to market their heroin, it became cheaper, and more pure. I have witnessed first hand how heroin's increased availability has impacted the City of Portland.

The most significant trend has been due to this increased availability, resulting in a greater number of people becoming addicted. For instance, in Maine, during FY 2001, seizures of heroin rose 171% over FY 2000, and 622% over FY 1999. In 2002, there was a 56% increase in heroin seizures over FY 2001. In addition, heroin arrests in FY 2001 rose 50% over FY 2000, and 110% over FY 1999. There has historically been a heroin problem in Maine, but over the last five years it has become nothing short of an epidemic.

During my fifteen years in law-enforcement, I have personally witnessed the devastation that heroin has inflicted on countless families within my community, not to mention throughout the state. The increased availability of heroin is the single most

contributing factor when accounting for the state's dramatic increases in heroin related incidents, including its sale, use, arrests and sadly deaths.

During the mid 1990s, I was assigned to conduct numerous undercover operations, where I personally purchased heroin from in-state and out-of-state heroin suppliers. During that time, a bag of heroin cost approximately $35-$50 per dose, with a purity level of 10%-30%. There was approximately 1/10 of a gram of heroin in each bag.

Within the City of Portland, I knew almost all of the heroin addicts by name. They tended to be poor, uneducated, middle aged people who were in late stages of substance abuse. Today, a bag of heroin costs $15-$25 per bag in Southern Maine, and the purity levels are consistently in the 80th percentile, if not more pure than that. Today, due to the higher purity levels, a bag of heroin contains 1/100th of a gram of the highly addictive drug. The heroin that is used and sold in Maine generally is transported north on the Interstate 95 corridor from Massachusetts. A majority of the addicted people in Maine travel to Massachusetts to purchase heroin for as little at $4.00 per bag. A lunch at a fast food restaurant costs more than a single dose of heroin. Obviously, the increased availability of this drug, along with the simultaneous decrease in its price, has created a market that makes this drug attractive to younger people who often times may become addicted after using heroin only one time. The drug is made even more attractive to young adults who believe they cannot become addicted to heroin if they only snort or smoke it, rather than inject it. This myth is quickly dispelled, however, after the first few uses of this incredibly addictive drug.

This dire problem is a direct result of the Colombians intentionally flooding their established cocaine markets with stronger, cheaper heroin. We can no longer wonder "if"

our children will be exposed to heroin, we must now wonder "when" will they be exposed to it and pray they choose not to experiment with it. The Colombian Cartels intentionally market cheap, strong heroin that has the ability to addict a person after only one or two doses, thereby assuring a steady client base.

Today, we can only estimate how many heroin addicts there are in Portland. We estimate that there are between 1200 and 1500 addicts living locally, and I no longer know them all by name. I do, however, know based on our arrests, that the average user of heroin is no longer a late stage substance abuser, they are teenagers and young adults; college students and high school graduates from every single walk of life. It is no longer exceptional for law enforcement to have contact with an 18 or 19 year-old heroin user who has already been addicted for a year or two. Our society is forced to deal with a whole new generation of opiate-addicted substance abusers. When these young people should be considering which college or trade school to attend, their need to supply their addiction supercedes everything else.

This translates into young addicts committing crimes such as robberies and thefts to support their addiction, and in many cases overdosing or dying in the process. In many instances addicted people who are convicted of these drug-related crimes go into our jails and prisons. It is estimated in Maine that 80% of the Department of Corrections prisoner population has a substance abuse problem. In most cases, they return to the community still addicted.

As a result of the increased availability of heroin, Portland Maine has consistently experienced increases in drug-related overdose deaths. Although not all of the overdose deaths were directly heroin related, 2/3 of the victims in these deaths were known heroin

users. In Portland in 2001 there were 16 drug overdose deaths; of those 16 deaths, 2/3 were heroin related. So far in 2002, Portland has had 27 suspected drug overdose deaths, 20 of the 27 were known heroin users. Beyond this, there have been well over 200 non-fatal opiate related overdoses reported by the city's Medical Emergency Response Units (MEDCU). If not for the ready access to emergency medical treatment , the death rate would be considerably higher. How many more young people need to become addicted and die before the flow of heroin into small cities like Portland is stopped at its source?

We, as a society, cannot expect local law enforcement agencies to eliminate this epidemic alone. We are able to put local suppliers of heroin out of business, but for each one that is arrested and taken off the street, another one is ready to step in and fill the void. Despite how tough our state's drug laws are, if nothing is done to reduce the availability of heroin at its source, communities will continue to fill prisons with lower to mid-level drug dealers and addicts. This method of enforcement alone cannot be expected to stop the flow of heroin into our cities. It is a known fact that Colombia has the ability to produce between 6 and 8 metric tons of heroin each year. It makes sense that the most effective way to assist local law enforcement is to aggressively eradicate heroin at its source, which is in the poppy fields of Colombia. Cutting off heroin at its source will have the most impact toward reducing the availability of heroin in our cities. We have a heroin epidemic in Portland, Maine, and it is a crisis that knows no age limits and no economic boundaries. Portland is one of many cities that has to contend every day with this epidemic. To the Colombian Cartels, each of our children are nothing more than future customers.

I urge you to make it a priority to assist officials here in the United States and abroad, who desperately want to keep heroin out of our country, by eradicating heroin at its source. Our children are our future; we must afford them every opportunity to succeed in life and reduce the likelihood of them experiencing the death and despair that comes with heroin addiction.

Mr. BURTON. As I said to Mr. Jimenez, I say this to all of you, we really appreciate the hard work and risks that you take in trying to protect us; and we're very happy that you're here today.

Mr. Marcocci. I'm going to have to learn more about you Italians.

Mr. MARCOCCI. Chairman Burton and committee members, it is an honor and a privilege to speak to you today about heroin. I am Detective Tony Marcocci, along with my partner, Detective Terry Kuhns of the Westmoreland County District Attorney'S Office, and Detective Ray Dupilka of the Latrobe Police Department. In 1985, Detective Kuhns and I, along with other law enforcement, first encountrered a new drug on the streets of Westmoreland County. That drug was crack cocaine, which is cocaine in its purest form.

During these investigations we learned of the addictive qualities of crack. While their children went without food or clothing, we watched as parents traded food stamps for crack cocaine, and in other cases individuals committed crimes to obtain it.

Addressing this drug problem presented a challenge never before seen. We thought that through public education, drug awareness programs, and dedicated police work, we could eliminate the use of crack cocaine. We were wrong. With all the time, manpower, and effort law enforcement spent to combat the crack cocaine problem, we now face an even more urgent, pressing, deadly, dangerous and addictive enemy.

In the past 18 months we have seen an unprecedented rise in the use of a new form of an old drug in Westmoreland County. The wholesalers of this drug, in an attempt to assist the buyers, print the names of their product on the sides of each bag. Some of these names include Lightening, 12 Monkeys, Mombo King, Murder One, Boyon, and Brain Damage. This drug is Colombian heroin. I have brought some evidence samples of these bags for you to understand a little better what I'm talking about.

These bags contain very small quantities of heroin, usually between .01 grams and .03 grams. The reason that such a small amount of heroin can be placed into these bags is because the purity of this heroin is between 80 and 90 percent. We have never experienced heroin of this quality in our careers. Heroin buyers are able to purchase these bags on the streets of Westmoreland County for 20 to $30 a bag. Some individuals drive to neighboring communities where they are able to purchase these bags for $100 a bundle, which is a 10-unit bag, bundle of heroin, or $500 per brick, which is, say, a 50-unit quantity of heroin. Some of these individuals are doing this as a way to make money to support their own habit.

Heroin has made its way into the mainstream of drug use in adults and unfortunately in our high schools and middle schools with children as young as 12 and 13 years old. Almost all heroin users tell us that their addictions began with prescription drugs such as Oxycontin and Vicodin. They develop a tolerance and progress upwards to heroin. They also advised us that they began snorting heroin because they believed it was not as addictive if ingested in that manner. They were just kidding themselves. Once they began to develop a tolerance to snorting, they began injecting it. After working 28 years in law enforcement, we have seen many tragedies, but nothing is more sad than seeing a child or a teen be-

come the victim of a crime. In Westmoreland County, we're seeing it daily. My partner and I have witnessed teens dying from heroin overdoses. We've executed search warrants and spoken with 16- and 17-year-old children who say they have already been through rehabilitation and they're still using heroin. These same teens tell us how they are coping with the ancillary effects of their heroin abuse such as Hepititis C and HIV. Clearly the societal costs of heroin extend beyond the users and their families.

Throughout our years in the narcotics field, we have spoken with individuals who have used heroin for a short time and others who have used it for years. They may be detoxed or attend court-ordered treatment facilities for their heroin abuse. These people may stay heroin-free for a week, a month, or in some cases a few months, but they will always go back to using heroin. The sad reality of heroin abuse is we personally know of no success cases as a result of treatment. It's a disturbing reality to look into the eyes of a parent or their child, knowing in our hearts there is no hope that child will ever beat this addition.

Often people believe that this is an inner-city problem, but it's not. Westmoreland County is a typical rural and suburban community population of approximately 400,000. Often people believe that this problem is with low-income individuals, but it's not. Heroin has touched families of all social and economic backgrounds. In Westmoreland County we have had 12 overdoses resulting in death this year alone, all of which were between the ages of 19 and 46. Ten were male, two were female, all were white. As a comparison to these 12 deaths, in the preceding 5 years we only had five overdoses resulting in death.

Upon checking with one local community hospital emergency room, they report the number of individuals seen for heroin overdoses has doubled every year for the past 3 years, with 60 individuals being examined this year, 2002. I'm sure if we contacted all the hospitals in our area, that number would multiply exponentially.

My partner and I are asked regularly to speak before committees and organizations. In September of this year, we took part in a drug symposium in our county. A speaker at this symposium presented an analogy to our current heroin problem. As you will recall, September—in September, a sniper was killing and critically injuring individuals in the Washington, DC, area with no regard to race, age, or income level. As a result of the shooting spree, 10 people died and 3 were critically injured. During this time, a massive effort was made by local, State and Federal agencies to stop the senseless killings. Cooperation and open lines of communication among the various law enforcement agencies played a large part in bringing this case to a successful conclusion. These agencies were attempting to stop a faceless killer of 10 in the Washington, DC, area.

We in Westmoreland County are faced with a killer of our own. Our killer is heroin. It has taken 12 lives this year alone and will continue to destroy lives at an ever-increasing rate. Knowing now what is happening in our small community and others like it, my belief is that eliminating this drug in its country of origin will help all of us at the local level. If heroin can be eliminated at its source,

it would reduce the amount of heroin on the streets in my community and in many others, helping law enforcement to help the community that we are sworn to protect and serve. Thank your, Your Honor.

Mr. BURTON. Thank you Mr. Marcocci. The only people that may call me Your Honor is my kids. So you don't need to call me that.

[The prepared statement of Mr. Marocci follows:]

Westmoreland County

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STATEMENT OF DETECTIVE TONY MARCOCCI

WESTMORELAND COUNTY DISTRICT ATTORNEYS OFFICE

DECEMBER 12, 2002

GOVERNMENT REFORM COMMITTEE

Chairman Burton and Committee Members,

It is an honor and privilege to speak to you about Heroin. I am Detective Tony Marcocci, along with my partner Detective Terry Kuhns of the Westmoreland County District Attorneys Office, and Detective Ray Dupilka of the Latrobe Police Department.

In 1985, Detective Kuhns and I, along with other law enforcement officers, first encountered a new drug on the streets of Westmoreland County. That drug was "Crack" cocaine, which is cocaine in its purist form. During these investigations, we learned of the addictive qualities of "Crack". While their children went without food or clothing, we watched as parents traded food stamps for "Crack" and in other cases, individuals committed crimes to obtain it. Addressing this drug problem presented a challenge never before seen. We thought that public education, drug awareness programs and dedicated police work would eliminate the use of "Crack" – but we were wrong. With all the time,

manpower and effort law enforcement spent to combat the "Crack" cocaine problem, we now face an even more urgent, pressing, dangerous, deadly and addictive enemy.

In the past 18 months, we have seen an unprecedented rise in the use of a new form of an old drug in Westmoreland County. The wholesalers of this drug, in their attempt to assist the buyers, print the names of their product on the side of each bag. Some of these names include Lightning, Twelve Monkeys, Mombo King, Murder One, Boyon and Brain Damage. This drug is Colombian Heroin. I have brought some evidence samples of these bags for you to understand a little better what I am talking about.

These bags contain a very small quantity of Heroin, usually between .01 grams and .03 grams. The reason that such a small amount of Heroin can be put into these bags is because the purity of this Heroin is between 80 and 90 percent. We have never experienced Heroin of this quality in our careers. Heroin buyers are able to purchase these bags on the streets of Westmoreland County for $20.00 to $30.00 per bag. Some individuals drive to neighboring communities where they are able to purchase these bags for $100.00 per bundle (a ten bag unit of Heroin) or $500.00 per brick (a 50 bag unit of Heroin). These individuals do this as a way of making money to support their own habit.

Heroin has made its way into the mainstream of drug use in adults, and unfortunately, in our high schools and middles schools, with children as young as 12 and 13 years old. Almost all Heroin users tell us that their addictions began with prescription

drugs, such as Vicodin or Oxy-Contin. They develop a tolerance and progress upward to Heroin. They also advised us that they began by snorting Heroin because they believed it was not as addictive if ingested in this manner. However, they were just kidding themselves. Once they began to develop a tolerance to snorting, they began injecting it. After working 28 years in law enforcement, we have seen many tragedies, but nothing is more sad than seeing a child or teen become the victim of a crime. In Westmoreland County, we are seeing it daily. My partner and I have witnessed teens dying from Heroin overdoses. We have executed Search Warrants and have spoken with 16 and 17 year old children who say they have already been through rehabilitation and are still using Heroin. These same teens are telling us how they are coping with the ancillary effects of Heroin abuse, such as Hepatitis C and HIV. Clearly, the societal cost of Heroin extends beyond the user and their families.

Throughout our years in the narcotics field, we have spoken to individuals who have used Heroin for a short time and others who have used it for years. They may be detoxed or attend a court ordered treatment facility for their Heroin abuse. These people may stay Heroin-free for a week, a month or in some cases a few months, but they will always go back to using Heroin. The sad reality of Heroin abuse is that we personally know of NO success cases as a result of treatment. It is a disturbing reality to look into the eyes of a parent and their child, knowing in our hearts there is no hope the child will ever beat this addiction.

Often people believe this is an inner city problem, but it is not. Westmoreland County is a typical rural and suburban community, population of approximately 400,000. Often people believe that this is a problem with low-income individuals, but it is not. Heroin has touched families of all social and economic backgrounds. In Westmoreland County, we have had 12 overdoses resulting in death this year, all of which were between the ages of 19 and 46, 10 were male, 2 were female, and all were white. As a comparison to these 12 deaths, in the preceding 5 years we had only 5 overdoses resulting in death. Upon checking with one local community hospital emergency room, they report the number of individuals seen for Heroin overdoses has doubled every year for the past 3 years, with 60 individuals examined in the year 2002. I'm sure if we contacted all the hospitals in our area that number would multiply exponentially

My partner and I are asked regularly to speak before committees and organizations. In September of this year, we took part in a drug symposium in our county. A speaker at this symposium presented an analogy to our current Heroin problem. As you will recall, in September a sniper was killing and critically injuring individuals in the Washington, D.C. area, with no regard to race, age or income level. As a result of this shooting spree, 10 people died and 3 were critically injured. During this time, a massive effort was made by local, state and federal agencies to stop these senseless killings. Cooperation and open lines of communication among the various law enforcement agencies played a large part in bringing this case to a successful conclusion. These agencies were attempting to stop a faceless killer of 10 in the Washington, D.C. area; we

in Westmoreland County are faced with a killer of our own. Our killer is Heroin. It has taken 12 lives this year alone, and will continue to destroy lives at an ever-increasing rate.

Knowing now what is happening in our small community and others like it, my belief is that eliminating this drug in its country of origin would help all of us at the local level. If Heroin can be eliminated at its source, it would reduce the amount of Heroin on the streets in my community and many others - helping law enforcement to help the community we are sworn to protect and serve.

Mr. Chairman, thank you for allowing me to testify. I would be happy to answer any questions you may have.

Mr. BURTON. Mr. Carr.

Mr. CARR. Good afternoon, Chairman Burton——

Mr. BURTON. Turn the mic on.

Mr. CARR. Mr. Gilman, Mr. Tierney, and especially Ms. Norton who is from my area. My name is Tom Carr. I am the Director of the Washington-Baltimore HIDTA. The HIDTA program, as you all know, is a program designed to enhance and coordinate drug control efforts in certain geographic areas of the country. The Washington-Baltimore HIDTA was designated in 1994 by the Office of National Drug Control Policy, and we focus on the central part of Maryland, to include Baltimore, all of Washington, DC, and the northern part of Virginia.

As the heading for the hearing here today, "America's Heroin Crisis" indicates, there is a growing crisis perhaps in other areas of the country, but I'm here to tell you that in at least the Baltimore region, that's been a standing epidemic for years.

I have submitted my testimony and other documents to you. Let me just briefly cite you some statistics which I think point out the gravity of the situation. Baltimore's population is around 651,000. That accounts for around 12 percent of the total population of Maryland. Yet 55 percent of all the drug overdoses occur in Baltimore. Of the 306 overdose deaths that occurred in Baltimore last year, 86 percent were connected either directly or in combination with an overabuse of a narcotic, primarily either heroin, morphine, or methadone, all spinning around the heroin industry. What we've seen since the middle nineties is an increase in purity of the heroin.

Baltimore, another shocking figure estimates—this is from their health department—they have 60,000 heroin addicts. Again I remind you, in a population of 651,000 people, that's 9 percent of the population. It's an astonishing figure.

I wish Congressman Cummings was here today. He could certainly verify what I'm saying because, unfortunately, many of them live in and about his district. And we've been working very hard with him to come up with some solutions for that. But there are some other things that sort of point to that. All of Baltimore is not bad, just pockets of Baltimore have these problems. For example, when you look at the high crime areas where the homicides are—is the chart up here? I don't need to see it. If you look at the concentration of those dots in there which represent homicides since—what does it begin with, 1990?

Mr. BURTON. 1992.

Mr. CARR. 1992 up through 2000, I believe.

Mr. BURTON. 2001.

Mr. CARR. Thank you, sir. I should be able to see it, I guess. At any rate, if you look at the pockets there, you can see there hasn't been many changes as to the locality of these homicides. I could show you other crimes that cluster there as well.

My point is that there is where the area is bad. This is where you see many single parents; in fact, usually fatherless households, absentee, they're the absentee parent, and the parents themselves have arrest records, drug—history of drug abuse and drug problems. Only 54 percent of the seniors in the school system in Baltimore graduate high school.

And another alarming figure that we went over yesterday with the police commissioner, Ed Norris, is that 87 percent of the births last year in Baltimore were to unwed mothers. That has some real ominous forecast for Baltimore and what may come in there.

In Baltimore since—from 1990 to 1999, 3,200 homicides. Most of those, between 75–80 percent, are drug related. I'm happy to report that thanks to the efforts of the Baltimore Police Department, Congressman Cummings' support, work of the Baltimore HIDTA, that we've got that number down below 300. So it was the first time in a decade we were able to get that homicide rate down, number of homicides down below 300.

According to our indications, according to reports we have, the heroin that we see in Baltimore comes from New York and Philadelphia. We see heroin—this epidemic is starting to spread into the D.C. area; we see gangs trafficking heroin and cocaine in this area. And along with that, I can assure you, will come more violence because it's street-level trafficking; the fight for the drug market, the fight for the drug corner to make that dollar that Mr. Tierney referred to and that is so important to focus on will take place when this trade comes down here.

I mean, that's what it's all about. This is a business that's designed to make money. These people aren't in this job—or in selling drugs because they're altruists believing that everyone has a right to use drugs; they're in this to make money. And they've proven in Baltimore and other areas over and over again they will kill to do it.

Now, so far as the source of the heroin, in the late 1980's, early 1990's it was clear to us that the source of the heroin was Southeast Asia and Southwest Asia. Indications are, from different sources, although we certainly can't confirm all of it, is that much of this heroin now—what the police departments estimate and others estimate—upwards of 90 percent is South American heroin. At least it has the signature of South American heroin.

Most of our distributors are locals. It's a cottage industry. They can drive to source cities like New York, Philadelphia, buy drugs, come back and quickly double their money. So I guess they look at it as, why should I go, why should I go to high school as evidenced by the dropout rate, why should I go get a minimum-pay job at McDonald's when I can sell drugs on the street?

Mr. BURTON. And make hundreds.

Mr. CARR. The trouble is, it's dangerous. I'm going to conclude; I realize I'm taking too much time. I'm sorry.

I just want to say that despite all these sad figures I'm quoting to you, I could cite even more, we've taken the attitude that you can either complain that the rose bushes have thorns or rejoice that the thorn bushes have roses. We're doing a lot of good things. We've seen them make a lot of changes and a lot of headway, but we need to get heroin off the street.

Mr. BURTON. Thank you, Mr. Carr. I think you made a very, very graphic argument.

[The prepared statement of Mr. Carr follows:]

COMMITTEE ON GOVERNMENT REFORM

"AMERICA'S HEROIN CRISIS, THE IMPACT OF COLOMBIAN HEROIN AND HOW WE CAN IMPROVE PLAN COLOMBIA"

TESTIMONY

MR. THOMAS H. CARR

DIRECTOR

WASHINGTON/BALTIMORE

HIGH INTENSITY DRUG TRAFFICKING AREA PROGRAM

The Office of National Drug Control Policy established the Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA) Program in 1994. The two principle cities in the HIDTA, Washington and Baltimore, are large centers of drug consumption and drug-related violence. Unlike other designated areas in the HIDTA Program that focused exclusively on law enforcement efforts to interdict the flow of drugs into the country and the flow of money out of the country, ONDCP and Congress recognized the need for the Washington/Baltimore HIDTA to address issues involving drug treatment and prevention as well as drug law enforcement. Of the $12.5 million ONDCP provides annually to the Washington/Baltimore HIDTA, nearly $5 million is devoted to improving drug treatment services throughout the region and to seed innovative drug prevention projects.

At the Washington/Baltimore HIDTA we have a drug control strategy in place that funds targeted, coordinated, intelligence driven, law enforcement efforts, implements a well-founded and proven drug treatment system and three different, but very effective drug prevention programs. Copies of our latest Annual Report, Threat Assessment and Strategy along with an independent evaluation report on our treatment services have been provided for the record.

Overview

Since our designation in 1994, the Washington/Baltimore HIDTA has worked to enhance and coordinate drug control efforts throughout the region. What has been described as an emerging heroin epidemic in other parts of the country has, unfortunately been a standing epidemic in Baltimore and, of late, an emerging

problem that could well become of epidemic proportion in Washington D.C., our nation's capitol. To illustrate my point, let us look at some descriptive data about the level of heroin use in and around Baltimore.

According to the 2000 U.S. Census Bureau report, Baltimore has a population of 651,154. While it accounts for 12.3 percent of the total population in Maryland, 55% of the drug overdose deaths occurred in Baltimore in 2001. Of the 306 overdose deaths in Baltimore in 2001, 159 are attributed to narcotics (heroin and methadone) alone, 59 deaths are the result of a combination of alcohol and narcotics and 45 deaths came about through a combination of cocaine and narcotics. Simply put, 263 of the 306 overdose deaths in Baltimore in 2001 were directly attributed to heroin. That is nearly 86 percent of the drug overdose deaths!

The availability of high purity heroin at the retail level is at least partially responsible for the number of fatal heroin overdoses in Maryland. Inexperienced new abusers who have not developed a tolerance often overdose because of the high purity. Even experienced abusers may misjudge their dosage and overdose because of the higher purity of the heroin. According to many experts, the high purity heroin affects newly released prison inmates who were heroin abusers before their incarceration. They often revert to their old habits, not realizing that the heroin they purchase is now much more potent than before.

The magnitude of the heroin abuse problem in Baltimore is evidenced further by the number of ER mentions, which remains high despite a decrease in 2000. According to DAWN, the number of ER mentions in Baltimore declined from 6,999 in 1999 to 5,405 in 2000. Even so, in 2000 the highest rates of heroin-related ER mentions in the nation were reported in Newark, Baltimore, and Chicago.

Drug treatment has not kept pace with demand in Baltimore. According to numerous government sources, there are approximately 60,000 heroin addicts in the Baltimore metropolitan area. Astoundingly, this represents 9 percent of Baltimore's population. Heroin-related admissions to publicly funded treatment facilities have increased in Maryland since 1994. The number of heroin-related treatment admissions increased from 11,741 in 1994 to 15,823 in 1999. The number of heroin-related treatment admissions per 100,000 population ranked Maryland fifth in the nation in 1999. According to the Community Epidemiology Work Group, 48 percent of all treatment admissions in Baltimore were heroin-related in 1999. In Baltimore, males accounted for over 57 percent of heroin-related admissions, individuals aged 35 or younger accounted for 53.6 percent, and African Americans accounted for 62.1 percent. City health officials attribute increases in heroin-related treatment admissions in Baltimore to the increased

availability of treatment facilities. Statewide funding for treatment facilities increased from $18 million in 1996 to $46 million in 2000.
From a drug prevention standpoint, it is difficult to provide statistics that accurately present the very complex social conditions that confront Baltimore. Unemployment is on the rise. Many of the households in the high crime areas in Baltimore are run by a single parent, who has two or more children. The absentee parent, almost always the dad, provides little or no support to the family. All too often, both mom and dad have arrest records and have a history of drug and alcohol abuse. In Baltimore, only 54 percent of its public high school students graduate. In high crime areas, the percentage is even lower.

This is an alarming situation that holds an ominous forecast for the future of Baltimore. To make matters worse, the drug trafficking industry in Baltimore has been and continues to be excessively violent. Gangs, crews, trafficking organizations, or whatever term you choose to use to describe those who sell drugs at the street level, do not hesitate to kill or maim their competitors. From 1990 through 1999, Baltimore had 3204 homicides. Baltimore averaged over 300 homicides per year during this time frame. It was not until 2000 that the homicides in Baltimore fell below 300. While not all of Baltimore's homicides are drug-related, estimates are that between 75% to 85% are linked to drug use and drug trafficking.

Heroin Availability

Most of the heroin available in Maryland is produced in South America, although limited amounts from Southeast and Southwest Asia are available. Both Baltimore Police Department and Baltimore County Police Department agree that the predominant type of heroin supplying the more than 60,000 addicts in the region is South American (Colombian) heroin.

Heroin is readily available in urban areas in Maryland, especially in Baltimore, and is increasingly available throughout suburban and rural parts of the state. In response to the National Drug Intelligence Center (NDIC) National Drug Threat Survey 2001, the Maryland State Police reported that the availability of heroin is increasing in Maryland and is spreading from cities to suburban areas. South American heroin is the type most commonly available in Maryland; however, Southeast Asian and Southwest Asian heroin occasionally are available. The availability of Mexican heroin is limited.

Heroin purity levels vary throughout Maryland. According to DEA's Domestic Monitor Program (DMP)--a heroin purchase program designed to identify purity, price, and source of heroin at the retail level--in the first quarter of FY2001

(October through December 2000) heroin purity levels ranged from less than 10 percent to 96 percent in the Baltimore area.

According to the Middle Atlantic-Great Lakes Organized Crime Law Enforcement Network (MAGLOCLEN), heroin purity levels ranged from a low of 16 percent to a high of 94 percent statewide in 2001. Highly pure (80% to 98%) heroin is sold as rock-like chunks in glass vials. High purity heroin is purchased predominantly by younger abusers who snort the drug; long-term abusers who inject the drug continue to purchase low purity heroin. The Maryland State Police reported in 2000 that low purity heroin was being injected and high purity heroin was being snorted.

According to the latest edition of *Pulse Check,* Colombian heroin is the predominant type of heroin distributed and used in Baltimore. This determination comes from both law enforcement and epidemiologists.

Distribution

Dominican and Colombian criminal groups based in New York City, Philadelphia, and Baltimore and Maryland-based local independent dealers dominate the wholesale distribution of heroin in Maryland. Some Dominican criminals have established part-time residency in the Maryland cities where they distribute heroin. Wholesale heroin distribution in Maryland is centered in Baltimore. Local independent dealers may distribute heroin at the wholesale level in the counties around the city of Baltimore; however, the Maryland State Police indicate there are no known wholesale distributors outside the Baltimore area.

The heroin trade in Baltimore can best be described as a "cottage industry". Independent dealers and loosely organized, largely African American gangs are the dominant retail distributors of heroin in Baltimore. According to the Baltimore Police Drug Enforcement Section, many retail distributors purchase heroin in wholesale quantities, transport it to private residences in the Baltimore County suburbs, cut and package it into retail quantities, and transport the heroin to Baltimore City for retail distribution. Many abusers also distribute heroin at the retail level, and those living in suburban and rural areas of Maryland often travel to Baltimore, or Washington, D.C., to purchase heroin for personal use and further distribution. They often make large purchases to obtain bulk discounts and then sell the excess to other distributors and abusers.

In Baltimore loosely organized neighborhood gangs, primarily composed of African American members, conduct most of the retail heroin distribution, often in open-air environments. The location of an open-air drug market determines its

customer base. Neighborhood residents purchase heroin at drug markets located in housing projects. Suburban residents seeking easy access to the drug and a convenient route out of the city purchase heroin at drug markets located along main corridors. These open-air drug markets are breeding grounds for violence.

Transportation

Maryland-based local independent dealers and Dominican and Colombian criminal groups based in New York City and Philadelphia are the dominant transporters of heroin into Maryland. These independent dealers and criminal groups primarily travel via private or rental vehicles on interstate highways or via public transportation (buses and trains). Heroin also is transported into Maryland via commercial aircraft and maritime vessels. Numerous commercial vessels, primarily cargo ships, call at the Port of Baltimore. Many of these ships make prior stops at Colombian ports and other transshipment points utilized by Colombian heroin trafficking organizations and their surrogate groups from Latin America.

Criminal groups generally employ couriers to transport heroin into the state, and local independent dealers who distribute wholesale quantities in Maryland typically travel to primary distribution centers such as New York City and Philadelphia to purchase heroin from Colombian and Dominican criminal groups. They then transport the drug back to Maryland. Miami is also a distribution center for wholesale quantities of heroin available in Maryland but to a far lesser extent than New York City or Philadelphia.

Heroin abusers and independent retail distributors throughout Maryland travel to Baltimore, Philadelphia, and Washington, D.C., to purchase small quantities of heroin for personal use or for local retail distribution. Couriers primarily transport heroin into and through the state in automobiles and buses traveling on I-95. These couriers sometimes use alternate, less traveled routes to avoid highway interdiction. These couriers travel US 13 to US 50 and then I-97 to Baltimore, or follow US 13 to areas along the Eastern Shore. According to EPIC Pipeline and Convoy data, Interstates 97, 495, and 695; US 140; and SR-24 also are used to transport heroin into and within the state.

Violence

While the distribution and abuse of heroin are not frequently associated with violent crime in other parts of Maryland, a substantial amount of violence occurs in the Baltimore area. In February 2002, 12 individuals who operated a heroin and cocaine distribution network were indicted for five homicides; one of the victims was a young girl who was killed when gunmen opened fire on a crowd

of 200 people. On October 16, 2002 Angela Dawson, her four children and eventually her husband, died tragically when their home was torched by a 21-year-old neighborhood hoodlum with links to the drug trade. Ms. Dawson was a neighborhood activist and police feel her home was set afire in retaliation for her stance on drugs.

Heroin distributors at all levels in Baltimore commit violent crimes to protect their turf and to expand their drug distribution operations. Dominican criminal groups in the region commit violent crimes to assert and maintain dominance over drug distribution territories and to control retail distributors. Heroin abusers frequently commit property crimes--including random theft, credit card fraud, and burglary--to support their addictions.

HIDTA's Response

While the situation sounds grim, it is not without hope. To the contrary, individuals, private and government institutions have learned that there is no "silver bullet" solution to America's drug problems. Let us look at Baltimore again, this time to learn what the Washington/Baltimore HIDTA has helped to accomplish.

More individuals are seeking drug treatment than ever before and resources have increased to help meet the demand. We are also using our limited treatment resources more wisely by focusing on the hard-core drug user -- the individuals that consume 20 percent of the drugs and commit 80 percent of the crime. HIDTA's coerced treatment model, which incorporates a continuum of care, drug testing and graduated sanctions to manage its drug clients, has reduced recidivism rates dramatically. HIDTA's Baltimore clients showed a 36.6 percent reduction using before and after comparisons.

Since 1994, HIDTA has identified and funded law enforcement initiatives that targeted major drug trafficking organizations, violent traffickers, and open-air drug markets. In 1994, HIDTA identified over 500 open-air drug markets in Baltimore. Today, there are less than 300 such markets.

Despite the unacceptable level of violence in Baltimore, the violent crime rates in Baltimore fell 20.6 percent between 1999 and 2001. Murder declined 61.1 percent, robbery dropped by 19.3 percent and aggravated assault declined 19.2 percent. These significant improvements came as a result of a well devised strategy that focused law enforcement on specific, geographic targets. Not all of Baltimore is crime ridden, just parts are. Working with Baltimore Police Commissioner Norris, HIDTA developed targeting information and help to measure results.

Since its inception, HIDTA has provided over $12 million worth of resources to Baltimore to facilitate these changes.

Following the murder of Ms. Dawson and her family, Congressman Cummings joined hands with Director Walters at ONDCP to provide more funding to HIDTA. This funding is being used to purchase specialized surveillance equipment, provide more street lights and increase police activities in the worst areas of Baltimore.

Last month, Congressman Cummings invited the Washington/Baltimore HIDTA to participate in a community coalition forum at Johns Hopkins University. As a result, HIDTA staff are actively working with local community groups to ensure they get access to the Drug Free Communities Act resources.

Out of tragedy and despair and, dare we say, a failed drug policy by the previous administration in Baltimore, we now see real successes. So, as a wise person once said, "You can either complain that the rose bushes have thorns – or rejoice that thorn bushes have roses."

Conclusion

As you go about your deliberations over how best to deal with drug trafficking and drug abuse in America, keep in mind what drugs such as heroin are doing to the people living and working in cities like Baltimore and are threatening to do to Washington, D.C. Opium poppy cultivation in Colombia and other parts of South America already have had a devastating impact on our country and threaten to do even more harm. On the other hand, we should not cast all the blame on South America. Our nation's vast appetite for drugs is the reason why South America grows coca and poppies. Consequently, it is in our national and local interest to craft a balanced policy that deals with domestic and international aspects of the drug trade. Furthermore, as my testimony indicates, it is drug law enforcement, drug treatment and drug prevention applied in balance that makes for successful outcomes.

Mr. BURTON. I don't know your name and I'm not supposed to use it, so would you like to make an opening statement?

Mr. X. I would. Thank you.

Good morning. I would like to thank the committee for taking the time to hear me on the topic of heroin. My name is being withheld because of my work in an undercover capacity and to not jeopardize cases which I'm currently involved in. However, I can say that I'm a member of the Howard County Police Department in Maryland. I am currently assigned to the Vice and Narcotics Division within that department. I have been a sworn police officer for just about 7 years.

Howard County itself is in the Washington metropolitan area and includes a multicultural, very diverse population of approximately 258,000 citizens. It's approximately 252 square miles. It is one of the wealthiest counties in the country and also one of the most educated countries within the country. It's home to many high technology companies as well as farms in its rural areas.

However, just as too many other communities throughout the country, Howard County is not spared from the scourge of illegal drugs. Primary responsibility for the investigation of violations of the controlled substance laws are assigned to the Vice and Narcotics Division, which I'm a part of.

It is common knowledge and well known to police agencies around the country that a large number of street crimes, such as robbery, theft, assault and murder, are directly connected to the drug trade. The unit to which I'm assigned is tasked to address the drug trade in a proactive, community-based way. In this way, not only is the drug trade directly affected, but crimes associated with the sale and use of drugs are also curtailed.

The majority of our investigations revolve around marijuana and crack cocaine at this time. These drugs are the most commonly seized. However, the Howard County Police Department is currently seeing a rise in seizures of PCP, phencyclidine, heroin and methamphetamine.

The focus of this committee hearing is on heroin. Heroin, as we know, is a highly addictive and dangerous drug. It is responsible for many accidental and intentional overdose deaths throughout the country. Howard County is not spared by this fact. Statistics alone cannot paint a picture of heroin use and its dramatic effect on the Howard County community.

Death from heroin overdose often comes from unexpected places. I'd like to tell you one story. Colombia, Howard County, Maryland, a young male was in his first year of college in Pennsylvania. He was from an upper middle-class family. He was a promising musician and a member of two different bands. He had trained to become a professional musician.

While in high school, he experimented with and used marijuana. When he went away to school, he began to use heroin. As all too often happens, he became addicted. He then left college and came home. He continued to use heroin. He was apparently doing well at home. He had good grades. He was in a long-term relationship with his girlfriend. He had no problems with his parents and appeared to live a happy life.

One day he told his father he was going upstairs to study. Around 9:45 p.m., his father wanted to talk to him. He knocked on his bedroom door and got no response. He then forced his way into the room and found his son unconscious and unresponsive. Paramedics were called and the father attempted to start CPR. When EMS personnel arrived, they took over rescue efforts. These efforts failed and the young musician died.

The cause of death was ruled to be an accidental overdose of heroin. During an interview with the parents, they stated they did not know the scope of their son's addiction. They knew he used heroin while in Pennsylvania, but did not know he still used it. The last memory they have of their son is him lying in bed with a syringe in his arm and blood coming from his mouth and nose.

A trend the detectives in my unit are currently seeing is that heroin is becoming a drug more commonly used by adolescents and younger adults. The younger heroin users are generally not injecting it first, their heroin, they're snorting the heroin powder. Heroin powder, that we've been seeing within the county, is generally white and generally packaged in glass bottles. When talking to arrestees and informants, both advise that they usually go to Baltimore City to obtain their heroin, and bring back quantities of heroin to use and sell.

Also, as mentioned before, the use of heroin is related to many other crimes. One arrestee in particular said he had a $400-a-day heroin habit. He also stated he does not inject the heroin because he does not like needles. I think he's kidding himself. He stated he likes to snort it. To support his habit he steals cars, shoplifts and commits burglaries. This is a person from an upper middle-class family, lives in a nice home. He's 19 years old, said he has been using heroin for several years now. He's not your stereotype junkie, but represents a growing trend in younger, more affluent persons using heroin.

In summary, the stories that I have told you are from experiences of the detectives of the Howard County Police Vice and Narcotics Division. As I said before, I could spend hours talking about persons' lives that I've certainly seen ruined by heroin.

The fact is that heroin is becoming a much more commonly used drug. It's no longer the stereotype junkie in the dark alley of a city with a needle sticking out of his arm. Heroin is now moving rapidly into the suburbs, and Howard County in particular, and affecting families that it is not normally traditionally associated with.

Heroin not only destroys the person using it, but all the people around him or her. Mothers abandon their fathers—families, sons and daughters die, and families are destroyed all from heroin. Thank you for your time.

Mr. BURTON. Thank you, Detective. We really appreciate that.

First of all, I want to thank all of you. I know you lay your lives on the line on a daily basis trying to deal with this crisis.

I've been in public life off and on for about 35 years. I know I look a lot younger, but it's 35 years—I'm glad you didn't laugh at that—but I want to tell you something. I have been in probably 100, 150 hearings like this at various times in my political career. And the story is always the same. This goes all the way back to the 1960's, you know, 35, 40 years ago. And every time I have a

hearing, I hear that people who get hooked on heroin and cocaine become addicted and they very rarely get off of it. And the scourge expands and expands and expands.

And we have very fine law enforcement officers, like you, who go out and fight the fight; and you see it grow and grow and grow, and you see these horrible tragedies occur. But there's no end to it.

And I see young guys driving around in tough areas of Indianapolis in cars that I know they can't afford, and I know where they're getting their money. I mean, there is no question a kid can't be driving a brand-new Corvette when he lives in the inner city of Indianapolis, in a ghetto ,and you know that he's got to be making that money in some way that's probably not legal and probably involves drugs.

Over 70 percent of all crime is drug-related, and you've alluded to that today. We saw on television recently Pablo Escobar gunned down and everybody applauded that and said that's the end of the Medellin cartel. But it wasn't the end; there's still a cartel down there. They're still all over the place.

When you kill one, there's 10 or 20 or 50 waiting to take his place. You know why? It's because of what you said just a minutes ago, Mr. Carr and Mr. Marcocci, and that is, there's so much money to be made in it, there's always going to be another person in line to make that money.

And we go into drug eradication and we go into rehabilitation, we go into education, and we do all these things; and the drug problem continues to increase, and it continues to cost us not billions, but trillions of dollars, trillions. We continue to build more and more prisons. We put more and more people in jail. We know that the crimes that they're committing are related most of the time to drugs.

So I have one question I'd like to ask all of you, and I think this is a question that needs to be asked. I hate drugs. I hate people who have to—who succumb to the drug addiction. I hate what it does to our society. It's hit every one of us in our families and friends of ours.

But I have one question that nobody ever asks and that's this question: What would happen if there was no profit in drugs? If there was no profit in drugs, what would happen?

I'd like for any of you to answer that. If they couldn't make any money out of selling drugs, what would happen?

Mr. CARR. If I could comment, if we took away all the illegal drugs today, we're still going to have a drug problem.

Mr. BURTON. I understand that. I'm talking about new drugs.

Mr. CARR. The question is—what you're arguing then is complete legalization?

Mr. BURTON. No. I'm not arguing anything. I'm asking the question. Because we've been fighting this fight for 30 to 40 years—let me finish—we've been fighting this fight for 30 to 40 years and the problem never goes away. New generations, younger and younger people get hooked on drugs. Kids in grade schools are getting hooked on drugs. Their lives are ruined. They're going to jail. They're becoming prostitutes and drug pushers because they have to make money to feed their habit.

These horrible drug dealers, many of whom reason—using drugs, they send free drugs into schools and school yards and everything else to hook these kids; and the problem increases and increases and increases. And nobody ever asks this question.

I'm not inferring anything, because I hate drugs. I hate the use of it. I hate what it's done to our society. But the question needs to be addressed at some point. What would happen if they don't make any money out of it?

Mr. CARR. I don't think you can create a situation where no one makes any money out of it. There's always going to be a black market. I don't think the American public is going to say, OK, well, drugs don't cost anything, but only 18-year-olds can have it, or 18 and above; then you have a black market for the minors. No one is going to say 2-year-olds can have heroin, 5-year—where do you make that demarkation? So I don't think you can get to that point where you have a laissez faire type of drug business without any profit in it. That would reduce—even with that would reduce some forms of crime. But you're still going to have other crimes there because we aren't addressing——

Mr. BURTON. How about the overall effect on our society? The long-term problem with our society, the number of people that are being addicted in our society, would it go up or down if there was no profit?

Mr. CARR. Oh, I think it would go up. If people were told that it was free, I think people would try it more and get addicted.

Mr. BURTON. I didn't say free.

Mr. CARR. I think people would try it more if it was available.

Mr. BURTON. Well, I don't think that the people in Colombia would be planting coca if they couldn't make any money. And I don't think they'd be refining coca and heroin in Colombia if they couldn't make any money. And I don't think that Al Capone would have been the menace to society that he was if he couldn't sell alcohol on the black market. And he did, and we had a horrible, horrible crime problem.

Now, the people that are producing drugs over in Southeast Asia and Southwest Asia and in Colombia and everyplace else, they don't do it because they like to do it. They don't fill those rooms full of money because they like to fill it full of money. They do it because they're making money.

Mr. CARR. Exactly.

Mr. BURTON. The problem, in my opinion, is that at some point we have to look at the overall picture. And the overall picture—I mean, I'm not saying there's going to be people who are addicted and you're not going to have education and rehabilitation and all those things that you're talking about. But one of the parts of the equation that has never been talked about, because politicians are afraid to talk about it—this is my last committee hearing as chairman, last time, and I've thought about this and thought about this, and one of the things that ought to be asked is, what part of the equation are we leaving out and is it an important part of the equation, and that is the profit in drugs.

Don't just talk about education. Don't just talk about eradication. Don't just talk about killing people like Escobar, who is going to

be replaced by somebody else. Let's talk about what would happen we started addressing how to get the profit out of drugs.

Mr. CARR. I think that's something that needs to be looked at, but I still question the idea of—if you're taking the profit out of drugs, that doesn't mean you're eliminating the demand for drugs. People are still going to want heroin, so someone is going to produce it and someone is going to sell it.

Mr. BURTON. But the new addictions, would they be diminished if you didn't have somebody trying to make money, if you didn't have these people going from Philadelphia to New York or from Washington to New York? Why would they drive from here to New York to get these drugs, to sell them, if they couldn't make any money?

Mr. CARR. I think they're going to make money. I don't know how you're going to eliminate them, not making money. If they couldn't make money, certainly they wouldn't; they would do something else.

Mr. BURTON. That's right. And that's part of the equation that ought to be looked at that we haven't been looking at.

Mr. CARR. I think you're right.

Mr. BURTON. Ms. Schakowsky, do you have questions?

Ms. SCHAKOWSKY. Mr. Chairman, I wanted to stay and hear your question, because I want to thank you for raising it. I think we can't be afraid to raise these kinds of questions when we discuss this whole issue of addiction and substance abuse, the attendant crime and law enforcement issues that go with it. And I think—going forward, I'd welcome, under your leadership, that we explore this issue fully and follow your line of questioning.

I do have to leave. I want to thank the panel. I'm hoping I will get back for the other panels, but I wanted to ask to include in the record a couple of articles by Doug Castle from the Center for International Human Rights, Northwestern University School of Law, regarding the issue of Santo Domingo, what I believe was a corporate cover-up in Colombia states and the killing and covering up in Colombia, if I could make these part of the record.

Mr. GILMAN [presiding]. Without objection.

Ms. SCHAKOWSKY. Thank you.

[The information referred to follows:]

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"The Santo Domingo Massacre: Killing and Covering Up in Colombia"

Four years ago, on a clear, sunny Sunday morning in the Colombian hamlet of Santo Domingo, a young woman and her friends lay down in the street, spreadeagled, so that helicopters flying low overhead could see plainly that they were civilians. Some miles outside the town, air force planes and helicopters had battled guerrillas through the night.

As later summarized by a Tribunal of Opinion convened by Northwestern University School of Law, the young woman then "looked up at a helicopter and saw things that looked like rolls of white paper coming out of the helicopter. ... Then she heard an explosion, [and] everything turned dark ..."

When the smoke cleared, seventeen civilians, including six children, lay dead. Another 25, including the young woman and nine children, were wounded.

That same day, December 13, 1998, the Colombian military told the Red Cross that the civilians died when guerrillas used them as human shields. Later, changing its story, the military claimed the fatal explosion was caused by a truck bomb planted by guerrillas.

In any case, the air force commandant assured a Colombian newspaper, "none of the airships used in Santo Domingo had the capability to drop bombs."

Meanwhile Human Rights Watch contacted Senator Patrick Leahy, author of the Leahy Law, which requires that United States aid be cut off to Colombian military units "credibly alleged to have committed gross violations of human rights," until the perpetrators are brought to justice. Senator Leahy asked the US Embassy for an explanation.

Ambassador Curtis Kamman replied that six aircraft used at Santo Domingo came from the US government, including a Huey helicopter given as US military aid. Repeating the military's version of a guerrilla truck bomb, he added, "Our preliminary assessment, ..., is that the Colombian military's evidence has credibility."

Meanwhile the pilot of one of the helicopters had already contradicted his commandant. Not only did a Huey carry cluster bombs at Santo Domingo, he told an army judge, it dropped two of them near the town that day.

Later the Huey pilot admitted to an air force judge that, yes, he dropped two cluster bombs near Santo Domingo that day. Yet both the army and air force cases were closed. A civilian investigation continued to limp along, but no charges were brought.

With no prospect of official justice, Colombian religious and human rights groups then asked Northwestern University's Center for International Human Rights to convene an unofficial Tribunal of Opinion to hold public hearings in Chicago and to issue a "judgment" on the case. The tribunal could not compel any action, of course, but it could investigate and report the truth.

Former Illinois Supreme Court Justice Seymour Simon agreed to chair the tribunal. Ten other distinguished lawyers, clerics and former public officials agreed to serve as members. (I served as legal adviser.) After the Colombian government declined to participate, Chicago lawyers volunteered to represent Colombia and the victims before the tribunal.

In two days of public hearings in September 2000, the tribunal heard four witnesses from the town, watched a video produced by the Colombian military on its version of the event, listened to expert witnesses and received the army and air force investigation files into evidence. It also received a copy of an FBI lab report identifying fragments found at Santo Domingo as part of a US-designed cluster bomb.

Two months later, in a 69 page judgment, the tribunal unanimously concluded that the truck bomb theory was false, that the bomb was in fact dropped by the Huey, and that the Colombian military, including its commandant, had engaged in a cover-up. It recommended prosecutions and suspension of US aid under the Leahy Law.

Initial reactions were encouraging. The Colombian military reopened its investigations. Civilian prosecutors asked to take over jurisdiction. New US Ambassador Anne Patterson raised the case with the Colombian government, as did Senator Leahy, the late Minnesota Senator Paul Wellstone and Illinois Congresswoman Jan Schakowsky.

But until recently, it seemed that all might come to naught. Although military judges issued orders last year restraining the liberty of the Huey crew, no trials were held. The civilian prosecutor fled the country after receiving death threats. US aid was not suspended.

Now, however, there may be reason for hope. In October Colombia's civilian attorney general found two of the Huey crew administratively responsible for the bombing, and ordered their suspension from duty for three months. This month Ambassador Patterson, invoking the Leahy Law, recommended to Washington that US aid be suspended to the unit involved. Justice may yet come to Santo Domingo.

And new revelations have emerged. As reported by the *Los Angeles Times* and as we will discuss next week, the Huey crew testified in the reopened military proceedings that their targeting directions at Santo Domingo came from a US security contractor for Los Angles-based Occidental Petroleum, whose pipeline runs nearby. Ambassador Patterson has offered to assist Colombian authorities in following these leads. Can it be that the cover-up of the Santo Domingo bombing extends well beyond Colombia?

This is Doug Cassel of the Center for International Human Rights of Northwestern University School of Law, for Chicago Public Radio's World View.

Doug Cassel's commentaries are regularly broadcast on Chicago Public Radio's World View each Wednesday during the 1:00 p.m. hour. ***Views expressed are those of the author, and not necessarily those of Northwestern University, the Center, or Chicago Public Radio.***

Mr. GILMAN. Do you have any further questions, Ms. Schakowsky?

Ms. SCHAKOWSKY. No, thank you.

Mr. GILMAN. I'd like to ask Mr. Carr, you know, the staggering numbers of heroin deaths in Baltimore crime and violence are really an indictment of the de facto legalization scheme in Baltimore of a few years ago. Do you agree with that?

Mr. CARR. I wholeheartedly agree with that. We had a program that was put forth by then the mayor, Mayor Shmoke, who was calling for legalization. They were instituted programs that were on the—I call them "feel-good" programs. You feel good because you institute them. That doesn't mean they do any good.

It wasn't a coordinated effort. As a result, attention was drawn away from enforcement, and crews or gangs were able to get strong footholds in neighborhoods and on the street; and as a result of that, homicides went up because they were fighting for turf.

That's what the current administration has turned around, the police department. People like Congressman Cummings have really helped turn that around up there.

Mr. GILMAN. So you no longer have any legalization program?

Mr. CARR. I'm not aware of any legalization program although there are always those in the area that bring that to the surface. There are some drug needle exchange programs, I understand, still operating up there.

Mr. GILMAN. We had a similar problem in the Netherlands where they have a tolerance program, and it's not helped the situation.

Mr. CARR. Every drug addict in Europe that goes to the Netherlands has a lot of tolerance, don't they? That's the thing, it's drawing crime, it's drawing people in of that milieu and that element of society.

Mr. GILMAN. The Netherlands is now fighting additional crime.

I would like to address the entire panel: What's the purity level of the Colombian heroin that you're seeing in your cities? And also who are the wholesale heroin traffickers of Colombian heroin? Is it Dominicans, Colombians, Mexicans who are the major traffickers, if the panelists could address that?

Mr. JIMENEZ. Felix Jimenez from—retired Drug Enforcement Administration Special Agent.

When I was in charge of the office in New York, the DEA has a program called the Domestic Monitor Program. Basically what we do is, we go out to street corners and buy samples of heroin to determine the origin and to determine the price and the purity. I can tell you right now that in New York 90 percent of the heroin available is from a South American origin, and we're finding at the street level samples that come back at 90 percent pure heroin.

Mr. GILMAN. Who are the retailers?

Mr. JIMENEZ. Basically the organizations responsible at the street-level distribution of heroin in New York are Dominican trafficking organizations who are receiving this heroin from either Mexican trafficking organizations responsible for smuggling the heroin across the Mexican border, bringing that to New York and then passing the heroin to the Dominicans for street distribution.

Mr. GILMAN. Mr. Pelletier, are you finding similar problems?

Mr. PELLETIER. Yes, sir. It's basically Dominican distribution organizations selling the Colombian heroin.

Mr. GILMAN. What about the purity level?

Mr. PELLETIER. We routinely see it in the low 80's if not higher, but the routine is in the low 80's.

Mr. GILMAN. Mr. Marcocci.

Mr. MARCOCCI. Yes, we're seeing heroin—our heroin is between 80 to 90 percent pure. Sometimes it has exceeded 90 percent purity. Mostly it's inner city youths selling the heroin, the Colombian heroin. Individuals from our neighboring communities will travel to the larger city to bring it back.

Mr. GILMAN. Mr. Carr, who are your distributors in the Baltimore areas?

Mr. CARR. The suppliers, the wholesalers, are Dominicans, Colombians, out of New York and Philadelphia; the street dealers are African Americans; the purity levels range from below 10 percent to up in the upper 90's.

Mr. GILMAN. And I'm sorry, Mr. X.

Mr. X. That's OK. We don't do qualitative analysis within my department, so the purity levels I do not know. However, without fail, all the heroin that I've seized or bought, or that I know where it comes from, has come from Baltimore City, from the inner city.

Mr. GILMAN. Who are the distributors?

Mr. X. Again, it's mostly younger persons.

Mr. GILMAN. But you don't know the origin?

Mr. X. No, I don't.

Mr. GILMAN. And I suppose we have an obvious response to this question. If you had a choice of either fighting the menace in Colombia or on the streets of your cities, where do you think we should be focusing our efforts?

Mr. Jimenez.

Mr. JIMENEZ. Yes, sir. I think that we should be attacking the problem at the source area. I think that we need to concentrate in Colombia. We need to start a program, an eradication program, in Colombia to ensure that we can destroy those opium poppies before they are processed and converted into heroin hydrochloride and then smuggled into the United States for final consumption.

Mr. GILMAN. Thank you.

Mr. Pelletier, what are your thoughts about that?

Mr. PELLETIER. Sir, I would agree that it should be attacked at the source. If your bathtub was overflowing, you wouldn't think of stopping the flow by taking a Dixie cup and picking the water up off of the floor; you'd turn the faucet off to stop the water. I think that speaks clearly of local law enforcement, with increased incarceration times and such, speaks nothing of getting it at the source. We continually put local Band Aids on a situation that needs to be taken care of at the source location.

Mr. GILMAN. Mr. Marcocci.

Mr. MARCOCCI. Sir, I would indicate that it should be stopped at its place of origin. We in law enforcement would make every effort we could to stop it on the streets as best we could. However, there is too much heroin getting out on the streets today as we're trying, and too many lives are being affected by it.

Mr. GILMAN. Mr. Carr.

Mr. CARR. I certainly think it should be attacked at the source, but I want to caution you by saying that drugs are here by invitation, not invasion. And it's going to take us a long time to get all the people that are addicted and involved in this back to being productive citizens.

Mr. GILMAN. We have to fight both demand and supply at the same time.

Mr. X.

Mr. X. I agree with Mr. Carr. I mean, we have to focus on its origin.

However, you cannot forget the efforts that myself and other police officers are doing here on the street. It's going to be difficult to make it all disappear; even if we stop it at its source, it's still here. We still see it. We're still going to see it. And there are still addicts out there that are going to want to do that.

Mr. GILMAN. We have to do both simultaneously?

Mr. X. That's my opinion, that's right.

Mr. GILMAN. What's the recovery rate after treatment for heroin addicts, Mr. Jimenez?

Mr. JIMENEZ. Experts say they physically can recover in 2 weeks to 3 weeks; however, the problem is the mental dependency that they have in the individual. That sometimes never goes away. Once they become a heroin addict, they are still, for life, a heroin addict.

Mr. GILMAN. Mr. Pelletier.

Mr. PELLETIER. That's my understanding as well. The addiction process with opiate abuse is lifelong.

Mr. GILMAN. Mr. Marcocci.

Mr. MARCOCCI. Myself, along with my partner, know of no success cases through treatment programs.

Mr. GILMAN. Mr. Carr.

Mr. CARR. I can tell you plenty of success treatments through treatment programs. One of the biggest treatments is drug substitution, methadone, which a lot of people argue is not that very satisfactory. But you can detox them in 3 to 4 days; the drugs can be out of their system in several weeks. And a lot of the whether they will recidivate or not depends upon the environment they're in and their own mental attitude.

Mr. GILMAN. Mr. X.

Mr. X. Unfortunately, it is a lifelong addiction from my experience and what I've seen on the streets. I have a lot of repeat customers, so to speak. We deal with the same people all the time.

Mr. GILMAN. I want to thank our local police officials for your outstanding work, and we're trying to find a better way of handling being this.

Mr. Tierney.

Mr. TIERNEY. Thank you, Mr. Chairman. I want to thank all of the witnesses. It's been extremely helpful to hear your testimony.

I sort of gravitate toward the view that Mr. Carr expressed lately, that there is some potential for treatment. And, Mr. Marcocci, you apparently haven't had very good success with that in your area, and that's disturbing; but I think there is potential for treatment, and there is some sort of success. But I think a large part of that—I'm sure Ms. Norton would agree with me, because I've heard her speak to that before—is the environment that people are

left in after they've had the treatment. If you send them back to the same environment and same conditions, probably the recidivism rate is going to be sky high. So that's in large part of the problem.

I want to ask you a question that goes back to some of the things that were in my opening statement. I have varying degrees of sympathy for people—for people all along the line here. I have more sympathy obviously for the peasant grower than I do for the producers and manufacturers than I do for the traffickers, than I do for the dealers; and versus them, I probably have more sympathy for the person who is a user-addict on the other end of that. So we go back and forth.

What are your individual opinions of what impact it would have if we made a serious effort to go right at the money laundering issue and right at the precursor chemicals and things that go into the production and manufacture of these drug? If we really went after them, would that make your job easier in an appreciable way?

Mr. Carr, I might go right to left here on this one.

Mr. CARR. From my standpoint, I think that's where we have to go. We've been ignoring the money. I mean, that's what the money's about. We have to be concerned about not only the flow of drugs into the country but the huge sums of money that go out of the country, especially after September 11th, so it gave us the wake-up call.

I mean, these funds, and I can—I'm not at liberty to cite specific cases, but we have cases under investigation right now that are tied to the funding of terrorist activities. It's drug money. It's drug money. It's going to al-Qaeda sources, and it's right in this area. And I'm sure that this area is not unusual compared to other areas of the United States where the terrorists we've tracked from September 11th, we knew where they were and we know that we have other elements of al-Qaeda and other radical groups in our country.

So, yeah, it's a very important that we do that. We've all too often and for all too long ignored the money end of it because, quite frankly, if we're speaking directly, it wasn't politically correct. We're worried about someone's uncle who ran a used car lot, and we didn't want to get him indicted because his uncle is this or his cousin is that. I'm sorry; that's where it's taking place.

If you look at the cash industry in this country, which is used cars, a lot of import-type businesses, and as of late, a lot of the banks, they're involved in this. DEA has had over the years some tremendous cases involving the banking industry. And, you know, the terrorists are going to use this, these methods, to get money out of the country and into their pockets and finance what they're doing.

Mr. TIERNEY. Just to interject before I go to Mr. Marcocci, this stuff is fungible. If you eradicate in Colombia, as I said before, it's going to go to someplace else. If you eradicate in Latin America, it's going to go to Southeast Asia, you know, Southwest Asia, in or out. I mean, that's going to be a never-ending cycle of chasing people around.

But if you go to the money, if you go to the money, I think you might have a better prospect of doing that. And while you may have to do all the other things, too, you're really hitting them

where it hurts, and some of Mr. Burton's question, what about the money, well, let's go get the money.

Mr. CARR. There's no silver bullet. There's no one answer, but we have to do all these things.

Mr. TIERNEY. Mr. Marcocci, is going after the money, in terms of money laundering, a major part of this?

Mr. MARCOCCI. Yes, sir, it is.

Mr. TIERNEY. In your opinion, have we been doing nearly enough of that?

Mr. MARCOCCI. No, sir. Various dealers have told me right up front that they as addicted to the money as the user is to the drug itself.

Mr. TIERNEY. Could you or Mr. Carr give us ideas of just how to start going about that would make an impact? This is not something that's a mystery to anybody, right? We could put together a plan to do this in fairly short order?

Mr. CARR. Yes. We have a plan.

Mr. PELLETIER. No. I agree, any proactive type enforcement absolutely would make an impact. We can no longer just react, increasing someone's jail time; and the things that we do at a local level, those are Band Aids.

I agree that any proactive type thing would absolutely increase the effectiveness. Unfortunately, in my State there's 34 of us absolutely designed to handle investigations; 27 of those are federally funded. Without those types of funds, States like Maine that don't have a huge presence of Federal law enforcement and the locals just don't have the manpower or the resources.

Mr. TIERNEY. I'm thinking more in line, Mr. Chairman, of something like; that is, why not have a national task force using our resources nationally to just take this and target this issue and go after it, that wouldn't tax your local police force? It would need your cooperation, obviously; and we could arrange for that, whatever, but this is a job that is large enough to be undertaken by the Drug Enforcement Administration, by the FBI.

And Mr. Jimenez, why haven't the DEA and the FBI been more active in this area?

Mr. JIMENEZ. I think that we are. We are working together with the Federal agencies as well, as the State and local.

But in your initial question about money laundering I would like to be very careful on how I'm going to answer your question. But I would like to leave you with my thoughts as to what I think of our money laundering.

The U.S. Government needs to be very, very careful in the utilization of that tool, because sometimes—and I have seen it in the past—money laundering investigations have turned into the U.S. Government being the financiers of the drug trafficking in Colombia. What I mean is that utilizing that tool to launder the money for the traffickers and following where the money goes from New York to offshore banks and—to go back to Colombia. What is happening is, we are putting in there, in the Colombian's drug trafficker cartels, their money and their profit; and they're producing more drugs to be sent to the United States.

Mr. TIERNEY. I've got to stop you there, because I'm missing you. How is that happening?

Mr. JIMENEZ. Well, the money, the profits that they're making in the United States are going back to Colombia to produce more drugs.

Mr. TIERNEY. That's what we're trying to stop here. So if we stop the money laundering——

Mr. JIMENEZ. That is not money laundering. What basically we're talking is seizing the money before it goes back to Colombia.

But in money laundering you have to launder that money by taking the money in New York, depositing that money in an account. That money goes into an offshore account in a bank, and you follow that. And then, after that goes into another offshore bank and then probably ends up in a bank in Mexico, and then from Mexico it goes into Colombia. That's what is money laundering, OK?

Mr. TIERNEY. OK.

Mr. JIMENEZ. By doing that, we are putting back in the hands of the traffickers their profits.

We can't allow that to happen, because then we are becoming the financiers of the drug trade.

Mr. TIERNEY. Maybe I'm just being obtuse today; I'm sorry.

But my idea, that would be what we're trying to stop, sir, am I right, trying to interrupt that from being a viable option?

Mr. JIMENEZ. Money laundering investigation means that we are going to let the money go until it goes back to the owner, legal owner of that money. So normally the money, we follow it from where is the——

Mr. TIERNEY. So you want to grab the money earlier?

Mr. JIMENEZ. At that point we seize the money, goes to the source country or the owners or the producers of the cocaine, then it would be a success.

Mr. TIERNEY. So you want to stop the money earlier and maybe take action against the people along the process?

Mr. JIMENEZ. Absolutely. But in money laundering investigations, a lot of that money goes to the final destination.

Mr. TIERNEY. So you would approach it differently, but with the same goal, going after the money—going after the money, stopping the people along that chain of the process and grabbing it as quickly as you could to take it out of that chain?

Mr. JIMENEZ. Yes, sir, that would be a success.

Mr. TIERNEY. Do we do any of that now?

Mr. JIMENEZ. We're doing that in some cases. In other cases, we need to let the money go into the final destination so we can identify the people who are behind it in Colombia and in these countries.

Mr. TIERNEY. The object, once that happens, is to shut those people down so people know there's a price to pay?

Mr. JIMENEZ. That's the idea.

Mr. TIERNEY. Mr. X, I don't want to leave you out. I know the chairman's got a quick trigger on the button here.

Mr. X. I agree pretty much with what the panel has said. The drug problem has to be attacked in a multifaceted way. Taking money and profits and things purchased with drug money, at least on a local level, is a very important tool for us. We take money, we take cars, case houses, that kind of thing. It's important, I think, to—to look at the whole picture.

Yes, that would be a very important tool, and it would take a lot of the profit away from the people that are dealing or importing drugs into the country. And in all honesty, at that level, at the importer and the dealer, that's going to be their main concern. They want that dollar. We take that from them, we take some of their incentive to do these things because of the penalties that they're looking at. They balanced the money, what jail time they could get, for example; so if you take that——

Mr. TIERNEY. Closing your bank is going to get your attention, too, I would think.

Mr. X. Absolutely. That way, they'll have nowhere to put that money they get; and it opens up the doors for other agencies to look at those money laundering issues and that kind of thing.

Mr. TIERNEY. Thank you.

Mr. GILMAN. Thank you, Mr. Tierney.

Ms. Norton.

Ms. NORTON. Thank you, Mr. Chairman. This is a very important hearing. I appreciate the work you've done on eradicating supply at the source, and the work of the chairman on this issue as well.

When I hear the word "heroin," I'm inclined to say, "Not heroin again." At least it used to be expensive. The notion of cheap heroin is the most frightening drug notion I can think of. It is cheaper and purer at the same time.

You know, we all remember the $100-a-day addicts, the $500-a-day addicts. And at that time heroin, almost by itself, destroyed entire parts of cities. There are parts of—from New York to L.A.; there are parts of Philadelphia and Baltimore and New York you can drive through, and I'm talking about huge clumps of land that—where there used to be communities that aren't there any more; and if you trace back to the source, you will find heroin at the source.

D.C. is not immune. Mr. Carr spoke about how the terrible problem in Baltimore, of course, edges over into D.C. We're seeing a spike in our crime once again. Heroin which became—as manufacturing jobs left the inner cities, filled the gap there and became the way in which people from low-income families made money. It destroyed family life in the great cities.

In my own African American community, it has absolutely destroyed family life, where more than two-thirds of the children are born to single women, where young African American men have no models as their grandfathers did.

Many, many reasons for this. Obviously, if there were a legitimate economy in those communities, it would be different. There is an illegitimate economy in those communities. And it is, of course, at its root, a drug economy.

I am very much for eradication at its source. You will find, for example, in African American communities, that's the first thing they say. Go to the source, eradicate it at its source. We stand on record for that. But there is a balance here that requires effective law enforcement on the one hand and treatment at home on the other.

Now, I don't know about decriminalization. I think you will find in the African American community that nobody wants to hear it. I don't know what legalization and decriminalization, I don't know

how they meet—you know, if people are talking about decriminalizing a little marijuana stuff that—perhaps that's what they mean, although I have some problems with that. It's a gateway drug for many people in D.C.

We have had big trumps of marijuana selling in this town. I don't know. All I know is that in the absence of opportunity in our community, decriminalizing heroin ain't going to help us. I can tell you that much. The folks—if folks can get what they're paying $4 bag for with no penalties attached to it—and you will see in some of my questions that I think some of the penalties, mandatory minimums and the like, have had the opposite effect that they were intended. So I'm certainly not speaking for putting people in jail as the alternative. I just know we haven't come upon what is the right balance.

I have a question first of Mr. Carr about this study in Baltimore. Apparently it is the only full-scale study of a single study. It's called Steps to Success: Baltimore Alcohol and Drug Treatment Outcomes. It came before one of our subcommittees last February, but this study concluded that increased access to drug treatment on demand had resulted in significant reductions in drug and alcohol abuse and property crime, HIV risk behavior, and I want to know what you think of whether treatment on demand is available in Baltimore, whether you think it would help in bringing down crime and abuse. And I'd like, as the law enforcement officer, your view on treatment on that.

Mr. CARR. Let me point out that we also fund a $5 million treatment program with HIDTA in the region, and a lot of it goes back to—and I think this is why my colleagues and other members of the committee say, well, gee, I don't know a treatment program that works. It's just like I don't know every law enforcement program that works either, but I can show you some that do work. We have one that does, and we measure it vis-a-vis a crime control measure, and that is recidivism rates. The big important thing that we look at with our clients—and I might say if I recall, I gave you a copy of the study—our average client is 33½ years of age, 10 arrests, 6 convictions, and they're drug addicts. So we're not—we're dealing with a hard core group, the group that the—20 percent of the population that consumes—I'm sorry. The group of the population that consumes 20 percent of the drugs and commits 80 percent of the crime. We used a coerced treatment model, and by coerced treatment, that means that they're under some form of legal—there's a legal hammer over their head to make sure they come, because we know that people that volunteer for treatment don't stay in treatment very long. We have drug testing, and we have imposed a series of graduated sanctions to make sure these people hold the line and stay in the program. And if they don't, they go back to jail.

I mean, just let me add very quickly that the best treatment for drug dealers is incarceration. I mean, they're there to make money. Some of them become addicted. Some of them don't, but I think the best form of early intervention with them is incarceration. Slapping them on the wrist, letting them go back on the street over and over, as we've seen in Baltimore, only reinforces the negative. They become more violent. They become more belligerent, sometimes as

a result of the use of drugs themselves, and that's not a good situation.

Some drug treatment is very effective. Other drug treatment has shown to have no effect on the population. It depends how it's implemented, is the best answer I can give you.

Ms. NORTON. You may be aware that the Bureau of Prisons, pursuant, I would say, to funds that this Congress authorizes has both drug treatment and alcohol abuse treatment in prison. Now, of course when you get out of here from a State prison, you're not in the same shape.

I do want to put on the record and I'd like to introduce into the record and I will—I don't have it with me now, the record of the—the agency—it's short—it's the agency that—in fact D.C. prisoners now go to Federal prisons, and there is an agency which handles them when they get out.

As a result of that, the very program you describe has in fact reduced recidivism in this city. I mean, carrot and stick, not treatment that says, y'all come on and, you know, some of you sit down and we'll just talk to you and you won't be on drugs anymore. The others of you sit down and if you look like you're going to again, call up somebody. I don't know if anybody has ever liked ice cream a lot and then tried to wean themselves from it or tried to lose weight, but if you understand how hard it is to lose weight and stay off of fatty foods or give up ice cream, then perhaps you have some idea of what a truly addictive substance would be like. And I could not agree more. What it takes to in fact overcome it with all of these prescriptions out here is not well understood, but we do understand that this carrot and stick approach, Mr. Carr, that you describe——

Mr. GILMAN. Ms. Norton, did you want to put the report in the record?

Ms. NORTON. Yes, I do and I will submit it for the record.

Mr. GILMAN. Without objection. What is that report?

Ms. NORTON. It is a report of the reduction in crime—in recidivism by inmates who get out of the Bureau of Prisons and come home to the District of Columbia.

Mr. GILMAN. Without objection. And let me remind my colleagues that we have another panel that follows this. So please be brief.

Ms. NORTON. Could I just ask one more question, then?

Mr. GILMAN. Yes.

Ms. NORTON. It has to do with mandatory minimums. Our answer when the crack cocaine—it was about the time of the great increase in crack cocaine that we went into mandatory minimums. Since that time, the Drug Sentencing Commission and the Federal judges have all asked that this huge disparity between powdered cocaine and rock cocaine be eliminated, that it had produced hugely unfair effects, that you were getting the mules and the minor drug dealers, the people who launder, and the rest you don't get, even though they try to break them through the mules. I'd like to know where you stand on mandatory minimums and an effective way of controlling drugs.

Mr. GILMAN. Ms. Norton, would you agree to limit that to the former DEA official because of our time?

Ms. NORTON. Yes, Mr. Chairman.

Mr. GILMAN. Mr. Jimenez.

Mr. JIMENEZ. I strongly support that the——

Mr. GILMAN. Would you press your mic button?

Mr. JIMENEZ. I'm sorry. I strongly support that the minimum mandatory sentences be reviewed, especially on the heroin issue. To the fact that I know that we are looking up people in New York as well as in Philadelphia and other parts of the country, and 3 years later we are placing them back in the streets and they are more in control and they are more organized than ever. So basically it's a revolving door at this time. We are looking them up. They will maintain the control of the organization from jail, and when they come out they will have more money and more control than ever. So that must be reviewed, and the sooner the better.

Mr. GILMAN. Thank you, Mr. Jimenez, and I want to thank our panelists once again, Mr. Jimenez, Mr. Pelletier, Mr. Marcocci, Mr. Carr, Mr. X, for your excellent work out there fighting the battle. We appreciate your taking the time to be with us.

I now excuse this panel and ask our Panel No. II to please take seats at the panel table.

We want to welcome Panel No. II. Will the panelists in Panel No. II please take their seats. Barry Crane, Paul Simons, Roger Guevara. Let me swear them in first.

We'll now hear testimony from Panel No. II, our ONDCP witness panel, including the Honorable Barry Crane, Paul Simons from State, and Roger Guevara from DEA. I'm going to ask our gentlemen, would you please stand, and would you raise your hands.

[Witnesses sworn.]

Mr. GILMAN. Let the record indicate that the panelists have indicated that they agree to the oath.

We're deeply disappointed that our Drug Czar, John Walters, was not able to join us this morning. Our committee, as you know, serves as both an oversight and legislative authorizing committee, and if the Drug Czar was here, he could have responded to questions that we have about Colombia heroin. Our committee did invite Mr. Walters with adequate notice back in October and we wrote to him as well regarding the Colombian heroin crisis that we're now facing and as yet regrettably we've received no response to that inquiry.

We look forward to hearing from Mr. Walters' staff in how we can develop a badly needed heroin strategy and solutions to the crisis that we heard this first panel that was before us today of local police officers discussing.

The Colombian heroin crisis is rapidly moving west and will soon consume our entire Nation. We don't want our Drug Czar to be AWOL with regard to this problem. Accordingly, I'm going—this is my last hearing, regrettably, due to involuntary retirement due do redistricting, and I urge our committee and the new 108th Congress to stay intensely engaged in fighting this Colombian heroin crisis until ONDCP is able to effectively correct the problem. Our Drug Czar is going to have to take the lead in our war on drugs. I have a high regard for Mr. Walters, and we hope that he will assume the proper leadership in this issue.

So now let's ask Mr. Crane if he would take the first lead on testimony. Please try to limit your response to 5 minutes. Mr. Crane.

STATEMENTS OF BARRY CRANE, DEPUTY DIRECTOR FOR SUPPLY REDUCTION, OFFICE ON NATIONAL DRUG CONTROL POLICY; PAUL SIMONS, ACTING ASSISTANT SECRETARY OF STATE FOR INTERNATIONAL NARCOTICS AND LAW ENFORCEMENT; AND ROGELIO GUEVARA, CHIEF OF OPERATIONS, DRUG ENFORCEMENT ADMINISTRATION

Mr. CRANE. Thank you, Mr. Chairman.

Mr. GILMAN. And I might add that Mr. Crane is Deputy Director for Supply Reduction in the Office of National Drug Control Policy. Mr. Crane.

Mr. CRANE. Thank you, Mr. Chairman. It's indeed an honor to be here. These are respected colleagues here. And other members of the committee, it is a pleasure to meet with you today and discuss some of the major threats to the United States, especially heroin. Let me thank you for your longstanding and strong support for the fight against these drugs over the years and the social destruction they engender and the terrorism they subsidize.

You have a copy of my prepared testimony, and I ask that my written statement be included in the record.

In addition, I have some brief comments.

Mr. GILMAN. Without objection.

[The prepared statement of Mr. Crane follows:]

Testimony for Dr. Barry Crane Before the House Committee on Government Reform

December 12, 2002

Chairman Burton, ranking minority member Waxman, and committee members. It is a pleasure to meet with you today to discuss one of the major drug threats to the United States—heroin. Thank you for your steadfast and strong support for the fight against the scourge of all drugs, the social destruction they engender, and the terrorism they subsidize.

Overview

The Office of National Drug Control Policy is committed to meeting the goals set by President Bush of reducing drug consumption 10 percent by 2004 and 25 percent by 2007. As delineated in the President's National Drug Control Strategy, we are striving to reduce all drug use in the U.S. through demand reduction and through efforts to disrupt the illegal markets perpetuated by international criminal enterprises.

We recognize that reducing the demand for drugs, preventing our children from starting drug use, and providing treatment to get current abusers off drugs, are critical for a successful strategy. These efforts are complemented and enhanced by well-focused and strategic activities that disrupt the illegal drug businesses. Our budgets for prevention and treatment have risen significantly and now far exceed what we spend on international supply reduction (Fig 1).

Prevention and treatment are critical strategic pillars that are at the heart of solving the illegal drug problem, including heroin. Because this hearing is focused on law enforcement and interdiction related issues, we will not go into the many programs and initiatives that address prevention and treatment.

Restructured National Drug Control Budget
FY 2003 President's Request, by Drug Function
Total Resources: $11.4 Billion

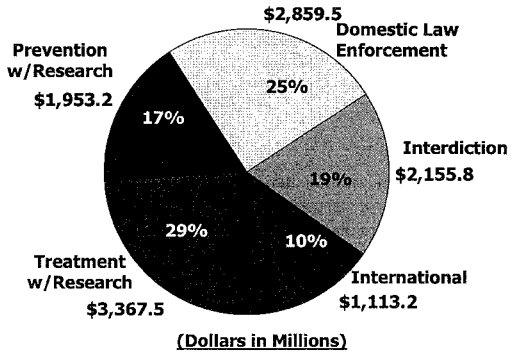

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Figure 1

The third pillar of our strategy is attacking the supply of illegal drugs. We approach the problem as one that is based on market dynamics—treating the trafficking of drugs as an industry. Our objective is to collapse that industry by attacking one of its critical vulnerabilities, thereby making it unprofitable to operate. I will address the basic elements of that strategy and the vulnerabilities upon which it based, but first, we need to understand the magnitude of the threat.

The Threat

The U.S. has a serious poly-drug problem involving cocaine, heroin, methamphetamine, ecstasy, and marijuana. We are under attack by international criminal organizations that traffic in drugs, arms and people. The drug trade costs the U.S. over $160 billion in lost productivity and damages and is responsible for more than 18,000 drug-related deaths a year. It fuels violence, terrorism and corruption tooth-to-tail, from cultivation to the drug abuser. Furthermore, it leads to destabilization of democratic governments and their economies. The drug market has several components, which we review in turn.

Marijuana is the most abused illegal drug in the United States. It is responsible for the majority of illegal drug dependence and clinical abuse in the U.S. Of the 5.6 million Americans suffering from illegal drug dependence or serious abuse, 62 percent are dependent on or are abusing marijuana. More young Americans are in treatment from marijuana abuse and addiction than for all other illicit drugs combined. Putting this in a numerical perspective there are over 12,000,000 current marijuana users in the U.S.

Although no longer the scourge it was in the late 1980s, cocaine continues to be a very serious problem in the U.S., with more than 2,000,000 current cocaine users and an abusing population that consumes over 250 metric tons of cocaine annually. Over 90 percent of the cocaine consumed in the U.S. originates in or transits through Colombia. Even as cocaine abuse has declined in the U.S. it has increased in other parts of the world. Cocaine production and trafficking provides around $300-$500 million per year, to the illegal armies in Colombia. These well-financed narcoterrorists pose a threat to U.S. interests and stability in the Andean region.

As cocaine abuse has declined, the abuse of ecstasy and methamphetamine has risen for the past several years. In the year 2000, there were about 2,000,000 new ecstasy users—a dramatic number of initiates, and almost twice the initiates of cocaine and many times that of heroin.

Heroin use in the U.S. continues at a serious level with a modeled estimate of about 900,000 current users, over 150,000 new initiates annually, and a total consumption of 13-18 metric tons annually. The United States' heroin problem inflicts serious damage on U.S. society and has seen some dramatic increases in specific regions and cities within the U.S. over the past year.

The Heroin Threat

The global illicit heroin market is very efficient, with heroin being shipped and distributed throughout the world. Worldwide production ranges up to 400 metric tons annually, with most of the cultivation and production occurring in Asia (about 4 metric tons of pure heroin from Colombia), and most of the consumption occurring in Asia and Europe. Hundreds of metric tons of heroin are consumed across the globe from Western Europe, to Iran, to Russia, to Pakistan, to China, to Malaysia, and the newly independent states around Afghanistan and Pakistan.

To reduce the supply of heroin, we have to engage the entire heroin industry; how it operates worldwide; and how it affects the U.S. Our overall objective—the outcome we all desire—is less heroin in the U.S. and fewer heroin users. To attain this outcome, we employ many tactics: interdiction, organizational attack, alternative development, intelligence collection and intelligence sharing, in addition to aerial eradication, all of which we will continue.

The 13-18 metric ton annual U.S. heroin consumption is supplied from three major sources. We estimate that Mexico has the potential to produce about 7 metric tons of pure heroin; Colombia has the potential to produce about 4 metric tons of pure heroin; and Asia has the potential to produce hundreds of tons, the vast majority of which goes to non-U.S. markets. As heroin transits to the U.S., substantial amounts are seized. During 2001, according to DEA compilations, over 1.2 metric tons of heroin were seized by law enforcement officials in Colombia, Venezuela, and Ecuador. Since little or no heroin is produced in Venezuela or Ecuador, the seizures were almost certainly of Colombian heroin. Also according to DEA, an additional metric ton of heroin was seized in the South Atlantic/Caribbean on its arrival in the U.S.

Although the Colombian heroin consumed in the U.S. may be no more than 1/3rd of the total amount consumed (even considering uncertainties), its use is predominant in some[1] major East Coast cities, and the damage is very visible. In some cities, an estimated 70 percent of the heroin used is Colombian with the remainder being Asian and Mexican heroin. In western cities, by contrast, you typically find that a majority of heroin use involves Mexican heroin. In both circumstances, there is most commonly a mixture of types of heroin available.

Employ Limited Resources for the Best Overall Result

To combat the heroin threat, it is important that we do not jump to options that are really not solutions. When we look at the supply reduction aspect of the drug threat, we focus on understanding the illegal drug businesses and identifying vulnerabilities that can be attacked to

[1] According to the December DEA signature program summarizing 2001: 64% of the heroin seized in New Jersey came from Asia while right across the river in New York 72% came from South America.

damage the business and reduce the availability of the illegal drug. Each illegal drug that threatens the U.S. involves similar, but distinct, illegal drug businesses; each of the drug businesses have different raw materials, shipping modes, price structures, financing arrangements, etc.; and, each have different vulnerabilities. A strategy that may be effective against one illegal drug business may not be effective against another.

Aerial Eradication: Vital against Coca but Questionable against Colombian Opium

Airborne eradication is one tool available to reduce the supply of illicit drugs; however, it has different strategic effects depending on the drug; e.g., cocaine versus heroin. Aerial eradication of coca can be strategic in attacking and disrupting the cocaine business. Once killed, a replanted coca field takes 9-12 months to mature and provide its first coca leaf harvest. Moreover, coca is relatively expensive to replant. Establishing a one-hectare (2.5 acres) field will cost between $1,300 and $2,200 depending on whether the field is replanted in an existing field or if a new field is cleared from native rain forest. Also, most coca is currently planted in large fields, 1-3 hectares, and in level lowlands where natural terrain is not an impediment to airborne eradication.

Heroin poppy poses a different agricultural situation. Poppy in the Western Hemisphere is cultivated in small fields, less than 0.5 hectares where many locations may be unknown, in rugged high mountain regions where weather prevents efficient aerial eradication. The poppy plant is an annual that takes 3-4 months to mature and can be replanted for about $5 worth of seed per hectare. Thus, when a poppy field is eradicated, within days the glyphosate eradication agent decomposes in the soil, and a new field can be planted that will mature within 3-4 months.

Consequently, Colombian poppy fields would have to be eradicated many times annually to eliminate the crop potential. Further, weather conditions may prevent this because of the prolonged 9-month rainy season.

The above assessment of the lack of impact of poppy eradication in the Colombian mountains is further supported by the results from activities during 1999 and 2000. During that period, Colombian poppy cultivation was estimated at 6,000 total hectares. The Government of Colombia fumigated over 8,500 hectares of poppy each year; however, numerous data sets showed that no noticeable change occurred in the heroin abuse data in N.Y. and the East Coast of the U.S. where Colombian heroin is predominant. The Colombian poppy eradication effort effectively sprayed and killed poppy plants, but did not achieve its intended outcome—reducing U.S. heroin availability and use.

- Arrestee Drug Abuse Monitoring (ADAM) Program: The percent of opiate positives in NYC was constant in 1999 and increased in 2000.

- Heroin retail purity: There was no significant change in either year from the purity rate that had been constant since 1997. A reduction of heroin supply should have been reflected in reduced purity. (DEA STRIDE data)

- National Household Survey on Drug Abuse (NHSDA): There was no substantial change in new heroin initiates from 1997-2000 (146,000; 135,000; 136,000; 146000).

- Drug Testing rates for corporate employees: There was no significant change for opiate testing results between 1997 and 2001 (Quest Diagnostics testing, which involves millions of tests annually, had a nominally constant 0.5 percent positive rate).

- Drug Abuse Warning Newtwork (DAWN) Emergency Department Mentions for Heroin: Mentions actually increased from 1997 to 2000, going from 72,000 to 97,000.

The conclusion is that Colombian heroin production was not significantly diminished by the aerial eradication. Either farmers replanted new plants, or whatever decrease occurred in Colombian heroin was immediately back-filled by Asian or other source heroin. Regardless, there was no discernible change in the use of heroin in the U.S. during that time.

In summary, although eradication is a strategic action for disrupting the flow of some drugs to the U.S., such as cocaine, the nature of the poppy plant and the operational difficulties posed by the mountainous regions of Colombia where poppy is grown, make aerial eradication of poppy in Colombia a limited strategic option. Vulnerabilities for coca and for opium poppy are different. The most effective strategy for attacking the cocaine industry is to go after cultivation, the transportation net (interdiction) and the organization (leadership and money). These vulnerabilities have not necessarily proven to be the same for the heroin industry.

Opportunity Cost of Deploying Limited Air Assets in Colombia

In addition to concerns about the utility of aerial poppy eradication in Colombia, there is also an opportunity cost that must be considered. There are only a limited number of Colombian eradication assets, and they cannot be focused on coca if they are spraying poppy. For every 1 hectare of opium poppy sprayed about 3 to 4 hectares of coca are not. For the months of August, September, and October of this year, more than 18,900 hectares/month (almost 60,000 hectares/quarter) of coca were fumigated. This rate of eradication potentially destroys coca crops at a critical level that convinces farmers in the affected regions not to re-plant. That is, coca eradication is higher than can be reconstituted.

In November 2002, we saw the effect of shifting one-third of the eradication air assets to poppy. Overall monthly rates of aircraft eradication efficiency dropped two-thirds: from about 90 hectares per planned sortie to about 30 hectares per planned sortie. Coca eradication rates dropped significantly to about 4,500 hectares/month while poppy eradication rates increased to about 1,400 hectares/month but only averaged 14 hectares sprayed per planned sortie. Poppy eradication in high, fog-shrouded mountains is a far less efficient use of eradication assets and extremely dangerous. In October 2002, the Colombian National Police lost one helicopter, with four killed, looking for poppy.

Shifting limited assets to poppy eradication from coca eradication perversely results in substantially higher income to terrorists (FARC, AUC, ELN, etc.) if it relieves pressure on their principal earnings source, cocaine. Colombia's illegal armed groups collect significantly more from the sale of coca base than opium because of the much greater volume of coca base and the

higher price paid per unit[2]. Thus, the loss of coca eradication capacity resulting from diverting resources to poppy eradication preserves terrorist income and makes it more difficult to restore security. Discussions with the Colombian Vice President confirm this understanding – coca must be eradicated first to restore security.

Attacking Colombia's Heroin Industry

But the above argument does not mean that we will ignore the threat posed by heroin. There are other approaches to stem the heroin flow from Colombia that appear to be effective. Almost all of the heroin exported from Colombia is moved by "mules" carrying small quantities of heroin, one to five-kilogram loads. They travel on commercial airline flights that depart Colombia directly to the U.S., or travel to the U.S. via airports in other South America countries. These flights arrive in the U.S. on the East Coast, from Miami to NYC.

Hence, our overall counterdrug effectiveness is best served by attacking the heroin trade where it is most vulnerable. DEA, U.S. Customs Service, Colombians, and the Ecuadorians have already been successful in seizing Colombian heroin at airports. Recent additions of x-rays systems at one Colombian airport have demonstrated that smuggled heroin is readily detectable. This approach is being implemented at all five international airports in Colombia as well as hiring many new investigators. Installing x-rays at the other four Colombian airports and other South America airports, and potentially adding advanced computer-targeting systems to identify the "mules" and their heroin, can cause real damage to the smuggling and the entire heroin industry

[2] Estimate is based upon current price of 2.2M Colombian Pesos per kg of coca base at about 800 metric tons production and 500,000 Colombian Pesos per kg of opium latex at about 100 metric tons production.

in Colombia. This type of law enforcement process can clearly and appreciably reduce the amount of smuggled heroin reaching the international market.

Implementation of Department of Homeland Security and Transportation Security technology and procedures at US airports should further enhance our ability to seize Colombian heroin that is being smuggled on commercial aircraft.

In addition to law enforcement seizures at airports, there is the opportunity to expand the attack on the heroin organizations in Colombia. The Colombian heroin business is primarily composed of a number (more than 30) of small organizations that produce and ship heroin to the U.S. The typical smuggling quantities are 250 kilograms per organization per year. Although this diverse type of industry poses problems, it also provides opportunities, since the small organizations have been very vulnerable to law enforcement attack. DEA has had significant success against these organizations; and, has reprogrammed 13 billets into Bogotá from other locations to establish a new, substantially expanded Colombian heroin task force that should provide significantly increased results.

U.S. Strategy for Colombian Heroin

Accordingly, the U.S. strategy for dealing with Colombian heroin is focused on attacking the transportation and organizational net – interdicting the movement, logistical transshipment and funding of the product. Its main elements are:

1. Increase intelligence collection of the heroin traffickers and their transportation net.
2. Increase Colombian National Police checkpoints on roads, Colombian Navy checks on the rivers and Colombian military international checkpoints.
3. Develop and expand the Regional Drug Information Exchange System.
4. Expand drug detection technology to all international airports and seaports.
5. Increase the multinational police cooperation, particularly to interdict the precursor chemicals for heroin production.
6. Assist the Government of Colombia in expanding the Rule of Law so that alternative development can become a viable option to many poor farmers being forced to cultivate poppy by the illegal armies.
7. Stand up a Heroin Task Force in the U.S. Embassy, Bogotá.
8. Continue to image cultivation and assess whether increased aerial eradication is appropriate in certain circumstances.

A New Era in Colombia

The inauguration of President Uribe launched a new level of Colombian commitment and dedication to eliminating illicit coca production and the income it provides for terrorists and international criminals. His strategy is to concentrate on coca first. President Uribe has committed resources at an unprecedented level that has enabled Colombia to eradicate 17,000-20,000 hectares of coca each month, weather and spray capacity permitting. This rate has the potential to destroy the coca agriculture, and affect the entire cocaine industry and reduce it to a much smaller level. Over the next 12-18 months there is a real opportunity to substantially

reduce the overall cocaine production in Colombia, *the income fueling terrorism*, and the total amount of cocaine internationally shipped to the U.S. Such a reduction can have a dramatic, positive impact on one of the major U.S. drug problems—cocaine. In the long-run, restoring security in remote areas of Colombia will also allow a more successful attack against heroin. In this context, diverting eradication efforts against coca to try to eradicate poppy may not be a strategically sound decision. We will evaluate through the interagency process in January the initial effects of President Uribe's campaign against coca and poppy in southern Colombia.

President Uribe's coca eradication campaign is linked to his campaign to establish security and the Rule of Law throughout Colombia. Security and the rule of law are necessary if we want long-term success under terms whereby coca production is de-legitimized among would-be producers. President Uribe's campaign against the terrorists who enable coca production in Colombia will help set the conditions for legitimate commerce to replace poppy cultivation, as well as coca.

Conclusion

In conclusion, the U.S. continues to have a serious poly-drug problem involving cocaine, heroin, Meth, Ecstasy, and marijuana. Colombian heroin is only a portion of the U.S. heroin threat, which also includes large quantities of heroin from Mexico and Asia. We all are striving to reduce drug use in the U.S. through both demand reduction and through efforts to disrupt the illegal markets perpetuated by the international criminal enterprises that are smuggling their illegal drugs into the U.S.

In regard to heroin, the outcome we desire is fewer heroin abusers and less heroin in the U.S. for the abusers to purchase. Although eradication may be strategic for disrupting the cocaine flow to the U.S., the nature of the poppy plant and operational difficulties posed by the mountainous regions of Colombia where the poppy is grown, makes poppy eradication in Colombia a less than effective strategic option. We also need to continue to support the Government of Colombia's strong anti-coca campaign and not let it fail by redirecting our scarce assets at a critical time in that campaign. Finally, we need to let our present heroin strategy work – attacking the movement of heroin through enhanced airport inspections using new technology and expanded law enforcement action against the Colombian heroin organizations. These actions should make an appreciable impact on the Colombian heroin available in the U.S.

We will continue to track our efforts, assess the effectiveness of our strategy and report our progress to Congress.

Mr. CRANE. First, let me say for the first time in many years, there's some real hope in Colombia. With the inauguration of President Uribe last August of this year, there's been much more support for U.S. counterdrug policy in Colombia, and we hope they've turned a corner. The challenge President Uribe faces are daunting. Over 30,000 armed narcoterrorists in this country threaten the safety and security of his people, kidnapping, assassination and massacre. These same terrorists provide sanctuary for the drug production, and trafficking supplies 90 percent of the cocaine and on the order of a third of the U.S. heroin market.

The insecurity bred by these evils of drugs and terror have harmed Colombia's economy, driven much of the population out of their homes and threatened the democratic foundation of their institutions.

But we are now in a new era in Colombia. President Uribe has very bravely stepped up to these numerous challenges facing his country. He has rallied his people to his side and against the traffickers and terrorists. He is mobilizing resources and political will. He is committed to reestablishing the rule of law in areas currently controlled by the illegal armed groups, providing security to the communities ravaged by terror and attacking this illegal drug industry. It's the fuel for the large instabilities in Colombia.

In the short months of his administration, he has attained historic eradication records in coca and restored poppy eradication. He's sped up the seizure disposition of property belonging to the narcoterrorists. He's trying to restore the environmental conditions of the rain forests destroyed by the drug traffickers. He's established record rates of extradition of wanted criminals. He's begun to repatriate numbers of these child soldiers that were pressed in the service by the FARC, and he's increased substantially the funding for his military and police.

The administration's drug control policy in Colombia is now built on a firm foundation of political will. Any progress in Colombia comes because the Colombian people will it, because their leaders have the courage to risk their lives and because the U.S. Congress has embraced this worthy cause, and we thank you for that over the years.

We are thankful for the bipartisan support of Congress in the efforts to protect our communities from drugs by giving the Colombian people many of the tools they will need to take their country back from the narcoterrorists.

President Bush has assured President Uribe of our support in helping defeat these narcoterrorists, and we are hoping this is really the beginning of a new day in Colombia. However, we can't take our eyes off the fact that the United States has a serious polydrug problem, involving marijuana, synthetic drugs, principally methamphetamine and ecstacy and cocaine and especially heroin, the last two which come to us from Colombia.

We are under attack by international criminal organizations that traffic in drugs, arms and people. Cocaine still continues to be a serious problem, and there's no doubt that heroin is particularly visible in many of eastern cities.

We want to reduce drug use in this country. Our objective in supply reduction is to cause one or more elements vital for drug pro-

duction to collapse and structurally damage the entire drug industry. We need to treat drugs as a commodity, increase the cost of doing business by targeting its vulnerabilities in the marketplace that's transportation and that's profit-based.

With regard to heroin, we have to look at the entire gamut of the entry and how it operates worldwide, what actions are necessary to break it and what actions have historically had little or no measurable impact. Our national drug control strategy employs a variety of tactics such as interdictional, organizational attack, alternative development, intelligence collection and sharing, in addition to aerial eradication, which we are continuing. We have not been able, though, to adequately assess how effective the aerial eradication on heroin flow to the United States has been. It does, however, exact a high opportunity cost, in that it uses up a substantial amount of eradication resources.

The nature of the poppy plant operational difficulties posed by the mountainous regions in Colombia where the poppy is grown suggests that we are continuing study of this issue.

Another important consideration in Colombia is that the cocaine industry supplies a very large amount of the income that supplies the terrorist organizations. We need to support Colombia's strong anti-coca campaign and not let it fail if we have to redirect assets. It is coca and the large amount of money that keeps the illegal armies in the field and denies security to Colombia.

We have employed in Colombia promising alternative strategies against heroin that can produce good or excellent results and build on our present efforts. We've attacked the movement of heroin through airport inspections and using many new technologies and also expanded substantially the law enforcement activities.

We'll continue to track our efforts, assess the effectiveness of this strategy, and we'll update Congress on our progress. I want to thank you again for this opportunity and for your steadfast support in this important struggle and for your part in the success of the current campaign being waged by President Uribe and the United States. We must all continue to back President Bush's commitment to support President Uribe and the brave people of Colombia. Thank you, sir.

Mr. GILMAN. Thank you, Mr. Crane.

Our next witness is Mr. Simons from the State Department, and we're going to ask Mr. Simons if he would proceed with his testimony.

Mr. SIMONS. Thank you, Mr. Chairman. Thank you for this opportunity to meet with you today to discuss U.S. heroin strategy in Colombia. I'd also like to associate myself with the congratulations that Mr. Crane offered for Mr. Gilman for your long-standing support for our Colombia programs and our counternarcotics objectives in Colombia.

Mr. GILMAN. Thank you. Let me note that Mr. Simons is Acting Assistant Secretary of State for International Narcotics and Law Enforcement. Please proceed.

Mr. SIMONS. Thank you. I also plan to deliver a short oral statement and would ask that my longer written statement be entered into the record.

Mr. GILMAN. Without objection, we appreciate your brevity.

[The prepared statement of Mr. Simons follows:]

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INTERNATIONAL NARCOTICS AND LAW ENFORCEMENT AFFAIRS
U.S. DEPARTMENT OF STATE

DECEMBER 12, 2002

HOUSE COMMITTEE ON GOVERNMENT REFORM
HEARING ON
"AMERICA'S HEROIN CRISIS: THE IMPACT OF COLOMBIAN HEROIN AND HOW WE CAN IMPROVE PLAN COLOMBIA"

Mr. Chairman and Members of the Committee, thank you for this opportunity to meet with you today to discuss the U.S. heroin strategy in Colombia.

United States counternarcotics programs with Colombia represent a response to one of the most important challenges that we confront today. The issues raised by Colombia's production and U.S. importation of illicit drugs directly affect the well-being of United States citizens, the survival of a democratic Colombia, and the stability of the Andean region as it relates to fighting the twin menaces of the illegal drug industry and terrorism. Colombian terrorist groups lack popular support, but derive their strength from an unholy alliance between terror and the illegal narcotics industry. Their coffers are filled largely by U.S. and European heroin and cocaine users.

For Colombia, confronting the intertwined dangers of counternarcotics and drug-supported terrorism is a vital element of President Uribe's broad initiative to reinforce the rule of law, build a healthier and stable economy, and instill a greater respect for human rights.

HEROIN

We recognize the significant support given the Administration by the Congress in attacking the scourge of drugs. Some Members of Congress have expressed concern that U.S. counter-drug policies and programs in Colombia do not fully recognize the dangers or devote sufficient resources to attacking heroin production and the cultivation of the opium poppy crop.

In fact, we do recognize the increasing growth and impact of Colombian heroin on the United States. U.S. Government

cultivation estimates document a disturbing increase in opium poppy cultivation in Colombia over the last few years - jumping by nearly 62%, from 4,050 hectares in 1998 to an estimated 6,540 hectares in 2001.

While the poppy cultivation 2001 estimate, and the potential 4.3 metric tons of heroin it represents, accounts for only four percent of the world's potential production of heroin, it translates to between 22 and 33 percent of the estimated 13 to 18 metric tons of heroin consumed annually in the U.S.

The fight against heroin and other hard drugs is a coordinated, multi-faceted campaign that includes interdiction, eradication and alternative development, as well as law enforcement.

INTERDICTION

Our financial and technical assistance to Colombia during the last few years under Plan Colombia is increasing Colombia's capabilities to interdict heroin in its production and distribution phases. In FY 2002, we directly budgeted $26 million in INL resources to the Colombian National Police (CNP) for interdiction and funded over $84 million in general CNP programs (aviation and construction) that included interdiction support. A sizable portion of the $104 million in FY 2002 INL resources dedicated to support Colombian military counter-drug programs was used for interdiction (especially funding the Counter-drug Mobile Brigade as well as maritime and riverine operations) and support of interdiction efforts. INL is also supporting DEA's airport interdiction project (to increase the detection and capture of hard drugs and traffickers using air transport) with $1.5 million in FY 2002 resources and a proposed $1.75 million in funding in FY 2003. In addition, in FY 2002, we dedicated $46.5 million on the promotion of the rule of law and support for democratic institutions.

Reflecting the value of interdiction activities, Colombia has seized over 670 kilograms of heroin and morphine in 2002 (compared with 796 kilograms in 2001) -- a significant percentage of total potential production.

AERIAL ERADICATION

We are not ignoring the opium poppy crop. In fact, we are in the second and most aggressive phase of this year's poppy spraying program, utilizing four T-65 spray aircraft in the southwestern part of the country. To date in 2002, we have

sprayed 3,263 hectares of poppy, and hope to reach the year-end goal of spraying 5,000 hectares of poppy. This is a significant increase over last year's 1,846 hectares sprayed.

We recognize that 2001's spray numbers were considerably lower than 2000's total of 8,843 hectares. However, in 2001, the spray programs were faced with several limitations: insufficient spray planes; inadequate numbers of security aircraft; lack of pilots; several interruptions in the flow of the budget; and bad weather. Also, poppy spraying requires many more resources per hectare and is higher risk (due to terrain, operational mission, and weather). In light of all of that, the priority assigned by the Colombian and U.S. Governments was to attack coca.

I am also pleased to report that with the support of Congress and considerable effort and work, especially during this last year, we have significantly increased the base capability of the spray program. We now have a spray plane fleet capable of carrying out serious eradication programs targeting both coca and poppy cultivation.

Of special note is the addition of three AT-802 Air Tractors to our fleet in 2002 and the upcoming delivery of an additional five AT-802s in the first half of 2003. These aircraft, which have a greater load capacity, can efficiently be deployed for coca or opium poppy spraying. Initially, we plan to use the Air Tractors for coca spraying, which will free up T-65s. We plan to dedicate our T-65 fleet principally to poppy spraying in 2003.

Our inventory now includes (for both coca and poppy programs):

- 10 OV-10 Broncos
- 4 T-65 Turbo Thrushes
- 3 AT-802 Air Tractors
- 2 additional T-65s by February (repaired and returned to service)
- 5 additional AT 802s (in January, February, May and June)

Just as important, we now have sufficient helicopters for reconnaissance and security to support spray missions as well as for use in interdiction and air support. Until this year, there were insufficient assets (especially those capable of operating in the mountainous areas where poppy is grown) in the country to cover an expanded spray program.

We currently have nine pilots who have been trained for the Air Tractors. This training includes intensive mountain flying which means the versatile pilots can spray coca or poppy. Six more pilots are in training in New Mexico and are due to graduate during the February-March time-frame. An additional pilot will be trained by April 30. This means that our complete contingent of sixteen mountain qualified AT-802 pilots will be trained and ready in time to match the incremental delivery of the additional AT-802 aircraft to Colombia.

With these improvements, we plan to achieve the 2002 spray goal of 5,000 hectares of opium poppy -- an increase of 170 percent over 2001. For 2003, the goal is to spray all remaining Colombian poppy -- up to 10,000 hectares -- along with the remaining Colombian coca -- up to 200,000 hectares. Full funding of our FY 2003 request for Colombia will be essential to achieving these goals.

As ONDCP correctly points out in their testimony, targeting the opium poppy crop is a complex and costly proposition, and it is important to highlight the difficulties we confront in opium poppy eradication. Poppy is grown in well-hidden, widely dispersed fields in rugged cloud-covered mountains, often defended by FARC or paramilitary groups. Reconnaissance and spraying of the poppy crop is significantly dangerous, as tragically illustrated by the October 23 crash (due to bad weather) of a Colombian National Police helicopter. Four people died on board this routine reconnaissance mission. Also, spray planes have been hit by ground fire, including three at the end of November on the same day. For the same factors -- hidden small fields, wide dispersion, mountain terrain, bad weather, and growing areas far from coca zones -- supporting poppy spraying requires spending approximately three times the resources per hectare as spraying coca.

To ensure that these eradication gains remain permanent, USAID continues to implement Plan Colombia alternative development programs in poppy growing areas. These programs focus on four main activities: strengthening private, public, national and local institutions; expanding rural infrastructure; increasing licit economic opportunities; and improving management of natural resources. Since initiating its $10 million program in 1999, USAID has signed agreements with small farmer associations in poppy growing areas resulting in the cultivation of 2,124 hectares of licit crops benefiting 3,357 families. USAID supports alternative income-generating programs such as cultivation of specialty coffees, cold climate fruits and

vegetables, raising dual-purpose (meat/milk) livestock, as well as development of infrastructure in poppy-growing departments. USAID will continue its robust alternative development programs in poppy areas, and plans to establish an additional 765 hectares of licit crops and assist an additional 2,320 families in the coming year.

INCREASED COLOMBIAN SUPPORT

In closing, I would like to touch on what is perhaps the most positive element in our drug policy and programs in Colombia. As you know, in August, President Alvaro Uribe took office, bringing with him a bold vision of how to resolve the problems confronting Colombia coupled with the political will and public support to do it. Within the first four months of his administration, he has already begun to act decisively and concretely:

- Even before assuming office, Uribe recognized the need for a comprehensive and viable plan to achieve his ambitious goals, and undertook the creation of the Colombian National Security Strategy (NSS). Although not yet released, and as we have reported to the Congress, the draft NSS includes pledges to enhance resources for security, undertake a comprehensive counternarcotics campaign, improve human rights protection, continue funding social/humanitarian programs, and make a determined effort to completely sever military-paramilitary ties. President Uribe wrote President Bush that Colombia is undertaking the commitments in the NSS to ensure the effectiveness of joint efforts with the United States to achieve our common goals in combating narcotics trafficking and terrorism.

- President Uribe has publicly and repeatedly emphasized his personal commitment to a total war against the Colombian drug industry on all fronts. He is working closely with the United States Mission in Bogota to broaden the spray program, enhance the capabilities of all counter-drug forces, increase the effectiveness and coverage of interdiction, and enhance alternative development programs. His administration has already directly assisted in concrete areas, including speeding up the acquisition and employment of new spray aircraft and helicopters. This enabled the spray program to undertake one of its most aggressive and effective spray campaigns in the second half of 2002 -- a vigorous initiative that is the first sustained, large-scale aerial eradication effort in Colombia. This campaign is currently attacking coca

in the Putumayo/Caqueta areas (spraying over 60,500 hectares as of December 1 for this campaign) and (beginning in November) poppy in the Cauca and Narino areas (spraying over 1,500 hectares as of December 1 for this campaign).

- President Uribe also recognized that fundamental to resolving Colombia's problems is the need to establish security throughout rural Colombia where the central government's traditional lack of presence has allowed the FARC, paramilitary groups, and drug organizations to run rampant. The new administration has already begun implementing plans to systematically re-establish government presence and public security throughout the country. This effort has a direct and important long-term impact on our broad counter-drug strategy. This is the first step towards developing a more developed culture of law in remote areas where drug crops are grown -- a culture designed to discourage involvement in illegal activities. Also, general public safety and stability are required to create a self-sustaining and developed economy that provides viable licit alternatives to drug crops from which people can make a living.

We believe that the commitment already shown by the Uribe Administration represents a unique opportunity for both of our countries to make serious, significant, and permanent progress in combating drugs, and in turn, the terrorism that drug profits support. In the four months since President Uribe has been in office, we have seen unprecedented cooperation and the highest level of support for our drug policies and programs. We also recognize that President Uribe, in his unflinching commitment, is taking a major political and personal risk.

The United States must follow through with its commitments in its fight to combat both heroin and cocaine in Colombia. We know the enemy and what we need to do. We have assets in country deployed to do the job, and we have effective and strong leadership in Colombia prepared to do its part. Full funding of our FY 2003 budget request for the Andean Counternarcotics Initiative ($731 million) will be essential to achieving our goals.

Mr. SIMONS. U.S. counternarcotics programs in Colombia represent a response to one of the most important challenges we confront today. The issues raised by Colombia's production and U.S. importation of illicit drugs directly affect the well-being of U.S. citizens, the survival of a democratic Colombia, the stability of the Andean region as it relates to fighting the twin nemesis of the illegal drug industry and terrorism.

For Colombia confronting the intertwined dangers of counternarcotics and drug-supported terrorism is a vital element in President Uribe's broader initiative to reinforce the rule of law, build a healthier and stable economy and instill a greater respect for human rights.

Mr. Chairman, attacking the heroin production problem in Colombia is an important U.S. counterdrug priority. Opium poppy cultivation in Colombia now totals approximately 6,500 hectares and generates a potential 4.3 metric tons of heroin, nearly all of this destined for the U.S. market. This could represent up to as much as one-third of the estimated 13 to 18 metric tons of heroin consumed annually in the United States.

Our fight against heroin and other hard drugs is a coordinated multifaceted campaign, again as Mr. Crane has indicated, that includes interdiction elements, eradication elements, alternative development elements, as well as the law enforcement elements.

State Department resources provided through INL are supporting all four elements of this strategy in cooperation with our 28-year program of partnership with the Colombian police.

In the interdiction area, our financial and technical assistance to Colombia during the last few years under Plan Colombia is increasing the government of Colombia's capability to interdict heroin in its production and distribution phases.

In fiscal year 2002, we directly budgeted $26 million in INL resources to the Colombian National Police, specifically for interdiction activities, and we also funded over $84 million in CNP aviation and construction programs that supported their ability to conduct interdiction operations.

In addition, the sizable portion of the $104 million that was provided in our resources for Colombian military counterdrug programs was also directed toward interdiction.

INL is also financially supporting DEA's airport interdiction project, which intends to detect and capture hard drugs and traffickers using air transport, and for that purpose we've dedicated $1.5 million in fiscal year 2002 and a proposed $1.75 million in fiscal year 2003 funding.

Reflecting the importance of this interdiction activity, Colombia has seized more than 670 kilograms of heroin and morphine in 2002, which is a significant portion of total potential production.

With respect to aerial eradication, we are currently engaged in the second and most aggressive phase of this year's poppy spraying program, utilizing four T–65 spray aircraft in the southwestern part of the country.

To date this year we have sprayed approximately 3,200 hectares of poppy, and we hope to reach the goal of spraying 5,000 hectares, which is our goal, by year-end.

We recognize, Mr. Chairman, that the spray figures from 2001 were considerably lower than 2000's total of 8,800 hectares. This was due to a number of different factors. Slow delivery of the spray planes that were ordered under Plan Colombia, inability of security aircraft, shortages of pilots, some interruptions in the budget and bad weather, but most importantly in the first year of Plan Colombia both the U.S. Government and the Colombian Government did assign a priority to the attack against coca in fiscal year 2001.

This year I am pleased to report that with the support of Congress and considerable effort and work on the part of both the Colombian police as well as U.S. Government officials from different agencies, we have significantly increased our capability to spray. We now have a spray plane fleet which is capable of carrying out serious eradication programs for both coca, as well as opium poppy, and we hope to see evidence of that both in the 2002 numbers, as well as in what we can do next year.

Of special note is the addition of three additional air tractor, AT–802, spray planes in our fleet this year, and the upcoming delivery of another five air tractors in the first half of next year. These aircraft, which have a greater load capacity, can effectively be deployed for either coca or opium spray operation. Initially we plan to use the air tractors for coca spraying, but this will have the important fact of freeing up the traditional T–65 aircraft, of which we should have six by the middle of next year for a dedicated effort to poppy spraying.

We also have sufficient helicopters for reconnaissance security to support our spraying missions, as well as to use these helicopters for interdiction and air support.

Until this year—and, Mr. Chairman, this has largely to do with the natural lags in the delivery of the Plan Colombia equipment—we did not have sufficient assets to carry out both programs to the degree that we would have wanted.

We've also made a major effort this year to enhance the training of pilots who could spray in the high altitude poppy environment that we find in Colombia.

We have already trained nine pilots specifically under New Mexico conditions to operate the air tractors in poppy-type environments. An additional six pilots should be trained in the first half of 2003. This means that by the middle of 2003, a complete contingent of 16 mountain-trained air tractor pilots will be ready in time to match the incremental delivery of this equipment to Colombia.

So for 2002 we plan to achieve our goal of 5,000 hectares of opium poppy spraying. For 2003, our goal is to spray all remaining Colombian poppy, up to 10,000 hectares, along with the remaining Colombian coca, which may total as much as 200,000 hectares.

I would also like to remind the committee that full funding of our fiscal year 2003 request for Colombia will be essential in order for us to achieve these goals.

Finally, let me say one word about alternative development in Colombia. Alternative development is an important pillar of our strategy to counter the drug trade in Colombia, and not only in the coca areas but also in the poppy areas. USAID is undertaking major efforts and alternative development, which are detailed in my statement. Thank you, Mr. Chairman.

Mr. GILMAN. Thank you, Mr. Simons.

Our next witness is Roger Guevara, Chief of Operations of DEA. Mr. Guevara, you may proceed.

Mr. GUEVARA. Thank you, sir. Mr. Chairman, distinguished members of this committee, I'm very pleased to be here before you today. Before I begin, I would like to thank you and the committee on behalf of Administrator Hutchinson and the men and women of DEA for your continued support of both our international and domestic efforts to combat heroin and other drug trafficking organizations.

Mr. GILMAN. And please convey to Mr. Hutchinson that we regret that he's soon to leave our battlefield to go on to a bigger battlefield, and we hope we're going to have a good alternative chairman and replacement. So please wish him well in his new endeavors. Please proceed.

Mr. GUEVARA. I'll convey your good wishes, sir.

High purity, low-price Colombian heroin today dominates the heroin market in the eastern United States. Although abuse of cocaine and marijuana are far more prevalent than heroin, its highly addictive nature, increased potency and availability make it one of the more significant challenges we face.

The increased availability of Colombian heroin over the last decade has led to higher levels of heroin use nationwide. The number of heroin users in the United States has increased substantially from an estimated hard core heroin user population of 630,000 in 1992 to almost 1 million regular users today. This country has an additional half million occasional heroin users. Today they consume 13 to 18 metric tons of heroin each year. Between 1996 and 1999, heroin was the third most frequently reported drug in emergency department visits, and the second behind cocaine involved in drug-related deaths.

According to the 2001 National Household Survey on Drug Abuse, more than 3 million Americans age 12 or older had tried heroin at least once. These statistics place heroin among the top three drugs of abuse in the country.

In the 1980's and 1990's, Southeast and Southwest Asian traffickers dominated the heroin trade. The majority of heroin entering the market originated in Burma and Afghanistan. Today Colombian traffickers have effectively seized control of the East Coast market.

In 2001, under DEA's heroin signature program, approximately 56 percent of the heroin seized in the United States by Federal authorities and analyzed by DEA was from Colombia as opposed to a combined 14 percent from Asia and 30 percent from Mexico. Although these results should not be equated with market share, they are good indicators of relative availability over time.

Independent trafficking groups who operate outside the control of the major cocaine organizations dominate the Colombian drug trade. In the early 1990's, the bulk of the South American heroin smuggled into the United States was transported by couriers on direct commercial flights from Colombia to the United States. Since the mid-1990's, Colombian heroin traffickers have diversified their methods of operation, smuggling heroin into the United States through countries in South America, Central America and the Car-

ibbean and sending bulk shipments of heroin to the United States using cargo planes, container ships, and go-fast vessels.

Seizures of 15 to 30 kilograms of heroin are now common, and seizures of up to 50 kilograms of heroin occur but less frequently. Uncorroborated DEA intelligence has implicated Colombia's terrorist organizations, the FARC, ELN and AUC in the Colombian heroin trade. Specifically, these groups are suspected of charging a tax fee from heroin traffickers who obtain heroin from areas under their control. These groups are also suspected of taxing farmers who cultivate poppy plants in areas they control.

While on the subject of terrorist organizations involving the Colombian heroin trade, I would like to repeat something Administrator Hutchinson has stated repeatedly, namely that the fight against international drug trafficking organizations is a crucial element in conducting the war on terror and one we are committed to fighting.

With the full backing of the administration and support of Congress, DEA and the Colombian National Police have created a heroin task force to coordinate Colombian heroin investigations. At full strength, the task force will be comprised of 40 officers in five locations throughout Colombia. To assist with this effort, DEA has dedicated additional manpower resources to Colombia. Effective multinational enforcement initiatives led by DEA have already resulted in significant seizures of heroin outside of the U.S. borders.

Since 1997, heroin seizures have increased by 1,100 percent in Venezuela, 1,000 in Ecuador, 500 percent in Panama and 300 percent in Colombia. The regional enforcement initiative known as Operation LATA Forma was launched in April 2001 and resulted in the seizure of 144 kilograms of heroin and the arrest of 85 defendants in Colombia, Chile, Peru, Venezuela and Ecuador. Based on this success, participating countries have continued the operation on a permanent basis.

DEA and the CNP initiated Operation Matador to target a heroin trafficking organization responsible for transporting multikilogram quantities of heroin from Bogota to the United States. The organization utilized couriers to transport heroin over land from Bogota to border towns located in Venezuela and Ecuador and then ship the heroin in commercial planes to Mexico City, Mexico and subsequently to McAllen, Texas. In November 2001, this investigation was concluded with the arrest of 26 key members of this organization and the seizure of 38 kilograms of heroin. Additionally, DEA offices in Texas, New York, New Jersey and Rhode Island arrested 28 defendants and seized an additional 38 kilograms of heroin.

The United States, Colombia and the Andean region countries face dramatic new challenges in combatting heroin trafficking groups. DEA will continue to invest considerable time and resources in the close partnership we have developed with our counterparts in the region.

I thank the committee again for this opportunity to appear before you today, and we'd be glad to answer any questions.

[The prepared statement of Mr. Guevara follows:]

Remarks by

Rogelio E. Guevara

Chief of Operations
Drug Enforcement Administration
United States Department of Justice

before the

House Committee on Government Reform

regarding

America's Heroin Crisis, the Impact of Colombian Heroin and How We Can Improve Plan Colombia

2154 Rayburn House Office Building
Washington, DC
December 12, 2002

Statement of
Rogelio E. Guevara
Chief of Operations
Drug Enforcement Administration
Before
House Committee on Government Reform
December 12, 2002

Executive Summary

The Drug Enforcement Administration (DEA) employs a global approach in attacking international heroin trafficking organizations that bring misery to America's cities and citizens. DEA's strong presence around the world enables the agency to focus its resources on the most substantial of these organizations.

Colombia and the Andean region countries face dramatic new challenges in combating heroin trafficking groups. In order to foster a comprehensive and strategic approach to the South American heroin problem, DEA will continue to invest considerable time and resources in the close partnerships the agency is developing with its counterparts in the region.

DEA will reach its goal of targeting, investigating, and destroying heroin trafficking groups having the greatest impact on the United States by utilizing a number of intelligence and enforcement strategies, including:

- *Working with host-nation counterparts to target and dismantle the South American heroin trafficking organizations with the most significant impact on the United States*
- *Proactively collecting, analyzing and distributing vital intelligence information to the domestic and international law enforcement community*
- *Establishing the Colombian Heroin Task Force to coordinate all heroin investigations within Colombia with other South American countries and DEA offices elsewhere*
- *Coordinating with local, state, and federal law enforcement entities to combat groups who operate illicit heroin enterprises*

Chairman Burton and distinguished members of the committee, it is a pleasure for me to appear before you for the first time in my capacity as the Chief of Operations of the Drug Enforcement Administration. Before I begin Mr. Chairman, I would like to take a moment to thank you, on behalf of Administrator Hutchinson and the men and women of the DEA, for your continued support of both our international and domestic efforts to combat heroin and other drug trafficking organizations. I look forward to a productive and cooperative relationship with the committee on this most important issue.

I appear before you today to testify about the high-purity, low-price Colombian heroin that has come to dominate the heroin market in the Eastern United States. Although abuse of cocaine and marijuana are far more prevalent than heroin abuse, heroin's highly addictive nature, and recent increases in its potency and availability make it one of the more significant challenges we in the law enforcement community face. DEA has directed significant enforcement and intelligence assets to identify, investigate, and dismantle Colombian heroin trafficking organizations, and will continue to do so in the coming months and years.

U.S. HEROIN USE

Regional Distribution:

Heroin from all major source areas is generally available throughout the entire United States. However, according to the National Drug Intelligence Center's National Drug Assessment 2002, there are two distinct geographic heroin markets in the United States, divided roughly by the Mississippi River. East of the Mississippi, high-purity white powdered heroin from Colombia is predominately available. West of the Mississippi, Mexican heroin, usually in the form of black tar, is the most common type. It is important to note that both forms of heroin can be found east and west of the Mississippi, but quantities of each kind are limited where the other type is prevalent.

National DAWN and ED Statistics

The increase in availability of highly pure, relatively inexpensive Colombian heroin over the last decade has contributed to significantly greater levels of heroin use nationwide. The number of heroin users in the U.S. has increased substantially since the early 1990s, going from an estimated hard-core heroin user population of 630, 000 in 1992, to a current population of regular users numbering approximately 977,000. The U.S. has an additional 514,000 occasional heroin users. Cumulatively, U.S. users consume 13-18 metric tons of heroin per year.

According to the 2001 National Household Survey on Drug Abuse, approximately 3.1 million Americans age 12 or older had tried heroin at least once in their lifetimes, 456,000 used heroin in the last year, and 123,000 reported using heroin during the month prior to the survey. Also according to the same survey, an estimated 76,321,000 Americans tried marijuana at least once in their lifetimes, and 27,788,000 Americans tried cocaine at least once. These statistics place heroin among the top three drugs of abuse in the country.

Similarly, heroin was the third most frequently reported drug in emergency department (ED) visits, and the second most frequently mentioned drug (behind cocaine) involved in drug related deaths between 1996 and 1999, according to the Drug Abuse Warning Network (DAWN). In the case of heroin ED rates, 10 out of 21 metropolitan areas in the United States had ED visit rates more than double the national rate, and four

cities -- Newark, Chicago, Baltimore, and San Francisco -- had ED visit rates more than four times the national average.

Domestic Arrests and Seizures

A number of factors determine the significance of the threat each type of drug trafficking poses to the United States. From an international perspective, these include the organizational strengths and adaptability of criminal organizations, their impact on the national security of the U.S. and its allies, the violence associated with drug distribution, and the flow of illicit funds that undermines the economic policies of nations. Public health and safety issues that arise from the production of illicit drugs, the drain on law enforcement resources, and the deleterious effects of drugs on individuals are but a few of the factors to be considered when calculating the domestic threat to the United States.

In calendar year 2001, DEA initiated 1,929 heroin cases, including 55 Priority Target cases, arrested 3,026 heroin defendants and seized 753 kilograms of heroin. In contrast, DEA initiated 8,177 cocaine cases, arrested 12,874 cocaine defendants, and seized 58,808 kilograms of cocaine. Most DEA field divisions continue to identify cocaine as the primary illicit drug of concern, based upon abuse indicators, the violence associated with the trade, and/or the volume of drug movement. However, as Colombian heroin purity levels have skyrocketed and the price of heroin has decreased, DEA has reorganized and dedicated new enforcement resources at the domestic and international level to address this ever-changing problem.

CHANGES IN THE HEROIN TRADE

Shift from Asian to South American Heroin

In the 1980s and 1990s, Southeast and Southwest Asian traffickers dominated the heroin trade, with the majority of heroin entering the market originating in Burma and Afghanistan. As early as 1977, DEA had received sporadic, anecdotal reports of opium poppy cultivation in the Valle del Cauca Department in southwest Colombia, but those reports remained unconfirmed until 1984.

In May of 1984, the CNP located and destroyed 35,000 opium plants at seven separate sites north of Villavicencio in Meta Department. In August of 1988, 450,000 opium plants were located and destroyed in Tolima Department, Colombia. Although the discovery of these opium fields was significant, the estimated size of Colombia's potential opium production paled in comparison to the important opium growing areas in Southwest and Southeast Asia.

SOUTH AMERICAN (COLOMBIAN) HEROIN

Trafficking Organizations

By the early 1990s, opium poppy cultivation in Colombia was expanding rapidly. In recent years, poppy cultivation and heroin production have become an integral part of the Colombian drug trade, and are dominated by independent trafficking groups that operate outside the control of the major cocaine organizations. Colombian heroin traffickers have established themselves as major sources of supply in the Northeastern United States, the largest heroin market in this country.

Connection to Terrorism

There is no dominant "heroin kingpin" in Colombia, as independent Colombian trafficking groups dominate the South American heroin trade. Uncorroborated DEA intelligence information from a number of sources has implicated the Revolutionary Armed Forces of Colombia (FARC) in the Colombian heroin trade. Specifically, intelligence information indicates the FARC, which is a State Department designated foreign terrorist organization, charges a "tax fee" from heroin traffickers who obtain heroin from areas under FARC control. The FARC is also suspected of charging a tax to farmers who cultivate poppy plants in areas they control.

In addition to the FARC, Colombia's other terrorist organizations, the National Liberation Army (ELN) and the United Self Defense Forces of Colombia (AUC), are also believed to be engaged in the drug trade to support their terrorist agendas. The FARC and AUC derive roughly seventy percent of their operating revenues from narcotics trafficking. While the ELN derives some of its revenue from narcotics trafficking, the amount is significantly less.

While we are on the subject of terrorist organizations involved in the Colombian heroin trade, let me take a minute to express DEA's support of Secretary Powell's recently expressed commitment to continue assisting the Government of Colombia in its fight against drug traffickers and narco-terrorists. As Administrator Hutchinson has stated repeatedly, the fight against international drug trafficking organizations is a crucial element in conducting the war on terror. We are confident that this war can be won and will continue to do our part by targeting and dismantling those groups that fund terrorist organizations using ill-gotten gains from the drug trade.

Trafficking Routes

In the early 1990's, the bulk of the South American heroin smuggled into the United States was transported via couriers on direct commercial flights from Colombia to the international airports in Miami and New York City. Most of the couriers arrested in

Miami were en route to New York City, and their most common method of smuggling was ingestion of small quantities of heroin (1 kilogram or less) wrapped in latex. Heroin was also concealed inside hollowed-out shoes and luggage, in the lining of clothes, and inside personal items.

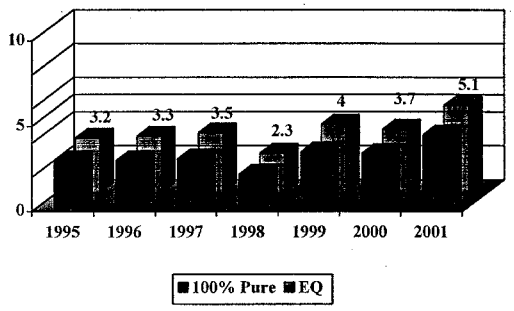
Since the mid-1990s, Colombian heroin traffickers have diversified their methods of operation. Couriers still come into Miami, New York City, San Juan, and other U.S. airports on direct commercial flights from Colombia. Increasingly, however, Colombian traffickers are smuggling heroin from Colombia into the United States through such countries as Argentina, Costa Rica, the Dominican Republic, Ecuador, Panama, Mexico, Venezuela and several countries in Central America and the Caribbean. In addition, heroin traffickers have begun to send bulk shipments of heroin to the U.S. using cargo planes, container ships, and go-fast vessels. Seizures of 15 to 30 kilograms of heroin are now common, and seizures of up to 50 kilograms of heroin occur, but less frequently.

Cultivation & Production Trends

By global standards, Colombia produces relatively little heroin—less than five percent of the world's total estimated production in 2001. However, since the early 1990s, opium poppy cultivation in Colombia has rapidly expanded and has continued to rise steadily. For example, in 1998, Colombia produced about 2.7 metric tons of heroin, but in 2001, Colombia cultivated approximately 6,540 hectares of opium poppy, translating into 4.3 metric tons of pure heroin. This figure is only a fraction of the estimated heroin produced by South Asian Countries in 2001– Burma potentially produced 72 metric tons of heroin and Afghanistan produced 7 metric tons of heroin. Similarly, this figure pales by comparison to the estimated 169,800 hectares of coca cultivated in Colombia resulting in the production of 730 metric tons of cocaine during the same period. Nonetheless, Colombian heroin's potency and availability on the U.S. Market renders it a significant threat.

Operation Breakthrough

The DEA initiated Operation Breakthrough in 1993 to provide policy makers and the counter drug intelligence community with the scientific data required to more accurately estimate potential cocaine and heroin production in Colombia. On the heroin side, Operation Breakthrough's efficiency studies documented that Colombian opiate processors are about 67% efficient in their overall process of converting opium latex into heroin. Considering that the typical Colombian heroin processor requires 24 kilograms of opium latex to produce one kilogram of 100 % pure heroin, with approximately 6,540 hectares of opium poppy under annual cultivation in 2001, Colombia potentially produced 104 metric tons of opium latex. At a 24:1 conversion ratio, this means Colombia potentially produced 4.3 metric tons of 100% pure heroin in 2001. DEA analysis indicates that wholesale-level Colombian heroin seized by the U.S. Customs Service in 2001 had an average purity of 84.5%. Accordingly, 4.3 metric tons of 100% pure heroin translates into 5.1 metric tons of "export quality" heroin.



Heroin Signature Program

One key indicator of relative heroin availability in the United States is the DEA Heroin Signature Program (HSP). The HSP identifies and quantifies the chemical characteristics and secondary components of heroin seized at U.S. ports of entry, as well as random samples of domestic purchases and seizures. Heroin exhibits are classified according to the process by which they were manufactured, which, in turn, enables DEA analysts to match exhibits to specific geographic source regions

In 2001, 56 percent of the heroin seized by Federal authorities and analyzed under the HSP was identified as South American (Colombian). Likewise, 30 percent was identified as Mexican, 7 percent as Southwest Asian, and 7 percent as Southeast Asian. Although HSP results should *not* be equated with market share, it is one indicator of relative availability over time. South American heroin has accounted for the majority of the heroin analyzed under the program for the past seven consecutive years.

MEETING THE THREAT

South American Regional Operational Initiatives

DEA has undertaken a number of targeted enforcement activities in an effort to combat the threat posed by Colombian heroin. In conjunction with the Colombian National Police (CNP) and other South American countries, DEA launched the regional enforcement initiative, Operation Plataforma, in April 2001. This initiative was carried out from April 15, 2001 until June 15, 2001 and culminated in the seizure of 144 kilograms of heroin and the arrest of 85 defendants in Colombia, Chile, Peru, Venezuela and Ecuador. A second phase of Operation Plataforma began in November 2001 and has been similarly successful in yielding a number of arrests and the seizure of multi-kilogram quantities of heroin. Due to the significance of this threat and the success of

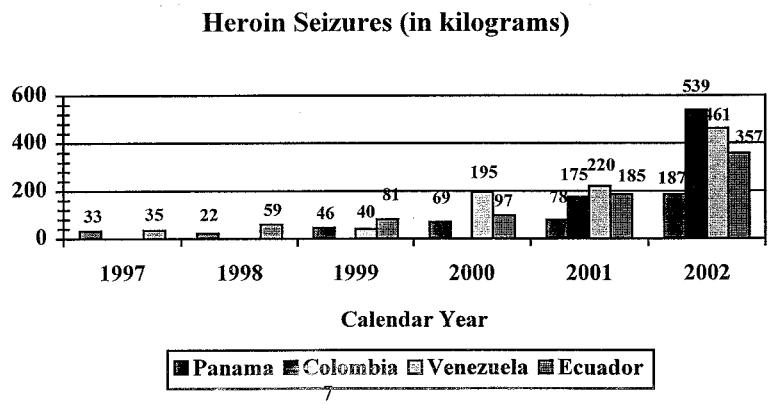
Operation Plataforma, the participating countries decided to continue the operation on a permanent basis.

Heroin Task Force

Additionally, DEA and the CNP have created a Heroin Task Force to coordinate heroin investigations within Colombia with other South American countries and DEA foreign and domestic offices. At full strength, the Task Force will be comprised of 40 officers working from five off-site locations throughout Colombia. To facilitate the formation of the Colombian Heroin Task Force, DEA has dedicated additional manpower resources to Colombia, with the full backing of the Administration and support of Congress. The Bogota Country Office was recently authorized to increase its staff by nine Special Agents, two Intelligence Analysts and two administrative positions, to better coordinate its efforts with the Task Force. With the full complement of Special Agent personnel in Colombia, it will staff the largest number of DEA agents in South America.

The Heroin Task Force will concentrate its efforts on targeting South American heroin trafficking organizations, especially those with regional and international implications. Intelligence derived from the Task Force will support in-country interdiction of chemicals and other materials used to produce heroin and the establishment of drug intelligence information exchange systems between CNP, Colombian Military and other Andean Countries. For example, information obtained from the Task Force is expected to dovetail into other enforcement initiatives such as Operation Seis Fronteras, a chemical control program targeting organizations diverting heroin and cocaine precursor chemicals.

Effective multi-national enforcement initiatives led by DEA have already resulted in significant seizures of heroin outside of U.S. borders. DEA reporting indicates that since 1997 heroin seizures have increased by 1,100% in Venezuela, 1,000% in Ecuador, 500% in Panama and 300% in Colombia. The following chart highlights the increase in heroin seizures in Panama, Colombia, Venezuela and Ecuador since 1997:



Airport Interdiction Programs

DEA also actively assists host nation counterparts in airport interdiction programs throughout South America. The Airport Interdiction Program in Bogota is particularly successful, generating substantial enforcement successes and intelligence collection. This program combines intelligence information gleaned from Heroin Task Force investigations and basic interdiction techniques to identify suspected couriers of heroin. The U.S. State Department's purchase of an onsite x-ray machine has greatly increased the seizure of heroin from couriers who have internally ingested heroin in capsule form. The use of drug detection dogs provides another layer of protection against the use of the airport to transport heroin to the United States. Our Airport Interdiction program has resulted in the seizure of 217 kilograms of heroin this year.

Specific Operational Enforcement Successes

Operation Matador

DEA and the CNP initiated Operation Matador to target a heroin trafficking organization, headed by Rene ROBLEDO-Roman, which is responsible for transporting multi-kilogram quantities of heroin from Bogota to the United States. The organization utilized couriers to transport heroin overland from Bogota to border towns located near Venezuela and Ecuador. Once in Caracas, Quito and/or Guayaquil, the heroin was transported via commercial air to Mexico City, Mexico, and subsequently to McAllen, Texas, for distribution in New York.

On November 19, 2001, the CNP arrested ROBLEDO and 26 key members of his organization and seized 38 kilograms of heroin. Additionally, DEA offices in Texas, New York, New Jersey and Rhode Island arrested 28 defendants and seized an additional 38 kilograms of heroin, as a result of this enforcement action.

Operation Juliet

During Operation Juliet, the DEA and the CNP Heroin Task Force targeted the heroin and cocaine trafficking activities of the Jose Jairo GARCIA-Giraldo organization. This organization is based in Pereira, Colombia, and coordinates the shipment of multi-kilogram quantities of heroin and cocaine from Colombia to the United States. The shipments are transported by couriers into the United States by internal ingestion and/or through concealment in the lining of clothing and suitcases. The shipments transit Ecuador, Venezuela and Guatemala, as well as Miami, Florida and Houston, Texas, before arriving in New York. From New York, the shipments are distributed to Boston and Philadelphia.

On June 12, 2002, DEA and the CNP concluded Operation Juliet with the arrest of 21 defendants in Colombia, four defendants in New York, and one defendant in

Philadelphia. The CNP Task Force also seized 12 kilograms of heroin, 2 kilograms of cocaine, approximately $100,000 in U.S. and Colombian currency and nine luxury automobiles. The CNP Task Force seized a heroin-packing house in Pereira that was utilized to conceal the heroin.

Operation U-Turn

During Operation U-Turn, the DEA and CNP targeted the international heroin-distribution organization headed by Luis Alfonso CORTEZ-Mejia. This organization, based out of Bogota and Pereira, Colombia, was responsible for sending multi-kilograms of heroin to the United States by utilizing flight attendants that work for Avianca Airlines.

On September 18, 2002 the CNP culminated this investigation by executing 11 search warrants and arresting seven individuals in Pereira and Bogota. Prior to the take down operation in Colombia, the New York Division arrested 11 defendants and seized 21 kilograms of heroin, 1.5 kilograms of cocaine and $220,000 in currency.

These enforcement activities have netted good results, which can only improve as additional resources are deployed and cooperation with our counterparts at home and abroad is strengthened.

CONCLUSION

Heroin trafficking organizations will continue to challenge the flexibility and resilience of both domestic and international law enforcement agencies. The DEA remains committed to identifying, investigating, and destroying organizations and terrorist groups involved in the heroin trade, and will continue to work with our law enforcement partners around the world to improve our cooperative enforcement efforts and achieve those goals.

Thank you for the opportunity to testify before the Committee today. I will be happy to respond to any questions you may have at the appropriate time.

Mr. GILMAN. Thank you, Mr. Guevara.

Mr. Simons, allow me to address some questions to you. You mentioned that you're going to be able to eliminate 5,000 by the end of this year, 5,000 hectares of opium. Is that correct?

Mr. SIMONS. Our goal for this year is 5,000. Currently we're at about 3200.

Mr. GILMAN. Well, how are you going to do it in just the few remaining days?

Mr. SIMONS. We don't have too many days left, but we are going to see how close we can get to the 5,000 figure——

Mr. GILMAN. How close do you expect to get to it? Realistically without putting figures——

Mr. SIMONS. I think we'll get as close as we can, Mr. Chairman.

Mr. GILMAN. Well, that's an obvious answer.

I note that in the year 2000 under General Serrano, some 9,200 hectares were eliminated in a 9-month period, and then in the year 2001 only 1,800 hectares of opium were eradicated. And now we're only up to 3,000, a total of 4,800 hectares in a 2-year period, 2001 and 2002. How do you account for that reduction in this important crop that's affecting our whole Nation?

Mr. SIMONS. Mr. Chairman, I think the main intervening event during that period was the passage of the Plan Colombia supplemental funding in the middle of the year 2000 and the major shift that took place at that time in which the government of Colombia, supported by our government, devoted substantial energies to spraying coca during the year 2001 at a time in which the new spray aircraft that were funded—were being funded on Plan Colombia had not yet arrived. So if you look at the total spray figures for the year 2001, we actually were able to boost the coca spraying from about 53,000 hectares up to 94,000. So clearly, there was a major focus——

Mr. GILMAN. Let me interrupt you. What was the boost?

Mr. SIMONS. It was about 40,000 hectares in the coca side.

Mr. GILMAN. Yeah, but what——

Mr. SIMONS. Clearly, there a major focus——

Mr. GILMAN. What happened to the opium side?

Mr. SIMONS. Well, the opium side obviously went down.

Mr. GILMAN. Why? We want to know why it went down. Is it true that Ambassador Patterson notified our committee that in January 2001 she decided to stop spraying opium in order to pursue an historic opportunity to spray a record number of hectares of coca? Is that an accurate statement?

Mr. SIMONS. My understanding, Mr. Chairman, is that the decision for the year 2001, the recommendation on the part of both the Colombians, which was supported by the United States, was to focus our energies on coca, and for that reason there was a major increase in the coca spraying.

Mr. GILMAN. Who made that decision?

Mr. SIMONS. I believe that was a decision in which the Colombian officials in consultation with the U.S. officials were involved.

Mr. GILMAN. Is Ambassador Patterson here? I see she is. Would Ambassador Patterson come up to the desk, please?

Ambassador Patterson, did you make that decision back in January 2001 to stop spraying opium?

Ambassador PATTERSON. Mr. Chairman, it's a pleasure to be here. Let me first say that.

Mr. GILMAN. We welcome you. Thank you for coming.

Ambassador PATTERSON. Mr. Chairman, as my colleague from the State Department has said, that was a joint decision, but certainly it was a decision that we made, yes, sir.

Mr. GILMAN. And was that directed by State in Washington?

Ambassador PATTERSON. Frankly, I can't recall, but there was vast support within the Colombian government and within the State Department, and I believe other agencies in the U.S. Government, to focus all our resources on coca eradication.

Mr. GILMAN. So there was no objection to stop opium eradication back in Colombia in January 2001?

Ambassador PATTERSON. Mr. Chairman, we continued opium poppy eradication continually throughout the year, and we're certainly trying to recover now, but we did have a—and we were very successful in coca eradication.

Mr. GILMAN. Yeah. I don't question that, but what I'm concerned about, what we're concerned about in this committee, is that only 1,800 hectares of opium were eradicated in the year 2001, a drop from 9,200 in the prior year, and it resulted in a massive increase in the export of opium to the United States.

Ambassador PATTERSON. Mr. Chairman, we were also facing a crisis in coca. It was flooding cheap coca. It was increasing at a rate of something like 20 and 30 percent a year.

Mr. GILMAN. But Madam Ambassador, isn't most of the coca production going to the European continent and the vast majority of the illicit drugs coming from Colombia are opium drugs at the present time?

Ambassador PATTERSON. Our estimates are somewhere between half and a third of the coca cultivation, coca crop goes to Europe but still a good half of it comes here.

Mr. GILMAN. But we have about 60 percent of the opium crop coming to the United States, do we not?

Ambassador PATTERSON. Yes, sir.

Mr. GILMAN. In light of what we heard from the local police this morning and the fact that ONDCP itself reports that heroin is the most addictive drug by nearly twice that of cocaine, was—Mr. Simons, I'm asking you—was this decision to stop spraying opium an appropriate decision?

Mr. SIMONS. Mr. Chairman, I think it's inappropriate to refer to a decision to stop spraying opium. As the Ambassador has indicated, the greater focus was placed on coca spraying. There was still spraying of opium that went on during the year.

Mr. GILMAN. But it was minor and intermittent compared to what had been done previously. Isn't that correct?

Mr. SIMONS. Certainly there was a decline, but as I pointed out in my testimony——

Mr. GILMAN. A major decline, 1,800 hectares in 2001 compared to 9,200 hectares in the year 2000.

Mr. SIMONS. That's correct.

Mr. GILMAN. 75 percent reduction.

Mr. SIMONS. That's correct, but we are making—we are beginning to make that up, and we expect to make major inroads next year.

Mr. GILMAN. You've only made it up to 3,000 this year. It's still a 60—one-third of what was done in the year 2000, and——

Mr. SIMONS. That's correct.

Mr. GILMAN. You heard the local police expressing their concern of the widespread opium addiction problem in our country. Something is wrong at the top here in your strategy.

Mr. SIMONS. That's correct, Mr. Chairman, but once again, if I could refer back to the observation I made before, which was we were able to achieve a very substantial increase in coca eradication this year, we'll be achieving up to 130,000 hectares.

Mr. GILMAN. Allow me to interrupt you. We're not concerned right now about the coca crop, which most of it is going to Europe. We're concerned about this vast supply of heroin that's coming to our country, and yet you're not doing enough to make the prior 2000 volume of 9,200 hectares that were sprayed only because you stopped eradicating, and I don't understand that rationale. I'd like you to explain that.

Mr. SIMONS. I think the issue here is it was a resource constraint. We had additional spray planes coming on board, but they had not arrived. At the same time there was a political——

Mr. GILMAN. Mr. Simons, General Serrano had the same amount of aircraft. He sprayed 9,200 hectares of opium with that amount of aircraft. So that's not an excuse that's rationally correct.

We've heard all kinds of excuses from the State, like bad weather, lack of spray planes, the crop is hard to find, and it goes on and on why opium eradication fell off, but the Colombian police in less than three-quarters of a year in the year 2000 nearly eliminated 80, 90 percent of the opium crop. So these excuses are hollow to our ears, and what we want to know is what you're doing now so eliminate the crop. We were told that in 2 or 3 months that crop could be eliminated completely if properly addressed.

Mr. SIMONS. Mr. Chairman, I would just go back with respect to the year 2000 and note that we were able to spray with the Colombians 53,000 hectares of coca that year, in addition to the 8,000——

Mr. GILMAN. You keep going back to the coca crop. I'm talking now about our crisis in opium.

Mr. SIMONS. Well, there were difficult tradeoffs to be made, Mr. Chairman.

Mr. GILMAN. Why did we make that tradeoff when we have such a problem with opium confronting our country?

Mr. SIMONS. Mr. Chairman, I would just go back to your opening statement with which I agreed, which is that we ought to be able to—I believe you said walk and chew gum at the same time. I believe in the year 2003 when the equipment that you provided under the supplemental is made available, we will be able to accomplish both of our objectives.

Mr. GILMAN. Well, you've had good equipment in the year 2002 and you've only done 3,000 hectares of opium spraying. It seems to me there's a lot lacking here, and I hope you would take another look at all of this. And wasn't it Ambassador Patterson who had to make that—that came out of Washington. And I think you made

some wrong decisions, and you heard the local police today. They don't know what to do with this major flowing of heroin that's coming out of Colombia. I hope you're going to take another look at the direction in which you're going.

Mr. Guevara, do you have any comments you'd like to make?

Mr. GUEVARA. No, sir. I've already indicated the level of the problem as DEA sees it. So we can do more with the resources that we have. We must continue to keep up the good fight.

Mr. GILMAN. And if we had better eradication, I assume your fight would be eased quite a bit?

Mr. GUEVARA. Well, I could not certainly dispute that. If we can attack it at the source, I think that we're all in agreement that is where we could have the biggest——

Mr. GILMAN. Was your agency conferred with with regard to cessation of opium eradication at the time they beefed up the coca eradication? Were you consulted?

Mr. GUEVARA. Sir, I can't answer that specifically, but I can assure you that the DEA in country in Bogota who report to the Ambassador certainly are in day-to-day coordination on all matters with regard to the drug issue in Colombia.

Mr. GILMAN. Well, I'm asking was DEA here in Washington consulted with regard to the change in policy of concentrating on coca eradication as compared to opium eradication? Do you know whether that——

Mr. GUEVARA. I do not know the answer to that. I'll certainly look into it and see whether my predecessor had such conversations.

Mr. GILMAN. I would appreciate it if you could advise this committee in writing after you've consulted with your people whether DEA was consulted.

Mr. Crane, do you have any comments?

Mr. CRANE. No, sir. What we have to find is an effective way. However, I look at this problem as a large problem. Wherever the heroin is coming from, we have to stop it and——

Mr. GILMAN. You're in charge of supply reduction?

Mr. CRANE. Yes, sir.

Mr. GILMAN. Were you consulted with the change of attitude about eradicating coca as compared to eradicating heroin?

Mr. CRANE. It would be my view I should get back to you since I've been there, what, 6 months and check the record.

Mr. GILMAN. Would you do that and notify us in writing whether you were consulted?

Mr. CRANE. Yes.

Mr. GILMAN. Thank you, and I'm about to turn the Chair over to Mr. Mica, who's been an outstanding warrior in our war against drugs. And I regret that I have to go on to another meeting. And I thank our panelists for being here and welcome Ambassador Patterson. We appreciate your hospitality when we were there not too long ago.

Mr. Mica.

Mr. MICA [presiding]. I thank our panelists again for their cooperation today and thank Mr. Gilman for his untiring efforts to deal with this narcotics problem. I think when I was a staffer back in the Senate in the early 1980's starting on the problem, he had

already provided leadership in the Congress on the issue, and we're going to miss his efforts. He certainly has been one of the warriors to address this very serious problem. And I think y'all join me in wishing him well. We'll miss him, both on the committee and in Congress.

The testimony today has provided us an update on, again, a very serious problem, and that's the availability of heroin and very deadly heroin coming in in unprecedented amounts from Colombia. We know the source, and we have the signature programs that identify exactly where this stuff is coming from. And unfortunately, its effects—we've also heard the testimony with regard to the deaths and destruction of lives, addiction it's causing.

There is some conflict in some of the testimony we've heard today, and I have a copy of an estimation of heroin availability in 1996 to 2000, which was published by the Executive Office of the President Office of National Drug Control Policy.

Let me state and quote from that report. It says, "An analysis of retail heroin signature data indicates that South American heroin dominates the U.S. heroin market, particularly in the eastern United States, accounting for more than 67 percent of the heroin consumed in the United States."

And we also have a copy of the official Country Handbook on Colombia, put out by the Department of Defense, dated October 2001, and it states on page 60 that "65 percent of the heroin found in the United States is of Colombian origin."

Are these figures correct, Mr. Crane?

Mr. CRANE. ONDCP did put the study out making the assumption that the signature program gave the balance. However, subsequent to that Drug Enforcement did a very detailed study, and there's been a reevaluation of the—the official estimate now is quite a bit less, so when that study was published it was based on assuming that the signature data gave the——

Mr. MICA. Can you turn the mic on?

Mr. CRANE. Oh, I'm sorry, I apologize. I thought it was on. Let me begin again. When that study was published the assumption underlying it was that the signature data gave an adequate estimate of the production percentages. However, subsequent research later concluded looking at where the fields are and the new breakthrough analysis by Drug Enforcement suggested that was an error. So the most recent studies, official estimates that we've put in are the current ones of about four metric tons available based on the amount of fields and the production. And they also looked in some detail how many harvests and so on. So the newer data is accurate, and these studies are outdated by newer research.

Mr. MICA. Who does the signature program? Is that you, Mr. Guevara?

Mr. GUEVARA. That is a study that's led by DEA, and it's conducted in concert with other government agencies. That study has in fact been conducted, and we identify as Operation Breakthrough.

Mr. MICA. Our staff has been told that there's a different figure here that is only about a third of heroin production coming out of Colombia, and you've just heard Mr. Crane say that number—the numbers in these documents and the documents I quoted are incorrect. What do you find?

Mr. GUEVARA. One of the results of the study was that the opium poppy fields were actually only capable of producing two times a year versus the previous belief that it was three and four times a year.

Mr. MICA. Well, this is information given to our congressional staff and Members in October, and it says 65 percent of the heroin in the United States is from Colombia. I'm not sure if this has a date on it. Given in October, but what date—do you know if that would hold true, or is that information incorrect also?

Mr. GUEVARA. I would have to consider what date specifically we're looking at. Our best information, sir——

Mr. MICA. Well, what's the latest signature evidence—and signature should be pretty accurate, because it's taken from, I guess, a chemical DNA analysis. I've been told you could pinpoint it practically to the fields where the stuff is being produced. What's the latest data that DEA has produced on the percentage coming from Colombia?

Mr. GUEVARA. I do not have that at my fingertips at the moment, but again, the study indicates that there's——

Mr. MICA. Well, everything we have from these reports and executive summary, the information provided to staff and Members as recently as October, just a month or two ago, indicates a higher percentage than we're hearing testimony today. Is there something we're missing?

Mr. GUEVARA. I understand, sir, that the heroin signature program from DEA has—that issue—considers 56 percent to be the——

Mr. MICA. What was the time of that analysis?

Mr. GUEVARA. I believe this to be the most current estimate.

Mr. MICA. Would that be 2000—2002, the latest information you have?

Mr. GUEVARA. That's correct.

Mr. MICA. So that's a little bit different than a third that you've heard Mr. Crane and others testify to or comment on today.

Mr. GUEVARA. I can only go by the best estimates, and I believe that to be 56 percent.

Mr. MICA. One of the disturbing things I found in the analysis—and I've been following this for a while. You said in the 56?

Mr. GUEVARA. Well, if I may be allowed to consult this question for clarification, please.

Mr. MICA. Well, signature analysis would give us very specific data as to that which—that's based on seizures and where that drug is coming from.

Do we have a—I want to try to proceed with the hearing. Mr. Guevara?

Mr. GUEVARA. Sir, as I understand it, of all the seizures made that DEA has analyzed——

Mr. MICA. As of what date?

Mr. GUEVARA. As of 2002, 56 percent of all the heroin that was analyzed by the DEA under the heroin signature program, of that amount 56 percent of it was Colombian.

Mr. MICA. And that's what I have from previous documents provided by DEA. One of the differences I see is an increase in Mexi-

can heroin production and also identification of Mexican heroin that's seized in the United States, and that's up to 30 percent?

Mr. GUEVARA. That was correct.

Mr. MICA. Well, again, Mr. Simons, Mr. Crane, these figures do differ from what you provided us today in testimony and also what you're indicating. Now, maybe you know something that we don't know about, a trend that's taking place right now. I'd certainly like to know about that. What's your explanation of the difference? Mr. Crane.

Mr. CRANE. The official estimates of supply come from surveillance of the fields in both Mexico and Colombia, and that's done through intelligence means. Then—so that's how we estimate how many fields there are, and then there's also a study of how many times they're harvested and how much—what is the yield of opium to heroin.

Mr. MICA. With the actual—the official drugs that are reaching the United States we know pretty definitely from this DEA analysis where they came from. That's correct?

Mr. CRANE. Well, let me comment. The signature data, for example, is based on seizures, and there were a lot of seizure increases after September 11th because we've increased security. But the seizures don't necessarily represent an unbiased sample of the country. So what they would provide basically is an estimate of, you know, what transportation modes they were seized off and so on. So they don't necessarily represent a production estimate. The one thing about as best I understand when I came to the job and I looked at this is the signature program can tell you the chemical process used to produce it. So, for example, if Mexican heroin was processed with the Colombian process, we would identify it as South America. So it depends on the type of process. So anyway, that's the best of my understanding at this time and why there's some of these differences.

Mr. MICA. Well, whether we have some of the differences or not, we're seeing dramatic increases in heroin. We're seeing dramatic reduction in the eradication program. I mean, you've—everyone has testified to that. Our job is to react to what's taking place, and we have the equivalent of September 11th every day—I'm sorry, every year in the United States now on an annual basis taking place with drug overdose deaths and many of them attributed to increase in heroin activity. And somehow—and you all represent the leadership at least in the administration on these issues. Somehow you've got to have the policy respond to the threat, and obviously it isn't doing it whether—and it's now unfortunately under our watch with this new administration.

So the next question would be we've identified that there is a problem. Everyone identifies that heroin is on the increase. Everyone agrees that the eradication program has fallen short, and maybe it was to address coca, but we've got that problem now, and we need a balance. One of the things that's been mentioned here is a lack of resources to go after both coca and heroin poppy production. I'm also told it's going to be the middle of 2003 to shift—now, I think 2003 it was indicated it would take that long to train additional pilots, and that's to have your maximum capacity do the

job. In the meantime is there some reshifting of resources to increase the eradication of the poppy heroin problem?

Mr. Simons.

Mr. SIMONS. Thank you. Yes, Mr. Chairman, as I indicated in my opening statement, our goal is to spray the entire Colombian opium poppy crop during calendar 2003 up to 10,000 hectares. We have not yet received the analysis, as Mr. Crane pointed out, from the Intelligence Community which will give us some idea as to the size of that crop. We should receive that in the next couple of months. But once we receive that we will map out with the Colombian National Police a game plan which will cover calendar 2003, which will look at our goal of spraying the entire poppy crop as well as the entire coca crop.

Mr. MICA. OK. Now, were all the funds that were to be expended on eradication through 2002, through the end of fiscal—the past fiscal year expended, and expended on the eradication program?

Mr. SIMONS. We have obligated all our fiscal year 2002 funding that was devoted to the eradication program, yes.

Mr. MICA. Well, OK.

Mr. SIMONS. Some of that will carry over.

Mr. MICA. OK. My question—let's go back. You've obligated, so what—how much of the obligation is a carryover from 2002 fiscal year that ended in the end of September?

Mr. SIMONS. We—at the very end of 2002 there were various holds placed on our eradication moneys during fiscal year 2002. We actually did not have the availability of those funds.

Mr. MICA. And who placed the holds?

Mr. SIMONS. By the Senate side. So we did not actually obtain a release of those funds until the very end of the fiscal year. So we are right now working——

Mr. MICA. And when was that?

Mr. SIMONS. I'm sorry?

Mr. MICA. When was that?

Mr. SIMONS. The last week of September.

Mr. MICA. The last week of September.

Mr. SIMONS. Correct.

Mr. MICA. And how much money was held by the Senate?

Mr. SIMONS. $17 million, Mr. Chairman.

Mr. MICA. What percentage of that was your total plan?

Mr. SIMONS. That was the entire budget for the chemicals that were used in the program.

Mr. MICA. So you had no money for chemicals?

Mr. SIMONS. We are now utilizing the fiscal year 2002 moneys for the chemical program, but we don't have our budget yet for fiscal year 2003. We're operating off a continuing resolution.

Mr. MICA. All right. So $17 million, and you carefully term—in your testimony you said that you obligated—that's all obligated and that's all for chemicals?

Mr. SIMONS. That's correct.

Mr. MICA. And if you have the chemicals, what about the aircraft and other operational spare parts and things that are needed?

Mr. SIMONS. Well we're still working off some 2002 moneys. But we will need—I can get back to you on the specific numbers on that.

Mr. MICA. What percentage? 50 percent, 20 percent? Was part of that held up, too?

Mr. SIMONS. No, it was not, just chemicals.

Mr. MICA. OK. And well—again, I'm trying to get a picture of where we are, what we haven't done with money that was appropriated and whether it was—and some of this may justifiably be—well, that's not justifiable, but it may not be your responsibility. What I'm trying to do is pinpoint responsibility, why things didn't get done and where responsibility lies.

So let's go back to equipment, and tell me what you have left over, spare parts, other things it would take to do the job. And then when you finish with that, I was told it took about a year to do one of the contracts, and I want an explanation why it takes so long to contract. I don't have the specific information on the 1-year contract. But let's start first with what's left over now in addition to the chemical fund disbursement delay.

Mr. SIMONS. Essentially, Mr. Chairman, the resource issue has largely to do with the delivery of the spray aircraft that we obtained under the fiscal year 2000 supplemental for Plan Colombia. Those aircraft are now starting to arrive. Three of the air tractors have arrived this year. We'll get five more.

Mr. MICA. OK. That was 2000?

Mr. SIMONS. That's right, and that procurement took some time.

Mr. MICA. Yes, and that was part of my question is why that took so long.

Mr. SIMONS. Well, there are various lead times in terms of—Mr. Chairman, There are various lead times in terms of ordering these aircraft and also in terms of training the pilots. We needed to train the pilots for the mountain conditions in Colombia.

Mr. MICA. Well, the contract took how long to do for the aircraft?

Mr. SIMONS. I believe the aircraft, most of the aircraft were available toward the middle of this year, and since then we've been engaged in pilot training.

Mr. MICA. I'm told that's a separate contract. The first one for the T–65 aircraft waited so long that the contractor went out of business. Is that the case?

Mr. SIMONS. Could you repeat the question?

Mr. MICA. Well, they're talking about several contracts here. The T–65 spray aircraft, it took so long for the contract to be processed, during that time of the processing the contractor went out of business, filed for bankruptcy?

Mr. SIMONS. I don't have that information, Mr. Chairman. I can get it for you.

Mr. MICA. Could you get it for us?

Well, again, I mean, this is like the gang that can't shoot straight. Sometimes I wonder if they don't want to shoot in the first place. But it's very frustrating from our standpoint. And I know that there are impediments placed on you if the Senate puts a hold or somebody puts a hold on this money. But you can see why we're not getting the job done. It's——

Mr. SIMONS. I would remark, Mr. Chairman, that together with the Colombian police we will succeed in spraying approximately 130,000 hectares of coca this year, in addition to 94,000 last year. And we hope to meet our goal of 5,000 hectares of poppy this year

of the 10,000 hectares of poppy next year. And these in our view are significant achievements.

Mr. MICA. OK. And you have the money now, you have the resources as far as the aircraft, because you need aircraft. You have the resources as far as the chemical. You have the resources—you have all the resources to get the job done. Some carryover money. You do have some delay now and you probably should have a resolution in January on the funding for the fiscal year we're in. Does that present a delay factor?

Mr. SIMONS. No. We should be able to achieve our objectives provided we get full funding in 2003.

Mr. MICA. OK. And that would be of the funds that you're anticipating and that you've seen at least preliminarily designated for this fiscal year we're currently in but hasn't been finished. Is that correct?

Mr. SIMONS. That's correct.

Mr. MICA. OK. The only caveat that I heard in testimony was that it would take another 6 months to train the pilots to have all aircraft flying. That's also correct?

Mr. SIMONS. That's correct. The new air tractors that we'll be getting during the first 6 months of the next year, it will take that much time to train the pilots.

Mr. MICA. One of the—OK. So there are no impediments. We're having testimony today that we will have the resources to go after both the coca and heroin production. Are there any political impediments, either on the Colombian side or the U.S. side that you know of that would inhibit moving forward with this eradication program?

Ambassador, you want to just——

Ambassador PATTERSON. Could I take this, Mr. Chairman?

Mr. MICA. Yes. Go ahead.

Ambassador PATTERSON. There are no political impediments. Actually the new administration in Colombia has been extremely aggressive.

Mr. MICA. We've met with the President. I've met with him twice. The Speaker has met with him and we're told that he has—well, he's personally committed the will, the resources, the policy to support that effort. What about the United States side?

Ambassador PATTERSON. I wanted to followup on my colleague's response if I could. The bottom line is that they would spray even more aggressively if we could provide additional resources. In other words, we can always use extra money. I think we could do more, and perhaps this would be something to discuss with you in 2004, if we had additional aircraft and additional helicopters. But they have, this current administration in Colombia has an unprecedented degree of political will to prosecute the drug war.

Mr. MICA. Well, I'd rather do it in 2003 than in 2004, so if you could provide us with a request—I'm asking for a request for a supplemental to be provided to the subcommittee and what it would take to move forward in this fiscal year to complete the job.

The other thing, too, in Plan Colombia, and, you know, we heard—we do hear that this does push the product around. I'm also concerned about the spread of cultivation in Ecuador. And we did provide funds and assistance in the program in Plan Colombia to

assist some of these other regional, potential future locations as they're spreading the cultivation. Where are we on that, Mr. Simons?

Mr. SIMONS. Administration request for 2003 for the Andean counternarcotics initiative; $731 million is the administration request. That's also the House mark and that's the number that we are hoping that we can receive full funding for in order to obtain our objectives. Of that $731 million, $439 million is for Colombia. The remainder is for the other Andean countries, specifically to address this issue of spillover that you mentioned. Now, the bulk of these funds are for Peru and Bolivia, but there's also a substantial amount for Ecuador for alternative development as well as for support to Ecuadoran law enforcement.

Mr. MICA. The other thing being—and again, you don't have to be a rocket scientist to look at these things—is that Mexico is now becoming one of our top producers. And every year I get the statistics back I'm shocked by the increases in drug production in Mexico, and also percentage of Mexican either produced or processed narcotics that is entering the United States. And that's confirmed by your signature analysis; is that correct, Mr.——

Mr. GUEVARA. That's correct.

Mr. MICA. That brings up a couple of things as to how we stop the Mexican production. Have we developed any kind of a strategy to deal with this, Mr. Simons?

Mr. SIMONS. Certainly we're taking a very close look at Mexico. For a number of years our programs in Mexico were quite small. But we've recently enjoyed a much improved relationship with Mexican law enforcement across the board. I think DEA may also want to speak to that. So we have the opportunity now to work more closely with our Mexican counterparts, and most recently in the fiscal year 2002 supplemental we sought and received $25 million in additional funding for Mexico for the border security project on the northern border, which could also have significant impact on the drug trade.

So we're certainly taking a look at opportunities to work more closely with Mexican law enforcement.

Mr. MICA. Mr. Guevara, the Mexicans placed a limitation on the number of DEA agents in the past. Has that changed?

Mr. GUEVARA. Yes, sir. We have made a request of the Mexican government to increase our staffing in Mexico for the express purposes of assigning additional personnel along the northwest border of Mexico. It's my understanding——

Mr. MICA. Have we—they did put a cap before. Has that cap been lifted, or do you just have a request pending?

Mr. GUEVARA. I believe that the request has been honored and that we have received approval to go forward with opening additional DEA offices along the border. The fact——

Mr. MICA. What about investigations?

Mr. GUEVARA. Yes. They would be there for——

Mr. MICA. Are you aware of any treasury increase in activities in Mexico to cooperative efforts to increase our financial investigations?

Mr. GUEVARA. I could only speak for DEA, and we see an enhanced will and ability as well on the part of——

Mr. MICA. What about the issue of allowing our agents to carry weapons and protect themselves?

Mr. GUEVARA. That has also been brought up with the Mexican State Department, the SRE, and that has not been resolved to my knowledge and remains an outstanding issue.

Mr. MICA. What's INL's recommendation to the President on the certification issue for this coming year? Have you held a——

Mr. SIMONS. Mr. Chairman, I'm afraid I can't get into that question here in open session. But we may be able to brief you separately on this. The President has not yet made his decision.

Mr. MICA. What was your recommendation?

Mr. SIMONS. Until the President makes his decision, Mr. Chairman, I would prefer to handle this separately.

Mr. MICA. All right. And can you provide the subcommittee, if you don't want these documents public, with copies of your recommendations. Without objection, that request is so ordered of your office. And I'd like to try to have that in as soon as possible.

Let me run back to equipment and resources. I got sidetracked and didn't ask this question. One of the problems we've had is first getting equipment down there, getting resources and then having a balanced program that goes after the threat as it is developed or recognized or we see its effect in the United States. We've lost more aircraft in Colombia than I think we lost in the entire Desert Storm operation.

What are we doing to protect the assets that we're sending down there? What kind of program is in place? Is INL working on that? Is Defense working on that? Can you report to me, Mr. Simons, on what we're doing to protect the assets that we have down there?

Mr. SIMONS. Well, we have an active safety monitoring program in place that is supervised by the INL airwing out of Patrick Air Force Base and appropriate safety standards——

Mr. MICA. Is DOD assisting with that? I mean this is a defense of—it's not——

Mr. SIMONS. I'm not aware if DOD is engaged in this activity.

Mr. MICA. Who is—is there a plan or is there something that is in place to deal with, again, good program to protect our flying assets?

Mr. SIMONS. We have an active air safety program in place. We can provide more detail to your staff on this.

Mr. MICA. I wish you'd do that.

Mr. SIMONS. But I would note that it is a very dangerous operating environment in Colombia and we have some very courageous Colombian police and army officials who put themselves at considerable risk in the drug war and the Secretary—Secretary Powell when he was down in Colombia last week paid tribute to the Colombian police who died in the course of duty. And not only do they face substantial risks but our contractors who are also out there on the front lines also face substantial risk. Within the last year our spray pilots took more than 180 hits from ground fire.

So this is an issue that we take very serious, Mr. Chairman.

Mr. MICA. I'm very much aware of that, but it doesn't sound like we have a plan to protect those assets and it doesn't sound like INL is coordinating with DOD. And there's a greater DOD presence in the activity and we've been protecting—we've been protecting

the National Police and we should be protecting these assets, which are pretty damn expensive and very difficult to get down there.

Let me ask you another question about the assets that we have there, helicopters and any other aircraft, either participating in spraying or any other activities. Are 100 percent of those assets in the air and being utilized or are some of them—the last time I was there they were being cannibalized and they didn't have parts to fly and we had a small percentage of the assets to complete these missions incapacitated. What's the status of that?

Mr. SIMONS. Well, one of our highest goals is to maintain a high operational readiness rate for the aircraft that we support, and we support a large number of aircraft and helicopters in Colombia and we've been pretty successful on this. In fact, our contractor—part of their——

Mr. MICA. Are our assets all——

Mr. SIMONS. I will provide the figures, Mr. Chairman.

Mr. MICA. OK. Can you do that?

Mr. SIMONS. But I wanted to indicate to you that this is a high priority and it's something that we also measure.

Mr. MICA. Could you provide me with the background?

Mr. SIMONS. I can provide them right now, but I wanted to indicate to you that this is a priority.

Mr. MICA. OK. Well, just submit them to the committee and the most updated figure you have.

Mr. SIMONS. I have them right now and I would like to provide them here in open testimony. The Colombian National Police fixed wing fleet, there are 23 aircraft we support. Their operational readiness rate has been over 75 percent over the last year. The mission readiness rate for the CNP helicopter fleet was in excess of 75 percent over the past year. And the Colombian Army helos, the 71 Colombian Army helos that were provided under Plan Colombia we've maintained readiness rates of over 80 percent for those. So we think we've actually acquitted ourselves quite well on the issue of operational readiness. And as I mentioned, the premium payments that we made to our contractor are specifically related to their being able to meet the targets on operational readiness. So for INL and INL management this is a very high priority.

Mr. MICA. OK. And on the contractor, do you have any percentages of what they're keeping their aircraft up at?

Mr. SIMONS. They're keeping their aircraft at an operational readiness rate also in excess of 80 percent.

Mr. MICA. OK. Well, hopefully we're making some progress in that—you've been provided with some additional background you want to provide? Did you have something else you wanted to provide?

Mr. SIMONS. Nothing else.

Mr. MICA. OK. All right. One of the other concerns I have is whether—well, there's two things that I mentioned in my opening comments that we've studied a long time, or delayed, and one is the shoot-down policy as it relates to Peru and information providing—I'm told that already in Peru we're seeing additional trafficking, additional production, lack of ability to respond to again, reinstitution of production and trafficking in that area because we

haven't been able to make a decision or initiate a policy that will help the countries that want to cooperate to move forward.

What's the status on that, Mr. Simons?

Mr. SIMONS. Mr. Chairman, this came up during Secretary Powell's recent visit to Colombia. Certainly, one of President Uribe's top priorities is the renewal of the air bridge denial program in Colombia. And Secretary Powell indicated to President Uribe that we are moving as quickly as we can to get this program back up and running and that we would hope to have it operational early in the next year. Currently, we are in the process of training pilots and crews, Colombian and Peruvian pilots and crews.

We are working out a revised series of procedures that are consistent with the new U.S. law. We plan to deploy a team to Colombia, a negotiating team, in the next couple of weeks to begin to review these procedures with the Colombian government. Subsequent to that, Congress enacted a procedure that requires a certification process before we actually bring the decision to the President whereby a U.S. team would go down to Colombia and certify that the revised procedures are in place. Once all that is done, we come up here, we consult with Congress, and then the President issues the determination that can make the program move forward.

Mr. MICA. So we could actually have that done by April or May if everybody did what they were supposed to, right?

Mr. SIMONS. Well, I think the Secretary indicated to President Uribe that we would try to get this running early next year, and that's what we're trying to hold to.

Mr. MICA. Well, you have very strong support and I'm going to ask Mr. Souder, the chairman of the subcommittee, if he continues, or whoever chairs the subcommittee to followup with additional hearing or review of that matter. I think it's extremely important. Appreciate your keeping the subcommittee posted.

The other matter that I raised was the micro herbicide program. What's the status of that Mr. Simons, Ambassador, someone?

Ambassador PATTERSON. My understanding is that it was—it was tested some years back, a couple of years ago and proven to be effective in Colombia. We have not pursued it with this government and perhaps we should, Congressman.

Mr. MICA. I think it should be. And, you know, for a little—we found that we cannot only spray this stuff, but we can also deactivate it for some period of time, saving money and lives and then encouraging alternative production. It's not like you put this crop out with a little bit of herbicide. I think it has great potential. I wish we could pursue that. And it would do a lot of damage to the potential of the stuff coming back.

Ambassador PATTERSON. We are having very good luck, Mr. Chairman, with glyfersate, which is a very benign herbicide and very widely used.

Mr. MICA. Well, I have no objections to a less benign herbicide. So I think, again, it's something that I'd like to see pursued. I know a majority of the subcommittee would, too.

I understand you have to leave at this time. I have some additional questions, but what I'm going to do is actually give them to the staff and let them submit them. So without objection, we will be providing our witnesses with additional questions and we'd like

you to respond. Without objection, we're going to leave the record open for a period of 2 weeks, 14 days. So ordered.

So I will excuse the witnesses at this juncture. Thank you again for your cooperation. This isn't meant to be critical of you. You all do yeoman's work in this effort. Our job is to look at what's happening and then try to see if we can correct the problems. Part of the problem of course is the Congress, if they put holds on things or you have conflicting signals given. But we have adopted a major plan. We need to execute that plan. We need to make certain that you get the resources to do that and try to move this along. So we appreciate your cooperation. And also, if you could get back to the subcommittee we would—well, we'll not only be grateful, we won't hold you in contempt. How's that? Thank you all. Have a nice holiday, and look forward to working with you in the new Congress. You're excused.

Mr. GUEVARA. Thank you, Mr. Mica.

Mr. MICA. We have one other panelist and I'm going to call that panelist forward. If we could go ahead and proceed. We have one final panel. This third panel consists only of Mr. Adam Isacson. I think the other witness, who was a tentative witness, is not here. He is a Senior Associate for the Center of International Policy.

Mr. Isacson, you know this is an investigative oversight subcommittee of Congress. If you'd stand and be sworn.

[Witness sworn.]

Mr. MICA. The record will reflect that the witness answered in the affirmative.

Welcome, Mr. Isacson, and if you have lengthy documentation or statement, you're welcome to submit it to the subcommittee and we'll put it in the entire record. If not, recognize you to proceed at this time.

STATEMENT OF ADAM ISACSON, SENIOR ASSOCIATE, CENTER FOR INTERNATIONAL POLICY

Mr. ISACSON. Thank you, Mr. Chairman. I know it's been a long hearing and I'm going to take that 5-minute limit very seriously. I just want to begin by congratulating you and the whole committee for holding a hearing on Colombia's heroin crisis. To my knowledge, this problem hasn't been given such a high profile in the House before. We've already seen today that this crisis is severe and it's getting worse. But I want to caution the committee that simply increasing aerial spraying is not likely to reduce the poppy crop. There are several reasons for this.

First, opium poppy is an annual plant. If poppies are sprayed, new ones can be planted and harvested within 120 days. A spray program is going to have be very nimble in order to catch up with that kind of growth cycle.

Second, poppy cultivation is also kind of hard to find. Poppies are grown in high altitude zones along the spine of the Andes in very rugged terrain with lots of cloud cover in plots that are usually an acre or smaller. Poppy is so illusive that since 1999 the State Department hasn't even had a decent estimate of how much is being grown in Colombia. If we can't even tell how much there is, how are we going to be able to eradicate it all?

But it gets worse. The highest estimate I've heard lately is about 15,000 hectares and there's a citation in my written testimony of about how much poppy is in Colombia. That sounds like a lot of land, but in fact if you were to put all those hectares of poppies together, 15,000 hectares, they'd fit into a square only 7.6 miles on a side. That's smaller than the District of Columbia, and it's scattered around the country, a country the size of Texas, New Mexico and Oklahoma put together. I'm not convinced that spray planes and helicopters are going to be able to keep up with this.

Our experience trying to spray coca in Colombia is also instructive. Since 1996 the United States and Colombian Governments have sprayed herbicides over nearly a million acres of coca growing zones. Yet we've seen the coca cultivation in Colombia in that period triple and the total amount grown in South America has stayed just about the same.

But it gets worse. Colombia has 32 departments or provinces. When large scale coca spraying began in 1996, four of these departments, maybe five of them had about 1,000 hectares of coca or more. At the end of last year, 13 departments of Colombia had that much coca. Despite all of our spraying, coca is spreading like a stain across the map of Colombia.

So what do we do then to start reducing drug protection in Colombia? The answer is as complicated as the problem itself. We have to do a lot of things at once. We have to spend a lot of money, and only a fraction of this money should go to forcible eradication. We have to recall that in a lot of rural Colombia there's simply no way to make a legal living. Security, roads, credit access to markets, they're all missing. When the spray planes come they take away farmers' illegal way of making a living, but they don't replace it with anything.

For arguments in support of alternative development we don't even have to look further than classic counterinsurgency doctrine. A basic tenet of counterinsurgency strategy is that arming the security forces isn't enough. Large amounts of development aid are needed to help the government win the people's hearts and minds. But when thousands of families get their crops sprayed and then aren't reached by development aid, which is what's happening now, their opposition to the government hardens. This is counterinsurgency in reverse and it's good news for the guerillas.

A major increase in alternative development has to be at the center of our strategy to reduce heroin in Colombia. Alternative development should be easier to carry out in poppy growing zones than coca growing zones for two reasons. First, the guerillas and paramilitaries aren't as much of a threat because they're not as involved in the poppy trade. The DEA Administrator, Asa Hutchinson, told the Senate at its Narcotic Caucus in September, our indication is that the terrorist organizations are principally engaged in the cocaine trafficking. There are other criminal organizations in Colombia that are heavily engaged in heroin. But thus far we are not seeing significant terrorist involvement in the heroin side. So security shouldn't be as much of a threat.

Second, there's already an obvious alternative crop. Coffee grows best at the same altitudes as heroin poppy. Yes, coffee prices are at historic lows and in fact some coffee growers are turning to pop-

pies in Colombia. But the U.S. Congress has already shown that it wants to help. Last month the House passed a bipartisan resolution calling on the United States to adopt a global strategy to respond to the coffee crisis with coordinated activities in Latin America, Africa and Asia. Alternative development in poppy growing areas must be part of that strategy.

Beyond alternative development we must never forget that Colombia's status quo, its crisis of drugs and violence benefits some very powerful people who are getting away with their lawbreaking. We've got to do more to go—we've got to go beyond spraying peasants and jailing addicts. We have to do more to stop the traffickers who've set up international networks. We have to stop the corrupt government officials who allow drugs to pass through. We have to stop the bankers who are laundering the money. Too many of them are still getting away with it.

Finally, we have to keep increasing funding to treat addicts here at home. It's been discussed a lot and it's true. Remember the 1994 RAND Corp. study that asked how much would the government have to spend to decrease cocaine consumption in the United States by 1 percent? RAND found that $1 spent on treatment is as effective as $23 spent on crop eradication.

Just to sum up, we all agree that Colombia's heroin crisis has reached frightening proportions. The way out though is going to be complicated, expensive, and sometimes frustrating. I ask the committee not to place all of its eggs in the basket of spraying and aid to Colombia's security forces. We're going to need a much fuller mix of strategies if we're going to solve this.

Thank you very much. I look forward to your questions.

Mr. MICA. Thank you, Mr. Isacson. Just a couple of quick questions.

[The prepared statement of Mr. Isacson follows:]

Testimony of Adam Isacson
Senior Associate, Center for International Policy
Hearing of the House Government Reform Committee on
"America's Heroin Crisis, Colombian Heroin and How We Can Improve Plan Colombia"
December 12, 2002

Let me begin by congratulating the committee for holding a hearing about the crisis of Colombian heroin. To my knowledge, this problem has never been given such a high profile here in Washington.

We've already seen today that Colombia's heroin crisis is severe, and getting worse. But it has also been made clear today that we're still grasping for solutions to this problem. The question remains: what are we going to do about Colombian heroin?

Not very long ago, the U.S. government thought it had the answer: a bit of alternative development combined with massive aerial spraying. The head of the State Department's Narcotics Control Bureau, Rand Beers, told a Senate committee that "The alternative development program is being integrated with the aggressive opium poppy eradication program; and combined, the programs aim to eliminate the majority of Colombia's opium poppy crop within three years."[1] That statement was made more than three years ago, in September of 1999. The poppy crop was not eliminated. In fact, the problem has grown more serious.

Elusive poppy cultivation

I want to caution the committee that simply increasing aerial spraying is not likely to reduce the poppy crop significantly. There are several reasons for this. First, opium poppy is an annual plant. It yields one harvest and dies whether it's sprayed or not. Newly planted poppies will yield opium latex within 120 days. A spray program would have to be enormously nimble to catch up with that kind of growth cycle.

Poppy cultivation is also hard to find. The crop is grown in isolated, high-altitude zones along the spine of the Andes, in rugged terrain with lots of cloud cover, in plots of usually not much more than an acre. Poppy is so elusive that since 1999, the State Department hasn't even had a decent estimate of how much is being grown in Colombia.[2] There is no available estimate of acreage. Klaus Nyholm, who heads the UN Drug Control Program's Bogotá office, said in July 2001, "we don't have good images or even a good impression of how much poppy there is in Colombia … We believe there has been a rather strong increase … Estimates so far have ranged from between six to ten to twelve thousand hectares. I believe that it could easily be twelve or fifteen thousand, or even more, but we don't know."[3] To make things more complicated, a recent report from the Colombian government drug czar's office alleges that poppy cultivation actually

[1] Statement of Rand Beers, Assistant Secretary of State, Bureau for International Narcotics and Law Enforcement Affairs, before the Senate Caucus on International Narcotics Control, September 21, 1999 <http://www.ciponline.org/colombia/00092102.htm>.
[2] United States, Department of State, *International Narcotics Control Strategy Report* (Washington: March 2002) <http://www.state.gov/g/inl/rls/nrcrpt/2001/rpt/>.
[3] United Nations, Office of Drug Control and Crime Prevention, Press Conference with Klaus Nyholm, representative for Colombia and Ecuador, Bogotá, July 24, 2001 <http://ciponline.org/colombia/072402.htm>.

decreased by nearly a third between 1999 and 2001, from 6,500 to 4,200 hectares.[4]

The upshot is, if we can't even tell how much there is, how are we going to be able to eradicate it?

But it gets worse. Let's take Mr. Nyholm's estimate of 15,000 hectares. That sounds like a lot of land. But in fact, if you were to put all those poppy crops together, they would fit into a square only 7.6 miles on a side. That's smaller than the District of Columbia, but it's scattered all around a country the size of Texas, New Mexico and Oklahoma put together. (See Appendix A.) A country where two-thirds of the people earn less than two dollars per day and there is little law and order, so there are strong incentives for people to grow the stuff. I am not convinced that spray planes and helicopters alone can keep up with this.

Lessons from coca spraying

The United States' experience trying to spray coca in Colombia is also instructive. Over the past seven years our coca spray program can only be described as massive. Since 1996, the U.S. and Colombian governments have sprayed herbicides over nearly a million acres of Colombian soil (just to kill coca; the poppy spraying has been in addition to this). (See Appendix B.) Yet we have seen coca cultivation in Colombia triple, from 57,000 hectares in 1996 to 169,000 hectares in 2001, while the total amount grown in South America has stayed about the same. (See Appendix C.)

Colombia has thirty-two departments, or provinces. When large-scale coca spraying began in 1996, four of these departments – perhaps five – had more than a thousand hectares of coca. Spraying was able to reduce coca cultivation for a short amount of time in some specific zones. But at the end of last year, a survey carried out by the UN and the Colombian Police Anti-Narcotics Division found at least a thousand hectares in *thirteen* departments.[5] (See Appendix D.) Despite all of our spraying, coca is spreading like a stain on the map of Colombia.

One reason that spraying has not worked against coca is simple economics. Spraying targets the part of the drug-production process where the drugs are easiest to find – the plants sitting in the ground. But this is not the part of the drug-production process where the money is. A Colombian peasant usually gets about $1,000 for a kilogram of coca paste. Narcotraffickers then turn the paste into cocaine and sell it on U.S. streets for $100 per gram or more. The cocaine coming from that kilo of paste has a retail value of at least $100,000, meaning that there is a $99,000 profit going to middlemen and dealers. Now suppose a very successful spraying program makes coca paste so hard to come by that the price jumps from $1,000 per kilo to $10,000. (This has never happened before.) The effect will be to reduce the profit for middlemen from $99,000 to $90,000. (See Appendix E.) The dynamic with heroin trafficking is the same. Spraying is simply not likely to hurt the drug trade.

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[4] Government of Colombia, Dirección Nacional de Estupefacientes, "Cultivos Ilícitos y el Programa de Erradicación," (Bogotá: 2002) <http://www.dnecolombia.gov.co/contenido.php?sid=18>.

[5] United Nations Drug Control Program, Colombian government National Narcotics Directorate, Colombian National Police Anti-Narcotics Division, "Localización de Areas con Cultivos de Coca, Proyecto SIMCI, Censo Noviembre 01 de 2001," (Bogotá: SIMCI project, 2001) <http://ciponline.org/colombia/2002map.jpg>.

Policy alternatives

What, then, do we do to start reducing drug production in Colombia? I wish there were a simple answer, but there is not. Instead, there is a very unsatisfying, complicated answer: we have to do many things at once, and we have to spend a lot of money, and only a fraction of this money should go to forcible eradication. In particular, we have to devote more attention and resources to three areas that aren't getting enough of either: those are alternative development, ending impunity, and treating addicts.

In much of rural Colombia, there is simply no way to make a legal living. Security, roads, credit, and access to markets are all missing. The most that many rural Colombians see from their government is the occasional military patrol or spray plane. When the spray planes come, they take away farmers' illegal way of making a living, but they do not replace it with anything. That leaves the farmers with some bad choices. They can move to the cities and try to find a job, though official unemployment is already 20 percent. They can switch to legal crops on their own and risk paying more for inputs than they can get from the sale price. They can move deeper into the countryside and plant drug crops again. Or they can join the guerrillas or the paramilitaries, who will at least keep them fed.

Spraying without providing development assistance not only doesn't work, it probably strengthens the guerrillas. Remember that the classic U.S. doctrine of counterinsurgency insists that large amounts of development aid have to be transferred in order to help the government win the people's "hearts and minds." But when thousands of families get sprayed and then are not reached by development aid, their opposition to the government hardens. This is counterinsurgency in reverse, and it's good news for the guerrillas.

As of early this year, U.S. alternative development programs had reached about 1,740 poppy-growing families, covering about 1,070 hectares.[6] The programs have grown since then, but it still appears that the majority of families facing eradication are not being reached by development efforts. In Putumayo department, where the U.S. and Colombian governments sprayed 50,000 hectares of coca this fall, the idea of alternative development is being nearly abandoned; the State Department reported in March that "alternative development efforts … might be better concentrated in neighboring departments where viable economic activities already exist."[7] It seems that the peasants of Putumayo are simply out of luck and must fend for themselves. Their desperation plays right into the hands of the FARC guerrillas, who have a strong presence in Putumayo.

A major increase in alternative development has to be at the center of any strategy to reduce heroin production in Colombia. Alternative development should be easier to carry out in poppy-growing zones than in coca zones, for two reasons. First, the guerrillas and paramilitaries do not pose as much of a threat, because they are not as involved in the poppy trade. DEA Administrator Asa Hutchinson told the Senate International Narcotics Control Caucus in September, "Our indication is that the terrorist organizations are principally engaged in the

[6] Department of State, *International Narcotics Control Strategy Report.*
[7] *Ibid.*

cocaine trafficking. There are other criminal organizations in Colombia that are heavily engaged in heroin… [but] thus far, we're not seeing significant terrorist involvement in the heroin side."[8] Most poppy-growing areas have more government presence and more infrastructure than coca-growing areas.

The other reason it should be easier is that there is an obvious alternative crop: coffee, which grows best at the same altitudes as heroin poppy. The U.S. Congress has shown a desire to help our Latin American neighbors emerge from the crisis caused by the recent plunge in worldwide coffee prices. Last month, the House of Representatives passed a bipartisan resolution calling on the United States to "adopt a global strategy to respond to the coffee crisis with coordinated activities in Latin America, Africa, and Asia to address … short-term humanitarian needs and long-term rural development needs." Alternative development in poppy-growing areas must be part of that strategy.

In addition to alternative development, we must never forget that Colombia's status quo, its crisis of drugs and violence, benefits some very powerful people who are getting away with their illegal activities. Only some of these people are guerrillas and paramilitaries. We need to go beyond spraying peasants and jailing addicts, the weakest links of the drug-trafficking chain. We have to devote more resources to stopping the traffickers who maintain international networks, the corrupt government officials who don't enforce the laws, and the bankers who launder the money. Too many of them are getting away with it.

Finally, we have to continue the past few years' increases in funding for treatment of addicts here at home. Remember the 1994 Rand Corporation study that asked, "How much would the government have to spend to decrease cocaine consumption in the U.S. by 1%?" RAND found that a dollar spent on treatment is as effective as ten dollars spent on interdiction and twenty-three dollars spent on crop eradication.[9]

We are all in agreement that the crisis of Colombian heroin has reached frightening proportions. The way out of the crisis, though, is going to be complicated, expensive and frustrating, just like the conflict in Colombia that helps to prolong the problem. I ask the committee not to place all of its eggs in the basket of spraying and aid to Colombia's security forces. We are going to need a much fuller mix of strategies if we are going to solve this.

Thank you very much. I look forward to your questions.

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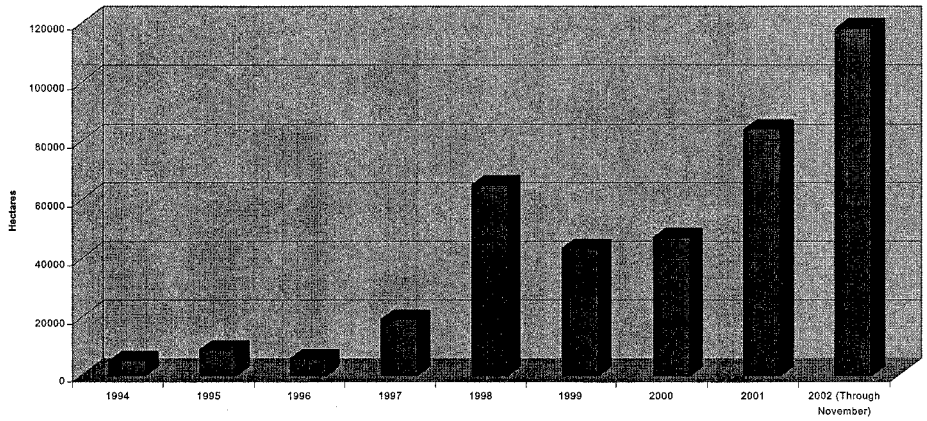
[8] Transcript, Hearing of the Senate Caucus on International Narcotics Control on "U.S. Policy in the Andean Region," September 17, 2002 <http://drugcaucus.senate.gov/hearings_events.htm>.
[9] C. Peter Rydell and Susan S. Everingham, "Controlling Cocaine: Supply Versus Demand Programs," (Santa Monica: RAND, 1994).

Appendix A

All of Colombia's heroin poppy could fit into a square 7.6 miles on one side.

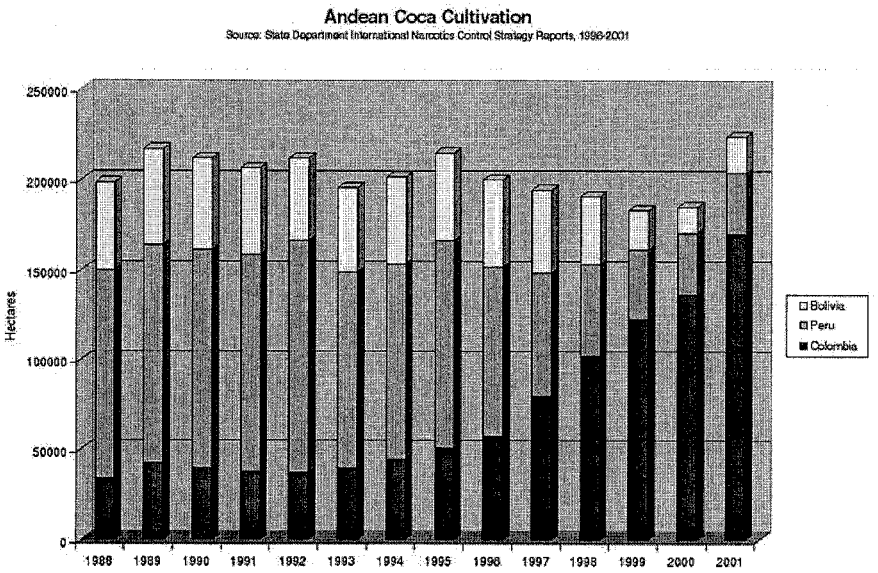
Appendix B

Aerial Coca Eradication in Colombia, 1994-2002
Total: 395,000 hectares



Sources: 1994-2000: State Department, *International Narcotics Control Strategy Report* (Washington: March 2002) <http://www.state.gov/g/inl/rls/nrcrpt/2001/rpt/>.
1998: State Department, *International Narcotics Control Strategy Report* (Washington: March 1999) <http://www.state.gov/www/global/narcotics_law/1998_narc_report/major/Colombia.html
2001: Testimony of Marc Grossman, Under Secretary for Political Affairs, Department of State, Senate Western Hemisphere Subcommittee, April 24, 2002 <http://usinfo.state.gov/regional/ar/colombia/02042403.htm>.
2002: U.S. Ambassador to Colombia Anne Patterson, Speech before the Colombian Cattlemen's Federation (Bogotá: November 21, 2002) <http://usembassy.state.gov/posts/co1/wwwsa037.shtml>.

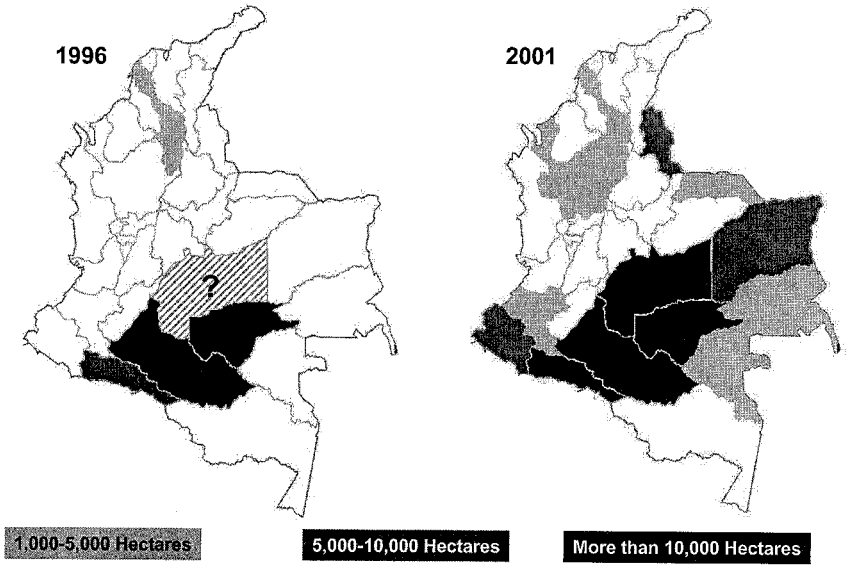
Appendix C



	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Colombia	34000	42400	40100	37500	37100	39700	44700	50900	57200	79500	101800	122500	136200	169800
Peru	115530	21589	121300	120800	120100	108800	105600	115300	97400	68900	51000	38700	34100	34000
Bolivia	48925	52900	50300	47900	45500	47200	48100	48600	48100	45800	38000	21800	14600	19900

Appendix D

Departments where coca is grown in Colombia



Appendix E

Does spraying growers make economic sense?

	Before aerial spraying	After (hypothetical) extremely successful aerial spraying
Price at which farmer sells 1 kilogram of coca paste	$1,000 →	$10,000
Est. retail price, gram by gram, of resulting cocaine on U.S. streets	$100,000	$100,000
Profit for middlemen and dealers	$99,000 →	$90,000

Mr. ISACSON. Sure.

Mr. MICA. One, I think you pointed out one of the problems of just spraying for eradication of a poppy crop or coca crop. That was why I asked the question of Ambassador Patterson and the other witnesses about the micro herbicide. They do provide a long term eradication. Are you familiar with their use?

Mr. ISACSON. I'm familiar with their use and I haven't seen any tests showing——

Mr. MICA. We have tests that show that it will eradicate some of these crops for substantial periods of time. So I guess, based on your testimony, you would be supportive of something that would take the crop out for a long time.

Mr. ISACSON. Well, micro herbicides, to be honest, make me nervous because we don't know what their impact will be on this Amazon ecosystem. We're talking about the second largest biodiversity of any country in the world.

Mr. MICA. But you also said the area that would be—that's in production is less than the size of the District of Columbia.

Mr. ISACSON. Scattered around an area more or less the size of California if you look at the Andean ridge.

Mr. MICA. So it wouldn't do much damage since it's spread over such a large area. And if the evidence showed that micro herbicide only affected that individual plant you're trying to eradicate, you'd certainly be supportive, wouldn't you?

Mr. ISACSON. Hmm, I would be supportive of something that got rid of coca, but also strengthened the Colombian government and provided an alternative to the people who had nothing left to do.

Mr. MICA. If you were devising Plan Colombia to deal with—first of all, you said one of the things we had to do was provide Colombia with security. That was one of the problems that we have. If you have security you can probably deal with some of this production and illegal trafficking which finances the terrorism in pretty good order. So we—if we put an element to deal with security in Plan Colombia, we put an element in that deals with crop eradication, and then finally we also put an element in to deal with alternative development, which you strongly advocated in your testimony, are you—you're aware that at least a third of the funds that were in Plan Colombia were dedicated toward either economic development or crop alternative programs?

Mr. ISACSON. Yes, I am and I agree on security. I wish that our assistance did more to protect actual Colombians and increase the strength of the state. What we did mainly was secure the fumigation program and now we're proposing to secure a pipeline. That doesn't really affect the lives of most Colombians.

Mr. MICA. Well, I think if you secure the terrorist threat you do provide security for the land and the ability to also conduct business and make a living. So we have about a—well, we have in excess of over a third of the funds for these assistance programs. So I think it's a pretty good balance. I would have to say that I've been personally disappointed that—not only in the eradication and security areas, but also in the economic development——

Mr. ISACSON. I share that disappointment.

Mr. MICA [continuing]. And alternative development programs. There have also been unnecessary delays, bureaucratic bungling

and lack of progress. So we appreciate—I guess that would be your same observation?

Mr. ISACSON. That would be my observation, too. I'm worried that coverage is nowhere near where it should be.

Mr. MICA. Right. And it does take all of those elements to make this program successful. Well, I want to thank you. I tried to stall a bit to see if any of the minority Members would return since you are a witness from—requested from their side. But we do appreciate your participation, your patience in waiting until the end, and also for your recommendations to the panel on a very important subject.

So we'll excuse you at this time, and we'll also see if they have any questions from the minority side that they'd like to submit. And we've left the record open for that purpose. So thank you and you're excused, Mr. Isacson.

Mr. ISACSON. Thank you for your invitation.

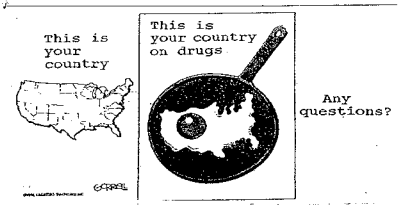
Mr. MICA. And I did have one article that I wanted to submit to the record by Mr. Burton and Mr. Gilman. It's dated Thursday, October 29th, commentary on heroin awakening. Without objection, this will be made part of the record today.

[The information referred to follows:]

PAGE A20 / THURSDAY, OCTOBER 29, 1998 ★ The Washington Times COMMENTARY

DAN BURTON / BENJAMIN GILMAN

Heroin awakening



As the 105th Congress adjourned, the Republican Congress forced an ambivalent Clinton administration to confront America's heroin crisis.

Administration negotiators, including the drug czar Gen. Barry McCaffrey, reluctantly accepted the congressional proposal to increase the ability to eradicate and interdict in the source countries. Republicans in Congress have pressed Gen. McCaffrey and Madeleine Albright's State Department for more than a year to address this issue.

Pressure from Congress, which has oversight responsibility, was not enough. Neither were the facts, apparently, as the defiant Gen. McCaffrey and Mrs. Albright have alleged that Congress was "micromanaging" their floundering counter-narcotics program.

Heroin has become a crisis and the numbers are staggering. During Bill Clinton's beleaguered presidency, first-time heroin use by American teenagers (ages 12-17) has risen a mind-boggling 875 percent. While Gen. McCaffrey spent thousands of dollars on Frisbees and key chains, the overall percentage of past-month heroin use increased a numbing 378 percent. State Department ambivalence toward poppy eradication encouraged the narco-terrorists in Colombia to increase production from 6,000 to 9,000 hectares (roughly 22,500 acres, according to Colombian sources) over the last few years. All evidence of a distracted Clinton administration.

Colombian heroin is nearly 90 percent pure, making it even more addictive and lethal. At a purity level this high it can be snorted or smoked, and first-time users can become addicts from casual use. According to Thomas Constantine, Drug Enforcement Administration chief: "Today we are seeing 11th and 12th graders turning to heroin. These initiates are . . . at the outset of a long, downward spiral into hard-core addiction or death."

Tragically, the Orlando, Fla., area has recently experienced 35 teenage heroin overdose deaths. Last year alone, Prince George's County, Md., had 42 heroin overdose deaths. In Baltimore, 40,000 heroin addicts are paying drug dealers $730 million a year for heroin (equivalent to the cost of 61 Black Hawk utility helicopters). Clearly, it is a deadly crisis affecting every community and every constituency in our nation.

Our source-country counternarcotics effort still pales in comparison to the $16 billion-plus budgeted for domestic counternarcotics programs —some of which are beneficial. Until Republicans stepped in, Gen. McCaffrey's domestic advertising campaign commanded more money than America's entire counternarcotics effort in Colombia —the source-country of more than 80 percent of the world's cocaine supply and more than 75 percent of the heroin seized on American streets and schools.

Gen. McCaffrey and Mrs. Albright still contend the best place to fight illicit drugs is at home. The DEA, FBI, U.S. Customs, thousands of local, state and federal police officers, and many in Congress contend the place to stop illegal narcotics is at the source — period. Once it enters the stream of commerce, it is virtually impossible to interdict.

Heroin does not come in large shipments. It is nearly impossible to detect inside hollowed suitcases, in the heels of shoes, and in some cases in human "mules." The place to stop the heroin is in the poppy fields of the Colombian Andes. Heroin production is different from traditional cocaine production, making it more difficult to disrupt. Heroin production requires only small amounts of precursor chemicals, and it is forcibly produced by peasant farmers, not in traditional large cocaine-type laboratories that can be attacked and destroyed.

Customs agents at the Port of Miami informed congressional investigators that it seizes less than 10 percent of the drugs coming through America's second-busiest seaport. This means more than 90 percent makes it into the stream of commerce.

A senior FBI official recently told congressional investigators, "Eradication of the opium poppy in South America seems to be the logical point of attack in order to curb the increasing flow of Colombian heroin into the growing northeast market. . . . You know, if we could fight it at the source it would be better."

Republicans specifically earmarked the source country funds from the budget agreement to address the heroin problem. This included funding for six high-altitude-capable Black Hawk utility helicopters for the Colombian National Police's (CNP) world-renowned anti-narcotics unit, the DANTI. Finally, the CNP will be able to reach the poppy fields to eradicate what the Colombians call "the devil's flower" before it unleashes its hell on American children.

Ultimately, Gen. McCaffrey begrudgingly signed off on the agreement and proceeded to arrogantly trumpet his "support" for this package. Privately, Gen. McCaffrey was seething about his surrender. Gen. Jose Serrano, who has lost 4,000 Colombian cops fighting our War on Drugs, knows Republicans have been his ally in Washington, fighting for years to get the CNP more assistance.

The American people deserve to know the truth about these issues as well.

Rep. Dan Burton, Indiana Republican, is chairman of the House Government Reform and Oversight Committee. Rep. Benjamin A. Gilman, New York Republican, is chairman of the House International Relations Committee.

Mr. MICA. There being no further business before the committee today, and this is the full committee meeting isn't it? Excuse me. I'm usually chairing the subcommittee, but this is historic in that we're addressing a very serious issue facing the United States. It's also historic in that it's the last hearing, I believe, of the Government Reform Committee in the 107th Congress.

I want to particularly thank the staff on both sides of the aisle for their cooperation, the Members for working over the past year, our chairman for his leadership and our ranking member for his leadership in one of the most important committees in the House of Representatives that is charged with investigation and oversight of all of the activities of our Federal Government.

So there being no further business, this hearing and this committee for the 107th Congress is adjourned.

[NOTE.—The report entitled, "Fiscal Year 2002 Annual Report, July 1, 2001-June 30, 2002, Maine Drug Enforcement Agency," may be found in committee files.]

[Whereupon, at 2:40 p.m., the committee was adjourned.]

[The prepared statements of Hon. Bob Barr, Hon. Elijah E. Cummings, and additional information submitted for the hearing record follow:]

VICE CHAIRMAN BOB BARR

House Government Reform Committee
December 12, 2002
"America's heroin Crisis, Colombian Heroin, and How we can Improve Plan Colombia"

I would like to thank Chairman Dan Burton for his long-standing diligence on the issue of narco-terrorism and the threat posed to the United States and the Western Hemisphere. In September he asked me to lead an oversight fact-finding mission to Colombia in mid-October in order to assess the progress of Plan Colombia and the nearly $2 Billion dollars of U.S. taxpayers money invested in this effort. He did this because he cares about promoting democracy and fighting the twin scourges of terrorism and illegal drugs. For this and a host of many other reasons, it has been a distinct privilege and an honor to serve as his Vice Chairman on this important Committee.

I remember well, in 1995, that Chairman Burton was a lone voice in identifying the emerging threat of narco-terrorism in Colombia when he served as Chairman of the Western Hemisphere subcommittee of the House International Relations Committee. Today, unfortunately, he was correct in his predictions over seven years ago, and the Clinton administration did not heed his warnings. I hope that the Bush administration will heed his wise counsel in the future.

This is an important and long overdue Congressional oversight hearing. In the most simple terms, its about weapons of mass destruction called illegal drugs, that are killing Americans each and every day. It's about the neglect of the eight years of the Clinton administration and the past two years of this administration. It's about the issue of accountability of the Department of State and it's officials who are responsible for executing our foreign policy iniatives. And finally, its about the future of our youth and the promise of tomorrow. I sincerely wish that more members would be in attendance here today, because this issue is important to all Americans and it is far too important to ignore.

The heroin menace is upon us, and as we shall hear today from this first panel of witnesses... it didn't just happen overnight.
This first panel of witnesses see what heroin is doing to our communities and our citizens each and every day. They face the danger and the violence that goes hand in hand with drug trafficking. This heroin crisis has been long in the making and we must fight it on all fronts. The reality of this situation silences the bureaucratic rhetoric we have heard from ONDCP and the State Department.

When I accompanied now-speaker Dennis Hastert to Colombia, Peru and Bolivia in May of 1997, we investigated the heroin threat and it was a clear-cut issue. Today, 5 and 1/2 years later ... the threat has now arrived and the crisis is **now**. I would like to enter into

the hearing record an editorial that was authored by the Speaker in November 1997, when he chaired the Government Reform Subcommittee on National Security, International Affairs and Criminal Justice. It tells a haunting story, ... and like it or not, we are dealing with it today !

As I said earlier, in October, I led a fact-finding mission to Colombia with Chairmen Ben Gilman and Congressman Brian Kerns. It was just one of the many times that I have visited this beautiful nation. In my youth, I lived in Colombia and I know her mountains, her rivers, her jungles and most importantly, her people. They are suffering greatly today, and I am convinced that the United States must stand with her sister democracy in this fight against narcotics and terrorism. Colombian President Alvero Uribe has put forward a most ambitious strategy for the road ahead. I have met with him and I know that he is resolute in his mission. It will not be easy, but he recognizes that it must be done... no matter what.

Our fact-finding mission was a very ambitious effort as we had a great deal of ground to cover in the 5-day visit. I would like to recognize a staff member who served as our "SHERPA GUIDE".
John P. Mackey of the House International Relations Committee was of emense value to our effort. His law enforcement background and knowledge of Colombia proved invaluable.

Our findings gave us insight into the difficulties, Challenges and obstacles that the United States and Colombia are encountering in their battle against illegal narcotics and terrorism.

The drug-fueled terrorist violence came home to our Congressional delegation when Chairman Ben Gilman visited the City of Medellin on October 14th. A FARC terrorist offensive in the section of Communa 13, cost the lives of 20 Colombians, most of them young children. The Colombian National Police and Army suffered casualties as well in this operation. I met with Police Commandos, a day before they were sent into Medellin in this operation, and I must tell you that they inspired a high degree of confidence in their ability to enforce the rule of law. A FARC bombing spree in Medellin, Cali and Bogota followed, just as our delegation departed Colombia. A short while later, a Police station in Bogota was bombed killing four and wounding 40 other people.
This week another bomb detonated in Bogota causing over 60 casualties. Today, in the Washington Post it was reported that at least five car bombs were discovered in Bogota and were defused by the Colombian National Police. This is terrorism by anyone's definition !

While in Colombia, U.S. Embassy officials indicated that the "Expanded Authority" granted by Congress and signed into law by President Bush in September, had still not been acted on. In a plaintive letter to Ambassador Patterson on November 11th. of this year, I requested that she resolve this issue immediately. Specifically, the authority to

utilize U.S.-titled helicopters originally sent to Colombia for counter-narcotics purposes, to be used by the anti-kidnapping police (GAULA). As of last week, a memorandum of agreement with the U.S. Embassy and the Colombian National Police has yet to be signed. I would like to know why ? The GAULA needs that assistance, and they need it now ! The U.S. Ambassador must resolve this isuue as soon as possible.

As of yesterday, I was told that twenty-two (22) U.S.-titled Helicopters have been shot down by narco-terrorists or crashed for other reasons, since 1997. At least 60 Colombian National Policemen have been lost as well in those crashes. Additionally, at least five U.S. citizens, serving as contractors in Colombia have died as well down there. In that five-year period a lot of flesh and blood and the U.S. taxpayer's money has gone down the drain. I want a full report of these losses from the U.S. Embassy. I also want to know exactly what is being done to protect those people and assets.

All of the flowery words today, must be put into context with the harsh reality that a drug-fueled war is being fought in our hemisphere. The U.S. Embassy must face the facts that they must do more to help the people who are risking their lives to stop these drugs. The cocaine and the heroin that is being produced in Colombia is funding the growing violence, no one can dispute that.We must deal with facts here, not well-doctored phrases that skirt the issue. People are dying, and as Speaker Hastert wrote in November, 1997... we must do something !

Plain and simple, the Heroin that is flooding the United States and is killing our citizens, comes from Colombia. It is weapon of mass destruction and we must help the Colombian government eradicate it, before it gets to the United States ! I look forward to hearing from our witnesses on this critical issue. I thank you again Mr. Chairman for all you have done on this very important subject. It has been privledge to serve with Chairman Ben Gilman and Chairman John Mica... both have been heroic in their efforts to fight illegal narcotics and protect our children from drugs.
It has been a pleasure to serve with you, Sir. Thank you.

Congressman Elijah Cummings
Committee on Government Reform Hearing
America's Heroin Crisis, Colombian Heroin, and How We Can Improve Plan Colombia

December 12, 2002

Mr. Chairman, thank you for convening today's hearing.

Heroin is the most widely abused opiate worldwide. The United States is flooded with heroin from three foreign sources: Southeast Asia, Southwest Asia, and Latin America. Sixty percent of the heroin seized in the United States originated in Colombia. Since Richard Nixon proclaimed a war on drugs in 1971, the U.S. has assisted regimes around the world in combating the growth and trade of the illegal drug industry.

While the United States has been providing counternarcotics (CN) assistance to Colombia since the mid-1970s, former President George H. Bush dramatically increased CN aid to Colombia through his 1989 Andean Initiative. Grant aid to Colombia has increased gradually over the years with the figures from FY 1999 through FY 2002 exceeding $2 billion. Meanwhile, Colombia evolved from a major supplier of marijuana to the U.S., to nearly the sole supplier of cocaine. By the end of the 1980's as part of the effort to supply military resources for the war on drugs, Congress enacted "Section 1004" of the 1991 National Defense Authorization Act. This legislation authorized the DOD to provide transportation, reconnaissance, training, intelligence, and base support when requested by foreign law enforcement agencies for CN purposes.

The problem of Colombian heroin has reached epidemic proportions. The Committee has heard from past witnesses that the problems of crack cocaine pale in comparison to the devastation of lives affected by heroin. In cities such as Philadelphia and my district in Baltimore, heroin has been a dominant drug for many decades. Colombian heroin, because of its high purity level is now the predominant heroin type supplying addicts. Because the Colombian heroin is readily available and inexpensive, addiction and abuse has spread to a new segment of the population in which heroin use was not traditionally prevalent. The DEA in New York has reported purity levels as high as 93%, and levels regularly exceeding 85% at street level. The number of overdose deaths has increased due to the user's inability to determine the potency of this "new" heroin. Colombian heroin has gained the reputation of being the purest, most addictive and deadliest heroin in the world.

Earlier this year the Administration specifically requested $573 million for Colombia. The major portion of the aid under Plan Colombia has gone to the Colombian military for helicopters and other related equipment that is utilized in the fight to wipeout illicit drug crops. Unfortunately, to date, fumigation and ground-level eradication efforts have not been

effective in reducing the heroin supply. Part of the reason for this failure is that heroin is produced in small shacks and rural locations spread throughout the countryside that are nearly impossible to detect. Even with successful eradication efforts, producers simply shift heroin cultivation to new locations. Attempts for successful eradication were further undermined by the decision to place the rebel-controlled demilitarized zone off-limits to fumigation.

While I consider drug treatment and prevention strategic components in the battle against addiction and abuse, I also feel that the illicit drug market is a business and operates on the supply and demand principle. If there is no supply, there is no market. The question of how we can improve the plan of action to stem the flow of drugs into the United States is one that is not easily answered. I am hoping that our discussion today will arrive at strategic actions that can be implemented in our fight against drug abuse in this country.

Thank you Mr. Chairman.

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HOUSE COMMITTEE ON
GOVERNMENT REFORM

United States Department of State
Washington, D.C. 20520

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Dear Mr. Chairman:

This is in response to your letter of November 21 regarding eradication of opium poppy in Colombia. Enclosed, please find answers to the three questions posed in your letter.

We hope this information is useful to you. Please do not hesitate to contact us if we can be of further assistance in this or any other matter.

Sincerely,

Paul V. Kelly
Assistant Secretary
Legislative Affairs

Enclosure:
As Stated.

The Honorable,
Dan Burton, Chairman,
Committee on Government Reform,
House of Representatives.

EXHIBIT
1

1. For the years 1998 to the present, provide the total annual amounts of coca leaf and opium that were eradicated. If possible, break these numbers down into hectares per department.

COCA SPRAY RESULTS IN HECTARES

CY	1998	1999	2000	2001	31Oct 02
Raw	66,366	46,379	53,058	94,127	116,986
TGAC	54,851	41,171	47,371	84,251	110,298

Raw – hectares of illicit crop sprayed based on "out-the-nozzle" spraying.
TGAC -- total ground area covered is an adjustment of raw spray data for "overlapping and cross-spraying."

COCA TGAC IN HECTARES BY DEPARTMENTS
(NOTE: Data Available by Department only for 2001 and 2002)

Departments	CY2001	CY2002 (thru 31 Oct)
Antioquia	233.8	3,306.9
Bolivar	10,494.0	0
Caqueta	14,598.5	5,198.3
Cauca	2,009.6	951.7
Cordoba	0	311.2
Guavaire	6,599.6	7,287.9
Meta	3,978.6	818.6
Narino	7,007.8	18,587.9
Norte de Sant.	9,466.6	8,431.5
Putumayo	28,265.9	65,404.4
Vichada	1,596.5	0
Totals	84,250.8	110,298.2

Note: We only have coca hectares by Departments for CY01 & CY02.

POPPY SPRAY RESULTS IN HECTARES

CY	1998	1999	2000	2001	30 Nov 02
Raw	3,012	8,106	8,843	1,846	3,263
TGAC	not available	not available	not available	1,818.7	2,872.3

POPPY TGAC IN HECTARES BY DEPARTMENTS
(NOTE: Data Available by Departments only for 2001 and 2002)

Departments	CY2001	CY2002 (30 Nov)
Cauca	366.5	683.1
Cesar	277.6	475.3
Huila	396.2	1,584.3
Narino	570.5	0
Tolima	207.9	129.6
Totals	1,818.7	2,872.3

Note: We only have poppy hectares by TGAC by Departments for CY01 & CY02.

2. Please determine the date at which the Colombian National Police opium eradication spray pilot program ended and it was turned over to private contractors. Please also identify the individual who made the decision to privatize the spraying by contract pilots and an explanation for the decision.

Insofar as we are aware there has only been one active duty CNP fixed-wing spray aircraft pilot. He was trained by INL/A in 1992-93 and served as a T-65 Turbo Thrush pilot, spraying both coca and opium poppy, from 1993 to 1998. We have no records on how much opium poppy he sprayed, but according to the pilot himself, the total was approximately 4,000 hectares. He was eventually transferred by the CNP to staff duties with collateral flight duty in a transport plane. In 2001, he was transferred by the CNP to non-flight duties outside the CNP Anti-Narcotics Directorate. He retired from the CNP that year.

In 1994, the CNP made a very brief attempt at spraying opium poppy with helicopters piloted by active duty CNP members. A fatal crash in the first week of operations ended that program.

With the exception of the aforementioned pilot and the short-lived helicopter spray program, all the opium spray pilots in Colombia in the last ten years have been contractors.

There have been changes in the contract arrangement over the years. From 1992 to 2000, the pilots were contracted directly by the CNP. From 2000 to 2002, they were contracted via a NAS Bogotá contract with DAOL. Since July 2002, the pilots have been contracted via the INL/A DynCorp contract.

3. Please provide us with the monthly totals of opium eradication achieved by the Colombian National Police pilots during the twelve-month period immediately preceding the turnover to private contractors, and provide us with the data on opium eradication achieved by the private contractors during its first twelve months of operations by their spray pilots.

As noted in the answer to the previous question, there was never a cadre of CNP active duty spray pilots, and there was no "turnover" to contractors. We do not have data on how much opium poppy the one CNP pilot sprayed as opposed to the total which he and the contractors sprayed. However, the total opium poppy sprayed in in 1998 was 3,012 hectares; in 1999 was 8,106 hectares. The 2000 total was 8,843 hectares. The 2001 total was 1,846 hectares. As of November 30, 2002 total poppy sprayed was 3,263 hectares.

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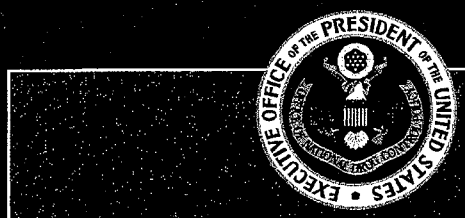

Estimation of Heroin Availability

1996-2000

Executive Office of the President
Office of National Drug Control Policy

MARCH 2002

EXHIBIT
2
PENGAD Reports, N.J.

The Estimation of Heroin Availability: 1996-2000

Prepared for:
Office of National Drug Control Policy
Office of Programs and Budget
Terry S. Zobeck, Ph.D.; Branch Chief
Michael A. Cala, Ph.D.; Project Director

Under HHS Contract No. 282-98-0006
Task Order Number 24

Prepared by:
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1110 Vermont Avenue, NW
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March 2002

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NCJ 192336
PO 3266

Executive Summary

This study was commissioned by the Office of National Drug Control Policy (ONDCP) to:

- Provide a baseline for evaluating progress in achieving the supply reduction goals of the National Drug Control Strategy; and
- Inform policy decisions by providing insight into the source of heroin supplying U.S. markets, where it is entering the U.S., and how successful U.S. law enforcement is at detecting and seizing it.

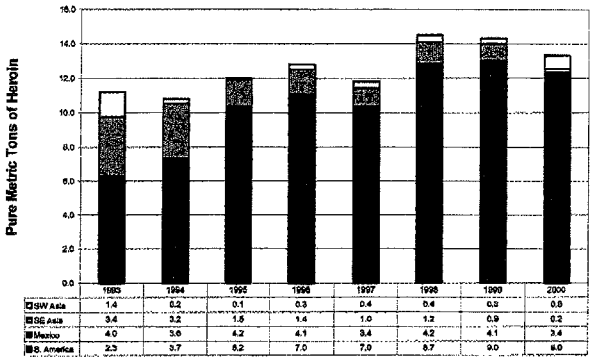
This study updates and extends the analysis done for this report's predecessor *Estimation of Heroin Availability, 1995-1998* (Rhodes, 2000). It seeks to weave together and reconcile information currently known about heroin consumption, heroin seizures and purchases, the source area of heroin seizures and purchases, and heroin production estimates. The end product provides valuable insight into the movement of heroin from various source areas (Mexico, South America, Southeast Asia and Southwest Asia) into and through the United States.

U.S. Consumption of Heroin

It is estimated that Americans have consumed from between 11 to 14 metric tons of heroin per year since 1993.[1] As illustrated in Figure 1, an analysis of retail heroin signature data indicates that South American heroin dominates the U.S. heroin market, particularly in the eastern U.S., accounting for more than 67 percent of the heroin consumed in the U.S. Mexican heroin makes up the second largest share, supplying one-quarter of the U.S.'s heroin consumption. Southeast and Southwest Asia provide the remaining supply of heroin for U.S. consumers with about 2 percent and 6 percent of the market share, respectively. The dominance of South American heroin has steadily increased over the last five years, largely at the expense of Southeast Asian heroin. Eastern U.S. cities are the largest consumers of South American heroin, but its use in other American cities has been steadily increasing over the years. Consumption of Mexican heroin has remained fairly constant over the years with western U.S. cities making up the bulk of its consumer market. Following a sharp decline in 1994, consumption of Southwest Asian heroin appears to be increasing.

[1] Rhodes, W., Layne, M., Bruen A., Johnston, P., and Becchetti, L., *What America's Users Spend on Illegal Drugs 1988 – 2000*. Report prepared for the Office of National Drug Control Policy. Abt Associates Inc., December 2001.

Figure 1 - U.S. Consumption of Heroin by Source Area (CY 1993 through CY 2000)



	1993	1994	1995	1996	1997	1998	1999	2000
SW Asia	1.4	0.2	0.1	0.3	0.4	0.4	0.2	0.0
SE Asia	3.4	3.2	1.5	1.4	1.0	1.2	0.9	0.2
Mexico	4.0	3.6	4.2	4.1	3.4	4.2	4.1	3.4
S. America	2.3	3.7	6.2	7.0	7.0	8.7	9.0	9.0

The Flow of Heroin into the U.S.

The map in Figure 2 illustrates the flow of heroin from each source area into the U.S. through various import regions in Calendar Year 2000.[2] The Southeast U.S. is the preferred import region for South American heroin. This is not surprising when one considers the proximity of this region to South America and the availability of direct commercial airline flights from Colombia to Miami. Since South American heroin makes up two-thirds of our nation's heroin supply, this also gives the Southeast U.S. the distinction of being the primary importation region for *all* heroin entering the U.S. In fact, 40 percent of the heroin entering the U.S. (or 5.72 pure metric tons) does so through the Southeast U.S.

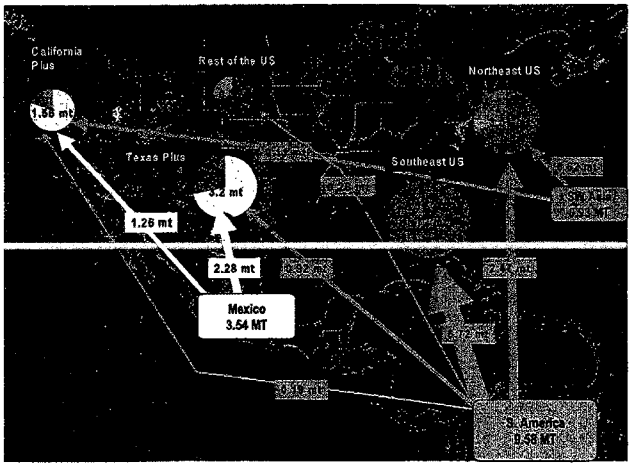
About one quarter of the heroin entering the U.S. comes through the Northeast U.S. The majority of Asian heroin enters the U.S. through the Northeast region. Although Asian heroin comprises less

[2] For purposes of this study, we partitioned the continental U.S. into five geographic areas: Northeast U.S. (which includes the states of CT, DC, DE, MA, ME, MD, NH, NJ, NY PA, RI and VT); Southeast U.S. (FL, NC, SC, VA, GA); TexasPlus (TX, NM, AZ); CaliforniaPlus (CA, OR, WA); and the Rest of the U.S. (all other states).

than 10 percent of the total flow, it accounts for over a quarter of the flow through the Northeast.

Slightly less than one quarter (22%) of the heroin flow enters the U.S. through the TexasPlus region. The majority of this heroin is Mexican, but more than a quarter is from South America. Only eleven percent (1.56 metric tons) of heroin entering the U.S. comes through the CaliforniaPlus region. The majority of the flow into this region is Mexican heroin; relatively small amounts of South American and Southwest Asian heroin enters the U.S. through the CaliforniaPlus region. The Rest of the U.S. accounts for the remaining 3 percent (0.36 metric tons) of the heroin flowing across our borders; comprised largely of South American heroin with small amounts of Southeast Asian heroin.

Figure 2 - The Flow of Heroin From Source Areas Into the U.S. - CY 2000



The following table shows annual trends in the distribution of heroin into the U.S. through the various import areas from 1996 to 2000. Mexican heroin has consistently moved into the U.S. through the CaliforniaPlus and TexasPlus regions. The Northeast U.S. and Southeast U.S. have been the primary import areas for South American heroin, with a trend towards more imports flowing through the Southeast. The TexasPlus region has also increased in importance as an importation region for South American heroin. The Northeast U.S. has been the preferred importation region for both forms of Asian heroin, with the Rest of the U.S. being the second preferred region of entry.

Table 1 - Distribution of Flow from Source Areas into the U.S.

Source Area	Import Region	1996	1997	1998	1999	2000
Mexico	Northeast US	0%	0%	0%	0%	0%
	Southeast US	0%	0%	0%	1%	0%
	TexasPlus	54%	46%	52%	11%	64%
	CaliforniaPlus	46%	54%	47%	88%	36%
	Rest of US	0%	0%	1%	0%	0%
South America	Northeast US	43%	40%	39%	37%	26%
	Southeast US	52%	58%	48%	37%	60%
	TexasPlus	3%	1%	11%	19%	10%
	CaliforniaPlus	2%	2%	1%	4%	2%
	Rest of US	0%	1%	0%	3%	3%
SE Asia	Northeast US	77%	67%	62%	87%	71%
	Southeast US	1%	4%	3%	0%	0%
	TexasPlus	0%	1%	0%	0%	0%
	CaliforniaPlus	1%	1%	0%	10%	0%
	Rest of US	21%	27%	35%	3%	29%
SW Asia	Northeast US	45%	81%	76%	72%	88%
	Southeast US	30%	0%	7%	8%	0%
	TexasPlus	0%	0%	0%	0%	0%
	CaliforniaPlus	0%	4%	0%	0%	12%
	Rest of US	25%	15%	17%	19%	0%

Heroin Import Seizure Rates

One of the primary purposes of this study is to enable an assessment of U.S. law enforcement's effectiveness in stemming the supply of heroin to U.S. consumers and to identify areas where resource enhancements would further national objectives. Equipped with estimates of the amount of heroin entering the U.S. at various importation regions and import seizures for those regions, it is a simple calculation to derive seizure rates for each region. Table 2 provides seizure rates for each import region from 1996 to 2000. To describe the table briefly, for each U.S. import region, the rates reflect the amount of heroin seized at import in that region divided by the total estimated amount of heroin flowing into that region. The *National Total* row is not an average, but rather the consolidated seizure rate for the nation (i.e., the sum of all heroin import seizures divided by the total estimated flow).

Table 2 - Regional Seizure Rates of Heroin Entering the U.S. (CY 1996-2000)

Import Region	1996	1997	1998	1999	2000
Northeast US	5%	8%	7%	5%	10%
Southeast US	6%	8%	6%	5%	6%
TexasPlus	2%	3%	3%	4%	4%
CaliforniaPlus	2%	3%	2%	1%	4%
Rest of US	6%	8%	10%	6%	11%
National Total	**4%**	**7%**	**5%**	**4%**	**6%**

The implications of this table are obvious. What is perhaps most notable in this table is the low national seizure rates – ranging from 4 percent to 6 percent. Because the majority of heroin is being shipped into the U.S. through the Southeast U.S. and Northeast U.S., performance in these regions has a substantial impact on national effectiveness.

Conclusions

While some of the more detailed results of this model may be dependent upon certain assumptions, on a macro level, several assertions can be made with reasonable confidence:

- South American heroin dominates the U.S. heroin market – both from a supply and consumption perspective – with the bulk of this heroin being shipped through and consumed in the Eastern U.S.
- Mexico is the second largest supplier of heroin into the U.S. with the bulk of it being shipped through and consumed in the Western U.S.
- The flow of South American heroin through the TexasPlus region is increasing.
- U.S. law enforcement agencies are seizing, at best, 10 percent of the heroin moving into and through the U.S., with the majority of seizures occurring at import.

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COUNTRY HANDBOOK

A FIELD-READY REFERENCE PUBLICATION

October 2001
DOD-2630-COL-009-01

COLOMBIA

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EXHIBIT
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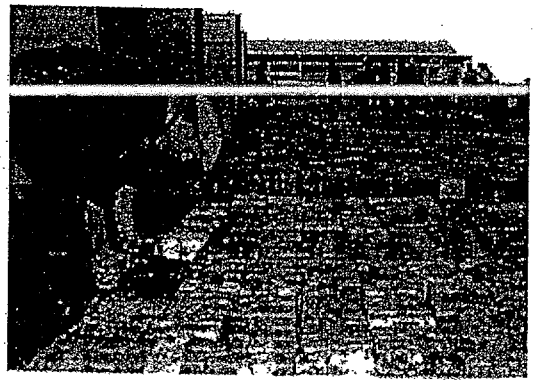
Castano, reportedly was drawn into the conflict 20 years ago when his father was kidnapped and killed by FARC members. However, Castano resigned from leading the AUC in June 2000 and was later replaced by Salvatore Mancusso. There are at least 5,000 militia members in the AUC and it is the largest and most fierce paramilitary organization in Colombia. Like their leftist guerrilla rivals, the paramilitaries also benefit from the drug trade; the *paras* "tax" drug revenue. Neither Colombia nor the international community officially recognizes the AUC and other paramilitary groups.

Transnational Issues

The drug industry affects every facet of society in Colombia, from the rural farmers who grow the coca to the government's highest officials who are corrupted by the industry. The Drug Enforcement Agency estimates that Colombia produces 75 percent of the world's cocaine. More than 85 percent of the cocaine and 65 percent of the heroin found in the United States is of Colombian origin. Most of these drugs are smuggled to the U.S. via Mexico, Central America, and the Caribbean. The Colombian government, the U.S., and other nations have invested billions of dollars over the last few years to curb the drug flow.



Police Drug Seizure

U.S. DRUG-INDUCED DEATHS

According to the National Center for Health Statistics

1994	**13,787**
1995	**14,218**
1996	**14,843**
1997	**15,973**
1998	**16,926**
1999	**19,102**
2000	**20,227**

United States Department of State

Washington, D.C. 20520

January 7, 2003

Dear Mr. Chairman:

Following the December 12, 2002 hearing at which Acting Assistant Secretary of State Paul Simons testified, additional questions were submitted for the record. Please find enclosed the responses to those questions.

If we can be of further assistance to you, please do not hesitate to contact us.

Sincerely,

Paul V. Kelly

Paul V. Kelly
Assistant Secretary
Legislative Affairs

Enclosure:
As stated.

The Honorable
Dan Burton,
Committee on Government Reform,
House of Representatives.

Questions for the Record Submitted to:
Acting Assistant Secretary of State
International Narcotics and Law Enforcement Affairs
Paul E. Simons
House Committee on Government Reform
December 12, 2002

QUESTION:

1. Media report from Secretary Powell's recent visit to Colombia indicate that he believes that despite increased coca eradication we have yet to reach the point where eradication outstrips planting. When do you anticipate that eradication will exceed planting of coca?

RESPONSE:

Coca cultivation is dependent on the resources of illicit farmers and their commitment to replant in the face of our continued spraying and in the subsequent crop (and profit) losses. In 2002, we sprayed nearly 130,000 of the 169,800 hectares of coca. In 2003, we plan to spray all coca cultivation up to 200,000 hectares.

Experience shows that eradication eliminates roughly 80 percent of potential cocaine production in sprayed fields. Replanted or newly planted fields can, at best, produce one harvest during a year - instead of the normal four to five harvests that a mature coca field can produce. The extensive spray program in 2002, and that planned in 2003, will result in huge financial losses to coca farmers and drug organizations - losses, which if

sustained, we believe will ultimately force them both out of business in Colombia.

Questions for the Record Submitted to:
Acting Assistant Secretary of State
International Narcotics and Law Enforcement Affairs
Paul E. Simons
House Committee on Government Reform
December 12, 2002

QUESTION:

2. Of the monies allocated to Plan Colombia, how much is dedicated to counter-drug activities? How much is dedicated to aerial spraying, how much to coca spraying and how much to opium spraying? What monies are still unobligated?

RESPONSE:

All of the original $1,018.5 million in Plan Colombia was designated to combat drug trafficking in the Andean region. Of this amount, $838.5 million was specifically for Colombia with $668.5 million for "hard" counter-drug programs such as interdiction and eradication.

Of these counter-drug funds, $115.6 million was dedicated to aerial spraying - for planes, chemicals, and infrastructure support. The coca and poppy spray programs are both budgeted and operated together under the Colombian National Police Air Wing, sharing the same equipment, personnel, logistic systems, and security support. Separate budget breakdown numbers are not available for the two.

On the status of monies, of the $115.6 million budgeted for the spray program, roughly $6.76 million was un-subobligated at the end of 2002.

Questions for the Record Submitted to:
Acting Assistant Secretary of State
International Narcotics and Law Enforcement Affairs
Paul E. Simons
House Committee on Government Reform
December 12, 2002

QUESTION:

3. Of the reported $104 million in the FY 2002 budget for the Colombian military's counter-drug programs, how much was used to build bases and barracks for the Colombian Army?

RESPONSE:

In FY 2002, we funded a total of $413,960 of bases and barracks construction for the Colombian Army.

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House Committee on Government Reform
December 12, 2002

QUESTION:

4. Of the $46.5 million dedicated to the "Rule of Law and Support for Democratic Institutions," how much was used for building courthouses, jails and prisons?

RESPONSE:

There was no construction of courthouses, jails or prisons funded by the "Rule of Law and Support for Democratic Institutions" budget.

Questions for the Record Submitted to:
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December 12, 2002

QUESTION:

5. In the assistance package for the Colombian Army's new Aviation Brigade, what exactly is being provided?

RESPONSE:

The Colombian Army (COLAR) aviation program consists of 71 helicopters. U.S. Government funding supports operations, maintenance, and personnel training for these helicopters, including: fuel; spare parts; weapons; ammunition; some mechanics; tools; some pilots; and operations coordinators. In addition, the U.S. helps fund general infrastructure that provides operational and maintenance support as well as intelligence collection and analysis capabilities.

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QUESTION:

6. Since Plan Colombia provides three different types of helicopters (HUEY IIs, HUEY-N models and UH-60L Blackhawks) what provisions are made for standardization of pilot training, maintenance, spare parts and provisions?

RESPONSE:

INL provides contract support to ensure that pilot training, maintenance, spare parts, and other support provisions are in place for all three helicopter programs. While each of the three aircraft requires its own unique flight standardization programs, maintenance procedures, spare parts, and other provisions, all are operated under a unified program implementation system using a single management concept. Training manuals and standardization techniques, as well as logistical and maintenance procedures, are individualized for each type of aircraft, but all adhere to an overarching general program - a system modeled after that used by the U.S. military for these same aircraft.

Questions for the Record Submitted to:
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QUESTION:

7. Our recent CODEL was told that the Colombian Army's UH-60L Blackhawk program has encountered problems or "challenges" in training pilots and mechanics. Is that correct? Is that the reason that seven UH-60L Blackhawks are currently inoperative?

RESPONSE:

The Colombian Army (COLAR) has provided sufficient pilot candidates, and we expect to have enough qualified Pilots-in-Command (PIC) and co-pilots to operate the program fully by mid-2003. While there are still difficulties with the number of mechanic trainees, we are working with COLAR command to improve the process of identifying and securing more candidates.

When the CODEL visited Colombia recently, seven of fourteen UH-60s were in storage status for two principal reasons -- retraining of the COLAR Counter Drug Brigade that lessened helicopter mission requirements, and FY 2002 funding shortfalls for operations and maintenance of the UH-60 fleet. As of January, however, all fourteen UH-60s will be in operational status.

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December 12, 2002

QUESTION:

8. U.S. Embassy personnel informed our CODEL that there exists a "Nationalization Plan" to eventually turn over our support to the Colombian Army. Would you please provide us the specifics of this plan?

RESPONSE:

A central objective of U.S. counter-drug assistance is to give the Colombian Army (COLAR) Aviation Brigade the capability to operate and maintain its aircraft without the support of U.S.-funded contract pilots, mechanics and technical personnel. The goal is to replace U.S. contracted workers with uniformed personnel as quickly as possible without compromising the mission or health and safety requirements.

In the case of pilots, operating the current inventory of helicopters full-time requires 213 certified pilots (96 for the UH-1Ns, 42 for the UH-60s, and 75 for the Huey IIs). After an extensive recruiting and training program, there are presently sufficient COLAR pilots for the UH-1Ns and UH-60s; and we should have enough Huey II pilots by mid-2003. The next step is to provide these pilots the operational experience and professional

guidance for them to mature into Pilots-in-Command. On average it takes two years to qualify for that status. In the interim, there will continue to be a need for contract pilots in command.

For a couple of reasons, the training of mechanics is proceeding more slowly. First, it takes years for a helicopter mechanic to acquire the necessary training and practical experience that ensures effectiveness and safety. Secondly, there is tremendous work pressure on the existing COLAR mechanic corps to maintain the COLAR aircraft that do not receive U.S. contractor support. That greatly limits the time they can devote to training in new skills. We are using a combination of formal training (both in Colombia and the U.S.) and on the job training (under the guidance of experienced contract mechanics) to build the cadre of mechanics that the COLAR will need to maintain the helicopters without U.S. contractor support.

Many observers are not aware of the youth of the COLAR Aviation Brigade - it had only one helicopter as recently as six years ago.

Questions for the Record Submitted to:
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QUESTION:

9. How many Colombian Army "Plan Colombia" helicopters have been lost to crashes, or been shot down, during the last two years?

RESPONSE:

During the last two years, one "Plan Colombia" Colombian Army helicopter has been lost. That was due to an accident. A UH-1N helicopter flying a night medical evacuation mission crashed on August 1, 2002, resulting in six fatalities. It was the only serious accident the unit has had in over 29,000 flight hours.

Questions for the Record Submitted to:
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QUESTION:

10. The fourteen UH-60L Blackhawks for Plan Colombia require qualified command pilots and co-pilots. How many are available at this date?

RESPONSE:

As of the end of 2002, there were 8 COLAR Pilots-in-Command (PIC) and 10 co-pilots. An additional group of 4 Pilots-in-Command candidates and 10 copilot candidates should complete training by February 2003, bringing the total to 12 Pilots-in-Command and 20 co-pilots. We expect to have a full complement of Pilots-in-Command and co-pilots by mid-2003.

Questions for the Record Submitted to:
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QUESTION:

11. There are seven UH-60-A Blackhawks in the Colombian Army that are not part of Plan Colombia. Is it true that pilots flying the "L" model must go through a 30-hour training program for this model? What is the cost of this program? Has the actual cost exceeded the original budgeted funds?

RESPONSE:

Colombian Army (COLAR) pilots entering the Plan Colombia Blackhawk program bring a mix of training and experience. In most cases, these pilots are not capable of immediately assuming duties as co-pilots or Pilots-in-Command of the UH-60Ls. As is done in the U.S. military, we evaluate the incoming candidates, identify where additional instruction is needed, and train new pilots to be able to handle new tasks and missions to our required standards. There is not a set number of hours required, but training has taken an average of 28 to 32 hours in order for a new pilot to be certified as combat mission ready. The cost of this training is not funded or tracked separately, but rather is absorbed within the overall operational budget. This element of the program has not been greater than earlier expected.

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QUESTION:

12. Has INL budgeted for the operating costs of all of these helicopters?

RESPONSE:

If approved, our budget request for FY 2003 is adequate to cover the operating costs of all 71 Plan Colombia helicopters in the COLAR program.

Questions for the Record Submitted to:
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QUESTION:

13. How many Colombian National Police (CNP) pilots will be trained to fly the new Air Tractor spray planes?

RESPONSE:

In April, 2003, the Air Tractor spray program will begin to evaluate new pilot candidates who apply to enter the training program. There are seven CNP candidates applying for entry.

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QUESTION:

14. If none, please provide the cost of paying a contract pilot versus a CNP pilot to perform the spraying job in Colombia.

RESPONSE:

The approximate costs for a contract Air Tractor pilot is $110,000 per year plus a rotation/contractor fee consisting of an additional $65,000 per year.

An "experienced spray pilot" can be trained and certified to INL standards within 3 to 4 months. However, it would take 12 to 18 months to train the average CNP pilot -- at a cost of $160,000 in flight time alone (plus per diem, salary, etc.). In addition, such training would incur increased expenses to provide training aircraft and instructor pilots -- adding as much as $3 million in new support costs each year. Moreover, such augmented training would become a recurring cost as the routine rotation of assignments (an important part of the CNP promotion requirements) would cause trained pilots to leave the program after only a couple of years of service.

Nevertheless, our goal remains to have the CNP provide all pilots and mechanics and we are working with them to determine how best to address this situation.

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QUESTION:

15. When does the State Department plan begin to nationalize this spray program and have the CNP pilots do eradication, as was the case in the past?

RESPONSE:

Nationalization is an important component of all our aviation policy in Colombia, including the aerial eradication program. However, the primary and overriding is to bring illicit coca and opium poppy cultivation under control as quickly as possible.

At present, there are no available Colombian police spray pilots. The spray program has always had to depend on contract pilots -- including the 1992-2000 period when the CNP handled the contracting. There has been only one CNP active duty, fixed-wing spray pilot (trained by INL Air Wing). He served from 1992 to 1998, and has since retired. In 1994, the CNP made a brief attempt at opium poppy spraying using helicopters with CNP pilots. Tragically, a fatal crash in the first week of operations ended that program.

Nationalization remains a matter of strong concern. We, accordingly, are working with the police to identify current CNP pilots who might be potential candidates for AT 802 and T-65 training in 2003.

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QUESTION:

16. Were officials at DEA headquarters in Washington consulted on the January 2001 Embassy Bogota decision to place the emphasis on coca eradication, as opposed to opium eradication, as was stated at the hearing?

RESPONSE:

DEA is part of the inter-agency process which produced the decision in 2001 to place eradication of coca as the highest U.S. counter-drug priority in the Andean region, particularly in Colombia. DEA is a member of the inter-agency Colombia Working Group, but is represented by the Department of Justice at senior-level meetings considering drug policy. DEA's principal activities in the Andean region have traditionally been more in the area of enforcement operations than eradication.

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House Committee on Government Reform
December 12, 2002

QUESTION:

17. If DEA headquarters in Washington, D.C. was not consulted, please explain why.

RESPONSE:

As previously noted, DEA was part of the inter-agency process which produced the decision in 2001 to place eradication of coca as the highest U.S. counter-drug priority in the Andean region, particularly in Colombia.

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QUESTION:

18. What provisions, if any, has INL made toward addressing the lack of ramped supply aircraft?

RESPONSE:

We believe current Colombian government capabilities, along with K-MAX external load helicopters that are soon to be deployed, are adequate to satisfy airlift needs. INL supports the Colombian National Police (CNP) DC-3 fleet that, although not loading ramp equipped, meets the vast majority of its transport requirements. We augment this capability with two dedicated C-27 aircraft that are loading ramp equipped and available to support counter-narcotic (CN) missions by both the CNP and Colombian Army. Additionally, we encourage the Colombian Air Force (COLAF) to provide C-130 support to CN missions. The Department of Defense funded major support for the COLAF C-130 program in FY 2002 and is requesting similar funds for FY 2003.

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QUESTION:

19. How are program requirements and performance measures being defined under any forthcoming contracts to ensure a more cost-effective, performance-driven program in 2003 and beyond?

RESPONSE:

The INL Air Wing is presently in the process of preparing a solicitation for a new Aviation Services Support Contract, with assistance from the Department's Office of Acquisition and the USAF Acquisition Center of Excellence. The new contract is being competed using a performance based services acquisition philosophy. Requirements will be outcome oriented, with measurable performance thresholds. This process will involve important industry input in developing specifications, and will empower the contractor to use best commercial practices and management innovation. We believe this process will yield the most cost-effective, performance-driven program possible.

EMBAJADA DE COLOMBIA
AGREGADURIA DE POLICIA
2118 Leroy Place NW WASHINGTON D.C. 20008
Tel. (202) 4831740 Fax (202) 4831741

Washington DC, enero 7 de 2003

No 002 / AGREPOL- USA

ASUNTO : Envío Información

Washington DC.

Cordialmente me permito enviar al señor JOHN MACKIN, el balance de la lucha contra el narcotráfico de la Policía Nacional de Colombia, durante el año 2002:

Aspersión de coca 130.000, hectáreas.
Aspersión de amapola 3.371 hectáreas.

Información publicada por el diario el Tiempo el 01-01-03.

Atentamente:

Coronel. **JORGE HERNAN VALENCIA MARULANDA**
Agregado de Policía de Colombia en Estados Unidos

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Usted tiene una cita con nosotros

BosqueNativo

NOTICIAS

Nacional

La Policía entregó el balance de las acciones realizadas durante el año que finalizó. El reporte indica que más de 32 mil personas murieron en el país y se capturaron más de 222 delincuentes en distintas operaciones.

Policía entrega balance del 2002

Caracol Noticias

1/1/2003 19:56

BOGOTÁ – La Policía Nacional presentó el balance de las acciones adelantadas durante el año pasado. Según el reporte oficial, el delito de homicidio disminuyó uno por ciento y el secuestro lo hizo en tan solo un cuatro por ciento.

Esto en cifras significa que 32 mil 626 personas perdieron la vida, mientras que 2 mil 931 fueron tomadas como rehenes por distintas organizaciones al margen de la ley. Pese a los altos índices de retenciones, los Grupos Antisecuestro y Extorsión (GAULA) lograron rescatar a 236 ciudadanos.

"Los sectores más afectados por el secuestro son los departamentos de Antioquia, Cesar, Cundinamarca y Magdalena", explicó el general Teodoro Campo, director general de la institución.

El alto oficial aseguró que en los doce meses anteriores se adelantaron más de 50 mil operativos en los que fueron detenidas 222 mil 223 personas, entre quienes figuran delincuentes comunes, guerrilleros y paramilitares.

"En enfrentamientos con la institución fueron dados de baja 56 de estos subversivos y de los integrantes de las Autodefensas fueron detenidos por la Policía Nacional 495", explicó el general Campo.

El alto oficial también dijo que 236 efectivos de la institución perdieron la vida en ataques perpetrados a patrullas y puestos oficiales en poblaciones colombianas.

En la lucha contra el narcotráfico se erradicaron 130 mil hectáreas de hoja de coca y 3 mil 371 de amapola con lo que se dejó de producir 756 toneladas de cocaína.

El general Campo agregó que la Policía ha pagado más de 357 millones de pesos a mil nueve cooperantes lo que ha evitado atentados terroristas en distintas zonas del país, y se logró, además, la recuperación de un millón 554 mil galones de hidrocarburos en operativos que dejaron 966 delincuentes detenidos.

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STEPS TO SUCCESS

Baltimore Drug and Alcohol Treatment Outcomes Study

A report submitted to Baltimore Substance Abuse Systems, Inc.

January 24, 2002

January 24, 2002

The report you are about to read, commissioned by Baltimore Substance Abuse Systems, Inc. (BSAS), shows conclusively that drug treatment is effective in Baltimore City. It is tempting, when presented with research of this caliber, to trumpet its findings with great fanfare; but addiction is nothing to celebrate. Many addicted Baltimore residents lead lives of quiet desperation, shielded from public view except when drug-related crime makes the front page of the morning paper.

For years, Baltimore has cited national studies on the effectiveness of drug treatment. Three years ago, we began our DrugStat program to closely monitor treatment program outcomes in order to strengthen performance. Now we have the first system-wide analysis demonstrating that, in Baltimore City, treatment works. In 1999, Baltimore City and the Maryland General Assembly began a partnership to substantially increase investment in drug treatment. This commitment, if fulfilled, would increase by $25 million funding for Baltimore City's treatment system. Any wise investor would seek evidence that his/her dollars are well spent. This new data is proof of the logic and public health benefit of making treatment available "on demand."

This study shows that, as we continue to invest in drug treatment, we can expect dramatic reductions in crime, overdose deaths and drug-related emergency room visits. We are more confident than ever of the effectiveness of drug treatment and are armed with findings that prove what treatment practice and common sense have told us. As a result, we must redouble our efforts to provide drug treatment for all who need it.

We are indebted to the University of Maryland, Johns Hopkins University, and Morgan State University for their collaboration and commitment to excellence. Finally, I would like to offer a special thank you to the treatment providers of Baltimore City who labor long hours to meet incredible demand.

And yet, we cannot pause long to celebrate nor indulge much in congratulation, for with this data comes a public health responsibility to make "treatment on demand" a reality. I am heartened to open this new year, a fresh legislative session before us, with the much-anticipated release of the Baltimore Drug and Alcohol Treatment Outcomes Study. May it strengthen our convictions that our work makes a difference.

Peter L. Beilenson, M.D., M.P.H.
Baltimore City Health Commissioner
Chairman of BSAS Board of Directors

The Baltimore Drug and Alcohol Treatment Outcomes Study

A Report Submitted to Baltimore Substance Abuse System by:

Jeannette L. Johnson, Ph.D.
Ashraf Ahmed, Ph.D.
Bradford Plemons, Ph.D.
Walter Powell
Hugh Carrington, Ph.D.
James Graham
Robert Hill, Ph.D.
Robert P. Schwartz, M.D.
Robert K. Brooner, Ph.D.

January 24, 2002

Evaluation Team

Jeannette L. Johnson, Ph.D.
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As Principal Investigator, Dr. Johnson was responsible for the overall conduct of the study. Along with the evaluation team she participated in the design and methodology of the study. Dr. Johnson supervised the research assistants and data entry staff and was responsible for supervision of the data collection and data entry. She worked with Walter Powell and Jim Graham from Baltimore Substance Abuse Systems to create the data entry and transmission systems. She worked on the data analysis team with Bradford Plemons and Dr. Ashraf Ahmed. Finally, she was the principal author of this report.

Ashraf Ahmed, Ph.D.
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Dr. Ahmed conducted all of the data analysis for this project along with Dr. Johnson and Mr. Plemons. He worked with Dr. Hill on obtaining data from the Maryland Department of Public Safety of Correctional Services. He helped to edit the final report.

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University of Pittsburgh
Department of Psychology
405 Langley Hall
Pittsburgh, Pennsylvania 15206

Mr. Plemons assisted Dr. Johnson in the quality control of the data and in supervising the research assistant staff. He also played an integral role in the data analysis and wrote sections of the report.

Robert Schwartz, M.D.
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Dr. Schwartz, while at the University of Maryland, worked with the team in developing the study design, methodology and conceptualization of the data analysis. He also helped to write sections of the report based on the data analysis conducted by Dr. Johnson, Dr. Ahmed and Mr. Plemons.

Walter C. Powell
Database Administrator
Baltimore Substance Abuse Systems
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Mr. Powell created the data entry system and was responsible for the data transmission from the 16 participating treatment programs to BSAS and to Morgan State University and the University of Maryland for data analysis.

Hugh W. Carrington, Ph.D.
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Dr. Carrington, while at the University of Maryland, assisted Dr. Johnson in supervising the research assistants and in monitoring follow up rates.

Robert Hill, Ph.D.
Sociologist
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Dr. Hill, while at Morgan State University, helped to obtain the criminal justice data and assisted in editing the report.

James Graham
Executive Director
Johns Hopkins Bayview Medical Center
Addiction Treatment Services
5510 Nathan Shock Drive
Baltimore, Maryland 21224

Mr. Graham, while the Director of Management Information Systems at BSAS worked closely with Dr. Johnson as liaison to the participating drug treatment programs. He also worked closely with Mr. Powell in creating and operating the data entry and transmission system created for the project.

Robert K. Brooner, Ph.D.
Professor of Medical Psychology
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Dr. Brooner provided initial consultation on study design and methodology. In the first year of the project, he directed the assessment training for research staff and was responsible for developing the initial payment procedures for study participants. In the final stage of the project, he edited and wrote sections of the report, based on the final set of data analyses provided by Drs. Johnson and Ahmed and Mr. Plemons.

Acknowledgements

We thank the hundreds of treatment participants who gave their time to this study. We wish them success in confronting their alcohol and drug problems. We salute Dr. Peter Beilenson and former Mayor Kurt Schmoke whose vision galvanized Baltimore to support treatment on demand and who initiated this project with Baltimore Substance Abuse Systems to evaluate and continually monitor and improve treatment efforts in the city.

The Directors of the participating treatment programs and their staff deserve great credit for supporting this work in their clinics. Baltimore Substance Abuse Systems (BSAS) was an outstanding research partner. We extend our heartfelt thanks to Andrea Evans, Bonnie Cypull, Jim Graham and Walter Powell and the many others who, while at BSAS, moved the project forward with grace and competence.

Finally, we offer our thanks to Mayor Martin O'Malley for continuing support for these treatment efforts and to the many State officials who have made support for treatment throughout Maryland a top priority in order to save lives and money, prevent disease, reduce crime, and improve the quality of the lives of our citizens, families and communities.

Executive Summary

Introduction

The Baltimore Drug and Alcohol Treatment Outcomes Study is the largest and most rigorously conducted drug treatment outcomes study that focuses on a single city. It is one of the key components of Baltimore's strategy to rigorously evaluate and continuously improve the public treatment system, as it expands to meet the needs of the city's uninsured citizens. Overall, the study found a marked reduction in drug and alcohol use, crime, risky health behaviors and depression among participants who voluntarily entered publicly funded outpatient drug and alcohol programs in Baltimore City. This comprehensive study is the result of an unprecedented collaboration among the University of Maryland, Johns Hopkins University and Morgan State University, with the cooperation of 16 treatment programs and nearly 1,000 treatment participants. Baltimore Substance Abuse Systems, the agency responsible for publicly funded treatment in the city, funded the study.

Methodology

The data included in these analyses represent findings from 991 uninsured Baltimore City residents who voluntarily entered outpatient drug and alcohol treatment through 16 publicly funded programs from 1998-1999. Two kinds of programs are included in the study, those that treat heroin addicted individuals with methadone and counseling and those that treat alcohol, heroin, cocaine and other drug users with counseling only. All study participants provided informed consent and completed an initial assessment; the 991 reported in detail here also returned for at least one treatment session. Since this subset of 991 participants may have received as few as one treatment session, treatment outcomes represent conservative estimates of the benefits of treatment. In keeping with the methodology of earlier national studies, participants' self-reported behaviors at treatment entry were compared with those reported at one, six, and 12 months thereafter. While self-reports under confidential research conditions have been shown to be generally valid, investigators also examined objective measures of drug use and crime, including urine drug tests and official arrest and imprisonment records.

Participants

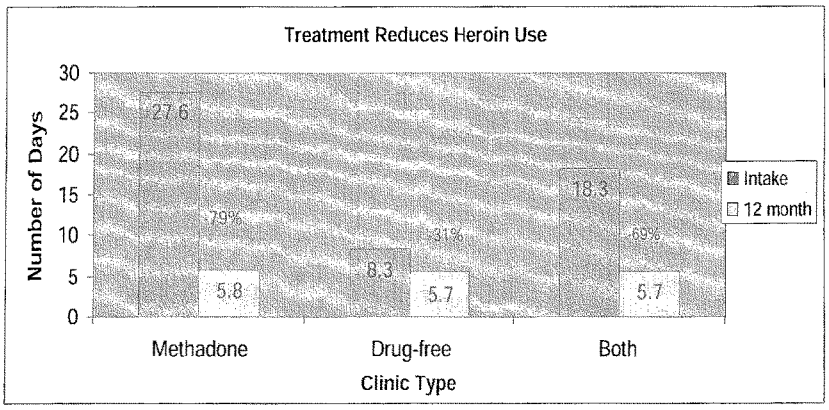
The average participant in the Baltimore Drug and Alcohol Treatment Outcomes Study was 37 years old. Nearly 50 percent were women and 85 percent were African-American. Three-quarters of the clients treated were unemployed and had an average annual income well below the poverty line, indicating that the public treatment system is fulfilling its mission to serve individuals who otherwise could not afford to enter drug treatment. On average, participants reported using heroin on 18 of the 30 days prior to entering treatment entry, using cocaine on six of 30 days and drinking to intoxication on four of 30 days. Given the difficulty women often face in entering treatment, the large proportion of women who participated in the study indicates that stigma surrounding substance abuse is not an insurmountable barrier to seeking treatment.

Reduction in Drug Use

Overall drug use among participants was significantly reduced as early as 30 days after treatment and remained below the pre-treatment levels at 12 months. These reductions in drug use are consistent with those found in large multi-city trials that have been conducted over the past 20 years. Urine drug testing confirmed over 70 percent of the self-reports of cocaine abstinence and over 75 percent of the self-reports of heroin abstinence. These high rates of agreement between self-reported drug use and urine results are also consistent with earlier studies and support the accuracy of self-report data.
Heroin Use

Heroin use declined at statistically significant rates for all treatment participants. Over the first 30 days of treatment, heroin use declined by 72 percent. This improvement was sustained at 12 months after intake (69 percent). Clients enrolled in methadone programs used heroin three times more frequently in the month prior to intake than clients enrolled in drug-free treatment. The decline in heroin use was greater for those enrolled in methadone programs at the one, six and 12 month follow-up interviews than for those enrolled in drug-free treatment.

Despite the widely recognized difficulty associated with discontinuing heroin use, drug treatment was associated with a remarkable and sustained reduction in heroin use up to one year from treatment entry. Heroin use contributes significantly to overdose death, emergency room visits and associated infections such as hepatitis B and C and HIV. The proven effectiveness of heroin treatment underscores the need for treatment capacity in those programs.

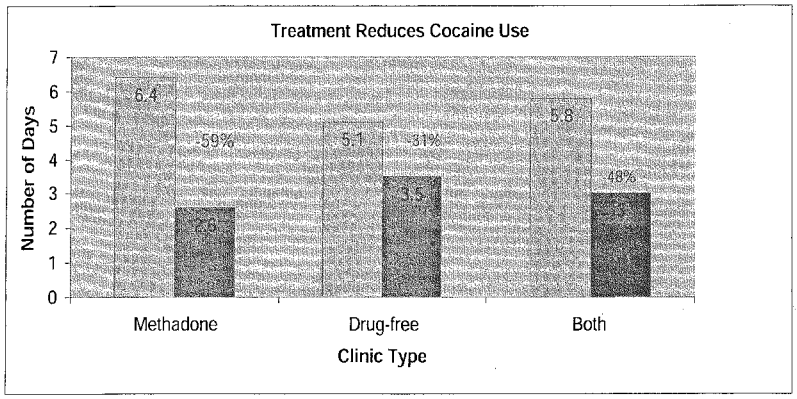


This Figure shows the average number of days clients used heroin within the past 30 days prior to intake assessment and 12 months after initiating treatment services.

Cocaine Use

There was a statistically significant decrease in participants' cocaine use over the 12 months following treatment entry. Cocaine use declined by 64 percent at 30 days from intake, 43 percent at six months and 48 percent at 12 months. Clients enrolled in methadone treatment had a higher baseline level of cocaine use (6.4 days) than those enrolled in drug-free treatment (5.1 days). There was a greater decrease in cocaine use among participants in drug-free programs compared to participants in methadone programs over the first 30 days of treatment (70 percent vs. 59 percent). Although both groups maintain improvement at six and 12 months, cocaine use declined at a lower rate among participants in drug-free treatments than among those in methadone clinics.

The erosion in improvement for drug-free clients is probably due to the higher dropout rate seen in these clinics compared to methadone programs. Treatment retention has repeatedly been linked to improved outcomes. Efforts by Baltimore to improve treatment retention, such as its Drug Stat Program in which outcomes are reviewed monthly by the treatment program directors, BSAS staff and the Health Commissioner to hold programs accountable and improve performance, are therefore critical to increased success.

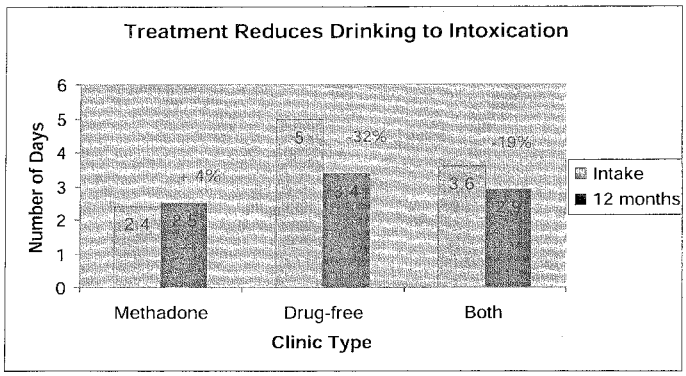


This figure shows the average number of days clients used cocaine within the 30 days prior to intake assessment and the 12 months after initiating treatment services.

Reduction in Alcohol Use

The study finds a statistically significant reduction in overall alcohol use during the 12 months following treatment entry. The average number of days of drinking to intoxication declined by 64 percent at one month after intake and 34 percent at six months. By 12 months after intake, participants reported drinking to intoxication 19

percent less than they had at intake. These findings indicate that treatment significantly reduces heavy drinking over the first month of treatment and, though the improvement attenuates over time, heavy drinking remains considerably less frequent (19 percent) even after one full year after the start of treatment. Participants treated in drug-free programs had greater alcohol problems at baseline and showed greater and more sustained improvement than those participants enrolled in methadone treatment.

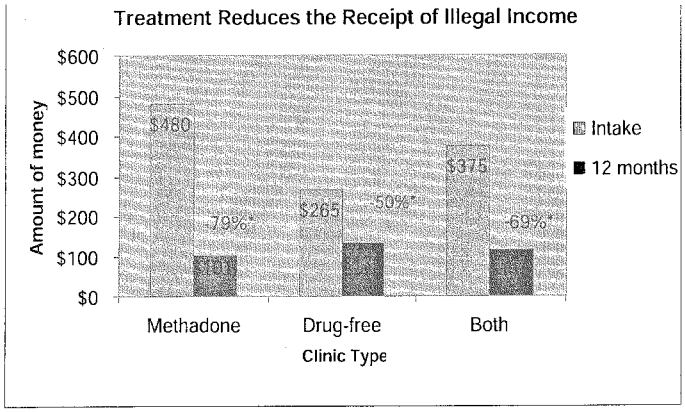


This figure shows the average number of days clients drank to intoxication within the 30 days prior to intake assessment and the 12 months after initiating treatment services.

Reduction in Crime

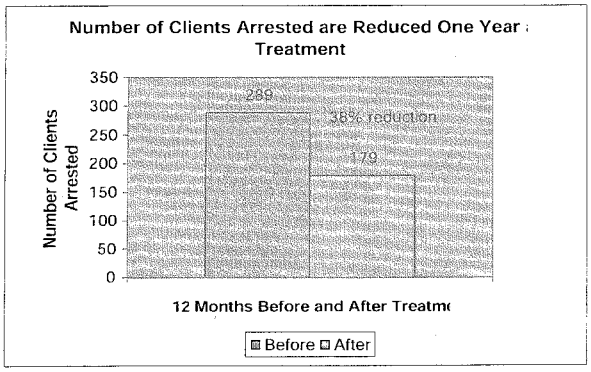
Researchers and law enforcement experts have linked the illegal nature of behaviors associated with drug addiction to crime. The legal problems of study participants improved significantly over the 12-month study follow up period, confirming previous national studies that indicate that addiction-related crime decreases significantly as a result of effective treatment.

Participants engaged in illegal activities 64 percent less at 12 months after treatment entry. Participants also significantly reduced the amount of illegal income they received by 77 percent at one month after treatment entry. At 12 months after treatment entry, the amount of illegal income remained low at 69 percent below levels at the start of treatment. This decrease occurred among participants in both kinds of treatment, although the methadone participants started at a higher level of illicit income and improved more markedly than the drug-free clients. The other self-reported drops in crime days, illegal income and drug use all underscore the importance of drug treatment as a key part of Baltimore's crime reduction strategy.



This figure shows the amount of illegal income received by the clients in the 30 days prior to intake and the 12 months after initiating treatment services.

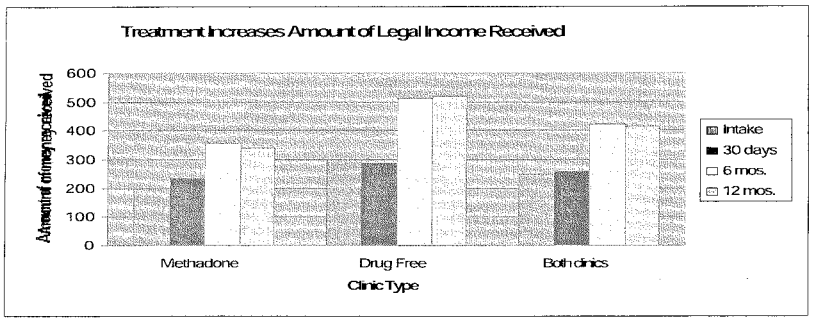
Official arrest records show a 38 percent decline in the number of treatment participants whose arrest led to an imprisonment in the 12 months prior to treatment (289 participants) compared to the 12 months after treatment entry (179 participants). These data must be considered preliminary, as there is often a time lag for sentencing, which results in an underreporting of the number of imprisonments during the follow-up period. Future reports, using additional data will update these preliminary findings.



The preliminary data in this figure are restricted to a subgroup of clients who were found guilty of crimes that led to imprisonment by the Division of Corrections.

Increased Earned Income

Treatment participants worked 52 percent more and earned 67 percent higher wages in the 30 days prior to the 12-month follow-up interview than they did in the 30 days prior to entering treatment. These improvements included "off the books" employment, which constitute an important source of income for marginalized populations. This informal labor market does not include illegal income but is characterized by a lack of health and other benefits, poor job stability and low pay. Though participants' income increased to an average of $415 per month, it remained considerably below the poverty level.



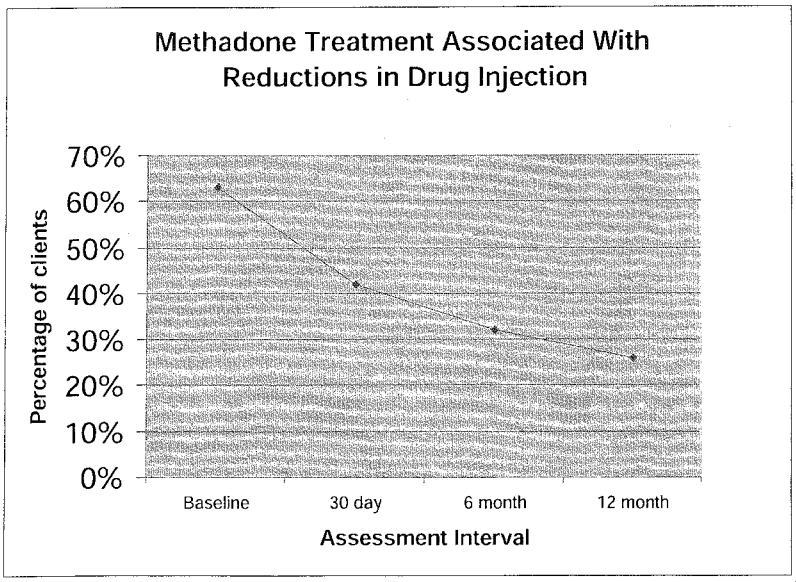
This figure shows the increase in the average amount of money earned within the past 30 days at each assessment period, separated by the type of clinic the client attended; then, both clinics are combined for an average of the clinics.

Decreased Depression

A substantial minority of people enrolling in drug and alcohol treatment had symptoms of depression at treatment entry. Study findings show a statistically significant decrease in depression scores across the study's follow-up intervals. Participants enrolled in methadone programs had more severe depression and more marked improvement than people treated in drug-free clinics. While many symptoms of depression improve with abstinence from drugs or alcohol, it is important to have anti-depressant medications and psychotherapy available for those clients whose depression does not spontaneously remit after drug and alcohol treatment alone.

Reduction in HIV Risk Behavior

Alcohol and drug dependence increases the risk of transmitting HIV, Hepatitis B and C and other sexually transmitted diseases through sharing injection equipment and unsafe sex. Study findings show a 59 percent reduction in drug injection among methadone clients at 12 months from the start of treatment. These robust reductions in drug injection reduce the risk of disease transmission.



This figure shows data from methadone clinics and is based on the response to the question, "Have you injected drugs in the past 30 days?" All time points cover the 30 days immediately preceding the evaluation.

Shooting galleries are buildings in which intravenous drug users congregate. They are a site of the spread of HIV, hepatitis and other sexually transmitted diseases through sharing of needles and other drug paraphernalia, as well as through trading sex for drugs. There was a statistically significant decline in the number of participants frequenting shooting galleries over the 12 months after entering treatment.

Benefits of Treatment- on-Demand

The benefits of treatment-on-demand for alcohol and drug dependent people can be measured by comparing participants' behaviors during the 30 days before they entered treatment with those reported in the first 30 days after entering treatment. Based on the average drop in drug use and crime in the first 30 days of treatment compared to the 30 days prior to treatment entry, treatment of an additional 1,000 people per year avoids: 164,000 days of heroin use, 45,600 days of cocaine use, 63,600 days of crime and $3.2 million in illegal income.

Negative Impacts on People and Society Resulting from Delays in the Onset of Treatment Services (for 1,000 people)

Behavioral Domain	30-Day Delay	6-Month Delay	12-Month Delay
Additional Drug Use			
Days of Heroin Use	13,700	82,200	164,400
Days of Cocaine Use	3,800	22,800	45,600
Additional Crime			
Days of Crime	5,300	31,800	63,600
Illegal Income	$267,850	$1,607,100	$3,214,200

Conclusions

The finding of Baltimore Drug and Alcohol Treatment Outcome Study are compelling as they confirm and build upon the results of other nationwide studies and upon documented trends in the past year in Baltimore (e.g., decrease in drug-related emergency room visits, overdose deaths and crime). Even after one year from treatment entry, participants significantly reduced their heroin, cocaine and alcohol use, decreased the number of crimes they committed, improved their psychological functioning, increased their legal income and reduced their risk of getting and transmitting life threatening diseases such as HIV and hepatitis. These findings support the efforts of the City of Baltimore and the State of Maryland to expand and improve the city's treatment system. Expanding the capacity of the public system will enable all city residents to have rapid access to high quality treatment services resulting in improved health and well-being for them, and their families and communities.

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Below please find answers to the questions you posed in your December 30 e-mail to INL.

Question:

Please provide an accounting of the losses (due to crashes, mechanical problems, pilot error or shoot-downs by narco-guerrilla ground fire). Please report the numbers and types of U.S.-titled aircraft lost in Colombia and the approximate cost involved.

Answer:

- 23 U.S.-titled aircraft have been lost in Colombia since 1997.
    - 18 were losses due to pilot error.
    - 4 were shot down by narco-guerrilla ground fire.
    - 1 lost (a helo burned) for unknown causes
- The loss of these aircraft total US $35,470,850. This represents the book value of the aircraft as recorded when they entered the program. This figure does not include depreciation or the cost of upgrades to the aircraft made subsequent to their acquisition.
- Numbers and types of aircraft lost:
    - 4 T-65 (single-engine) spray aircraft
    - 2 OV-10D (twin-engine) spray aircraft, converted from DOD observation aircraft platform
    - 8 UH-1H (single-engine) standard "Bell Huey" helicopters
    - 4 Huey-II (single-engine) upgraded "Bell Huey" helicopters
    - 5 UH-1N/BH-212 (twin-engine) standard "Bell" helicopters

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