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RESPONDING TO THE DRUG CRISIS IN NORTHERN CALIFORNIA

HEARING

BEFORE THE

SUBCOMMITTEE ON CRIMINAL JUSTICE, DRUG POLICY, AND HUMAN RESOURCES

OF THE

COMMITTEE ON GOVERNMENT REFORM

HOUSE OF REPRESENTATIVES

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RESPONDING TO THE DRUG CRISIS IN NORTHERN CALIFORNIA

MONDAY, MARCH 6, 2000

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON CRIMINAL JUSTICE, DRUG POLICY,
AND HUMAN RESOURCES,
COMMITTEE ON GOVERNMENT REFORM,
Woodland, CA.

The subcommittee met, pursuant to notice, at 9 a.m., in the Yolo County Board Chambers, 625 Court Street, room 206, Woodland, CA, Hon. John L. Mica (chairman of the subcommittee) presiding.

Present: Representatives Mica and Ose.

Also present: Representative Herger.

Staff present: Sharon Pinkerton, staff director and chief counsel; and Mason Alinger, professional staff member.

Mr. MICA. I would like to call this hearing of this Subcommittee on Criminal Justice, Drug Policy, and Human Resources to order.

Good morning. I am John Mica, chairman of the subcommittee, which is a subcommittee within the Government Reform Committee of the House of Representatives. We are in California today, and appearing here with this hearing at the request of Congressman Doug Ose, who is one of the most active members on our subcommittee and the Government Reform Committee, and has been a leader in attempting to help us develop a strategic and effective national drug policy.

I was speaking with one of the supervisors just before we began started today, and he was telling me that this area has had significant problems with illegal narcotics, just like the rest of the country. My area, which is central Florida, has had a record number of heroin overdose deaths, primarily with the young people.

In fact, a recent headline in our newspaper proclaimed that heroin overdose deaths now exceed homicides in central Florida. And I know this area has been hit by its own unique problems with illegal narcotics, and hopefully our subcommittee, through Representatives Ose and others' efforts, can assist us in responding and working with the local and State officials in doing a better job with this horrible problem.

This is an investigations and oversight subcommittee of the U.S. House of Representatives. Our format for this hearing will follow our Washington format. We will have opening statements by Members, and they will be recognized. We then will have today two panels. We will hear from all of the witnesses on the first panel and then have a round of questions, and then will go to the second panel and do the same. That will be the order of business today.

I will start with my opening statement and then yield to committee members. Our subcommittee is conducting this oversight field hearing as part of our need to understand fully our Nation's drug crisis and how it impacts different parts of our Nation, and what effective drug control efforts are underway, and which of these should be supported by Congress.

Today, we will learn about the impact of the manufacture, use and trafficking of illegal drugs in northern California. We are privileged to have with us today congressional leaders who strongly support efforts to protect our communities from the ravages of illegal narcotics. As I said, I know that Mr. Ose, who invited us to this community, and who is a member of our subcommittee, has been very active in our subcommittee drug control oversight and policy issues.

We also are very privileged to have with us Mr. Wally Herger. I believe he is a member of the Ways and Means and Budget Committee of the House of Representatives from the neighboring district just, I believe, north of here. And I want to thank him for his continued efforts to ensure that the drug problems of north California are efficiently and effectively addressed.

I wish to thank all of the Members and participants for their presence here today. Mr. Souder has come from Indiana. He is also a member of our subcommittee. I welcome and thank him. I appreciate your dedication to this issue, which is of critical importance to our Nation.

We are very honored to have testifying before us today a number of regional and local officials and citizens who are actively engaged in responding to the drug crisis and the terrible consequences of this epidemic on a daily basis. These individuals serve on the front line. They are preventing drug abuse in our schools and communities. They are enforcing our laws and are most in need of our effective and efficient support in the systems.

This subcommittee is particularly interested in how communities and regions are dealing with the critical responsibilities of implementing successfully not just the Federal, but our national drug control strategy. After all, law enforcement and drug control are primarily State and local responsibilities. In Congress, we try to ensure that the Federal Government is doing everything possible to assist you, both in reducing the supply of drugs in our communities as well as the demand for drugs in our communities.

In a recent hearing of the subcommittee, we learned that the estimates of Americans in need of drug treatment range from 4.4 to 8.9 million. Yet, less than 2 million people have reportedly received treatment. It is our intention to see that this gap is addressed. Our subcommittee will continue its oversight in this area and seek to improve our Federal programs that support both State and local drug treatment prevention efforts.

Today, we are focusing on regional challenges and threats facing northern California. As we will hear, illegal drug production, use and trafficking pose special dangers and challenges to schools and communities and law enforcement and public officials in this area.

This region of California continues to be a primary manufacturing, distribution and consumption area for methamphetamine. But in the last several years, this area has experienced dramatic in-

creases in the number and scale of clandestine methamphetamine manufacturing labs. These labs are operated by multi-drug trafficking organizations we know that are based in Mexico, but which now infest many areas of California. These organizations tend to locate their labs and so-called super labs in close proximity to the State's precursor chemical supply and also closely located to the companies that produce this on the major interstate highways including California's Interstate 5 and Highway 99.

Large scale sophisticated methamphetamine labs are set up long in advance of use, are well concealed, heavily guarded, and can produce from 20 to 200 pounds of high purity product per cooking cycle. In response to this growing methamphetamine problem as well as continuing problems with a host of other illegal drugs, part of central California has been designated by the White House National Drug Control Policy as a High Intensity Drug Trafficking Area, commonly referred to as HIDTA. Under Federal law and either designation by Federal legislation, specific legislation, or under a general law, an area can request and become part of a High Intensity Drug Traffic Area, which makes it eligible for substantial Federal assistance and better coordination of antinarcotics efforts.

Our subcommittee is responsible for authorizing and overseeing the Office of National Drug Control Policy and the HIDTA Program. Today, we will learn more about the effectiveness of the neighboring HIDTA, which covers nine counties, including what progress the HIDTA has made in combating drugs in this area, and how it may help others in northern California even more.

I applaud the continuing dedication and professionalism of our witnesses today, and their willingness to share their ideas and needs with us. I can assure you that this subcommittee and your local representatives here today will do everything possible to assist you in ridding your communities of these deadly menaces, and in fact doing everything they can to protect your loved ones.

We all recognize that this drug crisis demands full utilization of available resources in close cooperation and a comprehensive regional approach. After all, that is what HIDTA's are designed to do, and it is our job and responsibility in Congress to monitor and ensure their success. If obstacles are identified, then we must move decisively to overcome them. This community and this region of California and this Nation cannot afford to wait or delay. The drug crisis demands promising approaches and decisive action, and the time to act is now.

I want to thank all of our witnesses for appearing before us today, particularly again I thank Mr. Ose for requesting this and for his tremendous service on our subcommittee, not only as a local and regional leader in this issue, but a national leader who I have counted on as a close ally as chair of this subcommittee.

So with those comments, I am pleased now to yield to the gentleman from California, our host here, Mr. Ose.

Mr. OSE. Thank you, Mr. Chairman. First let me express my appreciation to you for coming out here. I know that you have probably endless demands on your time, and for you to take the opportunity to come is something that we all appreciate here in the 3rd District. Your leadership, as you very briefly covered in your open-

ing remarks, is remarkable. You picked up where Danny Hastert had ended his service as chairman of this committee, and there has been no drop in the intensity or continuity. I just want to make sure that you understand that we all appreciate that.

I also want to make note of the hosts here. We have supervisor, Tom Stollar, who joined us. The Yolo County's Bill Oden has been very kind in letting us convene here. Mayor Woodland is also with us and Donald Soya is here. I appreciate your great hospitality. One of Tom's colleagues is in the back of the room. She is so quiet, but she gets so much done. That is Lanelle Pollack in the back. So thank you, all three of you. I also want to make mention of three other people, a couple of whom will be testifying. We have three sheriffs with us today. Clay Parker has come all the way down from Tehema County, in the back. We have Jim Denney from the Sutter County. And we have someone from Yolo County and Glenn County in the back also. Gentlemen, I appreciate you guys coming.

I also want to extend my appreciation to Mr. Souder for traveling all the way from Indiana. Mark is—you don't see Mark in the media or in the paper. He just gets stuff done. It is really a pleasure to work with you. And my good friends from the north and east, the gentlemen who plays the drum for us. That is Congressman Herger. You have some folks from Butte County here, and I appreciate your taking the time to come down also.

Mr. Chairman, the reason I am focused on this is I am not quite sure of a more pressing or compelling concern for which people run for Congress than to try and find some means in bringing a measure of relief to this issue. Each year, drugs kill 15,000 Americans. That is not our figures. Those are figures from Barry McCaffrey of the ONDCP, the Office of National Drug Control Policy. 15,000 Americans are really dying of drugs every year. In every community across America, there are drugs. We need to face up to it. They are destroying our youth and our communities. They are derailing academic achievement that we all so desperately want for your children. They are breaking up families and these drugs are contributing to crime.

In this region, the largest problem is methamphetamines. It reflects the excellent transportation corridors we have in the larger rural areas that are immediately available to some of the cities. Meth is particularly a dangerous drug with significant disastrous side effects. Violent crime, domestic and child abuse, and interestingly marked severe environmental damage are just a few of the impacts that come from the production of methamphetamine. Locally or at least in this area, we have seen the effect of methamphetamines here in the last few weeks. We had an instance here—I meant to mention Dale back there, the chief of police here. We had an instance here in Woodland with a tragic outcome traced largely to drugs. We have a situation up in Shasta County that I think Congressman Herger is more familiar with in terms of someone in a position of respect and trust that may be involved in distributing methamphetamines. I won't even cite the name involved.

Today, I look forward to hearing from our witnesses. I know you all took time out of a busy day to come down and visit with us. You all have had first hand experience dealing with the challenges of drugs amongst our youth and in society. I do appreciate it, because

I know how hard it is to come out of your normal regime to come over here and testify. This is an important hearing and I appreciate you taking the time. With that, I will give it back to the chairman.

Mr. MICA. I would like to yield to the gentleman from Indiana, Mr. Souder, at this time.

Mr. SOUDER. I thank the chairman for holding this hearing, one of the most valuable things we do in this committee and have been doing over the last number of years. And we were concerned about the lack of focus in Congress and oversight function on the anti-drug issue. Chairman Mica and I have been involved in this, both as staffers years ago on the Senate side, and then since the Republicans took over the House and he in particular pushed for oversight hearings and getting out into the field. We have been down in central Florida a number of times and in Dallas, TX after they had a number of the heroin overdose problems there. Down in Nogales and Phoenix, on the border there, and basically around the country as well as the East and the Midwest. It helps not to just hear and read in the paper in Washington. Congressman Ose and Congressman Herger are going to aggressively advocate the California interest. But to be here and hear firsthand in more detail. Furthermore, we are not being buzzed to go running to 18 million votes and hearings, so we can actually sit through and all be here to listen and appreciate that. Congressman Ose has not only been a leader in Washington in making sure that California is heard. He went with the chairman and myself and some others down to South America to look firsthand at where the cocaine and much of the heroin and the hardcore marijuana was coming in. But as he and I well know, in Indiana the interdiction efforts that have been so destroyed over the last few years, which is why we saw the surge in cocaine and heroin purity go up and the price go down—as we get that up, methamphetamines are our grassroots threat all over this country because it is something that can be done domestically. Wherever you have national forests or wherever you have a lot of open land, it is very easy to get the labs that produce and send to the rest of the country. So it is good to be here focusing on that.

We also know that wherever you have HIDTA, that while the focus is intense there, it spreads to the areas around that. In the Midwest, I have Chicago and Detroit on each side and the more pressure you put there, the more it squeezes out the counties around that don't necessarily have the manpower or the intensity that you would have right in the heart of the HIDTA, and we have to figure out how to not have it corrupt all the youth and the communities around it as well. So we are looking at hearing that impact here.

I also want to pay tribute to Congressman Herger, who thought I was a little too conservative when I came to Congress, so he tried to make me a little bit more moderate. But I really appreciate his conservative Republican leadership in Washington in making our conference. We work not only on the anti-drug issue, but a lot of other issues of very much concern to the West. He has been one of the leaders in our conference in trying to make us more aware and more sensitive to Western concerns, and we appreciate that very much.

Mr. MICA. Thank you. Now I would like to recognize a gentleman who is not a member of our subcommittee, but we are delighted to have him here today. He has been a leader on this issue in the Congress and a very good personal friend.

Mr. Herger, you are recognized.

Mr. HERGER. Chairman Mica, I want to join in thanking you for leaving your Florida district and coming out——

Mr. MICA. Where it is much warmer and sunnier.

Mr. HERGER. But coming here and having this hearing on this incredibly and crucially important issue to those of us who live here in northern California. Congressman Souder, I am not sure if I ever thought you were too conservative. Actually, I think you voted just right. But I thank you for your leadership, and again journeying out here from Indiana. We are all very grateful to you. And of course to my very good friend and colleague and my neighbor, Congressman Doug Ose, thank you. You are, of course, the one who talked to Chairman Mica and persuaded him to have this important hearing here which is so important to all of us here in northern California. Thank you very much.

I, as many of you may know, represent 10 rural counties in northern California directly north of here that border the Nevada and Oregon border basically from Marysville, Grass Valley north. And we would like to think that our beautiful, pristine communities in northern California did not have a problem with narcotics or with illegal drugs, and specifically with methamphetamine, which happens to be the drug of choice in our area. We wish that were not the case. The fact is that it is. And one of the most important reasons that it is so important to be having this hearing, this congressional hearing here, is to make people aware of just how serious this problem is even in our own beautiful, rural, pristine communities. This is not just a problem of the inner city. It is not just a problem of Los Angeles, New York, Chicago. This is a problem even here in northern California. So I want to thank each of you, particularly those who have come out from our counties here just to the north, to help not only this committee, which ultimately will give recommendations on hopefully expanding the HIDTA Program into our other areas here in northern California, but also to the Congress and also to our own communities of how serious this challenge is. So that we can all begin more working together unitedly to take this incredible problem—take the bull by the horns and begin to turn it around.

So with that, again I thank you, and I look forward to our witnesses and to the hearing.

Mr. MICA. Thank you for your opening statement and comments from all of our Members this morning. We are going to turn now to our first panel of witnesses. The first panel is Ms. Raelyn Ruppel. She is an El Dorado County resident. Dr. Jorge Ayala, superintendent of the Yolo County Office of Education. Ms. Susan Webber-Brown, coordinator of the Drug-Endangered Children Program. And we have—is it Lieutenant Larry Saunders?

Mr. SAUNDERS. Yes.

Mr. MICA. And he is the tactical commander of the Narcotics Gang Division. In a minute, I will yield to our members for introduction of these individuals.

Ladies and gentlemen, this is an investigations and oversight subcommittee of Congress. In that capacity and for that responsibility, we do swear in all of our witnesses. So if you would please stand at this point. Please stand and be sworn. Raise your right hands.

Do you solemnly swear that the testimony you are about to give before this subcommittee of Congress is the whole truth and nothing but the truth?

Witnesses answered in the affirmative.

I might also point out in addition to swearing our witnesses as an investigative panel, we do have a procedural method that we follow in conducting these hearings. We allow you approximately 5 minutes for your oral presentation. Upon request, we will by unanimous consent submit for the record, and it will be part of the record in this congressional hearing, additional lengthy statement and background material or data that you think is pertinent to the hearing today. So that is how we will proceed as we begin. We will also suspend questions until all of you have given your opening 5-minute verbal testimony to this subcommittee.

At this point, for the purpose of introduction, let me yield to my colleague, Mr. Ose. I think he is going to have some comments of introduction on the witnesses. Mr. Ose?

Mr. OSE. Thank you, Mr. Chairman. I am a little curious about something. I saw a group of young people come in here. Is there a high school civics class in the room? Welcome. I saw some sitting here along the wall. I am very pleased to have you before our subcommittee today, particularly the students. Hopefully, this will be a good experience to see how the government does operate. Thank you for coming.

First of all, I want to introduce Raelyn Ruppel, who is a former user of some of the material we are going to be talking about. I want to make sure she understands that we appreciate the challenge that you faced up to, and we welcome you today.

Dr. Ayala has been a good friend. He is the superintendent of Yolo County Office of Education. He and I have visited a couple of schools together and had the opportunity to interact with young people across this history. He is responsible and has oversight—it is interesting, everybody has got oversight here. We have oversight at the national level. Dr. Ayala has oversight in terms of the county school districts as well as the—you are involved with the Drug Court Program too, if I am correct.

Dr. AYALA. To some degree.

Mr. OSE. Ms. Webber-Brown has come down from Butte County, if I am correct.

Ms. WEBBER-BROWN. That is correct.

Mr. OSE. She is actually a constituent of Wally's. I am kind of stealing your thunder here, Wally. She has some very striking testimony, if you will, about the impact of drugs on young children in particular. You have a video you are going to share with us?

Ms. WEBBER-BROWN. Hopefully someone has it here.

Mr. OSE. OK. And the program that she runs, the Drug Endangered Children's Program, provides a comprehensive system to help children who are basically existing within a drug environment. She coordinates with law enforcement at both the State and local level,

interacting with District Attorneys and fire departments and social service agencies. So we certainly appreciate your coming.

My good friend Lieutenant Saunders from Sacramento. I cannot say enough—I mean, I want to make sure I explain this correctly. My interaction with the Sacramento County Sheriff's Department has been remarkable. These are the people who put their lives on the line every day. They go into situations to try and cure a problem that you and I would more than likely shrink from, and they do it day after day after day. Lieutenant Saunders and his people in the Narcotics Bureau are just doing a remarkable job, and I certainly appreciate it. I may have told you that Sheriff Blanas, who is on his way—I don't see him in the crowd. When he gets here I want to—if he is able to join us, I want to make sure I recognize him too. So, Larry, thank you.

Mr. SAUNDERS. Thank you.

Mr. OSE. With that, Mr. Chairman, I will give it back to you.

Mr. MICA. Thank you for the introductions. I would now like to recognize our first witness this morning, and that is Ms. Raelyn Ruppel, a resident of El Dorado County. Welcome.

STATEMENT OF RAELYN RUPPEL, EL DORADE COUNTY RESIDENT

Ms. RUPPEL. Hi. My name is Raelyn Ruppel, and I am 19 years old. I have been in recovery since February of——

Mr. MICA. Ms. Ruppel, you might pull that microphone just a little bit in your direction. Thank you so much.

Ms. RUPPEL. I have been in recovery since February 1997. I am 16 months clean and sober. I started drinking in eighth grade when I was 13 years old. Alcohol was easy to get, because I stole it either from my parents or from my friends' parents. I had older friends who would also buy it for me. I could also buy it from the liquor store off Madison Avenue in Orangevale. They never asked for ID from anyone.

I got into drugs in my junior year at Oakridge High School in El Dorado Hills. I smoked pot and did acid a few times. I could get drugs every day at any time. I bought it at school on a daily basis from people I knew who dealt. It was incredibly easy to buy drugs at Oakridge. Just look around the quad, find the guy, walk over and hand him money, and he slips you a bag.

Smoking weed became an everyday occurrence for me very quickly.

I started getting in trouble from school authorities and from my parents on a regular basis. I also started getting incredibly depressed, to the point of being suicidal. My parents started sending me to a therapist and they got my school counselor involved because at this point I was failing my junior year. I was diagnosed as being clinically depressed. I was prescribed Prozac and started taking that on top of all the drugs and alcohol I was already consuming.

I was put into a special program at school for emotionally disturbed kids, and this enabled me to get rid of a bunch of detentions and Saturday schools that I had accumulated. I was able to change my classes into easier ones and erase all of my failing grades. Being labeled as clinically depressed, I had an excuse for all of my

out-of-control behavior. I never related what was happening in my life to my drug use. Nobody knew about my drug use, and they never pushed the issue because we had an answer to the problem. I had clinical depression.

I kept doing drugs and I kept getting worse. One day, I tried to commit suicide. A friend called the cops and I was taken to Heritage Oaks Mental Hospital in Sacramento. There, I was diagnosed as being bipolar. My parents transferred me from there to a rehab in San Diego called Vista. It was there that I was introduced to Alcoholics Anonymous and Narcotics Anonymous. I stayed in that rehab for about 2½ months. I turned 17 there. I came home and went to AA and 4 months later I relapsed. I had known some people in AA who had gone to treatment at this place called the Messenger Clinic. I decided to go there because I knew I needed something more than just AA and NA. My parents paid for it, and I went for 2 years from September 1997 until I graduated in August 1999. I went 4 nights a week for 3 hours a night, Monday through Thursday.

The director of the clinic, Tom Hills, suggested that I might not be bipolar. He urged me and my parents to get me off all the medications I had been taking. I got off all the medications I was taking and I was fine. I was misdiagnosed as being bipolar. I did not have that disease at all. The bottom line is I am just a drug addict. I had been taking all sorts of medications that I never needed. I have seen this a lot in addicts and alcoholics being diagnosed with mental disorders that they do not have, all because society would rather have someone be bipolar or have depression than be addicted to crank or heroin or marijuana. It is more socially accepted.

I had been at the clinic for 6½ months when I relapsed again. I relapsed with a friend of mine that was also attending the clinic. This time I started doing crank. Crank was also easy to get. My friend had friends who dealt it. One phone call and about 30 minutes to an hour later and we would have a sack. I could get it whenever and as much as I wanted. It was so easy that one time my friend and I were calling our dealer from a pay phone in Roseville and this guy overheard us talking about drugs. He asked us if we were looking for coke, and I said, no, crank. He told me he knew a house where they sold it and he got in my car and took us there. I bought $100 worth of crank that night.

My friend and I ran away that night and went to Bakersfield. My friend used to live there and she had a few connections down there. Not knowing the town, I could still just as easily as if I were at home get drugs. Anything I wanted from pot to prescription pills to acid to heroin I could get. I stayed down there for a week and came back home. I got back into the clinic in recovery.

I relapsed one more time, 6½ months later. This time I started doing coke. A friend of mine knew some coke dealers and we dropped by their house and got hooked up. Coke was as easy to get as any of the other drugs I had ever done. Another example of the accessibility teenagers have to get alcohol is this. One night, my friend and I drove to a bar and my friend talked to some guy who was totally drunk and told him we would give him a couple of beers if he would come with us to 7–11 and buy us alcohol. The guy got in the car, we drove to 7–11 and he bought us a couple of

12 packs. We gave him two beers and drove him back to the bar and we were set for the night.

About a week later, I got back in recovery and have been clean and sober ever since. That was October 24, 1998. I was able to get treatment for my disease pretty easily. I had parents who were willing to pay for it. It is not that easy for a lot of people. I mean, there are quite a few treatment facilities in the Sacramento area, but only a handful that are really good. But they all cost a lot of money. If you do not have money or health insurance that will cover it, you have only one resource, AA and NA. Don't get me wrong, AA will work. But the thing is, I am a chronic relapser. I needed more of a strong foundation and intensive treatment than AA has to offer. AA is what I do to stay sober now, but the Messenger Clinic is what gave me my foundation.

Staying in recovery is not always an easy thing. I have had a pretty difficult life for the last 16 months. I had two roommates who went back to using while they were living with me, and I ended up having to kick them out. My mom was diagnosed with cancer a little over 2 years ago, and 2 months ago she passed away. I have stayed sober through her being very sick and her dying. Recovery has been the best thing that has ever happened to me and the greatest accomplishment. Many addicts and alcoholics do not make it. They die out there. I just happen to be one of the chosen ones. Thank you.

Mr. MICA. Thank you for your testimony, Ms. Ruppel. I would like to now turn to Dr. Jorge Ayala, who is superintendent of the Yolo County Office of Education. Welcome and you are recognized.

STATEMENT OF DR. JORGE AYALA, SUPERINTENDENT, YOLO COUNTY OFFICE OF EDUCATION

Mr. AYALA. Thank you, Mr. Chairman and members of the committee. Thank you for the opportunity to address this congressional field hearing on drug trafficking, interdiction efforts and efforts to reduce drug abuse among teenagers. On behalf of the Yolo County Office of Education and the Education System in Yolo County, I want to welcome you to our community and to thank you for your commitment to and interest in this subject of primary importance to all of us.

As a lifelong educator, teacher, vice principal and principal and now superintendent, I will focus my remarks on drug use among the young. With more than 20 years of experience in our public schools, I have seen firsthand the damaging effects of drugs and alcohol abuse among our young people.

Two factors have remained constant. Drug use among youth as a trend has not significantly diminished despite the good intentions and funding of any number of programs. If anything, the problem has become worse. And two, the deleterious impact on the lives of young people and their families has proven time and time again to be damaging, destructive and at times deadly. Studies on domestic violence, teen suicide and juvenile crime draw parallel conclusions. Ironically and sadly, our Nation mourns the death of one young first grader in a related situation in Michigan. One lost her life and the other is scarred for life.

I will summarize in three sentences what I am going to speak about. We need to have comprehensive and sustained programs that address the child's developmental stages, culture and gender. Programs that are monitored for continuity and connectivity that incorporate the family. Drug and alcohol abuse and use are most often symptoms of deeper problems rooted in a lack of self esteem, dysfunctional family environments, peer group influence, and inappropriate societal pressures, including the mass media. Because of the clear relationship between drug and alcohol abuse and other factors in a child's life, it is essential to select methods of prevention, intervention and treatment that are holistic in nature and provide a child with tools necessary to resist destructive impulses and behaviors. Part of the selection process should be to mesh prevention and treatment agencies and strategies with development stages, culture and gender of a child.

The DARE Program, which is Drug Abuse Resistance Education, is primarily in the elementary level. Beyond the elementary level, there is a patchwork of different programs that are available within Yolo County through the State.

But consider some of the evidence. Teen focus groups in Yolo County recently identified drug and alcohol abuse as the greatest problem facing local youth. A local Healthstart grant survey recently identified drug and alcohol programs for teens as a primary issue. The California Safe Schools Assessment recently published by the California Department of Education demonstrates the correlation between substance abuse and age.

But what about our adolescents? What happens after the primary grades? We have State of California requirements which are providing different programs to bring drug awareness to ninth grade primarily. Beyond that, we have a hodgepodge of different programs. We have the Friday Night Live Program, which has suffered from erratic program quality and is now almost non-existent. We have Every Fifteen Minutes by the California Highway Patrol which focuses primarily on teenage drinking and driving.

Youth in Conflict courses at Woodland High School are voluntary. Woodland Reaching Out and Karing, called WROK locally, is an excellent program, but it is small in nature, 130 students per year. It does bring in the family, which is important to any drug rehabilitation. The counselor has found that when kids suffer severe and direct penalties from their first offense and subsequent interventions, this can significantly have positive results reaching nearly a 90 percent success rate. However, the same counselor reports that increases in drug referrals have been paced by increases in the tolerance level of such behaviors. Amazingly, much of the tolerance resides in the child's home atmosphere, where parents often look the other way as the child indulges in alcohol and other drug use. This lack of support undermines programs in schools. Zero tolerance policies at school are often marred with inconsistencies and lack of alternatives for behavior changes.

We do have at the Yolo County Office of Education, in conjunction with the courts here in Yolo County, the Drug Court Program, in which students are directed to take specific courses in drug prevention. We have the Yolo Youth Academy, which is a partnership with the National Guard in which students participate in a variety

of different activities, not necessarily directed to drug prevention. We are able to connect with youth.

There is a multitude of remaining programs that exist, a patchwork in fashion. Tracking their success rate is difficult because there is no logical interface between them and school, and there appears to be virtually no outreach that is conducted in a systematic fashion for teens.

Minority youth are disproportionately the majority in alternative schools, handed harsher sentences and dealt different consequences for the same offenses, meaning the school and community systems are not reaching these youth.

There are community service programs. The Woodland Police Department has a diversion program which is in place today.

Recommendations. I have 14 listed in my document. I am not going to go over the 14, but I would like to highlight 3.

Bring into the home prevention strategies and emphasize the need for everyone in the family to avoid substance abuse. Rely on comprehensive approaches that recognize the interrelationship between substance abuse and other issues in the child's family. Effective methods would include a combination of information, skill development, community service, an emphasis on academic progress and achievement, mentoring, intervention and counseling.

There is a use of overlap of approaches. Universal, those that reach the general population. Selective, those that specifically target at-risk kids. Indicated, those that are designed for youth already engaged in substance abuse or indulging in risky behavior.

Obviously, any approach or initiative will take a sustainable commitment of time and dollars to be truly effective. Where we spend our money dictates our priorities. Fortunately, in this chaotic sea of modern life, there are many children who acquire the resiliency characteristics that allow them to wedge through these complexities into healthy, balanced and successful adulthood. What are these characteristics and how can we capitalize on the influence? We do have that knowledge. Creative, relevant and safe structures are needed to connect with all youth, especially the high risk children. Strategies must be flexible and have high and doable expectations. We must generate results from a small to large scale. We must apply some intensive services with differentiated approaches tailored to the child's strengths and needs.

We know what doesn't work. We have scientific knowledge for what can work. By working together, we can make real progress on an issue that should be foremost on our national agenda. If children are our greatest asset, then why is the funding not there to save them. I encourage you to act in the interest of our youth, in the interest of our families, and in the interest of our Nation.

Thank you.

Mr. MICA. Thank you for your testimony.

Now I would like to recognize Ms. Susan Webber-Brown, the coordinator for the Drug Endangered Children Program. Welcome and you are recognized.

STATEMENT OF MS. WEBBER-BROWN, COORDINATOR, DRUG-ENDANGERED CHILDREN PROGRAM

Ms. WEBBER-BROWN. Thank you. Thank you for inviting me to speak at this very important hearing. I have been a DA investigator for 17 years, for the past 9 years on a special assignment as a detective with the Butte Interagency Narcotics Task Force. During this time, I have participated in over 200 meth labs investigations and arrested hundreds of persons for meth related violations. This testimony is a summary of the detailed statement you have before you.

You have very knowledgeable experts here today who will each tell you of the methamphetamine plague in the North State. They will say it is an insidious drug that is taking over the country. They will state that over 80 percent of the crime rate involves methamphetamine, and there are thousands of users, distributors and manufacturers who go undetected or who repeat a criminal behavior upon release from jail, and they are right.

What I am here to talk to you about are the children, from newborn to teens, who have been lost in this country's drug epidemic. In particular, I am speaking of the children that are found by law enforcement at the scene of a drug house or meth lab who have never been recognized as the true victims of this drug war. For years, children have been overlooked as victims and simply discarded as an inconvenience to deal with. Generally when law enforcement were at the scene of a drug raid and children were discovered, they would simply be viewed as a hindrance by those officer attempting to deal with arresting and incarcerating their parents. It was and still is to a great degree easier for the officers to give the children to a neighbor, relative or friend.

When first assigned to the task force, I would see children living in homes with drugs and needles and syringes lying about, no food in the house, dog feces everywhere, and oftentimes numerous containers of hazardous chemicals used in the manufacturing of methamphetamine. All over the State, children who are virtually eating, sleeping and playing in a meth lab are left unattended with no concern for their medical or psychological needs. No risk assessment is done.

In 1993, the Butte Interagency Narcotics Task Force took a bold step forward in dealing with children from drug homes and labs. As a matter of protocol, we started a program which was later named the D.E.C. Program for Drug Endangered Children. This is a multi-agency team to ensure the safety and well-being of drug-endangered children. Simply, the narcotics unit has a CPS worker and part-time deputy district attorney assigned to the team.

In a county where the seizure of meth labs has increased from 23 labs in 1993 to 45 labs seized in 1999, per capita we rank each year in the top three counties statewide for lab seizures. Of the more than 601 children we have detained, 162 of those children were removed from meth labs. In November 1994, we began obtaining urine screens obtained on all children detained from drug homes; 14 children tested positive for methamphetamine during an 18-month time period; 8 of those kids, and the remaining 6 were from secondhand meth smoke.

From the start of the D.E.C. Program, our goals have been to rescue children from unsafe environments, improve the safety and health of drug-exposed children by providing appropriate services, hold parents accountable for their actions, improve the community response to these children, and establish a consistent response from law enforcement and Social Services. With the exception of Butte County, the concept of children as victims of the methamphetamine epidemic was not addressed until 1997, when the Office of Criminal Justice and Planning issued grants to four counties to implement the D.E.C. Program modeled after Butte. In May 1999, three additional counties were funded for a total of seven funded D.E.C. response teams. They are Butte, Los Angeles, Orange, Riverside, San Diego, San Bernadino and Shasta. And of particular note, these grant funds enable one team in each county to work D.E.C. cases, but those funds are not sufficient to adequately address the problem. And these grant funds terminate September 30, 2000, this year, with no anticipated continued funding.

The life of a drug-endangered child, of the 600 children's names and faces that I have seen, all are different. But each story is the same. One would think that 9 years later with hundreds of suspects arrested and countless doors kicked in and the writing of thousands of reports that I would grow callous. But upon entering the bad guy's house again and seeing those small round innocent eyes look up at me saying finally someone came to save me, I turn to marshmallow. I don't have to make up stories or use the same photographs or tell the worst of the worst. They are all bad. The yard is covered with garbage, old bicycles, toys and rusted car parts. Three or four dogs run into the house or aggressively approach. Inside, the house is dark with no electricity. The stench of rotten food, animal urine and feces and soiled diapers permeate the house. Chemical odors irritate my nose and eyes. We fumble down hallways and bedrooms, stepping on filthy clothes and debris. The children are startled when a flashlight shines their way. They are sleeping on soiled mattresses with no sheets or blankets. They slept in their clothes for the third day in a row, haven't had a bath in days and can't remember when they last ate. They rarely attend school due to lice infestations, and cockroaches have become their pets. The children draw pictures for me of mommy's methamphetamine pipe and show me bruises where mom's boyfriend hit them. The oldest child comforts the oldest sibling and is obviously trying to parent. None of the kids cry or for that matter show any emotion at all. They exhibit a classic attachment disorder. Methamphetamine packages and small clear baggies are lying on a corner table next to a methamphetamine pipe with residue and scales. The oldest girl asks if she can take a bath and wash her hair when she gets to a new home. She starts to cry when she asks if her brother and sisters can all be placed together. Because of their environment and drug exposure, these children have learning disabilities, are behind in school, are laughed at and ridiculed because of their appearances, and they are the school dropouts, drug and alcohol users, physical abusers, and most have lifelong problems. This is learned behavior. It will be repeated behavior and it will produce our future felons if we don't make a difference in their lives. The problems are society-based now, but often stem from influences

from the home. Children's struggles in schools often stem from problems in the home. Where parents spread their criminal conduct into the lives of their children, the parents conduct must be addressed as would any other crime. Whether it is use, sales or manufacturing, methamphetamine destroys children's lives, future and health. Children living with methamphetamine users and cooks cannot compete in school, are inhibited socially and learn criminal behavior. To improve their chances, intervention must occur. Cooperate efforts from law enforcement, CPS and prosecution protects the welfare of these children while ensuring public safety and benefit the community as a whole.

Thank you.

[The prepared statement of Ms. Webber-Brown follows:]

Testimony Submitted To

The Subcommittee on Criminal Justice, Drug Policy and Human Resources

of the

Government Reform Committee

United States Houses of Representatives

Hearing on

Responding to the Drug Crisis in Northern California

held on

March 6, 2000

By

Susan Webber-Brown

District Attorney Investigator, County of Butte

Assigned to the Butte Interagency Narcotics Task Force

Drug Endangered Children Program Coordinator

Thank you for inviting me to testify at this hearing on Responding to the Drug Crisis in Northern California. I have personally witnessed the epidemic use, sales, and manufacturing of methamphetamine spread throughout the north state. This insidious drug plagues all ages as it infiltrates our schools, attracts young adults and results in scores of parents who place their children in atrocious, filthy, and uninhabitable dwellings. I am here to share with you the environment in which these children live. We started the Drug Endangered Children's Program in Butte County to save the children from the dangers caused by exposure to methamphetamine use, sales, and manufacturing.

I am an investigator with the Butte County District Attorney's Office. I have been assigned to the Butte Interagency Narcotics Task Force for nine years. This is a Department of Justice (DOJ), Bureau of Narcotic Enforcement (BNE) Task Force with a State Special Agent Supervisor overseeing seven local officers. I have been second in command for five years, and coordinate a response team for children found in drug homes.

Conducting criminal investigations, dismantling methamphetamine laboratories and rescuing children are part of my duties. I also make presentations on drug issues to law enforcement, social services, foster parents, civic groups, and local high schools. Each day, investigation after investigation, search warrant after search warrant, I see helpless children with little hope for a future. Then, at the conclusion of twelve hour days, I return home to my own three children, two

of which are teens, and hear them tell of the drugs they can purchase in high school and how easy it is to buy crank.

ESCALATING METHAMPHETAMINE USE AND MANUFACTURING

Since 1991, methamphetamine use and production has skyrocketed. Once manufactured by outlaw motorcycle clubs who kept their recipe under lock and key, methamphetamine recipes are now at your fingertips on the Internet. Many of the 32 various chemical ingredients can be easily obtained from a local grocery store. Most often called "crank" on the street, methamphetamine is also known as "ice", "crystal", "speed", and "go fast". It is highly addictive, affects the central nervous system, and delivers prolonged euphoria. Compared to the price of cocaine, methamphetamine is cheap and easy to make.

As told to me by hundreds of teens and adults, "crank" is affordable, always available, elevates your mood, enhances energy, and reduces sexual inhibitions. Teens and college students take crank to stay up all night studying or partying. Women initially report the drug allows them to get more done at home, i.e., laundry, chores, house cleaning and is a great appetite suppressant.

Methamphetamine is a highly psycho-active drug that most often leads to addiction. It also causes depression, insomnia, paranoid aggressive behavior, and uncontrollable fits of rage. Methamphetamine users are often irritable, irrational, confused and have nervous periods called "tweaking". Chronic use, or large doses, produce schizophrenic like symptoms that can result in death or severe injury to themselves and others. Experience of domestic violence and child abuse are high among methamphetamine addicts, many whose partners are methamphetamine dependent as well.

Society's biggest threat is a methamphetamine addict manufacturing methamphetamine in a residential neighborhood. Methamphetamine abuse impairs a parent's judgment rendering the parent unable to provide the very basic care and supervision children need. And, drug sales have known hazards from potential gun fire. But methamphetamine manufacturing poses the greatest threat to the safety of children residing there.

The corrosive and carcinogenic chemicals used in methamphetamine production emit hazardous gases and fumes toxic enough to burn lungs, cause brain, spleen, and liver damage. These chemicals pose other dangers which include cancer, developmental problems, chemical burns, immune system deficiencies, heart problems, and respiratory problems. This danger is potentially worse for children because their immune system and physiological development is not as strong as an adult.

In home based laboratories where children reside, the chemicals are most often cooked or stored inside a structure where children eat, play and sleep. Gallons and gallons of chemical waste are dumped outside where children walk, ride their bikes or play. Manufacturers often use household dishes to cook their methamphetamine thereby exposing the children to contamination.

In rural Northern California, children found in those methamphetamine environments are increasing at an alarming rate. In Butte County alone, with a population of 200,000, methamphetamine laboratories seizures have increased from 23 in 1993 to 45 in 1999. Per capita, Butte County ranks third statewide for laboratory seizures.

Just south of Butte, in Yuba and Sutter Counties, the Narcotics Task Force seized 44 methamphetamine laboratories, over twice what was seized in 1993.

METHAMPHETAMINE KIDS ENDANGERED AND ABANDONED

The Drug Endangered Children Program (D.E.C.) was developed because of a serious problem with children being endangered by drugs or chemicals and left abandoned by law enforcement. Throughout the State of California, and possibly the country, narcotic officers within police departments, sheriff offices, and state agencies are encountering children at drug homes and methamphetamine laboratories almost daily and not turning the children over to child protective services (CPS). Those few officers who do call CPS report social workers will not respond to the location. In most instances, those who do respond are not educated in the serious dangers of drug and/or chemical exposure to the children. Often CPS places the children in a relative's home without medical evaluation for drug exposure. Most officers are giving the children to friends, neighbors, and relatives. We know children ingest methamphetamine from second hand smoke and are not being medically tested. In addition, they are not being chemically tested for any organ damage as a result of living in hazardous conditions from chemical exposure to the methamphetamine lab. These children are endangered, forgotten, and never assessed by child protective services.

When first assigned to the task force, I would see children living in homes with drugs and needles and syringes lying about, no food in the house, dog and human feces everywhere, and oftentimes numerous containers of hazardous chemicals used in the manufacture of methamphetamine.

Children throughout the state are found by narcotic agents living in filthy, deplorable conditions, with drugs (specifically methamphetamine) accessible to them and child protective services was not called. Hundreds of clandestine methamphetamine labs are found throughout the state in homes and on property where children reside, yet all of these children are turned over to the suspects' friends, neighbors, or relatives.

Narcotic agents had, and still have, tunnel vision, only seizing the drugs and arresting the parents. There is no state-wide protocol between narcotic officers and child protective services to take care of the children. Agents report, "Why call CPS, they never respond and when they do it's hours later".

Children turned over by officers to family, friends, or neighbors are often in the same situation. Upon the return of the parents who often bail out of jail, the children go back to the same hazardous conditions.

When entering a methamphetamine lab, agents certified in hazardous materials wear full protective clothing, rubber gloves, and respirators. Suspects are decontaminated and also put in protective clothing before transporting them to jail. However, children who are virtually eating, sleeping, and playing in a methamphetamine lab are left unattended with no concern for their medical or psychological needs. No risk assessment is done.

In 1993, I helped develop Butte County's "Drug Endangered Children" (D.E.C.) program. To our knowledge, it was the only program of its kind in the State of California, or possibly the country. This is a cooperative effort with the Butte Interagency Narcotics Task Force (BINTF), Children's Services Division, and the Butte County District Attorney's Office. Butte County's children are now properly cared for, but what about the rest of the state.

In recent years and on a rare occasion when officers did call CPS, social workers chose not to respond or were so untimely that officers were frustrated and now don't bother to call.

Butte County is small compared to most other counties in the state. Since 1993, the D.E.C. program has enabled us to detain 601 children from drug houses. One hundred sixty-two of those children were detained from methamphetamine labs.

In November 1994, we began obtaining urine toxicological screens on all children taken from drug homes. Fourteen children tested positive for methamphetamine during an 18 month time period. Eight of those from clandestine methamphetamine labs. Imagine how many children throughout the state have been contaminated with caustic chemicals and methamphetamine poisoning.

In late 1995, L.A. Times newspaper staff reporter Dan Weikel began writing a story after three children were left to burn to death by their mother when a methamphetamine lab exploded in Los Angeles. His story brought him to Butte County and our successful D.E.C. program. His front page story on Easter Sunday 1996, caused quite a storm in the political arena.

In September, 1995, Mitch Brown, who is now Assistant Chief of the Department of Justice, Division of Law Enforcement in Sacramento, California, researched and wrote a paper for the California Department of Justice entitled "Child Endangerment and the Environmental Health Hazards Caused by Clandestine Methamphetamine Laboratories." This publication led to changes in policy for the California Department of Justice with regard to the manner in which children, at the scene of clandestine laboratories, are treated.

DRUG ENDANGERED CHILDREN (DEC) RESPONSE TEAMS

The first Butte County DEC Response Team established in 1993 is a multi-agency, cooperative effort to ensure the safety and well-being of drug endangered children. The team is comprised of law enforcement, a social worker and part-time Deputy District Attorney. Our goals are:

1) Rescue children from unsafe environments,

2) Improve the safety and health of drug or chemically exposed children by providing appropriate services,
3) Hold parents accountable for their actions,
4) Improve the community response to these children, and
5) Establish a consistent response from law enforcement and social services.

With the exception of Butte County, the concept of children as victims of the methamphetamine epidemic was not addressed until 1997 when the Office of Criminal Justice and Planning issued grants to four counties to implement the DEC program modeled after Butte. In May, 1999, three additional counties were funded for a total of seven funded DEC Response Teams. They are Butte, Los Angeles, Orange, Riverside, San Diego, San Bernardino, and Shasta.

Note: These grant funds enable one team in each county to work DEC cases, but the funds are not sufficient to adequately address the problem. (These grant funds terminate on September 30, 2000 with no anticipated continued funding).

DEC RESPONSE TEAM PROCESS

1. Law enforcement members of the DEC Response Team – the Sheriff's Department, the Police Department, the state Bureau of Narcotics Enforcement and the Drug Enforcement agency – call the team leader when they encounter a child at a scene involving drugs, hazardous conditions, negative living conditions or the arrest of the child's parent. The team leader immediately pages the social worker assigned to the DEC Team, who responds immediately.

2. DEC Response Teams investigate two separate cases when a child is found in a lab, distribution or use site – the narcotics case and the child endangerment case. Children previously released to relatives without evaluation or assessment are now immediately taken into the care of Children's Protective Services (CPS) to assess the child's health and well-being and determine proper placement. The social worker and law enforcement officers assess, document and photograph the conditions of the house and children and interview the parents and children. The social worker detains children in all cases where drugs and/or chemicals are found accessible to children.

3. The social worker transports the child to the hospital for a medical assessment, which includes test for child abuse, lice, neglect, physical damage due to toxic chemicals and drug exposure. Butte County was the first of the seven California pilot sites to obtain a court order from the Superior Court requiring hospitals to take blood and urine samples of drug endangered children to test for drug exposure and other chemical damage. Hospital staff formulates guidelines for examining children who have been exposed to drugs and identify their long-term needs.

4. The social worker follows the DEC case for a minimum of 18 months post lab-seizure to ensure that necessary medical and therapeutic services are provided to the child. With

some variability based on the county's local child welfare practices, most children found in Level One cases have been typically placed with relatives or foster care families. In certain circumstances, offending parents may regain custody of their children while on tightly supervised parole or probation and while participating in drug treatment and therapeutic services for their children and to rehabilitate their roles as parents.

5. The District Attorney is responsible for prosecuting cases where children are endangered by exposure to labs or subjected to neglect and abuse as a result of illegal drug use, manufacturing or distribution. The commitment of the DA to prosecute child endangerment cases is an essential part of the DEC initiative. Child Endangerment laws have been changed in recent years to include stiffer penalties. "New laws reflect the growing realization of this problem and the need to respond to it with criminal charges," explains Butte County Deputy District Attorney Clare Keithley. "It is more than a drug violation it is criminal conduct against a child."

DRUG ENDANGERMENT MEANS TOUGHER SENTENCES

In the last few years, California's child endangerment laws have been made more stringent and are being applied by prosecutors to drug abuse, distribution and manufacturing cases. To apply child endangerment laws, prosecutors must prove that the environment was a potential harm to children subjected to the situation. No actual harm must occur for felony endangerment laws to apply.

Felony child endangerment carries a sentence of two to six years, to be determined by the severity of the case. For cases where children are found in a methamphetamine lab, the sentence is two years in state prison for each child present and must be served in consecutive sentences. For each child injured as a result of drug manufacturing, the sentence increases to five years in prison for each child. The death of a child in a methamphetamine lab is a second degree murder charge and carries a sentence of 15 years to life imprisonment.

These sentences are accompanied by narcotics sentences, which accumulate to deliver a heavy punishment for the endangerment of children. Child endangerment charges can apply for a range of crimes, from driving while intoxicated with a child in the car, to exposing a child to the toxic chemicals used in drug manufacturing. Misdemeanor child endangerment charges can be redirected to incarceration alternatives to better facilitate reunification and recovery.

IN THE LIFE OF A DRUG ENDANGERED CHILD

The 601 children's names and faces are different. But each case and story is the same. One would think that 9 years later, with hundreds of suspects arrested, countless doors kicked in, and the writing of thousands of reports, that I would grow callous. But upon entering the bad guy's house again and seeing those small round innocent eyes look up at me saying, "Finally someone came to save me," I turn to marshmallow.

I don't have to make up stories or use the same photographs or tell the worst of the worst. They're all bad.

The yard is covered in garbage, old bicycles, toys and rusted car parts. Three or four dogs run under the house or aggressively approach. Inside the house is dark with no electricity. The stench of rotten food, animal urine and feces, and soiled diapers permeate the house. Chemical odors irritate my nose and eyes. We fumble down hallways into bedrooms stepping on filthy clothing and debris.

The children are startled when a flash light shines their way. They are sleeping on soiled mattresses with no sheets or blankets. They slept in there clothes for the third day in a row, haven't had a bath in days and can't remember when they last ate. They rarely attend school due to lice infestations and cockroaches have become there pets.

The spoiled food stored in an ice chest in moldy, there's no running water and the methamphetamine laboratory is all over the kitchen.

The children draw pictures for me of mommy's methamphetamine pipe and show me bruises where mom's boyfriend hit them.

The oldest child comforts the younger siblings and is obviously trying to parent. None of the kids cry or for that matter show any emotion at all. They exhibit a classic attachment disorder.

The domestic violence is obvious with holes kicked in doors and walls. A loaded firearm is found next to the couch and another under the bed, both where children had access. Pornographic magazines are throughout the house and sex toys next to the bed.

Methamphetamine packaged in small clear baggies are lying on a corner table next to a methamphetamine pipe with residue and scales.

The oldest girl asks if she can take a bath and wash her hair when she gets to a new home. She starts to cry when she asks if her and her brothers and sisters can all be placed together.

Oh, I forgot to tell you, they already had one previous child detained a few years back, it's the 8th day of the month, and their Welfare money and food stamps are gone because they spent it on chemicals for their next cook.

Because of their environment and drug exposure, these children have learning disabilities, are behind in school, are laughed at and ridiculed because of their appearances. They are the school drop outs, drug and alcohol users, physical abusers and most have life long problems.

This is learned behavior, it will be repeated behavior and it will produce our future felons if we don't make a difference in their lives.

These children were lucky, we rescued them before they were injured, maimed or killed. The newspaper clippings I collected from all over the state, and even a few other states tell more horrific stories.

- 15 month old overdoses on methamphetamine. Rancho Cordova
- 5 month old tests positive for methamphetamine and succumbs to death with 12 rib fractures, a burned leg and scared feet by methamphetamine addict. Los Angeles, California
- 13 month old dies of heart trauma, broken spine and broken neck by methamphetamine addict. She was also raped and sodomized. California High Desert
- 25 month old Oregon toddler overdoses on methamphetamine.
- 2 month old dies with methamphetamine in system. San Jose, California
- 2 year old eats methamphetamine from a baby food jar. Twenty Nine Palms, California
- 14 month old drinks lye in water from parents methamphetamine laboratory. Hospitalized permanently with sever organ damage. Fairfield, California
- New baby dies from mother's breast milk laced with methamphetamine. Orange County
- 8 week old, 11 pound boy, dies from methamphetamine poisoning found inside baby bottle. Orange County
- 8 year old watches and hears mom die in methamphetamine laboratory fire. Oroville, California
- 6 month old overdoes, semi-comatose, seizuring, hospitalized. Drank methamphetamine from bottle. Oroville, California
- 4 year old tests positive for methamphetamine. Beaten and hair pulled out by mom's boyfriend. Chico, California
- 8 children exposed to methamphetamine laboratory in day care center. Southern California
- Mom's methamphetamine addicted boyfriend drowns 2 year old in bath tub. Sacramento, California

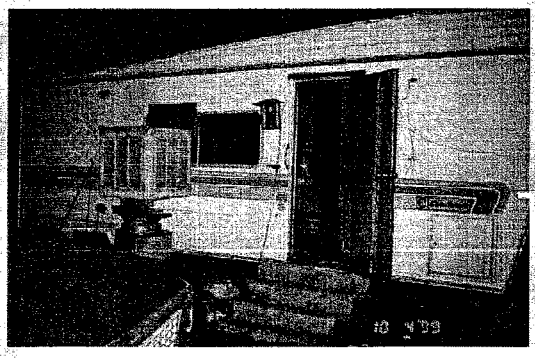
The problems our society face now often stem from influences from the home. Children's struggles in school, often stem from problems in the home. Where parents spread their criminal

conduct into the lives of their children, the parents' conduct must be addressed as would any other crime.

Whether it is use, sales, or manufacturing, methamphetamine destroys children's lives, future, and health. Children living with methamphetamine users and cooks, cannot compete in school, are inhabited socially, and learn criminal behavior. To improve their chances, intervention must occur.

Cooperative efforts of law enforcement, CPS, and prosecution protects the welfare of these children, while ensuring public safety and benefitting the community as a whole.

A Special Presentation



5th Wheel trailer with operational meth lab inside.
3 adults and 2yr old inside with 9mo Old outside.

A Special Presentation

Open containers of chemicals on counter in 5th wheel where child found.

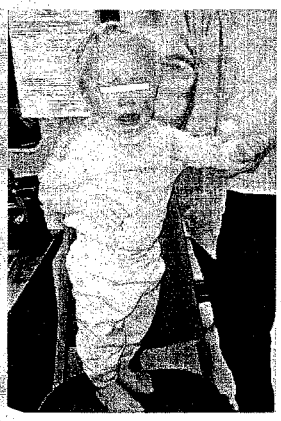
A Special Presentation

Alan Carnevale. Father of 9 mo. old and 2 year old. In meth lab with 2 yr. old.

A Special Presentation

Giovanni 2 yrs. Old. Inside meth lab.

Sara – 19 months old



- 1 of 10 children in home
- 7:00 a.m. search warrant
- Slept in dirty clothes
- Found in room next to 1/2 pound of crank on floor

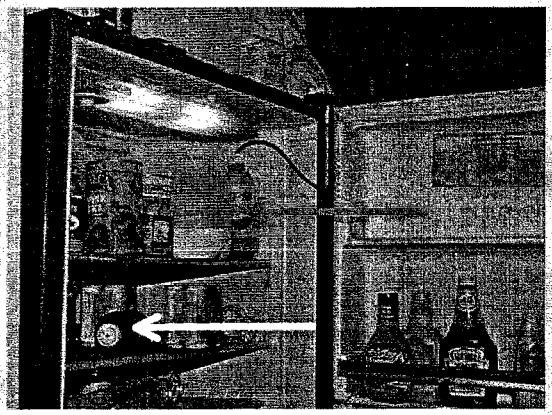
Sara's House

- No electricity / gas
- No running water
- Food rotten
- Wood stove with no fire wall next to propane tank

Bedroom where Sara was found

- Slept in bed with Mom
- No sheets
- Filthy mattress
- 1of 4 dirty diapers with exposed feces (E-coli)

Newborn, 3 year-old, and 8 year-old live with Mom in this home. Note chemicals in containers that a child would grab.



Chicken wrapped in foil tested positive for meth. Three containers of liquid with meth in solution.

Meet the Victims

Shaquile

At 6 months old taken to hospital by 18-year-old mother
- Seizuring
- Semi-comatose
- Tested positive for meth

Up Close and Personal

Shaquile

Search warrant served for Mom's house
- In addition to normal dope / pay-n-owe records, packaging and scales - search warrant also included all baby items, i.e., pacifiers, toys, blankets, and baby bottles
- 12 bottles seized - 1 tested positive for meth

- Mom got 3 years prison
- Mom admitted putting meth in bottle because he was crying - she thought he was going through withdrawals because she used meth while pregnant
- Life-flighted to UCD Medical Center
- Four days later released to foster home - later adopted

Shaquile with social worker after release from hospital

Meet the Victims

- 17 yr. Old – Assistant Lab Cooker Forced By Father
- Did Not Go To School
- Had no clothing or shoes fit to wear in public
- Had very few friends, was embarrassed
- Was ashamed of his lifestyle and parents

Up Close and Personal

Chemicals & drugs in every room of the house

Lab in bedroom with three children

Easy access for the children

4-year-old Janet is 5th child in family to be rescued by CPS - tested positive for meth at hospital

Mother's boyfriend beat Janet & pulled her hair out

anal, essentially
ches on $80 mil-

Please see NATOMAS, back page, A8

Agency warned on child

It received 2 calls before death of girl

By Cynthia Hubert and Yvonne Chiu
Bee Staff Writers

Child Protective Services received at least two calls of concern about little Rebecca Meza and her siblings on Friday, one day before the girl was rushed to the hospital with fatal injuries police say were inflicted by her mother's boyfriend.

Sacramento County social services agencies have had "extensive" involvement with the girl's mother, Traci Elizabeth Kaufman, who had been accused of neglecting her five children numerous times, authorities said. But CPS closed its case file on her in December, concluding that she had made progress and her children were not in imminent danger.

Rebecca Meza was nearly 3

Rebecca, who was to turn 3 next month, died shortly before noon Monday, two days after police said Joseph Carlos Engle, who had been living with Kaufman and her children, plunged her head under water until she lost consciousness. Police weren't notified until nearly an hour after the incident, when a neighbor found the girl lying face down on the floor of a bedroom, authorities said.

CPS officials said they followed proper protocol in the case and pointed to the mother's drug abuse and her involvement with Engle, a convicted felon who had been living with Kaufman and the children in a poorly kept apartment in Rancho Cordova.

"No program in this county or any other can protect children all of the time," said Don Nottoli, chairman of the county Board of Supervisors.

Nevertheless, county officials promised a full investigation.

For some, the girl's death was a tragic reminder of the murder of young Adrian Conway 15 months ago. That case sparked reforms that authorities reported last week were dramatically improving the way the county handles child neglect and abuse cases.

County authorities said the comparison was unfair and inaccurate.

"This wasn't a case in which a child fell through the cracks," Marlene George, interim chief of child

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▶ FROM PAGE ONE

Child: Social workers found home to be 'in order'

Continued from page A1

welfare services for CPS, said of the Meza girl's death. "This was not a case in which we did not do our job."

The death was the most recent incident in a horrifying pattern of child abuse and neglect in the home, police said.

Officers said the five children, ages 2 through 13, endured beatings and spent most of their time locked in a bedroom. One youngster slept in a closet and another in a bathtub.

Undersheriff Lou Blanas said the department will recommend today that the district attorney file murder charges against Kaufman, 33, and Engle, 34, for torturing and killing dark-eyed Rebecca. Engle and Kaufman will be arraigned today. He will face charges of molestation in the sexual abuse of Kaufman's older daughter, 11; Kaufman will faces charges of felony child endangerment.

"This is the worse case of child abuse we've ever seen," said Sgt. Jim Cooper, spokesman for the Sheriff's Department. He said investigators uncovered other atrocities they cannot make public for fear of jeopardizing the district attorney's case.

"The public would be appalled at what took place at that residence," he added.

Child welfare agencies have been in contact with Kaufman since 1991 and have received numerous reports of suspected neglect – but not abuse – of the children, said Robert Caulk, director of the county Department of Health and Human Services, which oversees CPS.

All of the reports were investigated, he said, and none was found to be serious enough to warrant court action.

Friends and relatives said Kaufman had been a good mother who struggled with drug addiction and who seemed drawn to violent men.

"She gets with abusive men and she disappears," said her mother, Phyllis, who has been estranged from her daughter for a year. "It's been a long history."

Friends said Traci Kaufman's life took a drastic turn for the worse when Engle, who has a long criminal record for grand theft, drugs and firearms possession, moved in about three years ago.

Within months, she changed from an attentive mom to an abusive and neglectful drug addict, said her close friend Dawn Morris, who has lived with Kaufman and her children in the past.

"She let him and the drugs take over," Morris said. "She was scared of him."

Neighbors reported that the children were seldom allowed out to play with others in the apartment complex, and that neither Kaufman nor her boyfriend talked much or left their home very often.

The last direct contact that CPS had with Traci Kaufman was in November. Social workers found her home to be "in order" with "an adequate food supply," Caulk said. He said Kaufman had been receiving help for her drug addiction.

In December, the department closed its file on Kaufman, concluding the children were not in immediate danger.

In February, following another call of concern about the household, CPS referred the matter to a neighborhood "child safety center" in Rancho Cordova, which contracts with CPS to monitor vulnerable families. The arrangement is one of the reforms touted by the county as a way to effectively monitor troubled households.

The center's caseworker tried to visit the family last week, but Kaufman refused to answer the door, Caulk said. That prompted the caseworker to telephone CPS.

She was told to keep trying.

It was at least the second call that CPS received that day about the family, according to an official with the Folsom Cordova Unified School District, where Kaufman's three oldest children attend classes.

Mark Rickabaugh, a spokesman for the district, said a school nurse visited the home Thursday and called CPS on Friday after one of the younger children failed to come to class as promised by her mother. Thursday's visit was the tenth time that a nurse had gone to the home since January, Rickabaugh said.

Rickabaugh said no school officials reported any signs of physical or sexual abuse. Several times, the children were sent home because of "health problems," he said. Another source said the youngsters had recurring head lice.

Students and staff members at the schools are "very disappointed and upset" about what has happened, he said.

"It's frustrating because you see problems and you try to work with these families and take steps," Rickabaugh said. "By the time we call CPS it's step 35 and they treat it like it's step one. We're feeling like it's the straw that broke the camel's back and they see it as the first straw."

CPS officials said they did everything they could to protect the children. Before taking steps to remove a child from a parent's custody, workers must substantiate abuse or neglect and determine the child is in immediate danger, they said.

"We must follow a legal standard," said George. "Our records indicate that the mother was very cooperative . . . and the risk at the time of case closure was moderate to low." Drug use by a parent is not in itself enough to warrant court action, she said.

County officials said the case, though tragic, should not be viewed as a failure of the system.

Just last week, CPS officials testified to county supervisors that they had made many reforms since last year's [illegible] death of Adrian Conway. CPS had [illegible] its file on the boy's mother two month[illegible] before he was killed and the case sparked community outrage.

"Many of the reforms that we have p[illegible] into place were used in this case," [illegible] said. For example, Kaufman's children were taken aside and questioned abo[illegible] whether they were being abused, [illegible] They denied it. Also, said Caulk, [illegible] mother underwent voluntary drug screening and was attending Narcotics Anonymous classes for awhile.

"This case is a horrible case," said Caulk. "It's mind-numbing and distressing. But I am not going to say that the system is a failure. We save a lot of children."

George said her agency maintains 2,00[illegible] active CPS files at any given time. [illegible] more than 80 percent of clients have [illegible] some involvement with drugs."

Officials declined to disclose the whereabouts of Kaufman's surviving children.

"This case hits the community very hard," said Blanas. "I just pray that the mother never gets custody of these kid[illegible] again. They deserve to be placed into a environment where they can be raised and nurtured for better things in life."

Volunteer: Wilson cites state program

Continued from page A1

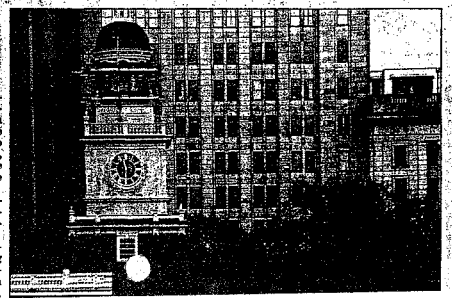
rently awards a college scholarship worth $4,725 for every year of service. It also picks up living costs of about $8,000. By challenging churches and charities to shoulder the living costs, the president said "we can double the number of full-time volunteers." There are now about 25,000 serving in AmeriCorps.

Speaking at the summit, Gov. Pete Wilson urged other states to launch programs similar to the California Mentor Initiative, aimed [illegible]ecruiting 250,000 mentors [illegible]oubled youth over the next four years.

Way, who heads a 10-member delegation of Sacramento-area residents to the summit, said Clinton told her workshop session that he would try to remove barriers to volunteerism at the national level, but that local efforts "were the most important work that can be done."

Self said she has learned Sacramento is far ahead of many communities in corporate and individual volunteer programs.

"Sacramento has some very remarkable collaborative planning and solution-building already under way," she said. "Rather than launch some kind of new effort,



Natomas: Some commercial projects have been allowed

Continued from page A1

tection than the rest of the city."

The part of Natomas within city limits is bounded on the east by the Natomas East Main Drainage Canal, on the north by Elk Horn Road, on the south by the Sacramento and American rivers, and on the west by portions of Interstate 80, Witter Road and Highway 99.

Much of it is very low-lying farmland practically ringed by high-flowing rivers, and there are fewer escape routes than other parts of the city, should a levee break occur. And that brings controversy.

"It is a mistake to build there," said Ron Stork of the Friends [illegible]e River environmental group. "It's the [illegible]st floodplain in the city."

Mendocino area hotbed for meth

POTTER VALLEY (AP) — A 13-year-old girl is found wandering through town in a drug-induced stupor.

Her friend, also reportedly drugged and raped, has been missing for nearly two weeks.

The events that led to the disappearance of 14-year-old Raina Bo Shirley are not likely to be forgotten in this small town northeast of Ukiah. They also have put a glaring spotlight on what some are calling Mendocino County's fastest growing drug problem: methamphetamine.

"Last year, we made 327 arrests for hard drugs — and 226 of them were for methamphetamine," said Doug Silva, a state Department of Justice special agent who supervises the Mendocino County Narcotics Task Force.

Drug investigators also broke up 26 clandestine methamphetamine labs in the county in 1995, seven more than the previous year. Six of the 26 labs were in the Potter Valley area, where Arnoldo Manzo, the man suspected of kidnapping Raina, allegedly gave the teen-age girls methamphetamine on the last day Raina was seen.

News that the drug methamphetamine — also known as "speed" and "crank" — has reached epidemic levels in cities and suburbs is not new.

But statistics show that the biggest increase in usage statewide is in small towns.

Reported emergency room admissions involving methamphetamine overdoses rose 134 percent in urban areas from 1991 through 1994. But the admissions jumped 160 percent in rural communities, according to the state Department of Alcohol and Drug Programs.

Researchers found that in 1992 the statewide rate of fetuses exposed to amphetamine-related drugs was 0.66 percent. But in rural Northern California the rate was 1.4 percent — more than twice as high as the statewide figure.

"As I travel the state and talk with prosecutors and law enforcement, the drug everyone cites as our biggest problem is methamphetamine," said state Attorney General Dan Lungren, whose Bureau of Narcotics Enforcement is the primary law enforcement agency responding to the methamphetamine epidemic.

From 1991 through 1994, more than 683,000 Californians were treated for methamphetamine overdoses, despite a statewide law enforcement crackdown on the drug.

Almost 75 percent of methamphetamine users are between 18 and 34 and nearly 80 percent are white, according to state health statistics.

4/96

Meth use climbs as feds, doctors struggle with treatment

SAN FRANCISCO (AP) — Methamphetamine deaths and hospital admissions are rising throughout the West as the drug known as "speed" or "ice" regains popularity, experts told a regional conference Monday.

More than 100,000 people now seek treatment annually for methamphetamine abuse in the United States, said Dr. Alan Lesher, head of the National Institute on Drug Abuse.

Methamphetamine-related deaths rose 22 percent in San Francisco between 1993 and 1994. In Los Angeles, 19 percent of all drug-abuse deaths in 1995 were due to meth — up from only 1 percent two years before.

"This is a problem that is not going away, and it is getting worse," Lesher said.

And the phenomenon, once largely confined to white males, is spreading to all groups, Lesher said.

"We're beginning to see increased use in women, minority populations that hadn't been using methamphetamine particularly and ... in men who have sex with men," he said.

The drug is popular with AIDS patients who may be "self-medicating" to counter the debilitating effects of the disease, said Michael Gorman, a research scientist with the Alcohol and Drug Abuse Institute at the University of Washington.

Gorman said that while methamphetamine appears to be moving East, it is still predominantly a Western drug-of-choice.

"We're seeing dramatic increases in the cases of people coming in for treatment," he said. "A 30-fold increase in the state of California over the last 12 or 13 years, a five-fold increase in Washington over the last three to four years."

One of the driving factors, Lesher said, was the increase in both the quality and production of speed in Mexican laboratories. The drug is easily smuggled across the border.

But much of the production still takes place in neighborhood drug labs, many run by motorcycle gangs.

Gordon noted that the drug is a "Pacific Rim" phenomenon — it has always been popular in Japan and the Philippines, and some of its ingredients are shipped to Mexico and the United States from Asia.

Thurs 5/8/97

▶ NEWSWATCH

METRO

■ Rancho Cordova

Baby overdoses; mother arrested

A 25-year-old Rancho Cordova woman has been arrested on suspicion of child endangerment after her 15-month-old daughter was rushed to Sutter Memorial Hospital for treatment of a methamphetamine overdose, authorities said.

Amanda Leigh Greene admitted to using drugs this week at her residence on the 3800 block of Mills Park Drive, said Sgt. Jim Cooper, spokesman for the Sacramento County Sheriff's Department.

"She's not sure, but more than likely she left it out and the daughter had access to it," Cooper said.

Meth abuse damages both body and mind

Methamphetamine is a chemically produced stimulant used legitimately by doctors for mood elevation, as a treatment for narcolepsy and attention deficit disorder, as well as an appetite suppressant.

But as most Butte County residents know, methamphetamine (also called meth, speed, crank or ice) is misused by drug abusers as a "feel good drug." It is smoked in a glass pipe, snorted in a powdered form or injected into the blood stream.

No matter how it is ingested, state Department of Justice toxicologist Bill Phillips said overuse of methamphetamine leads quickly to addiction. Additional side effects of overuse include nervousness, irritability and insomnia.

Phillips said psychological effects of meth are that users become combative and could suffer from paranoid hallucinations and a heightened optimism leading to an increase in risk-taking.

Users' bodies tend to suffer after prolonged use as well, Phillips said. The most obvious side effect is dilated pupils; and because of a lack of appetite and concern for proper nutrition, Phillips said, users teeth can fall out.

"These people are less likely to pay attention to normal cleanliness," he said.

"Tweakers" as they are referred to by many, including law enforcement officers, are individuals who go on meth binges for days at a time without sleeping.

According to the DOJ's Website at www.stopdrugs.org, tweakers are dangerous to the community because they can often suffer from hallucinations brought on by drug use.

Meth in its powdered form ranges in color from white to tan. It is usually sold in small paper packets or plastic bags. Syringes, razor blades, mirrors, straws, spoons, glass pipes and surgical tubing are all items associated with the use of meth.

Even though it is known as "poor man's cocaine," officials say meth is used by people in every socio-economic level, race, age and gender.

Cranking out concerns over a county 'epidemic'

Meth takes its place at top of area's crime problems

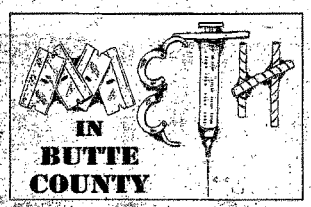
By RICK RANDOLPH
MERCURY-REGISTER STAFF WRITER

The first in a four-part series.

Last year, 45 methamphetamine manufacturing labs were busted in Butte County, culminating in 68 arrests for lab-related charges.

If those facts aren't enough, consider that one Butte County hospital estimated nearly 7 percent of the babies born there tested positive for meth. The danger compounds with the statistic that one in five labs are found when they explode or catch fire.

Those that don't think the problem affects them might not realize the Oroville Police Department gets calls nearly every week from people who find used syringes in their neighborhood. The Chico, Paradise and Gridley Police Departments receive similar calls.



The district attorney said the drug is "poisoning the soul of the community," while a local judge called it "insidious" and "horrible." The commander of the county narcotics task force called the problem an "epidemic."

Prosecutors, judges and law enforcement officers are calling it one of the most dangerous criminal problems facing the community as we enter the new century.

"And it's not like it's around the corner when we are going to solve this problem," said Keith Krampitz, Butte Interagency Narcotics Task Force commander. "The solution to this problem isn't tomorrow, it's not a month from now, it's not six months from now."

Krampitz estimates that BINTF is only finding one in 10 meth labs in

See METH on page 10A

In 1999, 45 methamphetamine labs were discovered in Butte County, seven more than in 1998. Below, is a breakdown of how many labs were discovered throughout Butte County in 1999.

METH

Continued from page 1A

Butte County. If his guess is right, that means more than 400 labs are busy endangering the lives of law enforcement personnel, children and neighbors, while contaminating the land with waste and the community with poison.

Most labs in Butte County, which are capable of producing multiple ounce quantities each month, are small in comparison to those in the Central Valley and Southern California, which can make 20 pounds at a whack.

Krampitz said the smaller labs are due to the unavailability of chemicals after new laws regulated their sale.

"A lot of individuals are getting involved in manufacture for their personal use; as well as for some sales on the side," he said. The larger labs to the south, which are generally run by Mexican nationals, are supplied by chemicals and equipment brought up from Mexico, Krampitz said. Locals, he said, have limited funding and less availability to chemicals.

"(Other counties) may have bigger labs, but I don't know about more," Krampitz said. "If you compare us per capita, we are right up there."

Compute those 45 labs that were discovered with a population of approximately 195,000 and that equals about one lab for every 5,000 residents. In 1998, in Riverside County, one of the state's largest meth producers, 288 labs were discovered — as in Butte County, that equals approximately one lab for every 5,000 residents. Nearby Shasta County, by comparison, averaged only one lab for every 11,000 people.

California Department of Justice Public Information Officer Mike Van Winkle said four years ago the department had four main drug targets — marijuana, cocaine, heroin and methamphetamine.

"Now about 75 percent of our resources are spent on meth," he said.

That is more than $56 million of a $75 million Bureau of Narcotics Enforcement budget. That doesn't include money spent by county or city drug enforcement efforts.

"With heroin and cocaine the production is in other countries and the product is smuggled in," Van Winkle said. In those cases narcotics agents were forced to investigate dealers. "With methamphetamine, there was a realization a couple of years ago that you can make a difference if you go after the labs."

But the financial costs pale in comparison to the toll taken on the children who live within the culture of meth abuse.

In the first 8 months of 1999, 1,530 labs were busted statewide. Living at 360 of those labs were 670 children. Van Winkle said it is not uncommon to find chemicals and lab materials sitting along side kid's toy boxes.

"The worst ones are those parents who are cooking up an ounce or two and don't even have any food in the house for the kids," Van Winkle said.

In those cases the children are taken into protective custody. Butte County District Attorney Mike Ramsey said in 1997, 105 children were taken from their homes to protect them. To get their children back the parents had to prove that they had gotten off meth and were responsible and could support their children.

"Only 15 made it home," Ramsey said. "The other 90 had parents that chose drugs over them. But at the least, here's 90 kids that now have an opportunity."

In 1999, 45 children were rescued from the local meth labs they lived in, according to Sue Webber-Brown, a BINTF detective and Drug Endangered Children project coordinator. Statewide, almost 30 percent of the labs discovered last year had children living in them, she said.

Some children, however, don't even get the chanee to start life clean.

Anne Dickman, a nurse at the Butte County Health Department, said that in 1993 every baby born in Butte County was tested for methamphetamine and 14 percent came back positive. She assumes the numbers are the same in 1999 although no such test has been done.

The problem, however, is not enough of the babies are tested. She said the tests are done at random. The hospital that reported that 7 percent of the babies born there tested positive for meth admitted that only 15 percent of mothers were even tested.

Dickman said babies born addicted to methamphetamine suffer from diarrhea, fevers sneezing and are very tense and don't tend to "snuggle in" like non-addicted babies.

"If you think of an addicted mother who is already dealing with her addiction, and a baby who instead of cuddling and snuggling in is stiff and tense, it creates a lot of problems when we look at bonding and attachment between a mother and a baby," Dickman said.

Joy Todd, who runs Options for Recovery, a program that places children from drug environments into foster homes, said currently she has about 70 cases.

She said although the research is limited, there is some evidence to show that children who are born addicted to the drug will have behavioral problems as they mature.

Touchstone, a county-funded program to help drug addicted mothers with infants and young children, runs two intake groups — one in Oroville and one in Chico. Every three months a new group of 15 to 20 drug addicted mothers join the program. At least twice as many are referred to the program.

"We always have more people than spots," one Touchstone worker noted.

Butte County Sheriff Scott Mackenzie agrees the problem is enormous, and although he isn't ready to pack up and move away, it does make him wonder about his own family's security.

"It bothers me that there are so many drugs in Butte County, especially methamphetamine, and with children — I have children — and they have an opportunity to be exposed to that."

KNOW THE SIGNS

Signs of a meth abuser or tweaker

- Hyperactive, rambling, paranoid, irritability
- Dangerous or violent
- Abnormal sleep patterns (months)
- Poor personal and dental hygiene
- Sores on skin
- Weight loss
- Takes items apart just to put them back together

Signs of a meth lab

- Abnormal flow of traffic in and out of the house
- Residents are up at all hours of the night
- Strong odors ranging from an irritating chemical smell to the stench of rotten eggs or dirty diapers
- Containers of all shapes and sizes: jars, glasses, plastic soda bottles or milk cartons
- Chemical containers for iodine, red phosphorus and packages from cold/sinus medications such as Sudafed, Actifed and Equate

Although meth manufacturers often project rural locations, labs have been found in backpacks, hotel rooms, in the trunks of cars and in well-to-do neighborhoods. If you see signs of a meth lab near your home, call the Butte Interagency Narcotics Task Force at 538-2261.

Full court pressure

Meth cases keep jailers, judges, prosecutors busy

By RICK RANDOLPH
MERCURY-REGISTER STAFF WRITER

Part two of four

When first asked about local methamphetamine manufacturing, Butte County District Attorney Mike Ramsey sports a confused look and replies, "We don't have a methamphetamine problem in Butte County."

But anyone who has seen police reports, court records or statewide statistics knows well Ramsey is joking. He is all too aware of the problem.

In fact, it was only three years ago Ramsey called Butte County the "methamphetamine capital of California."

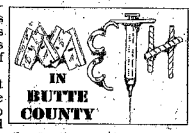
Although all the numbers have not been tabulated for 1999, Ramsey knows the county's 45 lab busts and 68 lab-related arrests will put Butte near the top of the list again.

"It certainly shows the depth of the problem and the energy of law enforcement trying to bust these labs," he said.

Ramsey remembers the root of the methamphetamine problem started in the early 1980s when the Sheriff's Department staffing was chopped in half due to the effects of Proposition 13.

It wasn't long, he said, until the word was out. As a deputy district attorney at the time, Ramsey recalls an ad in a biker magazine stating, "Come to what locals call beautiful Butte County. Do your own thing. You won't be hassled."

Since then, the core of meth manufacturers has shifted from large labs run by outlaw bikers, locals and Mexican Nationals to small "Beavis and Butthead" or "Butte Labs" that can be run out of a kitchen or even carried around in a backpack.



Last year, the DA's office prosecuted 330 cases for possession of meth and another 54 for manufacturing.

Now, Ramsey said, meth has become a criminal problem "second only to alcohol."

"When I say that, I'm looking at methamphetamine and the concentration of crimes associated with it," Ramsey said.

He said the meth culture gives birth to crimes like domestic violence, child abuse, child endangerment and burglary.

"It's been years since we've seen a straight-up burglar who is in it for the profit," Ramsey said. "Most burglars — 99 percent — are stealing to support their drug habit.

"Quite frankly if we can bring down the incidence of drug abuse we certainly can bring down the instances of other crimes."

Butte County Superior Court Judge Gerald Hermansen said between 70 and 80 percent of the cases on the criminal calendar are drug related. A good percentage of those are linked to methamphetamine.

"It has evolved over the years," Hermansen said. "Twenty years ago there wasn't much of a drug problem. Twenty or 25 years ago we saw cases of violence associated with alcohol. Now it's more violence associated with methamphetamine."

And Hermansen is seeing that apparently meth is a tough habit to break.

"It's sad to see the same people coming back," he said. "I am starting to see people I sentenced a few years back come through on new charges. It's a

See METH on page 10A

New law designed to foil dope cooks

[illegible]

METH

Continued from page 1A

little disheartening."

The usual felony manufacturing conviction nets five years in prison for the offender. Convictions for meth possession, either misdemeanor or felony, range from up to one year in county jail to three years in prison.

But what about the people who are arrested for making dope and then released on bail, free to cook again before they go to trial?

"We have to be careful to remember these people are innocent until proven guilty," Hermansen said. But once that proof has been established, the penalties are enhanced for committing the same crime while on bail, he added.

Take for example Berry Creek resident Steven Mark Robertson. He was arrested November 29 on suspicion of manufacturing methamphetamine at the same address he was arrested at in July for the same charges while he was out on bail awaiting trial. He was not allowed bail on the second arrest. Robertson pleaded no contest to the charges in January.

Ramsey said allowing those people back on the street in the first place is too dangerous.

"Letting them out (on their own recognizance) is something we constantly fight," he said. "There is an enormous sense of frustration with it when we are trying to fight this poison that is going out into the community."

He said he wishes the judges would look at the conduct of the individual instead of simply listening to their words when considering bail.

"Quite frankly, when they are standing in front of the judge, these people believe what they are saying about staying clean," Ramsey said. "But the drug has such an evil hold over them they can't fight it."

But even in jail methamphetamine has a strong influence. Butte County Jail Captain Dick Waugh said jail officers deal with the drug as soon as the inmates are admitted. He said during the detoxification process inmates act strange or violent.

"Then there is the health related issues, the sores, the teeth falling out, the things that go with putting a fairly toxic chemical into your body."

Then, Waugh said, jail officials have to deal with some of the bickering and fights of the meth culture where one user may think another is to blame for "ratting" him off or for not paying a dope bill.

"Let's face it, meth users have a high degree of paranoia," Waugh said.

Like Hermansen, the captain knows that recidivism is just part of the job. He said last year, of the more than 11,000 people who were actually booked into the jail, almost 7,000 were repeats.

Even though Ramsey seems a tough prosecutor whose only interest is getting the bad guy, he is sympathetic to meth addicts.

He said often times by sending people to jail, the system helps them hit rock bottom and allows them to build back up.

"There are certain folks who just have that monkey on their back. We all know them.

"We save who we can and we incarcerate those who we can't."

But even those who are incarcerated sometimes are saved as well.

Ramsey tells the story of a few years ago when he was at the Butte County Fair. He said a man walked up to him pushing a baby stroller.

"Mr. Ramsey," he said. "I really wanted to thank you."

He had been sent to prison on methamphetamine charges years earlier.

The man continued: "I spent the first two years in prison hating you," he said. "Until one day I looked in the mirror and saw who the real problem was."

The man told Ramsey he was off meth, had a good job and was raising his baby.

Ramsey smiled as he remembered the encounter.

"OK, this job is worth it."

Correction: In part I of the Meth in Butte County series published on Feb. 9, Anne Dickman was misquoted. The paragraph should have read: Anne Dickman, a nurse at the Butte County Health Department, said that in 1993 every baby born in Butte County was tested for drugs and 14 percent came back positive.

There be meth behind the madness

The 'hard truth' about life in dope culture

By RICK RANDOLPH
MERCURY-REGISTER STAFF WRITER

Part three of four

Bill Sposito understands how long forever is.

It is how long the word "crankster" will be tattooed across his back. It is also how long he said methamphetamine will scar his life.

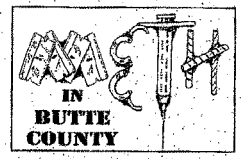
"I don't have a choice," he said. "If someone comes and puts a bottle under my nose and I smell (meth) or I see some tin foil and think about it, I am going to want to get high."

At 47, Sposito is sitting in Butte County Jail awaiting a Feb. 28 trial on charges of manufacturing meth and assault. He said he could face 25 to 30 years in prison if convicted.

He has six children who range in ages from 3 to 16 who he said he loves more than anything in the world — well, almost.

"I never thought I'd trade my kids for dope," Sposito said. But he often did. "When my daughter would get home, I'd make a little sandwich for her and write a note saying 'I love you' and she knew what time it was."

Then he said he would go in the other room, close the



door and get high or cook up some dope. He said he tried to keep them (children) in the back of the house to keep them safe while he was involved in the dangerous process of cooking meth, but his efforts were often ignored.

"You know how kids are when you tell them not to go in some room."

Most every cop with any tenure in the area knows who Sposito is. Mention his name and they give a knowing nod and say "Ah, the famous tattoo." He has a perforated line marked around his neck and the words, "cut on dotted line." But as famous as his tattoo is, Sposito's true infamy has come from his dealings in the dope world.

"To start out with, I've lost a 27-year fight with crank," Sposito wrote in a letter from jail. "And I mean FIGHT."

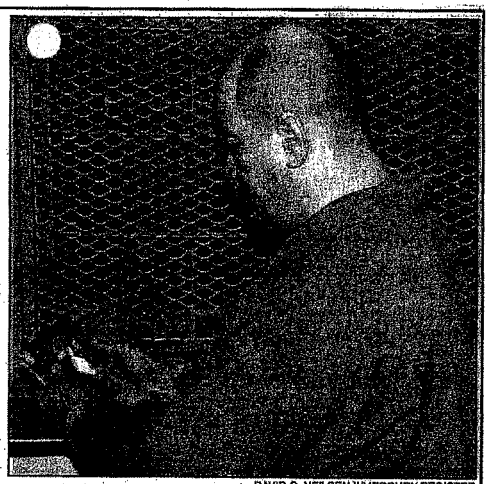
This is not Sposito's first stint in the clink. He said he was busted before for burglary — a crime committed to support his habit.

"Sure it was," he said. "You get more to make more, you make more to do more, you do more to get more."

That Sposito has worked as a meth cook, he does not deny. He admits to cooking up four to five pounds over the course of his life, some for sale and some for his personal use.

"It's so easy to do, it is like magic," he said of cooking dope.

For a period of time Sposito said he cooked in an orchard in Bangor where 60 cars a day would come and go bring-



DAVID C. NEILSEN II/MERCURY-REGISTER
Bill Sposito looks over photos of his family.

ing chemicals and picking up dope. He said he was never busted for that operation.

"There are no big labs any more. All I need is a coffee machine. I've even done it in a Snapple bottle."

Sposito thinks his addictions began when he was a little boy and his mother gave him her diet pills to help calm him down. He said he started using crank when he was about 15.

"It made me feel like a million bucks," he said. "I had conversations. I had something to say."

Over time, his addiction grew out of control to where he was committing crimes to get his fix.

With the help of church counseling and Narcotics Anonymous meetings, Sposito said he was able to get clean.

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METH

Continued from page 1A

He said he lived with his 4 and 11-year-old daughters and was happy without meth for two or three years. But then, he said, he let someone get high in his bathroom and that was the beginning of the end. Soon he was using and cooking again.

"I thought I could handle it," he said. "But I was wrong."

Ron LaFevers understands the struggle Sposito speaks of.

The 36-year-old used meth on and off for 14 years.

He's been clean for about 16 months now but it wasn't easy.

"(Using meth) becomes a way of life," LaFevers said. "It's hard to find new things to do and new people to hang out with."

He cut his ties with his old group of friends because all of them were users.

When he was using heavily LaFevers said he smoked crank daily. He would wake up and get high each morning.

"Well, if I got up," he remembered. "It's how you live. Some days I'd see the sun come up several times."

Now LaFevers spends his days working as a glass blower.

"There's a lot of enjoyable things about (meth)," he said. "I mean that's why people do it, but there's a lot of disadvantages, like your lack of priorities."

Now he is focused on those "priorities;" his job and children and he said the kids will hear about his struggle with the drug when they are old enough.

"I'll tell them the good and the bad about it and I'll tell them the reason why not to."

He said getting off the drug hasn't been easy, but he doesn't buy it when people say they can't break their habits.

"Anyone can quit; you just have to do it," he said "Everyone has free will but you got to choose for yourself."

Sposito said he would make the same choice if given one last opportunity, but then minutes later he admits it is too hard to kick.

In one breath he's telling how he wants to clean up, "I'm just hoping for one more chance at my life. I love being a dad. I love being a family man."

Just minutes later he'll lament that he would use crank again if he had the chance. "If I wasn't on probation or on parole, I'd get high," he said. "I can't stay clean for two days out there."

Now, he is more worried about whether he will ever get back out there. He claims the assault charge was self-defense and evidence for the manufacturing charge was obtained illegally.

"The thing is, the only one I am guilty of I am going to get off on."

Meth: in their own words

"I ain't going to lie to you, I love crank, I love making it, and I love doing it. I don't know which I love more."

Bill Sposito, Butte County Jail inmate, awaiting trial on manufacturing charges

"Meth is crazy. It turns Clark Kents into wannabe Supermans"

Mike Van Winkle, California Department of Justice Public Information Officer

"It affects every citizen at every level."

Jerry Roberson, Oroville Police Sergeant

"It's tentacles are out there as such where there are very few people who don't have a relative or a friend or a co worker who hasn't been affected."

Mike Ramsey, Butte County District Attorney

"In 1985 when I was a patrol officer on the street I started dealing with an increase in meth cases. I remember saying to myself and anyone who would listen that it was going to an epidemic problem."

Keith Krampitz, Butte Interagency Narcotics Task Force Commander

"If you would have told me three years ago that I would be sitting in a classroom with a judge, I would have asked you for some of the dope you were on."

Debie Miller, recovering methamphetamine addict

"It affects them at home. It affects them in bed. It affects them at school. They are not normal. They can't be."

Sue Webber-Brown, BINTF detective, on children of meth abusers

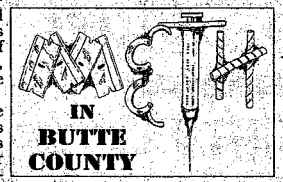
"(Meth addicts) are people that you would never know were drug addicts — students, housewives, mothers, fathers, business people — all ends of the spectrum."

Darrell Stevens, Butte County Drug Court Judge

A New Kind of Fix

RICK RANDOLPH
CURY-REGISTER STAFF WRITER

The numbers don't lie.
Butte County is home to e of the most serious ethamphetamine problems California. The number of es changed or destroyed by e drug are uncountable.
But amidst the arrests and nvictions, somewhere in tween the labs full of inno- nt chil- en and e jails l of dicts, me have en hope.
The age says cessity is e mother inven- n, so the county hit so hard the devastating drug has back harder with some of e state's premiere interven- n and rehab programs.



Courting addictions

Monday morning Judge urrell Stevens dismissed the arges and let another meth dict named George out on e street.
He's not worried though.
George is a recovering dict. After a year an a half the Drug Court program, he reached graduation day. Stevens showed the courtroom a booking photo of George, who at the time was a mess.

"What a difference in you," Stevens said to him holding the photo next to the new, well-dressed, drug-free man. "He has never had less than a perfect review."

George graduated a program Stevens said is "tougher to do than to serve time in jail."

But in the end, participants have their charges dropped and have a clean, healthy life to live.

Stevens said 80 percent of people who are arrested on drug charges and go through the normal court system will filter back through on similar charges. Only 11 percent of Drug Court grads are re-arrested he said. Just over half of those are on drug related charges.

During court Stevens chats with the participants as they come up to the stand. He asks about their kids by name, how they're doing — friendly chit chat. He compliments them when they are "working the program."

Part 4 of 4

Ron LaFevers, 36, a participant, said Steven's earnest concern for him is the key to the program.

"He really cares, which is rare for a judge," LaFevers said. "He even knows the names of my kids."

Since starting the program LaFevers has found himself clean and with a good job.

But Stevens isn't a pushover.

"I don't see myself as a compassionate judge," he said. "None of those people will tell you I am an easy judge."

Case in point a Hamilton City man who lied to Stevens about his progress.

"Honesty is a key to this program," the judge scolded. "If you're going to lie we don't have time for you. You can lie to yourself. You can live a lie, but you're not going to do that in Drug Court."

Stevens sent the man to jail for 72 hours to "think about what you want to do with your life."

"I'm a very conservative judge," he said. "I'm known as a tough judge. I also demand a great deal."

What he demands, in addition to clean and sober lives, is Drug Court participants get jobs, a sponsor and go to substance abuse meetings — sometimes as many as 90 meetings in 90 days. Drug Courters also are required to get high school diplomas or GEDs before they can graduate.

"Because they are not going to be able to accomplish anything without that."

To be entered in the program individuals must plead guilty to the charges against them. Stevens does not accept

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FIX

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the plea at that time and enters the individual into the Drug Court program. If they graduate the charges are dismissed, if not, they go to jail or prison.

Saving the kids

When Sue Webber-Brown goes into a drug lab and sees the cook's kids playing amongst the filth and dangerous chemicals, she gets angry. So angry in fact she wants to DEC the parents.

DEC, the Drug Endangered Children's program, which started in 1991, provides a means for law enforcement officials to help rescue kids found in labs.

Webber-Brown, a DEC project coordinator and Butte Interagency Narcotics Task Force detective, said before DEC there was no protocol for dealing with children discovered in lab raids. The kids were doled out to neighbors or relatives until the parents made bail.

"Often times those individuals were involved in the same drug activity," Webber-Brown said.

Eventually law enforcement, Children's Services and the District Attorney's office joined hands and created the DEC program.

Now when children are found at a lab scene, a specially trained Children's Services worker is called to take the kids and charges are filed through a the D.A.'s office against the parents for child endangerment. The kids are often put into foster care until if and when the parents clean up.

"The whole purpose is to break the cycle these kids grow up in," Webber-Brown said.

Otherwise, she said, not knowing any better, they would grow up to be just like their parents.

Clare Keithley, deputy district attorney assigned to DEC, said taking kids out of their parent's lives is not the end of the world.

"You have to adopt the unpopular view that disrupting the biological family is wrong," she said.

Webber-Brown said many of the children grow up in homes where drugs and chemicals are in their room or scattered among their toys. Their beds, if they have them, are usually nothing more than dirty mattresses tossed on the floor littered with trash and cigarette butts. Their basic medical and dental needs are usually unmet.

Webber-Brown has evidence photos of used meth syringes next to dolls and others of homes where human waste is splattered on the walls.

Often, she said, there is little or no food in the house and the kids are embarrassed when the school bus pulls up and the other kids see where they live.

And the children rarely contest the intervention.

"They don't cry. They don't beg to see their parents," she said. "They say, 'I love my mom but I don't want to live that way anymore."

Webber-Brown is passionate about "rescuing these kids." When she talks about the filth pits she has seen children living in, she gets teary-eyed. Nonetheless she knows the program is a success.

"We've rescued over 600 children ... 45 just in 1999," she said. "All of whom are in a better place and have a chance. So, yeah, it's working."

Since the Butte County program was developed other counties and states have developed DEC programs.

Currently the program is funded by grant money, and Webber-Brown is concerned because the money is set to run out in September.

"If the politicians came with us and saw what we see everyday there would not be a question of where the money should be."

Rising above the high

One day Debie Miller was hit by something more powerful than a line of the purest crank she ever snorted.

It was the realization that she was not only ruining her own life but also that of her 3-year-old daughter.

She'd been using for 15 years so the realization didn't come easily, even when Children's Services came and took her daughter.

"My first thought was 'oh, my God,'" Miller remembers. "My second thought was I have to get drunk, I have to do some dope."

But then one day it just hit her. She said she was in a car with a friend when they drove by a Narcotics Anonymous meeting.

"I said stop the car. I have to get out."

That first meeting led her to Touchstone, a countywide program, administered through Enloe Hospital in Chico, that works with drug and alcohol addicted mothers to teach them the necessary skills to become parents.

And if success stories could be sold, Touchstone would have a multi-million dollar tale to tell in Miller.

"Before, motherhood was burdensome," Miller said. "Now to get on the floor with my 3-year-old and act like a nut, I love it. I would have never done that before."

Some of the participants have had their children taken by Children's Services like Miller, others may have kids at home and want to clean up.

Miller went through the year-long program, attended the parenting classes, the substance abuse classes and life skills classes. Miller likened her Touchstone experience to being thrown into a raging river.

"Touchstone gave me swimming lessons," she said.

These days Miller is attending Alcohol and Drug Services classes at Butte College. She wants to be a counselor so she can help people in the same situation as she was.

Touchstone case manager Dede Brooks said what she sees most coming out of the program is hope.

"A hope that we can create a different culture or climate for society to understand drug addiction is medical problem," she said.

Mr. MICA. Thank you for your testimony. I would like to recognize our last witness on this panel, Lieutenant Larry Saunders, who is the tactical commander of the Narcotics and Gang Division.

Welcome, you are recognized, sir.

STATEMENT OF LARRY SAUNDERS, TACTICAL COMMANDER OF THE NARCOTICS AND GANG DIVISION

Mr. SAUNDERS. Thank you, Chairman. We at the Sacramento County Sheriff's Department are committed to do whatever is necessary to reduce the effects illicit drugs have on our communities. We see on a daily basis that manufacturing and trafficking in these substances increases crimes in our communities and pose a great risk to our youth.

I have personally and professionally witnessed the tragic effects of methamphetamine. As the tactical commander for our agency, a large percent of our squad and the hostage negotiator call-outs that we respond to involve the use of drugs, mostly methamphetamine. Many of the suspects involved in these crises are in fact under the influence of illicit drugs, mostly methamphetamine. Many times these call-outs involve children who are being subjected to violent behavior that the suspects display during these type of situations. Sometimes the children are used as hostages as these drug users try to escape capture. We have seen too many children seriously hurt and killed by people under the influence of illicit drugs.

It is only through prevention, education and aggressive, no-tolerance policies in our communities that we can be successful in our efforts.

The Sheriff's Department is happy to be the lead agency in a Central Valley HIDTA team. This team named SAINT, for the Sacramento Area Intelligence Narcotics Task Force, will concentrate their efforts on identifying methamphetamine and other drug traffickers and trafficking organizations. They will then pass along that intelligence in a partnership with other local investigative teams.

This past weekend, the SAINT HIDTA team did exactly that, resulting in the disruption of a major methamphetamine operation in Sacramento County. The results were the confiscation of 13 pounds of methamphetamine, $55,000 in cash, numerous weapons and the arrest of at least five suspects. We are encouraged by this operation and look forward to the HIDTA Program as a viable method to stem the transportation and distribution of illicit drugs into the Central Valley. An expansion of the HIDTA program further north would be an asset to the Central Valley if additional funding could be appropriated. I encourage all of you to explore this option.

Along with the HIDTA Program, the Sacramento County Sheriff's Department and the Board of Supervisors of Sacramento County has instituted three outstanding and effective programs in an effort to forge positive ties with our youth in several areas.

The first program is the School Resource Officers Program. These officers work on the high school campuses Monday through Friday in a non-traditional law enforcement method. They mentor students, form positive relations with staff and school children.

The second program is the Youth Services Officers that we have. They are assigned to the patrol districts and work in concert with

the School Resource Officers on matters such as truancy, child abuse, and other issues that contribute to the kids' failure to attend school.

Training for both these programs involves at least a 40-hour comprehensive course with emphasis on interacting with students.

Our third program that we have that is very effective is the State Schools Program. The Sacramento Sheriff's Department has enjoyed a longstanding relationship with the San Juan Unified School District to provide traditional law enforcement to all respective campuses in the San Juan District in grades K through 12. All programs emphasis a "no tolerance" policy involving drugs and alcohol on campus.

We look forward to this cooperative effort to make our communities a safer place in which to live. Thank you.

Mr. MICA. Thank you. We have a video I think that was going to be played now by Ms. Webber-Brown. Without objection, we will play that and also make a transcript of that a part of the record. So ordered.

Mr. OSE. Mr. Chairman, if I might interrupt here for a moment. There are a couple of distinguished visitors from——

Mr. MICA. Let me go ahead and play the tape first and then we will make the introductions.

Mr. OSE. OK. Sure.

Mr. MICA. Thank you.

[Video tape is played.]

Mr. MICA. Thank you. I would like to now recognize Mr. Herger for the purpose of an introduction.

Mr. HERGER. I would like to recognize several that are in the audience. One that will be on our next panel, our district attorney from Shasta County, Mr. McGregor Scott, who has been a leader on working in this area in Shasta County in the northern area. And also we have a Sheriff from Siskiyou County, which is up on the Oregon border, Sheriff Charlie Byrd in the far back. Charlie, if you would raise your hand up real high. Anyway, thank you both for being here. I am sure there are other constituents from our district. I am sorry, I am not recognizing you, but I want to thank all of you for being here at this very important hearing. Thank you, Mr. Chairman.

Mr. MICA. Thank you. I'd like to begin our first round of questions. I might say again for the witnesses, this is—maybe you have seen how we operate on C–Span in a congressional Hearing. But the purpose of this hearing, again, is to come out into this community and this area of our country and try to gain from you some insight as to the programs that we have at the Federal effort, our efforts, and how effective they are and how they can be improved. So that is the purpose of the hearing. Then take this back and try as an oversight and investigations subcommittee of Congress to see that those positive changes are made.

With that in mind, first of all Congress is now spending somewhere in the neighborhood of $1 billion on a media education program. Ms. Ruppel, have you seen any of those ads that we have on television or radio or newspaper?

Ms. RUPPEL. For the methamphetamine abuse?

Mr. MICA. Well, any anti-drug abuse?

Ms. RUPPEL. Yes, I have.

Mr. MICA. You have. What is your opinion of them? Be honest and candid. This is important to us.

Ms. RUPPEL. They are striking, but I don't think that people——

Mr. MICA. Would they make any difference?

Ms. RUPPEL. Well, the people that are using drugs, I don't think that you can scare them out of it. You know? So I don't know if they are necessarily making a difference to people who are already using methamphetamines.

Mr. MICA. You testified that you—and I think your words were that there were a handful of good programs, treatment programs?

Ms. RUPPEL. There are a handful of good treatment programs.

Mr. MICA. How would you determine what is—one of the things is that we have basically doubled the amount of money in treatment in the last 6 or 7 years. We are spending more than $3.2 billion on treatment programs just from the Federal level, and we are not certain what works and what doesn't. In your estimation, what works and what doesn't? What are the good programs that you have seen?

Ms. RUPPEL. There are, I believe, in-patient programs, 28-day to 3-month programs around the area that seem to be helping people out.

Mr. MICA. Did you experience private and public programs or just public operated? Both?

Mr. MICA. AA and NA are public, I believe. The outpatient place I went to is privately owned, but it was a very well run outpatient program.

Mr. MICA. Which is the most effective for you?

Ms. RUPPEL. I needed both. I needed both.

Mr. MICA. And how would you describe any of the programs that aren't effective?

Ms. RUPPEL. I was living in a halfway house kind of transitional living called the Madison House. It was for people who were in recovery. A lot of parolees lived there. And this place didn't have any rules. It didn't have any rules. It didn't have the funding that it needed to have in place so that drugs were coming in and out of there on a daily basis. It was supposed to be the place where I was supposed to live in a safe environment, and it wasn't. You know, there are a couple of different transitional living places like that in the Sacramento area.

Mr. MICA. Thank you. Dr. Ayala, you mentioned the two 6-year-olds, one a victim, that we read so much about last week. From the information I have received, that 6-year-old that found the gun came from a split home. The father, I think, was in jail. And the living conditions were appalling. It was also, I guess, the site of a crack house. We just saw a very vivid portrayal of a 4-year-old being scalded to death through the violence of a methamphetamine situation. And you testified that the family—we have to have comprehensive programs for the family. I know you are a public educator, but how in heaven's name do we turn this thing around where these young people—this witness has testified that there were 600 children you dealt with. In what geographic area is that?

Ms. WEBBER-BROWN. That is just in Butte County. That is just by seven agents that are assigned to the task force. It doesn't even encompass the entire county.

Mr. MICA. With those figures for one area, and we see conditions that these children come out of, how in heaven's name does a local school district or State government or Federal Government deal with the deterioration of family to that degree?

Mr. AYALA. It is a very complex question, and one that I don't have one answer to. But I do strongly feel the family needs to be included in any type of drug prevention rehabilitation program. As Ms. Ruppel said earlier, her family was involved. I think it is important that when we do create programs that a unit within those programs is incorporated dealing with family and educating family, not only on drug abuse but also how to understand and how to communicate with their children. You mentioned earlier the TV ads or the media ads. I think they address adults more than they address children. Children look at them and see that the adult is not reacting to the media message that is there and pretty much ignores it. I think what we need to have is a community-based program that reaches out to the parents. It is only a beginning with the DARE program in the elementary schools. But the stressful situations for children are beyond the elementary into adolescents when they are trying things out and experimenting. The support system kind of fades in the transition from elementary to middle school. And you can see the trend increasing in drug use as they go up the grades. I think we should not drop the ball. I think we need to have programs that do address children at every level. When I say comprehensive, I don't mean just drug-oriented programs. I also mean community-based programs where activities that are diversions to drug use are created. There is a connectivity with the community. They could be teen centers. They could be activities that are provided by the community with an emphasis on having the family and the child communicate.

Mr. MICA. As a superintendent with education responsibilities, I think you are aware that we have tried to turn this situation around at the Federal level, where we have mandated and regulated so much that very little money actually got to the classrooms and the student and the teacher. We do have problems, I think, with the new majority in mandating additional programs. If we gave funds, additional funds, which is probably the best thing we can do to States; we are trying to get away from providing a lot of strings attached. What assurance do we have that this money will ever reach the local level for these programs that you talk about to avoid the patchwork approach?

Mr. AYALA. I think there needs to be an agreement to how the program is to be assessed between the local entity and the government. And there needs to be some dialog about what the community consists of and the issues within the community. I think that needs to be tailored to the community versus a one-program-fits-all that this government wants to provide. Accountability is a key factor. Once the agreement is made, then there needs to be a measurement. What is the results? What is the impact on the children? What is the impact within the home and in the community?

Mr. MICA. Ms. Webber-Brown and Lieutenant Saunders, it appears that this region has a serious meth epidemic. From what you have described, we are looking at a very serious situation here, is that correct?

Mr. SAUNDERS. That is correct.

Ms. WEBBER-BROWN. Yes, that is correct.

Mr. MICA. And I am not sure of the geographic area of the current HIDTA. I know Mr. Herger and Mr. Ose have talked about expanding that into this area. What do we have, about nine counties currently in the HIDTA?

Mr. OSE. Mr. Chairman, there are eight or nine counties, the northern most of which is Sacramental County. There are no counties north of Sacramento that are presently included in the Central Valley area.

Mr. MICA. Both of you would support expansion of the HIDTA to include the areas to the north?

Ms. WEBBER-BROWN. Yes.

Mr. MICA. What type of money does the current HIDTA get? Lieutenant Saunders, are you aware?

Mr. SAUNDERS. I believe it is between $1.2 and $1.6 million. And I feel that to increase the counties north, which I definitely support, I think would take more appropriations than we currently have.

Mr. MICA. I heard someone, and I am not sure—I was trying to look through my notes—80 percent of the crime is meth-related. Was that you, Ms. Webber-Brown?

Ms. WEBBER-BROWN. Yes, that is correct.

Mr. MICA. Is that 80 percent of the crime—where, in this region or country or what?

Ms. WEBBER-BROWN. In Butte County.

Mr. MICA. In one county?

Ms. WEBBER-BROWN. In Butte County. As well 90 percent of the referrals that come into Children's Services Division in reference to children with general neglect issues are drug-related, specifically methamphetamines related.

Mr. MICA. That is an astounding figure.

Ms. WEBBER-BROWN. It is astounding.

Mr. MICA. Well, I have no further questions at this time. Mr. Ose, you are recognized.

Mr. OSE. Thank you, Mr. Chairman. Raelyn, I want to come back to your testimony. I have two specific questions that I need to ask from you. As a parent—if we look around this room, there are a lot of parents here. How do we help our kids when they are moving from elementary to middle school and from middle to high school and they are asked, "Do you want a joint" or "do you want a hit" or "do you need blow?" How do we help them?

Ms. RUPPEL. I think my parents did the best that they could. But I think more attention needs to be paid toward kids in that area. Kids are either going to turn to drugs or they are not. I am not exactly sure how—I think more involvement in your child's life. More programs that you bring your kids to. I am not real sure.

Mr. OSE. The other issue I wanted to talk to you about was the—Judge Mica mentioned it. The programs that are successful, what

differentiates those, in your experience, that are successful from those that aren't?

Ms. RUPPEL. It could be the people that run them. I think that the outpatient clinic I was in was run very well. The transition living place I was involved in wasn't run very well at all. It is mostly who is running it and how they are running a program.

Mr. OSE. Dr. Ayala, I know that you are going to submit for the record the 13 recommendations that you mentioned. You talked about an increased tolerance on everybody's part of inappropriate behavior. It is not just the public, but people accepting giving a kid a drink or what have you. Could you expand on that a little bit as it relates to your experience?

Mr. AYALA. In my experience with high school and the "continuation"—alternative—high schools, there is a degree of acceptance of behavior. "That is the way it is. We can't help it. There is nothing we can do. It is a family situation, not a school situation." Those types of thinking or those dimensions of thinking really create or increase the problem. And when we talk about zero tolerance here, one dimension is zero tolerance and the other dimension is turn the other way. When you have zero tolerance, there is also a skeptical belief that there is nothing to support it. There are no teeth in what happens with that child once that child is caught. And as one of the counselors mentioned in my report says, if we can make sure that that child is thrown the book at and the parent along with it, 90 percent of the time you will have a chance of success. Now turning the other way happens at home as well. When a child comes home stoned or a child comes home under the influence—stop it or don't do it anymore will not work. There is a lack of communication happening at the home. The same as at school. There is a lack of communication if the message is out there for zero tolerance and stop it, and there is nothing there to support or there is nothing there to connect with that student. I think what was said earlier kind of exemplifies it. It is who is on the other end providing the help that needs to make that connection and needs to understand the child and needs to understand the circumstances and provide concrete measurable types of programs or assistance that will bring that child in through incremental steps out of the drugs and into something more productive.

Mr. OSE. When you have a family where you have a child who is using drugs of this sort and the child comes to school, do you have any statistical information about the impact in a classroom of having a child who is under the influence actually in the classroom, whether it be added costs or added time requirements? I am going to ask Ms. Brown the next question, which is if it is manifesting itself in the schools, her testimony about needing some degree of intervention to be much more readily available—I am going to segue from your answer to that question of hers. I tell you why I ask that question, if I may. It is that I have sat in on some of these truancy hearings where the child has a pattern of truancy and the law now exists where the parent can be held accountable for that child not going to school and actually prosecuted, if you will. And I am not trying to open the door or lead you in any particular way, but I wonder whether or not that is a fact that offers some measure of relief.

Mr. AYALA. If a parent is held accountable for the child's behavior, as they should, then if there is a program to sustain that assistance by the parent and by the school system, then I think it is money well spent. Too often, though, there is only a program that is very limited. It addresses the issue at the moment and it looks like it has been solved. But if we take a look at how long this took for that moment to occur and how long it takes for us to solve that problem, there is quite a discrepancy between both moments. I think there needs to be sustainability, and through that there needs to be a connection with the child and the child's development.

Mr. OSE. Ms. Brown, what about an intervention? When you talk about 601 kids and the 8 that tested positive versus the 6 that don't.

Ms. WEBBER-BROWN. Actually, they all tested positive. It is just that eight came from meth labs and the others came from the secondhand meth smoke or meth environment. And I add that scores of kids have tested positive since that time from various scenarios. With methamphetamine residue on coffee tables and nightstands, with babies picking up meth pipes and putting them in their mouths. The intervention part of that for me is a lot different, coming from a different perspective. In conducting the criminal investigations, the majority of the time are because of the parents who are meth users and abusers. And we are taking these children out of the home as victims. With the program that we have currently, we are able to handle those children that we are currently detaining within our task force, but not county-wide. And that intervention is whereas before parents would be arrested for the drugs, they are now being arrested for child endangerment on every single case where we can prove and we are able to collect enough evidence of that. And that is where in my opinion as a law enforcement officer that parents need to be held accountable. So instead of just arresting them for the narcotics violations or the stolen car they have in their backyard or the illegal weapons they have, is to charge them with felony child endangerment. Detain those children and place them appropriately, hopefully with a relative. In Butte County, about 50 percent of the children are placed with relatives and about 50 percent of them are in foster homes. And then those children remain out of the house for at least a year. And during that time period, it enables Children's Services Division and Probation to work together to try to reunify. Many times that doesn't happen, but the goal is to reunify. And that is that parents have to drug test clean once a week. They have to go to parenting classes. They have to go to Narcotics Anonymous. They have to go to inpatient counseling, and they have to follow all the rules of the probation status, which works together with Children's Services. So the hope is that we return these children to drug-free families. And if not, then they are in a better place.

Mr. OSE. Butte County operates clearly under State law as it relates to family reunification.

Ms. WEBBER-BROWN. Correct.

Mr. OSE. Are there things we could do to improve that law? Obviously, I am a Federal officer, so to speak. But suggestions that you

might make that I could carry to some of my friends who serve in the State legislature?

Ms. WEBBER-BROWN. Actually, I think the new existing laws that were just placed with the fast tracking if there is ongoing criminal behavior, you know lengthy criminal behavior and they have had prior children detained if the children are under certain years of age. I don't really think, to me, that part of the program is working well. The biggest obstacle is having enough foster homes to place these children in. And then the other one is in most of the State of California, as well as across the United States, because I have been to at least five others doing training on drug-endangered children, is you don't have a good working relationship between law enforcement and Children Services Division. And that is primarily because law enforcement obviously have a completely different background than Children's Services. There has been a lack of response on Children's Services part. And because law enforcement is so strapped for financial dollars to pay overtime and so forth and just not enough dollars for law enforcement, you now have law enforcement on the scene of a meth lab or a drug home at 3 a.m., with three officers waiting 2 or 3 hours for a CPS worker to respond. And that was the whole purpose of assigning somebody to our team. They paged out when we paged out.

Mr. OSE. Mr. Chairman, you have been very generous with your time. I want to make sure and compliment Lieutenant Saunders for the great work that the Sacramento County Sheriff's Department on this recent meth bust, and I want just a short yes or no answer. I want to make sure I understand. The Sacramento County Sheriff's Department supports an expansion of the HIDTA north if sufficient resources can be found to fund it properly?

Mr. SAUNDERS. Yes, that is correct.

Mr. OSE. Thank you, Mr. Chairman.

Mr. MICA. I recognize the gentleman from Indiana, Mr. Souder.

Mr. SOUDER. I have a series of questions as well. Lieutenant Saunders, could you tell me are most of the labs you deal with, meth labs, small labs in the homes like were referred to or large labs?

Mr. SAUNDERS. In Sacramento County at least, most of our labs—we did over 30 labs this past calendar year—they are of the smaller variety. Occasionally, we get to the mid-level lab. I don't think we find all our labs, though. I am sure there are several large labs out there. This last year we just didn't find any. But we had over 30 labs and most of them were small.

Mr. SOUDER. Is a small lab basically self consumption and small income? What constitutes where you would cross over?

Mr. SAUNDERS. No. When I am talking about small labs, I am talking about one that in one cook they can make 1 to 2 pounds of methamphetamine. So it is being distributed at that level.

Mr. SOUDER. I don't have a concept. Does that mean it is regional within a section of Sacramento? Can that go beyond? Another question is how much is consumed within your HIDTA and how much is exported?

Mr. SAUNDERS. Those smaller labs are being consumed on a regional basis. This particular case I mentioned earlier was not involving a lab. That was involving a trafficking organization prob-

ably from Mexico. And we do have a substantial problem in that area in addition to our lab problem.

Mr. SOUDER. Could you explain that once? When you say trafficking, are they trafficking in—are they converting it or are they just being a distribution point?

Mr. SAUNDERS. They are using it as a distribution point. And also what we found in this one last weekend with the 13 pounds of meth, that a subsequent search warrant revealed a location that had extensive packaging material and the cut to dilute it and then it would be distributed from there. At this point, we are not exactly sure where all that methamphetamine was going, but that is what they were doing with that particular case.

Mr. SOUDER. Do you know whereabouts it came from Mexico?

Mr. SAUNDERS. From talking to the supervisor on this thing, we feel it did have Mexican ties, yes.

Mr. SOUDER. Thanks. Ms. Webber-Brown, on the—how many—you said parents are—they have a drug testing once a week and parental counseling and the goal is family reunification. How many parents successfully do this?

Ms. WEBBER-BROWN. Out of 35 families last year, only 4 families reunified with their children at the end of the year.

Mr. SOUDER. What is the primary reasons for failure? Is it the drug testing part or is it the failure to——

Ms. WEBBER-BROWN. That is a big—part of that, and a number of other things. Their drug is more important than their children or than reunifying with their children. Many of these parents had already lost children previous to these kids in Butte, some in other counties, adjoining counties. The methamphetamine has a hold on them, and it is just much easier to continue to find their next bag of dope than to go through all the steps necessary to reunify.

Mr. SOUDER. Is there a process where rights become terminated so it can move to adoption?

Ms. WEBBER-BROWN. That is correct. The majority of our children are permanently adopted, especially all the children—I have had a number of children who have been seriously injured as a result of methamphetamine. They have long term learning disabilities, and the majority of those children have been adopted.

Mr. SOUDER. I mean not likely. I know the answer probably to my question. But you said some of these parents have had this occur before where they have lost their children.

Ms. WEBBER-BROWN. That is right.

Mr. SOUDER. Does Child Protective Services notify a county when a child checks into school that a parent—they get the parents address that this is a potential problem coming?

Ms. WEBBER-BROWN. No, that is not happening.

Mr. SOUDER. Is tracking possible? Is there that sophisticated a system? I mean after it happens, clearly you've found out.

Ms. WEBBER-BROWN. That can happen if the parents obtained the necessary transfer papers for the child when they left that school district and went to the other school district. Or if there was a way in which the schools communicated, yes. Certainly that could be accomplished.

Mr. SOUDER. I have a few questions. I want to start first with Ms. Ruppel before I move to the superintendent. We are in the

process within the next 30 to 60 days of moving through the Education Committee the Safe and Drug Free Schools Bill as part of the Elementary and Secondary Education Act. We have been working on this for a couple of years, and it is very controversial and very difficult. We had the original Drug-Free Program, which has had mediocre success. We added it to Safe and now we may add 21st Century Schools to this as well and include mental health. The question is, is there any anti-drug program left? But first, let me ask you, did you ever go through any anti-drug program at school? Any kind of prevention programs? Did they have school assemblies? Did they have the DARE program? Did you do any?

Ms. RUPPEL. I went through DARE in sixth grade. That was the only program that I can remember in school going through.

Mr. SOUDER. That is the only thing you remember in anti-drug education?

Ms. RUPPEL. Yes.

Mr. SOUDER. What kind of impact did that have on you? Obviously you have had problems since then. But do you believe that would have worked better had you had a junior high and high school followup? Did it not have much impact at all? Did you think that is what square kids do?

Ms. RUPPEL. I can't say that the DARE program had any impact at all. The next year is when I started doing drugs and drinking.

Mr. SOUDER. Did you get any signals out of your school that there would be any consequences? One other thing that struck me is you said you could get drugs every day at any time. Were any of those from students?

Ms. RUPPEL. Yes, that was from students.

Mr. SOUDER. On school grounds?

Ms. RUPPEL. Yes.

Mr. SOUDER. Had there been a drug testing program at your school, what do you think you would have done?

Ms. RUPPEL. If there had been a drug testing program?

Mr. SOUDER. Yes, there is—we allowed in the 1989 Safe and Drug-Free Schools Act an amendment that—at that time, I was working for Senator Dan Coates and we put that in. And every single school in the country that has put that in, while it is not an ultimate solution, has had a dramatic drop in drug use each year. And I wondered what you would have done had you had a drug testing program that was random at your school.

Ms. RUPPEL. I probably would have gotten caught and somebody would have found out. There would have been some sort of interaction between my parents and the school. Because my parents and the school officials never found out that I was using drugs until I went into a mental hospital because of it.

Mr. SOUDER. That was an extraordinary thing because at one of the high schools in my district, I meet with high school seniors whenever I can. And the student council president and vice president were very much against drug testing. Then some students started speaking out for it. When we got done, the superintendent and principal told me that every single student that had spoken up, several who had self-acknowledged that they had a drug problem and everybody against the drug testing hadn't had a drug problem. But the kids who had spoken up for drug testing, one of

them got caught in an athletic program and it changed his life. The problem is that many people who are against drug testing have never abused drugs. It is one of the frustrations here. It is not to be mean. It is to try to figure out who needs the help. Twice you said that you came back after you had gone through the first treatment program and then you had—the first time you went away for 3 hours. Let's see, the first time you fell, you came back. What caused you to come back?

Ms. RUPPEL. My parents intervening.

Mr. SOUDER. Was that the same thing the time after Bakersfield?

Ms. RUPPEL. Yes.

Mr. SOUDER. Did you get—when you say your parents intervened, how did they find out?

Ms. RUPPEL. The last time I relapsed and came back, I was going to get caught in a drug test. Inside, I was dead. So I knew that I wasn't happy using it and I wasn't happy not using it. But I was worse using drugs, and I couldn't do it anymore. I came back on my own, but I also got drug tested that week and it came up positive for cocaine a day after I had told people that I had been using.

Mr. SOUDER. If there hadn't been a drug test, do you think you would have told them?

Ms. RUPPEL. Yes.

Mr. SOUDER. You were clearly wrestling with this, and you said now you have actually—that is terrible about your mother and that is a very moving story and you deserve tremendous credit for making it through this period. What other things happened that you haven't relapsed? What is different this time?

Ms. RUPPEL. Yes, it is different. I started becoming honest. I started doing the things that other people in rehab suggested.

Mr. SOUDER. Why?

Ms. RUPPEL. Because I was tired of being sick. I was tired of using drugs. I was tired of relapsing and getting kicked out of my parents' house and trying to find places to live until I could move back in. I was tired of getting in trouble. I was tired of the way that drugs made me feel.

Mr. SOUDER. Do you think we can actually be successful in treating until the person is tired and really ready to make a commitment?

Ms. RUPPEL. Sometimes. I think that if you have a teenager in your house who is using that parents have a lot of different options that they can take to help steer their child away from drug use.

Mr. SOUDER. I thank you. I found your misdiagnosis extremely depressing myself in how it was used and I may do some written followup with you. Because as we try to zero in on this, you have raised so many different questions that challenge our assumptions of how we do that. If I could yet, I wanted to ask Mr. Ayala, you made several statements in your—I read through your written while you were also giving the verbal. It is something that I have raised for a long time. I think we do a great job of concentrating for the most part on anti-drug education when the kids are totally agreeable. Yes, I won't ever do drugs. And it is before they do junior high. Now partly we have done that because the junior high and high school programs weren't working very well. And when

you get these negative stats back, then your funding gets cutoff. But in fact, I know we do, so this is a leading question—give schools this option? In other words, we don't say you have to use it for first to sixth currently. Why don't more schools use it for junior high and high school? And I grant in my district that most of it is driven down to junior high or below junior high.

Mr. AYALA. I think you touched upon it, which is that we find success there. And also you can prove to some degree that you have reached students. But again, I think, that that is an age that would be agreeable anyway, and they are not into it primarily. They may live within a home that does have drugs, but the utilization of drugs at that age is not really happening. It is when they reach the secondary level. The transition becomes extremely difficult from a self-contained environment to one where it is fragmented in different disciplines. Just as a point, I think when those students who do get caught, that is just the tip of the iceberg. If you multiply the number who get caught times 1,000, you are probably more accurate. I think the stats when you survey students are fairly accurate. You find more students utilizing drugs at every level, particularly it increases as they go higher up into education. The zero tolerance you mentioned and the drug testing, I think it is a great idea. But I think the parent needs to buy into it. I think drug tests need to be made available at no cost to parents who wish to help their children. It is extremely expensive to go through drug testing every time. Having it at school as a rule is another one of those one-fits-all systems. I think that the family needs to be drawn in as a critical component. The family is not in the school itself. And for the most part, particularly secondary, there aren't that many family members participating there. The numbers dwindle once they are beyond elementary.

Mr. SOUDER. Well, first let me say I actually had a number of amendments that have become law on family involvement, and I am really strong for family involvement. What we just heard, though, is only 4 of the 35 in her case that family members were really at all interested in the kids versus the methamphetamines. One of the big problems that we have here is that while we should encourage that and certainly exhaust it, the fact is that as the families break down in our society, the schools become the local parents even more. Schools are very uncomfortable with that. Your primary goal is education, but it is tough to educate if the system is broken. And one of the difficult things—without getting—I want to move to one other question, so I don't want to get on drug testing heavily here. But it is random. You can't do uniform drug testing unless it is random. And in fact then once you have a history of a problem, you can do the drug testing. One of the most controversial things happened in Michigan, and you have eluded to it in about two or three different ways in your testimony. It is how can you simultaneously target but not discriminate. Because high risk populations tend to be concentrated in places where either there is an education level lower or there is a family composition area that is different or a past criminal record that is different. Now in different areas, that will mix out differently as to who that impacts. But it is certainly a targeting question. In Michigan, they didn't want to label the child who was the killer. You have a ref-

erence in here that in fact kids are treated differently in court based on minority background often from those who are of an Anglo background. Often, quite frankly, because of either sometimes discrimination, which I will grant, and maybe even more than sometimes. But other times because of family composition and income levels, where the parents actually will come and do an investment. It is not just discrimination. How do you and the superintendent propose that we try to get into this problem. Because the buzz word is target, yet targeting means making decisions that involve the word discrimination. Not necessarily racial. I am not talking about that. Income, education and so on. How do we balance how to target without discriminating?

Mr. AYALA. I think when you are dealing with at-risk families, that when the target is to assist them, that it becomes a community effort versus one component, which may be the courts, law enforcement or education and the schools. It needs to be unified. I know in Yolo County some of the courts are working on family unity. When they bring in a youth, they also bring in the family. The family is involved in a variety of different malfunctions. It is a difficult question you've asked. I don't have an answer for it. But I think that we need to truly believe that these families can be helped. And I think that if we turn the other way, as sometimes happens in schools and in the family, and say "that is the way it is" and "they are never going to come out of it, there is no way." I think we are shooting ourselves in the foot when we come to that. The family unit is an important component, but it is one portion of it. The other is in the school systems themselves there are excellent programs run by individuals who have their heart in the right place. Who have the energy beyond their school day to do other types of activities for youth, knowing that that is connecting and that is bringing them in. Even though the family may be dysfunctional. And these are the programs I think we need to support and bring to the limelight. I think we need to unify more readily those types of programs that are there that are working for individual youth.

Mr. SOUDER. Thank you very much. And just for the record, while I propose zero tolerance in the regular school system, I voted against legislation that results in mandatory expulsion and just turning these kids on the street. We have to have alternative schools and alternative solutions. Because putting them on the street doesn't solve anything.

Mr. AYALA. If I may comment on that. I believe zero tolerance is the first step. What happens after that is the most critical part. And I don't think we have enough programs to sustain zero tolerance. Thank you.

Mr. MICA. I now recognize Mr. Herger for questions.

Mr. HERGER. Thank you, Mr. Chairman. I think we are beginning to get a feel for the magnitude of this problem. It is a major issue. I served for several years on a then Select Committee on Narcotics Abuse and Control, and I think it is becoming more apparent that so much of our challenge is just trying to get hold of this, trying to determine the scope of it. Then we need to find out or identify those programs so we can begin to make a difference. And I think certainly, Dr. Ayala, you have mentioned several of

them that I have noted. Just connecting and bringing in the family and doing all of these areas are certainly what we have to go after. And reminding ourselves, we are never beat until we quit. Again, this problem seems so overwhelming. It is real easy or comfortable for us, I think, to try to put it under the carpet and not think about it. But the fact is we have to be aware of it and we have to be thinking about it.

So I thank you.

Mr. AYALA. You are welcome.

Mr. HERGER. Ms. Webber-Brown, I want to thank you for your involvement and the time you spend. I believe just a week ago we spent about an hour in my office in Chico on a Saturday afternoon, you and your husband. I thank you for sharing with me at that time. As you mentioned then, really the program that you are working on, as I understand it, is really just a pilot program. It is not something that would seem so basic as working with these children and as horrendous as this filmstrip that you showed us, the video.

Ms. WEBBER-BROWN. Correct.

Mr. HERGER. And the incredible dangers that we see and the horrendous life of the young children that are living within these homes is really an aspect that in the past I don't know if we have been that much aware of and dealing with. It is more the interdiction as it comes in and treating it when it is here or education. But the fact of trying to work with these young children was really an eye opener to me. If you could just tell me how you feel the success rate has been in this Drug-Endangered Children program that you work in. If you could tell us a little bit about that and how it is working and what it looks like in the future for this program that you are involved with.

Ms. WEBBER-BROWN. It is extremely successful for rescuing the children. And that was my whole goal when I started it in 1991 unofficially. And then 1993, it became official and was to me real simple and something that should have been done across the country, similar to domestic violence. When domestic violence became such an issue that it was across the Nation. The same thing with these children. And we are not really just talking about children in meth homes but all drug homes who were easily left behind. And the reason for that in my opinion was myself as a police officer having tunnel vision. Being trained to go in and look for drugs and paraphernalia and assets and evidence and seize those things. And children were a nuisance initially. And it was easier to pass them off to a friend or neighbor or relative. And then when realizing that we would be back there in 6 months or 3 months or 2 weeks and those kids would be back in the same filthy conditions and the same environment, and we were doing nothing to help them. So for Butte County, the program has been extremely successful.

In short, we went to the Office of Criminal Justice and Planning in 1995 and said Butte County is real small compared to the rest of the State and we have a small number of meth labs compared to the rest of the State—L.A., San Bernadino and a number of other places. There must be thousands of children left in these homes with nothing being done. And a study was conducted by the Department of Justice and that in fact was occurring. And Office

of Criminal Justice provided moneys from their Burn grant funds from OCJP to help participate in funding these seven counties—four initially and then the other three. But my concern now is that those moneys go away in September, and that we are not going to abandon our program certainly, but we are not going to be able to do what we have been doing with it because we won't have the resources in order to do that. And then we are being inundated with requests from other States that are having huge meth problems as to what to do with their children that they are finding and how do they implement that with no resources available.

Mr. HERGER. So this program working with the children within these families where the meth labs are is something that was pretty much started with Butte County?

Ms. WEBBER-BROWN. Yes, it started in Butte.

Mr. HERGER. And I think you mentioned that you have actually been asked to go to some other States to share the program with some of them?

Ms. WEBBER-BROWN. Right. Oregon, Washington, Nevada, Utah, Washington, DC, and several others that I just haven't had the time to go to.

Mr. HERGER. Well, thank you. Something else I was concerned with when we were visiting was your pointing out that this is a problem that really we are not that much aware of. That we are becoming more aware of it, at least to the degree that it is a problem. And I believe you mentioned that if we had programs like this in some other areas that we would see how widespread it perhaps is. I think you used the number of 600.

Ms. WEBBER-BROWN. Right.

Mr. HERGER. And was that just for Butte County?

Ms. WEBBER-BROWN. Yes. 601 actually as of last week.

Mr. HERGER. Would you think there would be a corresponding number for adjoining counties if we had a program like this?

Ms. WEBBER-BROWN. I am certain of that. In the adjacent counties—for instance, Yuba and Sutter Counties just to the south had 44 labs in 1999, this past year. They have no Drug-Endangered Children Program in place. They do not have a CPS worker assigned to their narcotics officers. And they do not have a protocol in place. And just as an example, a year ago we had a meth lab in Butte County which led to search warrants in Yuba County, just over the line. We had 10 kids in two structures in a meth lab that were not detained and no program in place in that county in which to deal with those children.

Mr. HERGER. And unless there is future funding, this program will terminate in September.

Ms. WEBBER-BROWN. Or diminish a great deal.

Mr. HERGER. Lieutenant Saunders, my colleague and friend, Congressman Ose, asked a couple of times some questions about perhaps a need that we have of expanding the program that you are doing and working so well on and leading in some of the counties to the south of us perhaps in our northern California areas. I have a sheriff, Charlie Byrd, who I introduced earlier. I was just in a meeting with him as a matter of fact in Yreka here just on Saturday evening. The sheriff made it a point to come up to me and mention, even though he wasn't testifying here, of how impor-

tant this was up in their county. That he knew of the program going on in Shasta County and Butte, but that he wanted—he was asking that we not forget about him and not forget about them and their families and their problem up there. I am sure that he is speaking for all our adjoining counties. So I am wondering if—I believe you mentioned you have a budget of—I forget, $1.6 million or whatever that you mentioned. Do you have any idea what it would take to expand it up into Congressman Ose's—I believe he has 8 counties and I have 10 counties up to the north. Any ballpark?

Mr. SAUNDERS. You know, we just started a program within the last few months, so I would think it would take at least that much money to go to the next level to the north, and I certainly support that. Because the drugs—we have seen a lot of them coming from Mexico and the distribution points are all over the State. It seems to me in my opinion that if we are effectively going to fight this problem we have, that we would have to do it not only statewide, but even up into Oregon and Washington or north of that. And I would think that it would take at least as much money to do the next northern counties up there as we have down here.

Mr. HERGER. And again, I am asking the questions. I am sure you are just getting going in your own program. But just off the top of your head, would you think maybe an expansion of the current HIDTA we have or an additional HIDTA for that area? Do you have any——

Mr. SAUNDERS. I think if you are looking at eight counties, I think a new HIDTA up there would be fine. If not, an expansion of the current one down here with the appropriate funding for that HIDTA would work. And once again, I think our budget from our HIDTA currently in Sacramento is about $1.2 to about $1.6 million.

Mr. HERGER. Very good. Thank you very much. Thank you, Mr. Chairman.

Mr. MICA. I would like to thank each of our witnesses for appearing on the first panel today and also providing this insight testimony to our subcommittee. I will yield a second to Mr. Ose.

Mr. OSE. Thank you, Mr. Chairman. I would like to move that the witnesses written testimony be made a part of the record.

Mr. MICA. Without objection. So ordered.

Mr. OSE. And then also would it be possible to leave the record open for 2 weeks for additional questions?

Mr. MICA. Without objection. So ordered. And we may be submitting additional questions to the witnesses or if we have additional testimony or information that you would like submitted to the record upon request, that will be so ordered.

I would like to again thank each of the witnesses, particularly you, Ms. Ruppel. I am sure your mother would be very proud of you in hoping to take what has been a family tragedy and turning it into something positive for your future. And also hopefully today, you helped affect the lives of other young people who are facing this challenge. So we are very pleased that you joined us and gave your personal testimony. Thank you so much and we wish you well.

And to the other witnesses, we thank you for your information. If there is background you would like to submit for the record and we may have additional questions and we will do that. So at this point, I will excuse this panel and call the second panel.

Staff will go ahead and give out the name tags. The second panel today consists of Mr. McGregor Scott, the district attorney at Shasta County. Another witness on that panel is Sheriff Clay Parker of Tehema County, CA. We also have Sheriff Jim Denney, sheriff out of Sutter County, CA. Another sheriff is Gerald Shadinger of Colusa County, CA. A personal witness, Mr. Bill Ruzzamenti, and he is the director of the California Central Valley HIDTA. Also testifying is Mr. Gilbert Bruce, Director of the Drug Enforcement Administration located in San Francisco, CA, and Mr. Paul Seave, the U.S. attorney for the Eastern District of California.

As I explained to the other panelists we had in our first panel, this is an investigations and oversight subcommittee of Congress, and we do swear in our witnesses. So if I could ask the witnesses to please stand and raise your right hands. Do you solemnly swear that the testimony you are about to give before this subcommittee of Congress is the whole truth and nothing but the truth?

Answered in the affirmative.

I would like to welcome each of the witnesses on this panel. It is a rather large panel. We are asking that you do limit your oral presentation to the committee to 5 minutes. If you have additional lengthy statement or documentation you would like to be made part of the record upon request, it will be entered into the record.

With that, I am pleased to recognize the first witness today, Mr. McGregor Scott, who is the district attorney of Shasta County. Mr. Scott, you are recognized.

Mr. SCOTT Right here, Mr. Chairman.

Mr. MICA. Yes, sir. Thank you. Welcome, and you are recognized.

STATEMENT OF McGREGOR SCOTT, DISTRICT ATTORNEY, SHASTA COUNTY

Mr. SCOTT. Thank you. I want to thank the members of the subcommittee for coming to the North Valley to hear this testimony today about the epidemic of methamphetamine in our communities. I have submitted to you a formal statement with specific information and statistics. In particular, my formal statement provides you with details about the Shasta County Methamphetamine Task Force, a community-based coalition, which I believe can serve as a model for other communities in the battle against methamphetamine.

In addition, my formal statement provides you with the details of the high level of cooperation and teamwork which exists between local law enforcement agencies and State law enforcement agencies in the methamphetamine fight.

The points I wish to convey to you today in this brief opening statement are fourfold. One, we have a tremendous problem with methamphetamine in the North State. Two, we as law enforcement are all working aggressively to combat the problem. Three, we come from communities which are committed to working together to combat this problem. And four, we need the help of the Federal Government in this fight.

There are two specific actions which I believe the Federal Government can take to join in the fight. First, a regional office of the Drug Enforcement Agency should be opened as soon as practical in the North State. Second, the Central Valley HIDTA should under-

take an additional initiative to expand into the North State. I look forward to our dialog here today, the result of which hopefully will be these two actions.

Thank you.

[The prepared statement of Mr. Scott follows:]

OFFICE OF THE
DISTRICT ATTORNEY
COUNTY OF SHASTA

McGregor W. Scott
District Attorney

Gerald C. Benito
Assistant District Attorney

Bennett P. Lambert
Criminal Program Director

McGREGOR W. SCOTT, SHASTA COUNTY DISTRICT ATTORNEY

THE HOUSE GOVERNMENT REFORM COMMITTEE'S SUBCOMMITTEE ON CRIMINAL JUSTICE, DRUG POLICY, AND HUMAN RESOURCES

I want to thank the subcommittee members for coming to the northern valley to hear first hand from law enforcement leaders about the epidemic of methamphetamine in our communities.

In this statement, I will discuss two issues: 1) the Shasta County Methamphetamine Task Force; 2) Law enforcement efforts in the North State regarding methamphetamine.

I have been the district attorney of Shasta County for nearly three years. When I took the job, I knew there was a methamphetamine problem in Shasta County. But I had no concept of the breadth and magnitude of the problem. Obviously, in law enforcement, we see the meth epidemic every day on the streets and in the courts. But this is an issue which touches many other areas of our community than just law enforcement. The medical field, the business community, the schools, and the social services all see the impact of meth on our community on a daily basis.

Because meth is a problem which touches so many areas, we in Shasta County in the fall of 1997 formed the Shasta County Methamphetamine Task Force. Our Task Force is composed of leaders from the medical, business, education, law enforcement, and social services fields. It was and remains the collective determination of our Task Force that meth is a community-wide problem requiring a community-wide solution. Members of our task force include the emergency room doctors from our two primary hospitals, several nurses from those hospitals, the president of the Greater Redding Chamber of Commerce, several other business leaders, the county superintendent of schools, several other educators, the county public health director, the alcohol and drug rehab director, the county social services director, the child protective services director, the sheriff, chief probation officer, chief parole officer, our two chiefs of police, the state Bureau of Narcotic Enforcement chief responsible for the North State, and myself.

One of the first things our Task Force did was make the determination that we needed to quantify in specific statistics the meth problem in our county. We spent some time compiling those statistics from a number of areas. Some of the highlights

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from those statistics include:

1. From 1990 to 1996 the number of meth related arrests in Shasta County grew by 150%

2. From 1994 to 1997, meth arrests accounted for 76% of the total arrests made by the Shasta Interagency Narcotics Task Force

3. In 1997, of those persons on probation in Shasta County who tested positive for drugs, 72% were positive for meth

4. From 1991 to 1996, the number of persons seeking treatment for meth through the county Drug and Alcohol Program increased by 400%

5. Of the 775 mothers referred to Shasta County Public Health Nurse care for substance abuse from August, 1995 through December, 1997, 47% identified meth as their primary drug of choice

6. An average of two babies per week are born in Shasta County with meth in their blood

(This is the number of babies actually born with meth in their blood at the time of birth and is a dramatically conservative number in relation to the number of fetuses exposed to meth during pregnancy)

7. Emergency room physicians estimate that 40% of all persons treated for traumatic injuries are injured as a result of meth ingestion

8. Of those persons on parole in the North State who test positive for drugs, 98% test positive for meth (*North State is defined as Glenn, Lassen, Modoc, Shasta, Siskiyou, Tehama, and Trinity counties*)

9. Approximately 40% of the homicides committed in Shasta County from 1994 to 1998 in some way involved meth

10. A very high percentage of the overall crime rate in some way involves meth when the drug cases, the theft cases where someone steals to get money for drugs, and the violence cases arising from meth consumption are added up

In response to these statistics, the Task Force developed a several-pronged plan to combat the meth epidemic:

1. Prevention through Education: we have initiated a program whereby medical and law enforcement professionals go to the middle and senior high schools and provide information to the students about the dangers of meth. To date, hundreds of

such presentations have been made. It is our belief that educating our young people provides the best hope for a long term solution to the meth problem.

2. Sober Businesses: we have reached out to the business community to educate small business owners about the impact of meth use by employees upon their businesses. We have provided information on drug testing policies and presentations to staff about the dangers of meth use.

3. Prosecution and Punishment: we have focused our prosecution efforts upon those people who poison our community by manufacturing and selling meth. On all cases involving the manufacture of meth, the sales of meth, or the possession for sale of meth meeting certain criteria, the District Attorney's Office demands state prison for the perpetrator. A renewed effort to fight the battle against manufacturing meth in Shasta County has been undertaken by state and local law enforcement agencies. The level of cooperation between state and local law enforcement agencies on the meth front is superb.

4. Treatment: at the same time, the Task Force has worked to expand resources available to those who are addicted to meth and need help. It is the Task Force's belief that a distinction must be drawn in punishment between those who manufacture and sell meth and those who are addicted to it only.

5. Public Education: we have launched a very aggressive public education program through the media. Professionally prepared TV, radio, and newspaper spots have highlighted the message of the threat of meth to our community. This public education program has been hugely successful. The theme of our media spots has been "Not in Our Town". Our community in general is now very much aware of the meth problem we all face. In large part due to our public education campaign, dozens of citizens have volunteered to help us with our efforts.

Some additional accomplishments of the Task Force include:

1. Establishment of an 800 number for the Task Force (1-800-4NOMETH)

2. Widespread dissemination of bumper stickers reading "Not in Our Town"

3. Widespread dissemination of posters with information about the negative effect of meth on our environment and babies

4. Work on a web page is ongoing

5. Over 100 presentations about the dangers of meth given to local service and other organizations

6. A series of town hall meetings, each addressing the impact of meth on a part

of our community (schools, businesses, etc.)

I believe through the Shasta County Methamphetamine Task Force we have provided a community response to the community problem of meth which can serve as a model for other communities around the state.

Next, I wish to address the multi-jurisdictional law enforcement efforts to combat the meth problem.

In a nutshell, the level of cooperation between state and local law enforcement agencies on this issue is outstanding.

In Shasta County, we have a state Bureau of Narcotic Enforcement (BNE) task force called the Shasta Interagency Narcotics Task Force (SINTF). The mission of SINTF is to investigate narcotics offenses at the street and lower-level dealers levels. The commander of SINTF is a state BNE officer. The SINTF staff is composed of officers from Redding Police Department, Anderson Police Department, the Shasta County Sheriff's Department, the county probation department, the state parole office, and the district attorney's office. The investigator from my office assigned to SINTF comes from the welfare fraud arena and provides a whole new field of information and enforcement support. Information acquired by this investigator through welfare and school attendance records recently led SINTF to a meth lab described by the SINTF commander as the largest he has ever seen. In addition, a deputy district attorney from my office is assigned full time to SINTF to facilitate the investigation and prosecution of meth cases. The level of cooperation among the various state and local agencies in supporting the efforts of SINTF is excellent.

The state BNE has an office in Redding independent of SINTF. That office is responsible for 10 counties in the North State, including Modoc, Siskiyou, Del Norte, Humboldt, Trinity, Shasta, Lassen, Tehama, Glenn, and Plumas. In the meth fight, the BNE office has principal responsibility for meth labs. The two BNE lab teams work very closely and cooperatively with SINTF. Many times the initial contact which leads to a lab comes from SINTF, who then turns the case over to the BNE lab team. In addition, a deputy district attorney from my office is assigned full time to the Major Narcotics Vendors Program (MNVP) and works on a regular basis with the BNE agents, focusing on the investigation and prosecution of meth lab and major dealer cases. The MNVP program is a grant funded through the Governor's Office of Criminal Justice Planning. Again, the level of cooperation between state and local agencies is superb.

The major north-south axis of travel in the North State is Interstate 5. Not surprisingly, I-5 serves as a major route for the interstate trafficking of drugs (including meth) between Portland and Seattle and the Bay Area and Southern California. The California Highway Patrol (CHP) has in recent years conducted a highly effective interdiction program which has resulted in the seizure of very large quantities of meth, cocaine, and heroin on I-5 in Shasta County where the driver was coming from the Bay

Area or Southern California and headed to Portland or Seattle. CHP worked very effectively with both SINTF and BNE in the investigation of those cases. My office had prosecutorial responsibility for those cases. In these cases, the costs of investigation, prosecution, and incarceration of interstate drug traffickers has been borne by the locals. Again, the level of cooperation among state and local agencies was excellent.

Through the District Attorney's Office, Shasta County was awarded a grant from OCJP entitled the Drug Endangered Children (DEC) Program. There are only seven counties in the state which have received this grant, including Butte County. The purpose of the DEC Program is to remove children from highly dangerous meth situations. The team in Shasta County is headed by a registered nurse working on a contract basis for the District Attorney's Office, a Child Protective Services (CPS) case worker, a deputy district attorney, and an agent from SINTF. The program has been an unmitigated success in its eight months in existence. Again, the level of cooperation between the various agencies involved has been outstanding.

In summarizing this presentation, I have three points I want to make. First, there is a great level of cooperation and teamwork between all of the various state and local agencies involved in the meth fight, from law enforcement to social services. Second, we have a true community based organization dedicated to the eradication of meth from our community. The members of the Shasta County Methamphetamine Task Force have demonstrated that they are committed to working very hard to eliminate meth from our community. Third, there is tremendous teamwork and cooperation in Shasta County between local and state law enforcement agencies on the meth front. With commitment of money, personnel, and other resources, state and local law enforcement agencies have demonstrated that they are dedicated to working together on the meth problem. Fourth, the federal government has been conspicuous by its absence from the meth fight in the North State. We need the help of the federal government in this fight. There are two specific actions which should be taken. First, a regional office of the Drug Enforcement Agency (DEA) should be opened in Redding. A federal law enforcement presence dedicated to narcotics is essential to our long term success. Second, the Central Valley HIDTA should be expanded to include the north valley counties. As is set out above, there is a very strong state and local commitment to meth eradication. We can offer dedicated, hard working state and local partners in the North State to the federal government in the meth fight. Expansion of the HIDTA to the North State is the best means to accomplish this partnership. I strongly encourage this committee to take action to make these suggestions a reality.

Mr. MICA. Thank you, Mr. Scott.

I now recognize Sheriff Clay Parker of Tehema County, CA.

STATEMENT OF SHERIFF CLAY PARKER, TEHEMA COUNTY, CA

Mr. PARKER. Thank you, Mr. Chairman. And I also want to thank all of you for allowing me to testify here today before you to discuss a problem that as you can see doesn't just face northern California. It is a national problem as well. I want to take this opportunity to provide you with information on the North State and what we have been doing for the past 20 years regarding the methamphetamine problem.

I appear before you not only as the sheriff of Tehema County, but as a past narcotics officer and task force commander, and I have actively been involved in methamphetamine investigations for the last 10 years and actually methamphetamine cases for the last 20 years.

I have seen the adverse effects of persons making, using and dealing methamphetamine, and what it does to the families and communities. I do need to make something very clear at this point, though. And that is that the problem is not limited to a select few counties in the North State. This is a problem of the whole North State.

Before I came to you, I thought what we needed to do was point out what we have done on a local level, and what we have done is, as you have heard already, we have had DARE programs and there is curriculum now in the middle schools and high schools which we are expanding up in our counties already. We have done undercover operations, childcare programs, reverse stings, asset forfeiture, and Mr. Scott just mentioned about a DEA office up in the North State. Right now mainly when we do asset forfeiture cases on the Federal level, the DEA doesn't handle it. An IRS agent out of Redding does. And we personally would like to see a North State office of DEA be added.

On a local issue, in 1990 we didn't have a sustained effort against methamphetamine and other drugs because none of the local agencies had the manpower or resources to put it together. So in 1990, we formed a local task force, which consisted of the Sheriff's Department, Probation, DA and all the police departments in the county. As we worked that task force, we saw that there was a major problem with the kids, and the kids' access to drugs throughout the community, and we also saw that a lot of the parents in our communities were ignoring the problem and in fact saying there was not a drug problem in our local schools.

Well, in 1995 and the first part of 1996, we did an undercover buy program in the Red Bluff Union High School District, and we ended up arresting 52 people that were dealing and using the kids of our schools with methamphetamine. It was an extremely successful program and it kind of woke up our communities. The other thing through that time is that we have seen that it is just not a local county problem or a North State problem. We see with Interstate 5 and 99—again, this has all been brought up—that a lot of these narcotics and methamphetamine are coming from the major metropolitan areas such as San Francisco, Los Angeles, San Diego. And again, it is more of a regional problem. When I talk regional,

I am talking about this Central Valley HIDTA that needs to be extended into the North State.

Currently, we have in Tehema and Glenn County what is called TAGMET, which is the Tehema and Glenn Methamphetamine Enforcement Team. And what we did was we saw that we couldn't just do it on our own in counties. We then formed TAGMET, and now we have the California Department of Justice Bureau of Narcotics Enforcement, an agent in charge, and then we have the Sheriff's Department and Probation Departments, DA's from Glenn and Tehema on this, along with the CHP, California Highway Patrol from Willows and Red Bluff, and the local police departments from Red Bluff, Corning, Willows and Orland. And we have seen that that has been very beneficial. In 1999 alone, the TAGMET agents seized 27.5 pounds of meth, 4.5 pounds of cocaine, 48 pounds of marijuana, and 4,300 marijuana plants, 5 grams of heroin, and 124 liters of meth in solution, which probably would have worked out somewhere between 45 and 85 pounds of finished methamphetamine. The street value of these substances seized was in excess of over $10 million if it actually had made it to the street.

The other thing you have to look at when I give you these stats, compared to larger counties it doesn't sound like much. But you have to remember that Tehema County is 55,000 is our population. Glenn County is 27,000. So this per capita, there is definitely a major problem.

We are constantly in contact with special agent in charge, Jack Nair, the California Department of Justice Bureau of Narcotics Enforcement, and Jack is here. He has 10 northern California counties including Tehema. He has got Lasson, Modock, Pumas, Glenn, Trinity, and Siskiyou also. He can validate and talk to you about the problem we have in the North State and how we need to get Federal intervention to help us.

We believe through our cooperative efforts at this time that we have done everything possible that we can do on a local level. And again, what I am requesting and what we are requesting in the North State is that a DEA office be opened in the North State, hopefully in Redding. And that at some time that we also be considered in probably expanding the Central Valley HIDTA into the North State.

We talked about the education of the youth, and I preach this every time I go to a school or anything else. And that is that the youth of today are our leaders of tomorrow. So we need to do everything in our power today to help them so that they will become productive members in the future. Thank you.

[The prepared statement of Sheriff Parker follows:]

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CLAY D. PARKER
Sheriff

DENNIS GARTON
Undersheriff

Testimony to the Subcommittee on Criminal Justice, Drug Policy and Human Resources.

March 6, 2000

Honorable Chairman and Committee Members,

Thank-you for allowing me to testify today regarding a problem that faces not only California, but the nation as well. I want to take this opportunity to provide you with information regarding the North State and the problems associated with the production, sales and use of methamphetamine.

I stand before you today not only as the Sheriff of Tehama County, but also as a past Narcotics Officer and Task Force Commander who has dealt with the methamphetamine problem for over ten years. I have seen the adverse effects of persons making, using and dealing methamphetamine and what it does to families and communities.

However, I do want to make one thing clear, the problem is not limited to a few select Counties, but is the problem of all North State Counties.

In 1990, the Tehama Interagency Drug Enforcement Task Force (TIDE), was formed because no single agency had the necessary resources or manpower to maintain a sustained effort in combating drug related crimes.

In 1995-1996, the TIDE Task Force conducted an undercover narcotics program in the Red Bluff Union High School District which resulted in the arrest of 52 persons involved in the sales of illegal drugs to local teenagers. The program was a huge success and ultimately the TIDE Task Force received the "Case of the Year" award from Region VIII of the California Narcotics Officers Association.

A vast majority of methamphetamine and other controlled substances are transported into and through our counties via automobiles on Interstate 5 which originates in major metropolitan areas including the San Francisco bay area, San Jose area, Fresno area and the Los Angeles/San Diego areas. Statistical data maintained by TAGMET and the California Highway patrol substantiate this conclusion.

It became quite obvious that narcotics distribution in the North State was not just limited to the boundaries of each of our counties. Further ways to combat the narcotics problem were discussed and it was agreed upon that multi-jurisdictional task forces needed to be formed.

Currently, Tehama County is a member of the Tehama and Glenn Methamphetamine Enforcement Team (TAGMET) which was established in June of 1998. Agency members of the Task Force include the California Department of Justice Bureau of Narcotic Enforcement, the Tehama County and Glenn County Sheriff's Departments, the Tehama County and Glenn County Probation Departments, the Tehama County and Glenn County District Attorney's Offices, the California Highway Patrol Willows Office and Red Bluff Office, The Red Bluff Police Department, the Corning Police Department, the Willows Police Department and the Orland Police Department.

In 1999, the TAGMET agents have seized approximately 27.65 pounds of methamphetamine, 4.55 pounds of cocaine, 47.65 pounds of marijuana, 3,347 marijuana plants, 5 grams of heroin and 124 liters of methamphetamine in solution. The street value of the controlled substances seized by TAGMET is estimated at far in excess of $10,000,000.00. Both the Tehama County and Glenn County Sheriff's Departments have their own Marijuana Eradication Teams and their seizures are not included in this statistical data.

Additionally, the TAGMET Agents arrested 26 suspects for manufacturing and possession of precurser chemicals to manufacture methamphetamine. When in the finished process stage, the methamphetamine is used locally and also shipped elsewhere in the State for distribution.

We are constantly in contact with Special Agent in Charge Jack Nehr of the California Department of Justice Bureau of Narcotic Enforcement who is responsible for 10 northern counties including Lassen, Modoc, Plumas, Glenn, Tehama, Shasta, Trinity and Siskiyou. Mr. Nehr will validate the problem we have in the north state and will point out that the problem is national rather than local. To bolster their efforts, the Agents under Mr. Nehr's control have interstate cross designation so that investigations can be carried into the States of Oregon and Nevada.

Through our cooperative efforts, we believe that we have done everything within our control and limited funding to aggressively enforce narcotics laws. We are now requesting that the Office of National Drug Control Policy (ONDCP) consider our local problem at the national level and assist our communities with the addition of a Drug Enforcement Agency Office in the North State. Ultimately, we would also request that the counties in the North State be considered for inclusion in a High Intensity Drug Trafficking Area (HIDTA).

One of the most important aspects in dealing with the proliferation of drugs in our communities, is public education and teaching our kids to refuse to become involved with

drugs. Part of the time spent by TAGMET Agents is in our school system educating the youth on the dangers of drugs.

In closing, remember that "The youth of today are the leaders of tomorrow" so let's give our youth all the help we can today.

Clay D. Parker
Sheriff

Mr. MICA. Thank you for your testimony.

We will now recognize Sheriff Jim Denney of Sutter County, CA. You are recognized, sir.

STATEMENT OF SHERIFF JIM DENNEY, SUTTER COUNTY, CA

Mr. DENNEY. Thank you, Mr. Chairman. Good morning. My name is Jim Denney. I am the sheriff, coroner, and public administrator of Sutter County. For your information, Sutter County is a small rural county, probably one of the smallest counties in the State, located in the heart of the Sacramento Valley and immediately north of Sacramento County. The county encompasses 608 square miles and holds nearly 77,000 residents. The county has an agriculturally based economy and unemployment runs as high as 18 percent during the non-growing season. Our county seat is Yuba City, which is located on the west side of the Feather River, directly across from the city of Marysville, which is the county seat of Yuba County, population 69,000. Combined, both cities make up the twin cities for the Sutter/Yuba County region.

This region shares many services, which includes a two-county drug enforcement task force known as the Narcotic Enforcement Team or NET–5. The team is comprised of law enforcement officers from the two sheriff's departments and two police departments in the region and is supervised by an agent from the California Department of Justice, Bureau of Narcotic Enforcement. NET–5 is one of the oldest DE task forces in the State of California, and I have two deputies assigned to that unit.

I am here today to present to you from my perspective the methamphetamine problem in the Sutter and Yuba County region of northern California, and what I believe is needed to address that issue. My expertise in this issue is that of a career law enforcement officer with 28 years of experience, the last 24½ years with the Sutter County Sheriff's Department. From 1987 through 1989, I was assigned as a detective sergeant to the NET–5 task force as second command of that unit.

The methamphetamine problem has been a longstanding issue in Sutter and Yuba Counties since early 1980's. Back then it was manufactured by mostly outlaw motorcycle gangs like the Hell's Angels and loose knit associates with little or no organization. Rarely was large quantity manufacturing occurring on a regular basis, and most seized methamphetamine labs consisted of quantities measured in ounces.

Today, organized Mexican crime groups have largely taken over the major manufacturing of methamphetamine, moving chemicals, finished product and money back and forth across our border with Mexico. Back in 1988, NET–5 seized a total of five methamphetamine labs in the Sutter and Yuba County region. Fast forward 11 years to when NET–5 seized 43 meth labs last year alone. I might also add that this year, since January 1st, in the first 2 months of this year we have already seized 16 labs in the region. At that rate, we will be up close to 100 labs by the end of the year.

I admit that most of these labs were of the local variety, commonly known as Beavis and Butthead labs, but an alarming number of sophisticated laboratories are emerging. Last year, NET–5 conducted a multi-agency undercover operation known as Oper-

ation Reunited, which targeted the drug activity in the Sutter and Yuba region. A total of 16 local, State and Federal law enforcement agencies participated in the 4-month operation. This intensive operation resulted in 259 arrests, 15 methamphetamine laboratories seized, and over $43,000 in U.S. currency and two vehicles taken for asset forfeiture. Nearly 8 pounds of methamphetamine and three-quarters of a pound of tar heroin was seized during this operation including a small quantity of cocaine and marijuana. The combined street value of all drugs seized at this time totaled over $270,000.

During this operation, a major methamphetamine laboratory was established in my county by an organized Mexican crime group from the San Jose area. This resulted in round-the-clock surveillance by various agencies involved in Operation Reunited over a 2-month period. The surveillance would not have been possible by local resources had Operation Reunited participants not been in the area. When the lab was seized, in addition to several pounds of chemicals and various apparatuses, it included eight 22-liter round bottom flasks, which are considered to be significant in the manufacturing of the methamphetamine. This lab was capable of producing 100 pounds of methamphetamine per cooking operation. The street value of 100 pounds of methamphetamine after being diluted and packaged for sale on the street would exceed $3 million.

The question is how do we fix this? In my humble opinion, what we don't need is another task force at the Federal level to which I would be required to assign personnel from my existing staff. I presently assign two deputies to the local drug task force in our area, one of which is funded by the Federal anti-drug abuse enforcement funds or the Edward Burn Memorial Fund. The other deputy is funded out of my existing budget. I do not have the luxury of having another one or two deputies to send to another task force like a HIDTA unless full funding for these positions is included. What I need is additional long-term full funding for increased manpower and resources to address this problem. I am not talking about a Cops Fast or a Cops More or any other limited term funding which pays only a portion of the annual salary and terminates after 3 years. This leaves the local agency with the option of covering the full cost of the law enforcement officer or laying the officer off. What I need is permanent funding that pays the full salary of the additional personnel and is guaranteed to continue for a long time to come. I also do not need to send local law enforcement personnel to work on a regional task force that involves several counties. I have enough problems to deal with in my own county and I need all my resources to stay locally to address that problem.

What I am saying to this honorable committee is that if you want to address the drug crisis in northern California, then give us the long-term funding that we need to fund additional personnel to enhance our current operation and make it more effective. Additionally, I strongly recommend enhanced funding for programs supported by the national organizations like Fight Crime and Invest in Kids, of which I am proud to say that I am a State advisory panel member. This group advocates increased support for early childhood and after school intervention programs for at-risk youth

to deter them from criminal activity later in life. Combined with strong law enforcement, problems like drug manufacturing and distribution can be impacted. I thank you for your time and consideration on this issue.

[The prepared statement of Sheriff Denney follows:]

SUTTER COUNTY

JIM DENNEY
Sheriff/Coroner
Public Administrator

BILL GROVE
Undersheriff

March 6, 2000

To: The Honorable Members of the Subcommittee on Criminal Justice, Drug Policy and Human Resources

From: Jim Denney, Sheriff-Coroner, Sutter County (CA) Sheriff's Department

Subject: "**Responding to the Drug Crisis in Northern California**" Hearing Testimony

Good morning (afternoon) honorable members of the subcommittee, my name is Jim Denney and I am the Sheriff-Coroner-Public Administrator of Sutter County. Sutter County is a small rural county located in the heart of the Sacramento Valley and immediately north of Sacramento County. The county encompasses 608 square miles and holds nearly 77,000 residents. The county has an agriculturally based economy and unemployment runs as high as 18% during the non-growing season.

Our County's seat is Yuba City, which is located on the east side of the Feather River directly across from the City of Marysville, the county seat of Yuba County (population 69,000). Combined, both cities make up the "Twin Cities" for the Sutter-Yuba County Region. The region shares many services which includes a two-county drug enforcement task force known as The Narcotic Enforcement Team (NET-5). The team is comprised of law enforcement officers from the two sheriff's departments and two police departments in the region, and is supervised by an agent from the California Department of Justice – Bureau of Narcotic Enforcement (DOJ-BNE). NET-5 is one of

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the oldest BNE supervised task forces in California. I have two deputies assigned to NET-5 as investigators.

I am here today to present to you from my perspective, the methamphetamine problem in the Sutter-Yuba County area of Northern California and what I believe is needed to address the issue.

My expertise on this issue is that of a career law enforcement officer with 28 years of experience, the last 24 ½ years with the Sutter County Sheriff's Department. During the years of 1987 through 1989, I was assigned as a Detective/Sergeant to NET-5 as second-in-command of the task force. This assignment included being the Asset Forfeiture Specialist for the unit. Upon completion of my assignment, I returned to the Sheriff's Department Detective Division. In 1991 I was appointed as the Undersheriff by Sheriff Art Brandwood, where I was assigned to be in charge of Operations for the Sheriff's Department for the next 8 years. Sheriff Brandwood retired at the end of 1998 and I was elected as Sheriff, assuming office in January of 1999.

The methamphetamine problem has been a long-standing issue in Sutter-Yuba Counties since the early 1980's. Back then it was manufactured by mostly outlaw motorcycle gangs like the Hells Angels, and loose knit associates, with little or no organization. Rarely was large quantity manufacturing occurring on a regular basis and most seized methamphetamine labs consisted of quantities measured in ounces. Today, organized Mexican crime groups have largely taken over the major manufacturing of methamphetamine, moving chemicals, finished product and money back and forth across our border with Mexico.

Back in 1988, NET-5 seized five meth labs in the Sutter-Yuba County region. Fast forward eleven years to when NET-5 seized 43 meth labs last year alone! I admit that many of these labs were of the local variety, commonly known as "Beavis and Butthead labs", but an alarming number of sophisticated laboratories are emerging.

Last year NET-5 conducted a multi-agency undercover operation known as "Operation Reunited" which targeted the drug activity in the Sutter-Yuba Region. A total of 16 local, state and federal law enforcement agencies participated in the four-month operation. This intensive operation resulted in 259 arrests, 15 methamphetamine laboratories seized and over $43,000 in US currency and two vehicles taken for asset forfeiture purposes. Nearly 8 pounds of methamphetamine and ¾ of a pound of tar heroin was seized, along with a small quantity of cocaine and marijuana. The combined street value of all drugs seized totaled over $270,000.

During this operation, a major methamphetamine laboratory was established in south Sutter County by an organized Mexican crime group from the San Jose area. This resulted in round-the-clock surveillance by various agencies involved in Operation Reunited, over a two-month period. This surveillance would not have been possible by local resources had Operation Reunited participants not been in the area. When the lab was seized, it was discovered that this site contained eight 22-liter round bottom flasks with heating mantles, 110 pounds of iodine crystals, red phosphorous, 90 five-gallon cans of denatured alcohol, 30 pounds of processed ephedrine, three 5-foot tall hydrogen chloride gas cylinders, and two 75-gallon separatory funnels.

This lab was capable of producing 100 pounds of methamphetamine per each cooking operation. **The street value of 100 pounds of methamphetamine, after being diluted and packaged for sale on the street, would exceed $3,000,000!**

The question is, "How do we fix this?" In my humble opinion, what we don't need is another task force at the federal level to which I would be required to assign personnel from my existing staff. I presently assign two deputies to the local drug task force in our area, one of which is funded by federal Anti-drug Abuse Enforcement (Edward Byrne Memorial) Funds. The other deputy is funded out of my existing budget. I do not have the luxury of having another one or two deputies to send to another task force like a HIDTA, unless full funding for those positions is included.

What I need is additional long-term, full funding for increased manpower and resources to address this problem. I am not talking about COPS Fast, COPS More or any other limited-term funding which pays only a portion of the annual salary and terminates after three years. This leaves the local agency with the option of covering the full cost of the law enforcement officer, or laying that officer off due to the lack of ongoing funding. What I need is permanent funding that pays the full salary of the additional personnel and is guaranteed to continue for a long time to come.

I also do not need to send local law enforcement personnel to work on a regional task force that involves several counties. I have enough problems to deal with in my own local area and I need all of my resources to stay in the area and address the local problem.

What I am saying to this honorable committee is, if you want to address the "...Drug Crisis in Northern California", then give us the long-term funding that we need to fund additional personnel to enhance our current operation and make it more effective.

Additionally, I strongly recommend enhanced funding for programs supported by national organizations like "Fight Crime – Invest in Kids", which advocates increased support for early childhood and after-school intervention programs for at-risk youth, to deter them from criminal activity later in life. Combined with strong law enforcement, problems like drug manufacturing and distribution can be impacted.

I thank you for your time and consideration on this issue.

Mr. MICA. Thank you for your testimony. I now recognize Sheriff Gerald Shadinger with Calusa County, CA. Welcome. You are recognized.

STATEMENT OF SHERIFF GERALD SHADINGER, COLUSA COUNTY, CA

Mr. SHADINGER. Thank you. Honorable Members, good morning. I appreciate being here. I am largely here to support my neighboring sheriffs in Sutter today and the Glenn County Task Force. I come from a little different perspective, and my perspective is this. I will give a little background. We are a very small county north of this county along I–5. I have some things that will be passed up to the Members later, but this is an example of what is in my evidence room right now. These are tubs of methamphetamine and cocaine that aren't my problem from a smaller world perspective. These were taken off of Interstate 5 by our officers, CHP, and the task force itself made the seizures. But I am stuck with a bill of $200 a pound to dispose of this stuff and I have got hundreds and hundreds of pounds in these tubs.

I think largely what should be brought to the attention of this committee is that the drugs that I do have or that we have seized are largely an Oregon and Washington problem. North of here, you have all the freeway systems that come together and that channel for the next 200 miles to the Oregon border. On Interstate 5, 80 percent of the arrests that we make are from Washington residents and Oregon residents.

We have been innovative in the past in supporting the task force. We have actually gotten people to turn around and we follow them to Oregon and dealt with the Oregon authorities and nothing materialized to it on the last two occasions. But again, we find a lack of effort of coordination. And from a small county perspective, I have to say that we do need a DEA presence in the North State. I would like to see the Central Valley HIDTA extended all the way to the Oregon border for the purposes of being able to call the folks up when these drugs are headed to Oregon and Washington.

To me, that would say it all as far as in a context of this is a Federal interstate problem. It isn't necessarily to us a regional problem in my county.

I will say that in 1993—and the reason I bring this up is a preface to my next thing—but 1993, was when a couple of sheriffs went back and visited with Janet Reno when the Burn Fund was at risk back in Washington. We have these hearings periodically and everybody wants to know what is funded and we get new Congressman and so on. The Burn Fund was at great risk. We met with the sheriff's throughout the southwest to keep the Burn Fund intact. That is the only thing that runs my task force. I am not State funded. I don't have a State officer in my task force. It is strictly Burn Federal money that keeps me currently going.

I think in rural counties what you have to realize is we don't have the resources unless the program is funded largely by the feds and pass-through money to the State of California such as OCJP. We would be non-existent in any of our efforts. So, therefore, I have to reiterate that we are asking for a coordinated effort to ex-

tend the HIDTA to the Oregon border, and that would be specifically six counties north. Thank you.

Mr. MICA. Thank you for your testimony. We will now hear from Bill Ruzzamenti.

Mr. Ruzzamenti is the director of the California Central Valley HIDTA.

STATEMENT OF BULL RUZZAMENTI, DIRECTOR, CENTRAL CALIFORNIA VALLEY HIDTA

Mr. RUZZAMENTI. Mr. Chairman and distinguished committee members, I too appreciate appearing before you today to talk about the newest HIDTA, the Central Valley HIDTA in California. I would also like to take this opportunity to acknowledge the northern California sheriffs, which were an integral part in making the Central Valley HIDTA possible. They joined with the sheriffs from the Central Valley and were very active and instrumental in assisting us in bringing about the Central Valley HIDTA, and for that we very much appreciate it.

The Central Valley HIDTA is a methamphetamine HIDTA, which means its sole narcotic focus is the methamphetamine problem in the Central Valley. And because of that, there are several unique characteristics to the HIDTA and requirements to membership in the HIDTA that are mandated by ONDCP and which we deal with in operating the Central Valley HIDTA.

Our initial budget was only $800,000. And we have currently a supplemental budget of $687,000, which looks good for fiscal year 2000. That is not finalized, but I am very hopeful and it does look good that we are going to get those funds. However, that being said, that is still only $1,487,000 to spread amongst nine counties involved in the HIDTA. We have all the counties, as was said here before, from Sacramento south to Kern County and all those that border the 99 and Highway 5 corridor down to Kern County. So the resources we have are incredibly limited.

ONDCP itself has indicated that their perception of minimal funding for HIDTA operations is $2.5 million. We are still way below that, even with the supplemental that we currently have. I have submitted my testimony and I would be glad to answer questions when the time is appropriate.

[The prepared statement of Mr. Ruzzamenti follows:]

Statement of Mr. William Ruzzamenti
Director of the Central Valley, CA HIDTA
Office of National Drug Control Policy

House Subcommittee on Criminal Justice, Drug Policy, and Human Resources

March 6, 2000

Distinguished Committee members, I appreciate the opportunity to appear before you today to discuss California and this country's newest High Intensity Drug Trafficking Area (HIDTA), the Central Valley of California.

The following information is being provided to the subcommittee in order that you might have a better understanding of the Central Valley, CA HIDTA.

The Central Valley HIDTA was designated in 1999. The Executive Committee is comprised of six local, one state, and seven Federal representatives. The geographic area of responsibility of the HIDTA is California's Central Valley to include the counties of Sacramento, San Joaquin, Stanislaus, Merced, Madera, Fresno, Tulare, Kings, and Kern.

The FY2000 budget was originally $800,000 but a $687,000 supplemental enhancement is currently under final review and looks promising.

Threat Abstract: The nine counties of the Central Valley, California HIDTA area comprise a major agricultural center for the nation. The region is populated by approximately four million residents although the population swells seasonally as the need for agricultural migrant labor fluctuates. The residents of the Central Valley are serviced by two international airports and hundreds of private airstrips. The Central Valley also contains several major interstate highways including Interstate 5 and Highway 99 which are the traffickers' favored routes of transportation for moving methamphetamine, heroin, and cocaine from Mexico and the Central Valley to Northern California and the Pacific Northwest. Additionally, Interstate 80 runs east from San Francisco directly through Sacramento before traversing the length of the United States through the Rocky Mountains and Midwestern States and provides a major pipeline for the transportation of controlled substances headed to the Midwest and Eastern United States. The Central Valley is also home to rail, bus, cargo, and shipping port facilities.

The Central Valley continues to be a primary manufacturing, transshipment, distribution, and consumption area for illegal narcotics, and for methamphetamine in particular. Within the last several years the area has experienced a dramatic increase in the number and scale of clandestine methamphetamine manufacturing labs operating within the region.

These labs, most of which are operated by multi-drug trafficking organizations based in Mexico, now infest the Central Valley. These organizations tend to situate their labs and so called "super-labs" in the Central Valley due to its proximity to the State's principal precursor chemical supply companies and its major interstate highways. These large-scale, relatively sophisticated labs are set up long in advance of use, are well concealed, often heavily guarded, and can produce from 20 to 200 pounds of high purity methamphetamine per cooking cycle.

Strategy Abstract: The Central Valley HIDTA Executive Committee is comprised of 14 local, state, and Federal law enforcement leaders in the California Central Valley HIDTA areas of responsibility. A unified approach between law enforcement and prosecution agencies facilitates efforts to reduce the impact of methamphetamine production, trafficking, and distribution in the Central Valley.

Much of the information available for the Central Valley HIDTA region is anecdotal. With the implementation of the HIDTA strategies in the Central Valley, and with the establishment of the Central Valley HIDTA Intelligence Center, it is hoped that a more complete picture of the threat can be framed. With the evidence that is available, it is clear that the Central Valley continues to be a major manufacturing, distribution, and transshipment area for all types of illegal drugs, but particularly for methamphetamine. The rates of methamphetamine use in the area are alarming. The violence associated with drug manufacturing and dealing impacts our families, neighborhoods, and schools. The Central Valley HIDTA program will utilize an ambitious cooperative effort to identify, target, and impact the Drug Trafficking Organizations operating in our area.

Initiatives: The Central Valley HIDTA presently consists of five operational and one management/administrative initiative as set forth below:

1. Investigative Support/Intelligence Center: The intelligence initiative is a multi-agency, collocated element with a central office in Fresno, and satellite offices in Bakersfield and Stockton. The intelligence center is comprised of two sub-units: an investigative support unit and a technical support unit. Deconfliction is provided by the Los Angeles Clearinghouse with funding for two analysts supplied by the Central Valley HIDTA.

2. Management and Administrative: The HIDTA staff, consisting of the Director, Administrative Assistant, and Fiscal Officer, will provide support to facilitate the coordination and administration of all HIDTA initiatives and related budgets in order to ensure that the HIDTA's strategy and subsequent initiatives/budgets are affecting the regional threat, and that the HIDTA funds are targeting the intended mission as approved by the HIDTA Executive Committee and ONDCP.

3. Sacramento Area Intelligence Narcotics Task Force: This initiative will focus on providing operational intelligence, including the identification of methamphetamine and narcotic traffickers, the prioritization of information for the use of enforcement task forces within Sacramento, and in other areas of the HIDTA.
Emphasis: Intelligence gathering and targeting of major narcotics traffickers and distributors.

4. Stanislaus-San Joaquin County Methamphetamine Task Force: This initiative will focus on the initiation of long term investigations of sophisticated criminal organizations involved in the acquisition of precursor chemicals, the manufacturing of methamphetamine, and the distribution of methamphetamine. Information developed from these investigative efforts will be shared with the other initiatives through the intelligence center.
Emphasis: Methamphetamine and Precursor Trafficking

5. Fresno Methamphetamine Task Force: This initiative will focus on major methamphetamine manufacturing and distribution organizations, precursor chemical suppliers, pseudoephedrine tablet distribution organizations operating in Fresno, Madera, and into other areas of the country. The intent of these investigations will be concentrated on the dismantling cells and or entire organizations leading to the arrest and prosecution of key members of the organization.
Emphasis: Methamphetamine Manufacture, Precursor Chemical, and Methamphetamine Distribution

6. Southern Tri-County Drug Task Force: The focus of the task force will include an intelligence component and an investigative component. The task force will attack all operations of major methamphetamine organizations including the acquisition of precursor chemicals, the manufacture of methamphetamine, the distribution of methamphetamine, and money laundering.
Emphasis: Methamphetamine Manufacture, Precursor Chemical and Methamphetamine Distribution

Currently, plans are underway for FY2001 to increase the number of initiatives in the Central Valley, CA HIDTA. However the number of new initiatives will be dependent solely on funding.

The following agencies currently participate:

Federal: Bureau of Alcohol, Tobacco, and Firearms, Drug Enforcement Administration, Federal Bureau of Investigation, Immigration and Naturalization Service, United States Attorney's Office (Eastern District of California), U.S. Customs Service, United States Marshal Service

State: California Bureau of Narcotic Enforcement, California Highway Patrol, California Department of Corrections

Other: Sacramento, San Joaquin, Stanislaus, Merced, Madera, Fresno, Tulare, Kings, and Kern County Sheriff's Departments, Sacramento, Stockton, Modesto, Fresno, Merced, Bakersfield, Porterville, and Delano Police Departments, Sacramento County Probation Department

Points of Contact for further information on the Central Valley, CA HIDTA are as follows:

Executive Director: William Ruzzamenti
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Fresno, CA 93721
Phone: (559)487-5402
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-or-

Executive Committee Chair: Paul L. Seave, United States Attorney
Eastern District of California
Phone: (916)554-2706

-or-

Executive Committee Vice-Chair: Les Weidman, Sheriff
Stanislaus County
(209)525-7216

This concludes my remarks. I want to thank the committee for their time and attention. At this time I will be happy to entertain any questions regarding my presentation and the operation of the Central Valley, CA HIDTA.

Mr. MICA. Thank you.

We will now recognize Mr. Gilbert Bruce, Director of the Drug Enforcement Administration of San Francisco. Welcome. You are recognized, sir.

STATEMENT OF GILBERT BRUCE, DIRECTOR, DRUG ENFORCEMENT ADMINISTRATION, SAN FRANCISCO, CA

Mr. BRUCE. Thank you. Chairman Mica, Representative Herger and Representative Ose and Representative Souder, I too appreciate the opportunity to speak before you today and discuss this crisis in northern California.

With the committee's permission, I would like to summarize my rather lengthy testimony that was submitted for the record.

Mr. MICA. Without objection. All of the complete written statements will be made part of the record.

Mr. BRUCE. Thank you, sir. This crisis stems primarily from the regions sustained growth in methamphetamine production and trafficking and the continuing abuse of this illicit drug. But methamphetamine is not the only illegal drug adversely affecting California' northern counties. There is a robust production and trade in marijuana, a resurgent trafficking in cocaine and crack cocaine, and the persistent market for black tar heroin. The consequences of the abuse, production and trafficking of these drugs is enormous. Individuals who abuse any one of these drugs usually creates havoc within families and within our communities as we have heard this morning. The production techniques of drug manufacturers pose immediate risks for their neighbors' health and to the environment. The often violent tactics of traffickers endangers the safety of all of us.

Methamphetamine production, trafficking and abuse pose the most serious drug threat to northern California. The vast majority of methamphetamine available in the United States is produced and trafficked by Mexican groups that operate large laboratories both in California and in Mexico. However, domestic production of methamphetamine by U.S. citizens is also a significant and growing problem. The production level of these laboratories, often described as mom and pop labs, is relatively low. However, each represents a safety and environmental hazard.

Methamphetamine is a very simple drug to produce. A recipe can be downloaded off the Internet. A user can go to retail stores and easily purchase the vast majority of these ingredients necessary to produce it. Precursor chemicals such as pseudoephedrine can be extracted from common over-the-counter cold medications. The proliferation of these mom and pop laboratories has imposed terrible burdens. There is an increased abuse and trafficking of methamphetamine. There is also the fact that the highly toxic and flammable chemicals involved in making these rudimentary laboratories ticking time bombs requiring specialized and expensive clean-ups.

Each pound of methamphetamine produced in a clandestine laboratory generates up to 5 pounds of toxic waste. Clandestine laboratory operators routinely dump these wastes into backyards, open fields, sewage systems and streams to cover up the evidence

of their illegal operations. The poisonous sludge from these sites seeps into streams, rivers and drinking water sources.

Just in the eastern district of California, 486 laboratories were seized in 1999. This total includes 9 laboratories in Shasta County, 14 in Sacramento, 18 in Sutter, 21 in Yuba and 32 in Butte County as reported to the Western States Information Network.

Both production and trafficking and the abuse of methamphetamine generate an intolerable amount of violence within our communities. There are thousands of incidents of domestic and child abuse prompted by one person's methamphetamine habit. For instance, advocates for children remind us that substance abuse and in particular methamphetamine abuse puts young children in danger constantly. And for methamphetamine, as for most every other type of illicit drug, there is the violence propagated by traffickers as they conduct their illicit business. This happens at all levels of trafficking, but most noticeably at the street level.

Marijuana cultivation and trafficking is flourishing in northern California as well. The region is ripe with indoor and outdoor growths producing high grade cincemia and commercial grade marijuana. There is also the continuing influx of marijuana imported from Mexico. This production and trafficking of marijuana has been propelled in part by passage of the 1996 California Proposition 215. Many marijuana traffickers have claimed protection from prosecution under this law, despite the fact that under Federal law where marijuana is listed as a Schedule 1 drug, there is no basis for distinguishing medical marijuana trafficking from marijuana trafficking generally. Marijuana trafficking is a violation of Federal law.

Indoor and outdoor growths of marijuana are found throughout northern California. DEA helps fund and is a participant in the Campaign Against Marijuana Planting Program in California. And in 1999, the CAMP Program eradicated over 3,500 indoor and outdoor marijuana growths and destroyed nearly 1 million marijuana plants.

With the strong soaring popularity of cheaper methamphetamines, some experts just a few years ago heralded the demise of cocaine. These predictions were overstated. While methamphetamine clearly has eclipsed cocaine as the drug of choice, there has been a recent resurgence in the demand and supply of cocaine and crack cocaine. Today, cocaine is readily available in much of California. Cocaine is trafficked primarily by drug organizations based in Mexico, but there is some direct involvement by Colombian-based organizations also. Cocaine is primarily being shipped from Mexico to northern California via Interstate 5 and Highway 99 from the Los Angeles Basin.

There is also a persistent market for Mexican black tar heroin in northern California. Black tar heroin is the dominant type of heroin trafficked in the region. Southeast Asia, Southwest Asia and Colombia heroin are rarely encountered in the area. Black tar heroin is usually trafficked by organizations based in Mexico. Much of the black tar heroin is thought to originate in the state of Michoacan, Mexico, where heroin processing laboratories are believed to exist. Sacramento and other northern California cities are

destination and trans-shipment points for this heroin as it moves up from Mexico and southern California.

There is an emerging concern over the import of opium from Southeast Asia also. Between January 1998 and July 1999, more than 1 ton of opium in or destined for northern California was seized. The majority of these seizures were made from parcels originating in Laos or Thailand and sent to California addresses in Redding, Madeira, west Sacramento and other northern California cities.

Other drugs threaten the livelihoods and lives of people residing in the northern counties. Supplies of LSD are available in northern California. The increasing popularity of this drug among youth remains a significant concern. There is also abuse of MDMA or ecstacy and GHB, gammahydroxybuterate, especially at grave parties that take place in almost all of our cities.

DEA's goal is to disrupt and ultimately dismantle the major drug trafficking organizations operating in northern California. We focus our energies foremost on the burgeoning plague posed by methamphetamine while continuing to target marijuana, cocaine and heroin trafficking organizations. In pursuing this goal, DEA continues to work closely with other Federal, State and local law enforcement agencies throughout northern California through the Organized Crime Drug Enforcement Task Force, the Central Valley High Intensity Drug Trafficking Area [HIDTA], and State and local task forces. In particular, we continue our close cooperation with California's Bureau of Narcotic Enforcement. DEA continues to pursue methamphetamine manufacturers and traffickers operating in the northern counties. Parallel to these efforts, we continue the aggressive targeting of major road chemical supply houses and pseudoephedrine suppliers operating in northern California. We continue to target and investigate indoor and outdoor marijuana growths throughout the northern counties of California. These efforts involve close coordination and cooperation with our State and local counterparts. Our continued efforts to reduce the threat posed by cocaine and crack cocaine in northern California involve identifying, targeting and dismantling the transportation cells moving cocaine throughout the area. We continue to target and investigate organizations trafficking in black tar heroin or producing or selling LSD, MDMA and other dangerous drugs.

DEA specifically targets drug-related violence through our Mobile Enforcement Team Program. The MET is a special DEA enforcement group trained to assist local communities in fighting drug-related violence. DEA has advertised the MET program to local law enforcement officials in each of California's northern counties and is prepared to respond to a community's call for assistance. Already the MET has been deployed to Yuba County as part of the Operation Reunited that the Sheriff talked about. This 3-month deployment, which concluded on July 2, 1999, resulted in the arrest of 26 individuals and seizure of 7½ pounds of methamphetamine, 25 pounds of processed marijuana and small quantities of cocaine and heroin and nine weapons.

This concludes my remarks. I would like to thank you for allowing me to testify today and I would certainly be open for any questions.

[The prepared statement of Mr. Bruce follows:]

Remarks by

Gilbert S. Bruce

Special Agent in Charge
San Francisco Field Division
Drug Enforcement Administration
United States Department of Justice

Before the

House Committee on Government Reform
Subcommittee on Criminal Justice, Drug Policy
And Human Resources

Regarding

Responding to the Drug Crisis in Northern California

March 6, 2000
625 Court Street, Room 206
Woodland, California

NOTE: This is the prepared text and may not reflect changes in actual delivery

Statement of
Gilbert S. Bruce
Special Agent in Charge
San Francisco Field Division
Drug Enforcement Administration
Before the
House Government Reform Subcommittee on Criminal Justice, Drug Policy, and Human Resources
Woodland, California
March 6, 2000

Chairman Mica, Congressman Ose, Members of the Subcommittee: I am pleased to have the opportunity to appear before you today to discuss the drug crisis confronting Northern California. This crisis stems primarily from the region's sustained growth in methamphetamine production and trafficking, and in the continuing abuse of this illicit drug. But methamphetamine is not the only illegal drug adversely affecting California's northern counties. There is the robust production and trade in marijuana, the continued importation of Mexican marijuana, a resurgent trafficking in cocaine and crack cocaine, and a persistent market for black tar heroin.

The consequences of the abuse, production, and trafficking of these drugs is enormous. Individuals' abuse of any one of these drugs usually creates havoc within families and within our communities. The production techniques of drug manufacturers pose immediate risks for their neighbors' health and to the environment. The often violent tactics of traffickers endangers the safety of all of us.

Today, I propose to discuss with the subcommittee the specific threats posed by each type of drug. The bulk of this discussion, however, focuses on the most severe drug threat afflicting Northern California: methamphetamine. I will then address the actions DEA is taking, in cooperation with State, local, and other federal law enforcement agencies, to eliminate these threats and protect the citizens of California's northern counties.

1. The Drug Situation in Northern California

Methamphetamine

Methamphetamine production, trafficking, and abuse pose the most serious drug threat in Northern California. Methamphetamine production via clandestine laboratories and methamphetamine trafficking are largely controlled by Mexican groups operating large laboratories in both California and Mexico. As these organizations produce the bulk of the drug, it is worth noting how they rose to such a prominent position in the methamphetamine trade.

Traffickers based in Mexico have had a long history of involvement in polydrug production and smuggling. For years, these powerful and violent groups produced and smuggled marijuana and heroin into the United States, dominating the heroin trade in the Southwest and Midwest regions of the nation. During the early 1990's, the Cali drug mafia reached an accommodation with trafficking groups based in Mexico who agreed to transport multi-ton quantities of cocaine into the United States. At first, transporters from Mexico were paid in cash, but eventually they negotiated to be paid in cocaine, which they distributed themselves within the United States. This series of changes in the cocaine trade, along with the arrest of the powerful Cali leaders in 1995 and 1996, greatly strengthened the organizations in Mexico.

The increased power and sophistication of the Mexican traffickers led these groups to seek to dominate all phases of the methamphetamine trade. Because methamphetamine is a synthetic drug created from a mixture of chemicals, traffickers based in Mexico did not have to rely on traffickers in other nations to provide products such as coca or finished cocaine for distribution. These Mexico based groups initially had ready access to precursor chemicals on the international market. There were less restrictive chemical controls in Mexico and overseas than in the United States, and this allowed the organizations to produce large quantities of high purity methamphetamine in clandestine laboratories in both Mexico and California. In recent years, with the growth of DEA led international efforts to control the flow of bulk ephedrine and pseudo-ephedrine, Mexican traffickers have had to turn to tableted forms of these precursors in order to manufacture their product. Now, these organizations frequently buy their needed precursors from rogue chemical suppliers in the United States.

Ready with thousands of pounds of methamphetamine produced in laboratories in Mexico and California, these methamphetamine organizations exploited their polydrug distribution networks already in place throughout the United States. These groups are responsible for the majority of the methamphetamine available in this country.

While the vast majority of methamphetamine available in the United States is produced and trafficked by the Mexican groups that operate large laboratories both in California and in Mexico, domestic production of methamphetamine by United States citizens is also a significant problem. The production level of these laboratories, often makeshift and described as "mom and pop" operations, is relatively low; however, the large number of such laboratories, and the environmental and safety hazards each represents, make these types of methamphetamine laboratories a primary law enforcement concern.

Methamphetamine is a very simple drug to produce. A user can go to retail stores and easily purchase the vast majority of the ingredients necessary to manufacture the drug. Items such as rock salt, battery acid, red phosphorous road flares, pool acid, and iodine crystals can substitute for some of the necessary chemicals. Precursor chemicals such as pseudoephedrine can be extracted from common, over-the-counter cold medications. A clandestine laboratory operator can use relatively common items such as mason jars, coffee filters, hot plates, pressure cookers, pillowcases, plastic tubing, gas cans, etc., to substitute for sophisticated laboratory equipment. Unlike fentanyl, LSD, or other types of dangerous drugs, it does not take a college-educated chemist to produce methamphetamine. In fact, less than ten percent of those suspects arrested for the manufacture of methamphetamine are trained chemists. This may be one reason there are so many fires, explosions, and injuries in clandestine laboratory incidents.

Although the majority of these laboratories produce relatively small amounts of methamphetamine, the proliferation of this type of laboratory has imposed terrible burdens on law enforcement agencies. The threats posed by clandestine laboratories are not limited to drug abuse, fire, explosion, noxious fumes, and booby traps; the hazardous wastes generated by these laboratories also pose a serious danger to the nation's environment. Each pound of methamphetamine produced in a clandestine laboratory generates up to five pounds of toxic waste. Clandestine laboratory operators routinely dump these wastes into backyards, open fields, or sewage systems to cover up the evidence of their illegal operations. Traffickers have indiscriminately created thousands of toxic waste sites. The poisonous sludge from these sites seeps into streams, rivers, and drinking water sources.

The highly toxic and flammable chemicals involved make these rudimentary laboratories ticking time bombs requiring specialized and expensive clean-ups. DEA is pleased to have certified thousands of the nation's state and local law enforcement officers after providing instruction on how to raid and dismantle clandestine laboratories, and to have provided funds for cleaning up these laboratory sites. DEA records indicate that the cost of clandestine laboratory cleanups range from $500 to $5,000 each, depending on the size of the laboratory.

While methamphetamine is not an entirely new problem in the United States, about six years ago an upsurge in methamphetamine trafficking and abuse began taking hold in many regions of the nation, starting here on the West Coast. DEA statistics indicate that in 1993, DEA seized a total of 218 methamphetamine laboratories. Current DEA statistics indicate that in 1999, DEA alone seized 1,948 clandestine laboratories and that the total number of laboratories seized by Federal, state and local law enforcement officers nationwide was over 6,400. (Note that more than 99 percent of all 6,400 clandestine laboratories seized nationwide were producing methamphetamine.)

In just the Eastern District of California, preliminary Western States Information Network (WSIN) data shows 486 laboratories were seized in 1999. This total includes nine laboratories seized in Shasta County, 14 in Sacramento County, 18 in Sutter County, 21 in Yuba County, and 32 in Butte County.

The production capabilities of these laboratories varies considerably. The larger, Mexico-based trafficking organization laboratories operating in the State can often produce 20 or more pounds of methamphetamine. Most of the local clandestine laboratories usually produce less than one pound per process.

Many of the small clandestine laboratories manufacture methamphetamine using the sodium ammonia or "Nazi" method. The "Nazi" formula of methamphetamine production uses ephedrine/pseudoephedrine reduction, as well as sodium or lithium metal, and other dangerous chemicals such as anhydrous ammonia in the process. Sodium metal poses an extreme fire hazard, and will ignite upon contact with water. This production technique has spread throughout the country and accounts for 20 percent of the total methamphetamine laboratories seized by DEA.

A key to the success of methamphetamine manufacturers is of course the continued supply of pseudoephedrine, other precursor chemicals, and glassware. Major "rogue" chemical houses located in Northern California have typically supplied these materials. These companies have been responsible for tens of millions of dollars in sales of chemicals and glassware to laboratory operators throughout Northern and Central California. DEA has conducted investigations that have resulted in successful criminal and civil cases against several of these suppliers and continues to investigate others.

Meanwhile, pseudoephedrine tablets remain readily available in Northern California. Indications are that small liquor stores, gas stations, and "mom and pop" grocery stores are one conduit for the movement of pseudoephedrine tablets. Several family-based organizations, with known ties to methamphetamine manufacturers and traffickers, own a number of such small businesses. These families are earning millions of dollars from their "back door" sales of pseudoephedrine to Mexico-based trafficking organizations and local methamphetamine producers.

Methyl Sulfone ("MSM") and Dimethyl Sulfone ("DMSO2") products, sold by chemical suppliers, veterinary distributors, and feed stores, are used by methamphetamine manufacturers as a cutting agent in illicit methamphetamine production. Their recent reliance on these ingredients may reflect difficulties they are experiencing in securing preferred supplies. One consequence of the use of these cutting agents has been recent, wide fluctuations in methamphetamine purities.

DEA's Office of Diversion Control is cautiously optimistic that precursor chemical controls, combined with aggressive local law enforcement efforts in chemical interdiction, have produced positive results. Nationally, the average purity of methamphetamine exhibits seized by DEA has dropped from 60.5 percent in 1995 to 27.2 percent in May 1999.

Recent information suggests that outlaw motorcycle gangs, most notably the Hells Angels, are producing their own methamphetamine rather than relying upon the Mexican organizations. This is primarily due to the fluctuations in purity of the methamphetamine supplied by the Mexican groups.

Despite the recent, dramatic variations in purity levels, supplies of methamphetamine have not decreased. Supply (and demand) has surged so much in recent years that methamphetamine can be said to be the "drug of choice" among the majority of illicit drug users in Northern California. Currently, methamphetamine prices range from $4,000 to $8,000 per pound or $500 to $600 per ounce. Quality still varies widely. Purities generally range from 10 to 100 percent for pound quantities and eight to 47 percent for ounce quantities.

Finished methamphetamine, whether produced in the State or in Mexico, is shipped throughout California and the nation. Nationwide, law enforcement methamphetamine seizures have increased sharply since 1995. DEA's Sacramento District Office has taken hundreds of pounds of methamphetamine off the streets since 1995. Nationwide, DEA has arrested thousands of people for manufacturing or trafficking methamphetamine. DEA methamphetamine related arrests for 1999 totaled 8,783. Of those, 742 arrests were made in Central and Northern California by DEA's San Francisco Field Division (SFFD). At the SFFD's most northern office, the Sacramento District Office, more than 57 percent of all 1999 arrests were related to methamphetamine.

A significant number of methamphetamine seizures and arrests are made along California's major highways, particularly the Interstate-5 and Interstate-80 corridors. DEA's Sacramento Transportation Interdiction Narcotics Group (STING), a narcotics transportation interdiction unit, focuses on traffickers exploiting these corridors. This enforcement group has seized more than 412 pounds of methamphetamine, enough for 37.4 million dosage units of the drug, in just under four years of operation. The STING has also arrested 404 drug couriers and seized nearly $1.5 million in drug tainted currency.

Both this trafficking and the abuse of methamphetamine generate an intolerable amount of violence within our communities. Many under the influence of the drug, including those going through withdrawal, have turned violent. Who can forget the live television footage of a paranoid methamphetamine addict who stole a tank from a National Guard armory and went on a car crushing rampage in the San Diego area? Another methamphetamine addict in New Mexico beheaded his son after experiencing hallucinations in which he believed his son was Satan. These are the more outlandish examples. Much more common are the thousands of incidents of domestic and child abuse prompted by one person's methamphetamine habit. For instance, advocates for children remind us that substance abuse, and in particular methamphetamine abuse, puts young children in danger. Consider the tragic case of Rebecca Meza, the two year old baby from Sacramento, who was drowned by her mother's boyfriend, a methamphetamine addict. Both the boyfriend and the mother (who also used methamphetamine) were charged with the baby's murder. Then there are also the theft crimes and violent acts committed by addicts to obtain money to purchase more of the drug. Finally, there is the violence propagated by traffickers as they conduct their illicit business. This happens at all levels of trafficking, but is most noticeable at the street level. Local, violent gangs often engage in the street trafficking of methamphetamine. For instance, DEA is investigating members of several methamphetamine trafficking street gangs operating in the Sacramento region. These gangs are also being targeted by the Treasury Department's Bureau of Alcohol, Tobacco, and Firearms for trafficking in automatic weapons.

In addition to the threat posed by methamphetamine manufactured locally and in Mexico, there is a more recent potential threat of methamphetamine manufactured in Asia. DEA is involved in an investigation of an international drug trafficking organization based in Thailand transporting multi-hundred pound quantities of heroin, methamphetamine, and opium into Canada for further shipment into the United States. Just recently, a Northern Californian police department seized methamphetamine tablets with markings matching tablets seized in Thailand by Thai law enforcement officials. These markings have been linked to this international organization. The tablets tested approximately 20 percent pure methamphetamine by weight. DEA's Bangkok Country Office reports that over the last year, Thai authorities have seized over five tons of methamphetamine tablets. Sources indicate that Asian trafficking groups may be in the initial stages of attempting to facilitate the trafficking of methamphetamine tablets throughout the United States, initially focusing on California's Central Valley and other regions experiencing widespread methamphetamine use.

Marijuana

Marijuana cultivation and trafficking is flourishing in Northern California. The region is ripe with indoor and outdoor grows producing high grade sinsemilla

and commercial grade marijuana. There is also the continuing influx of marijuana imported from Mexico.

This production and trafficking of marijuana has been propelled, in part, by passage in 1996 of California Proposition 215 ("The Compassionate Use Act of 1996"). Many marijuana traffickers have claimed protection from prosecution under this law, despite the fact that under federal law, where marijuana is listed as a schedule I drug, there is no basis to distinguish "medical" marijuana trafficking from marijuana trafficking generally. Marijuana trafficking is a violation of federal law.

The good news is that this legal and political conundrum offers only some protection to small growers. Generally, federal, state, and local officials do seize plants and arrest and prosecute individuals where the grows are clearly criminal in scope and purpose.

The bad news is that this whole situation has been viewed as a "green light" for many growers and distributors in California who recognize a reduced risk in cultivating and trafficking marijuana. Consequently, marijuana is more available than ever throughout all of California. Production is especially flourishing in Northern California, long the home of many of the State's largest marijuana grows. Local traffickers are involved in the trade, as are Mexican nationals who manage fields of marijuana for their Mexico-based trafficking organizations. Street-level distributors sell the high quality domestic marijuana, the lower potency Mexican variety, or sometimes imports from Canada.

Indoor and outdoor grows are found throughout Northern California. DEA helps fund and is a participant in the Campaign Against Marijuana Planting (CAMP) program in California. In just 1999, CAMP eradicated over 3,500 indoor and outdoor marijuana grows, destroyed 908,468 marijuana plants, seized 205,228 pounds of processed marijuana, made 1,667 arrests, and took 1,428 weapons off the streets. Many of these grows were located in Northern California, including 432 in Humboldt County, 406 in Glenn County, 215 in Mendocino County, 53 in Tehema County, 53 in Butte County, 50 in El Dorado County, 43 in Placer County, 33 in Shasta County, 26 in Del Norte County, and 15 in Amador County.

Currently, the price of California grown, seedless cannabis (sinsemilla) is approximately $2,500 per pound, or $200 to $600 per ounce. Delta-9-tetrahydrocannabinol (THC) is regarded as the active ingredient in marijuana. The THC content for this sinsemilla ranges from three to 20 percent, but generally falls between ten and 20 percent. Supplies of Mexican marijuana dominate the market in the eastern portion of the State. Here, Mexican marijuana prices have fallen to as low as $250 to $400 per pound. THC levels usually reach no more than eight percent.

DEA continues to investigate significant marijuana trafficking organizations operating within the State. In the three years from 1997 to 1999, DEA's San Francisco Field Division seized more than 7,500 pounds of processed marijuana and tens of thousands of marijuana plants from traffickers. In just 1999, the Division arrested 126 individuals on marijuana cultivating or trafficking charges. Most of these seizures and arrests took place in Northern California.

In an effort to deal with the recent upsurge in marijuana trafficking, DEA's San Francisco Field Division recently created an enforcement group dedicated exclusively to marijuana investigations. This enforcement group will concentrate its efforts in California's northern counties.

Violence initiated by marijuana cultivators and traffickers is a growing concern. Outdoor cultivation sites are often booby-trapped to ward off competitors and law enforcement. DEA has noted a rise in the number of "gardens" that are guarded by individuals possessing firearms. This is especially true of the outdoor cultivation sites managed by individuals working for the trafficking groups based in Mexico.

Cocaine

With the soaring popularity of the cheaper methamphetamine, some experts just a few years ago heralded the demise of cocaine in Northern and Central California. These predictions were overstated. While methamphetamine clearly has eclipsed cocaine as the drug of choice, there has been a recent resurgence in the demand and supply of cocaine and crack cocaine.

Today, cocaine is readily available in much of Northern California. Traffickers are selling cocaine in kilogram quantities, selling both pure and cut cocaine. Prices range from $16,000 to $21,000 per kilogram, or $600 to $800 per ounce, at purities of 40 to 95 percent. Crack cocaine is also readily available throughout the region. Crack sells for $15,500 to $20,000 per kilogram, or $500 to $950 per ounce.

In Northern California, cocaine is trafficked primarily by drug organizations based in Mexico. There is some direct involvement by Colombia-based groups. The cocaine available in Sacramento and the northern counties is primarily being transshipped from Mexico to Northern California via the Los Angeles basin.

Much of this drug traffic moves along California's parallel Interstate-5 and Highway 99 corridors. Some cocaine base and crack cocaine is stored at local distributors' and street dealers' residences, businesses, or local storage facilities along these routes. Some of the cocaine is destined for the Pacific Northwest; some is headed east, often along Interstate-80, to the Midwest and East Coast.

For example, DEA Special Agents recently seized approximately four kilograms of cocaine and arrested two individuals transporting cocaine via a Greyhound bus. These traffickers were en route from Los Angeles to Tacoma and Seattle, Washington.

The Sacramento region is infested with numerous multi-kilogram cocaine trafficking organizations shipping cocaine through the area. DEA's Sacramento Transportation Interdiction Narcotics Group (STING), the narcotics transportation interdiction unit, has seized more than 325 pounds of cocaine in just under four years of operation. Seizures for the DEA's Sacramento District Office amount to nearly 500 pounds for the time period 1997 to 1999. The Office arrested 178 individuals for cocaine trafficking during those three years.

Like with methamphetamine, the trafficking and the abuse of cocaine and especially crack cocaine, generate significant spates of violence within our communities. Many who abuse the drug have become abusive. Many must steal to obtain money to purchase the drug. Finally, there is the violence perpetuated by traffickers as they fight for turf to conduct their illicit business. Again, this happens at all levels of trafficking, but is most noticeable at the street level. Local, violent gangs often engage in the street trafficking of crack cocaine and cocaine. For instance, DEA, with its state and local law enforcement partners, is currently investigating members of violent gangs actively involved in distributing crack cocaine in Northern California.

Heroin

There is a persistent market for Mexican black tar heroin in Northern California. Black tar is the dominate type of heroin trafficked in the region; Southeast Asian, Southwest Asian, and Colombian heroin are rarely encountered.

Black tar heroin is usually trafficked by organizations based in Mexico. Much of the black tar heroin is thought to originate in Apatzingan, in the State of Michoacan, Mexico, where heroin processing laboratories are believed to exist. Sacramento and other Northern California cities are destination and transshipment points for this heroin as it moves up north from Mexico and Southern California.

Much of the black tar heroin is transported by passenger vehicles up the State's Central Valley via Interstate-5 or Highway 99. Some of this heroin is destined for the Pacific Northwest. For example, DEA Special Agents stationed in Sacramento recently seized approximately three pounds of Mexican tar heroin and arrested two individuals transporting the heroin from Los Angeles to Portland, Oregon. Many of the dealers trafficking in heroin also deal in other drugs, notably methamphetamine.

In the past, black tar heroin couriers typically carried only ounce quantities of heroin. More recently, couriers have been found to be in possession of more than pound quantities of the drug. DEA's Sacramento Transportation Interdiction Narcotics Group has seized more than 33 pounds of black tar heroin in just under four years of operation. Seizures for the DEA's Sacramento District Office amount to nearly 60 pounds for the period 1997 to 1999. The Office arrested 47 individuals for heroin trafficking during those three years.

The price for an ounce of black tar heroin ranges from $600 to $1,800, at purity levels ranging from six to 80 percent.

Like with cocaine and methamphetamine, the abuse and trafficking of heroin has generated violence within our communities. Some who abuse the drug must steal to obtain their next fix. Oftentimes this involves an assault or other violence. There is also the violence perpetuated by traffickers. Again, this happens at all levels of trafficking, but is most noticeable as pushers and gangs vie for their piece of the street market.

In addition to the threat posed by black tar heroin trafficking, there is an emerging concern over the import of opium from Southeast Asia. Between January 1998 and July 1999, more than one ton of opium in or destined for Northern California was seized. The majority of these seizures were made from parcels originating in Laos or Thailand and sent to California addresses in Redding, Madera, West Sacramento, and other Northern California cities. This appears to have been a well organized operation, likely executed by several central players. The primary traffickers appear to be U.S. citizens or residents of ethnic Thai, Lao, Hmong, or Mien heritage.

Other Dangerous Drugs

Other drugs threaten the livelihoods and lives of people residing in the northern counties. Supplies of LSD are available in Northern California. The increasing popularity of this drug among youth remains a significant concern. The drug appears to remain popular because of its relatively low cost, the ease of concealment, and the false perception (*particularly* among youth) that its use is not dangerous. There is also abuse of MDMA (or "Ecstasy") and Gamma-Hydroxy Butyrate (GHB), especially at "Rave" parties. Psilocybin mushrooms and other types of illicit drugs occasionally surge in popularity.

2. DEA's Efforts to Curb Drug Trafficking in Northern California

DEA's goal is to disrupt and ultimately dismantle the major drug trafficking organizations operating in Northern California. We will focus our energies

foremost on the burgeoning plague posed by methamphetamine, while continuing to target marijuana, cocaine, and heroin trafficking organizations. In pursuing this goal, DEA will continue to work closely with other federal, state and local law enforcement agencies through the Organized Crime Drug Enforcement Task Force (OCDETF), the Central Valley High Intensity Drug Trafficking Area (HIDTA), and state and local task forces. In particular, we will continue our close cooperation with California's Bureau of Narcotic Enforcement (BNE).

Our paramount concern is the blight posed by methamphetamine production and trafficking. DEA will continue to pursue methamphetamine manufacturers and traffickers operating in the northern counties. Parallel to these efforts, the Sacramento District Office's Clandestine Laboratory Task Force and the Diversion Group will continue the aggressive targeting of major rogue chemical supply houses and pseudoephedrine suppliers operating in Northern California.

We are encouraged by the recent, unprecedented $225,000 civil penalty and permanent injunction stipulated judgement against CW. Brower, Inc., a major Central Valley distributor of pseudoephedrine, and its owner. This case is the first in the country to impose a lifetime ban on distribution of chemicals and equipment, and is also the largest civil penalty case ever against a distributor who sold pseudoephedrine to the public.

In cooperation with the Eastern District of California United States Attorney's Office, DEA will continue our leadership role in the multi-agency Methamphetamine Strategy Committee. All of our methamphetamine efforts are coordinated as part of the National Methamphetamine Strategy and a statewide strategy formulated by DEA, BNE, the U.S. Attorney's Offices, and other federal, state, and local agencies. We will continue to be active members of the California Precursor Chemical Committee.

DEA will continue to target and investigate indoor and outdoor grows throughout the northern counties of California. The new enforcement group dedicated to marijuana investigations will spearhead these investigations. These efforts will involve close coordination and cooperation with our state and local partners through the Campaign Against Marijuana Planting (CAMP) and other programs.

DEA's continuing efforts to reduce the threat posed by cocaine and crack cocaine in Northern California involves identifying, targeting, and dismantling the transportation cells moving cocaine throughout the territory. DEA will continue to use its narcotics transportation interdiction unit, the Sacramento Transportation Interdiction Narcotics Group, along with other investigative assets to identify and target these cocaine trafficking organizations.

DEA will continue to target and investigate organizations trafficking black tar heroin or producing or selling LSD, MDMA, or other dangerous drugs.

DEA specifically targets drug related violence through our Mobile Enforcement Team (MET) Program. The MET is a special DEA enforcement group trained to assist local communities in fighting drug related violence. DEA has advertised the MET program to local law enforcement officials in each of California's northern counties and is prepared to respond to a community's call for assistance. Already, the MET has been deployed to Yuba County. This three month deployment, which concluded on July 2, 1999, resulted in the arrest of 26 individuals, the seizure of seven and one-half pounds of methamphetamine, 25 pounds of processed marijuana, small quantities of cocaine and heroin, and nine weapons.

Mr. MICA. Thank you.

And we will suspend questions until we have heard from our final witness, which is Mr. Paul Seave. He is the U.S. attorney in the Eastern District of California. Welcome. We recognize you.

STATEMENT OF PAUL SEAVE, U.S. ATTORNEY, EASTERN DISTRICT OF CALIFORNIA

Mr. SEAVE. We are the 10th largest by size; we are the 8th largest by population. And perhaps surprisingly, we have the 17th worst crime rate among the four judicial districts. In California, we have the worst crime rate among the four in the State.

I would like to briefly outline the methamphetamine problem which others have mentioned, and then highlight two of the various strategies that we are pursuing to respond to the meth problem here.

Meth poses the primary drug threat in California and almost every State west of the Mississippi. Historically, as has been mentioned, meth use was found primarily in California produced by outlaw motorcycle gangs within the State. Approximately 6 years ago, however, poly drug organizations in Mexico moved into this market. They possessed the resources to finance and staff methamphetamine laboratories that could produce quantities far in excess of the multi-gram and pound laboratories of the past. These super labs can manufacture 10 pounds, 50 pounds and even 100 pounds of methamphetamine per production session. It is estimated that well over half, perhaps as much as 75 percent of the methamphetamine used nationally is manufactured in California. These super labs are located primarily in the southern half of this district and the Los Angeles area.

Not surprisingly, California is now referred to by law enforcement across the Nation as the source country for methamphetamine. California's methamphetamine is primarily manufactured with chemicals purchased domestically from American businesses. The main precursor chemical is pseudoephedrine. This chemical, which is also a main ingredient in over-the-counter allergy and cold tablets is imported from Europe, India and China by large East Coast companies, manufactured into pills and then sold to wholesalers across the United States. These wholesalers in turn sell to retailers such as small convenience and liquor stores, and these retailers sell cases of these pills to the operators of the methamphetamine laboratories. The wholesalers also mail cases of these pills directly to meth traffickers.

Alarmingly, the quantity of pseudoephedrine imported into the United States has nearly tripled between 1990 and 1996. Meaning that unless the citizens of this country are tripling the incidence of colds and allergies, we have a pretty good idea that all the pseudoephedrine is going to meth labs and to meth users in the United States.

I would like to highlight two aspects of our anti-meth strategy. The first has been to focus on the businesses that distribute pseudoephedrine and other chemicals to the manufacturers of meth. Criminal prosecution of these businesses requires proof of intent. For example, that the defendant knew or had reasonable cause to believe that the chemicals would be used to manufacture

methamphetamine. Prosecuting these businesses civilly requires a lesser quantum of proof, such as that the defendant distributed the chemicals with reckless disregard for the illegal uses to which they would be put, or that the defendant failed to report a suspicious transaction, or that the defendant failed to document the purchaser's identity. It is important to remember that such enforcement actions, criminal or civil, can be difficult because those who sell these legal chemicals for illegal purposes go to great lengths to enhance their appearance as legitimate business people. Notwithstanding these difficulties, experience has convinced us that prosecuting a chemical trafficker reduces methamphetamine production and distribution to a far greater degree than the traditional prosecution of those operating clandestine labs. Indeed, the price of pills containing pseudoephedrine has skyrocketed since we implemented this strategy and the purity level of meth has plummeted.

And I might just mention that right now in Federal court in this district, there are two trials going on. These are the two most significant cases that we have charged to date in this area.

A second aspect of our strategy has been to enhance our capacity to collect drug-related intelligence from the more than 100 police agencies in this district, to analyze that information, and to make that information and analysis available to all agencies. For example, it is critical that law enforcement comprehensively collect discarded pill bottles from meth labs and dump sites, determine the distributors of those bottles, and notify the distributors so that they can take preventive measures or face future enforcement action. This is a resource intensive and complex project requiring the participation and coordination of numerous agencies. We are well on our way to implementing that strategy.

In conclusion, methamphetamine, unlike most other illegal drugs, is produced primarily within our borders and primarily within our State. This means that the so-called legitimate businesses that supply the chemicals needed by meth manufacturers are within the reach of U.S. law enforcement. We are now focusing on these businesses and thus far we have met with some success. Again, thank you for allowing me to address you, and I look forward to any questions you may have.

Mr. MICA. Thank you. And we will start with some questions.

First, Mr. Scott, did you have to leave early?

Mr. SCOTT. I'll have to depart here soon.

Mr. MICA. OK. Well hopefully we will be through by that time. I just wanted to make certain that we didn't detain you. I have some questions. First of all, on the expansion of the HIDTA, you have a current request in for what? $2.5 million for the existing HIDTA?

Mr. RUZZAMENTI. The existing HIDTA, currently the budget will be $1.487 million for 2000. We have not put in our 2001 request yet. I have been advised by ONDCP though that next year's funding will be level funding and not to anticipate any more than we got this year unless there is another enhancement, in which case we could get more than the $1.4.

Mr. MICA. And you are saying it takes somewhere in the range of $2.5 million to operate just the HIDTA that you have now adequately?

Mr. RUZZAMENTI. That is ONDCP's estimate.

Mr. MICA. Right. I mean for your side of it. Are you requesting $1.4 and getting $1.4, or are you requesting more?

Mr. RUZZAMENTI. Well, I would anticipate that what—logistically the way we would do this is we will put in the request because we have been mandated by ONDCP to request level funding of $1.4. And then I will do a supplemental requesting that additional $1 million.

Mr. MICA. Describe for me how you are spending the money that you are getting. Is there administrative costs and is it distributed to the different agencies? How is it broken down?

Mr. RUZZAMENTI. Currently, we have three enforcement initiatives. One in Bakersfield, one in Fresno and one in Modesto. And they are all enforcement methamphetamine task forces that are involved in complex methamphetamine——

Mr. MICA. Are they getting money?

Mr. RUZZAMENTI. They are getting money.

Mr. MICA. How much of the $1.4?

Mr. RUZZAMENTI. They get right now roughly $200,000 and some each. It varies from——

Mr. MICA. OK. That times three is $600,000 or $700,000.

Mr. RUZZAMENTI. It is about $750,000.

Mr. MICA. OK. Where is the balance going?

Mr. RUZZAMENTI. Then we have the intelligence task force in Sacramento.

Mr. MICA. How much?

Mr. RUZZAMENTI. It is getting about the same, about $250,000.

Mr. MICA. OK. We are up to $1 million. The balance?

Mr. RUZZAMENTI. And then the balance, we are setting up an intelligence center in Fresno which will coordinate the intelligence amongst the HIDTA activities going on in the other initiatives. That is being set up and that again is about another $250,000 for this year's funding. And then the rest is administrative and operational funding.

Mr. MICA. Are there any amounts of money going to the individual sheriff's departments for employing additional personnel?

Mr. RUZZAMENTI. No, not at this time. We have funding going to the sheriff's departments to pay for overtime.

Mr. MICA. Well, you've heard that Sheriff Denney says that he just doesn't want to send more folks to another task force and meetings and deplete what he has now. If we expand this, we are going to need additional money and we don't want to divide this up to a lesser amount. Sheriff Shadinger has spoken about his only help is the Burn Grant.

Mr. SHADINGER. The Burn Grant is how we operate. There is no general fund money in small counties. That is the problem.

Mr. MICA. OK.

Mr. SHADINGER. And if I could just make a comment?

Mr. MICA. Go ahead.

Mr. SHADINGER. In talking with a couple of Central Valley sheriffs that are already participating in the Central Valley HIDTA, they are at a point where they know it is going to cost them money now out of their budget.

Mr. MICA. To participate in that.

Mr. SHADINGER. The $1.4 is not adequate. If I didn't make it clear before, I don't want to encroach upon that $1.4. We need additional money for it to be expanded.

Mr. MICA. Mr. Bruce, you described and I have heard described today that a lot of the trafficking in meth and other substances is coming out of Mexico. What are we doing to stop this stuff before it reaches our borders?

Mr. BRUCE. Again, a lot of that addresses our situation now in terms of resources. Because over the last few years, between the governments Southwest Border Initiative and the Caribbean Initiative, a great many of our resources at DEA have been dedicated to those initiatives. And I think we are——

Mr. MICA. Have you remained level in funding and personnel or increased? Give me a snapshot over the last 4 or 5 years?

Mr. BRUCE. Well, DEA has gotten substantial——

Mr. MICA. Your resources here.

Mr. BRUCE. Here in the division?

Mr. MICA. Yes.

Mr. BRUCE. Virtually been flat. Some increases, very small increases.

Mr. MICA. So we are going tomorrow to San Diego and do a border hearing followup to this hearing. So I will be anxious to see where the resources are. Finally, Mr. Seave, what priority do you place as far as your district here on the drug enforcement prosecution? And what are we doing at the Federal level to curtail the problem that we could be doing better? I believe we have the role, first of all, of stopping the stuff before it ever gets to the border and then tough prosecution. Is prosecution a high priority and what aren't we doing?

Mr. SEAVE. Yes. Prosecution of meth in particular is probably the top priority of our office. I know we prosecute more meth cases than any other U.S. attorneys offices and we get the highest sentences.

Mr. MICA. What could we do to do a better job at the Federal level to help bring the situation under control?

Mr. SEAVE. As far as resources go, I would harken back to what everyone on the panel has said. We need more DEA agents in this district, and particularly in northern California. This district relative to the rest of the country is significantly underserved if you measure the agents by agents per population or agents per number of cases brought and so forth. So as far as resources go, at the Federal level that is what I would like to see.

From a tactical level, what we are starting to do again is to go after the people who sell these chemicals.

Mr. MICA. Are the laws adequate in that regard? Federal law, particularly with some of the precursors or chemicals used in production of methamphetamine?

Mr. SEAVE. I believe that the laws are adequate. What we need more resources or more effort focused on, is tracking the chemicals when they hit the border or when they hit the East Coast and where they go from there—how you track them and where are they going—so we can more effectively focus our enforcement efforts. Stopping chemicals and drugs coming across the border is very, very difficult. But the beauty so-called of meth is that it is being

produced here. And that is why going after the chemical people strikes me as the most effective strategy. I mean, they are here. And if we can track them more effectively than we do now, and we are trying to do as good a job as we can, we can drive up the price even more than we have now.

Mr. MICA. Thank you. Mr. Ose.

Mr. OSE. Thank you, Mr. Chairman. If I may diverge for a moment. I want to make sure I recognize one gentleman who has already left, but also one who has joined us. Sheriff Blanas from Sacramento County joined us for a few minutes and unfortunately he had to go on. Also the District Attorney of Yolo County is here, Mr. Dave Henderson. Dave, thanks for joining us.

I wanted to highlight for the record that when the issue of the Central Valley HIDTA came up, up and down my particular district and I am sure in Wally's, there was an immediate response from my sheriffs as to we would like to be included. And the question became one of funding. And the thing I wanted to highlight was that without exception from north to south, every one of my sheriffs said if all we have got is enough money to set up one in the nine counties, what became the Central Valley HIDTA, we need to do that. We need to not let perfect be the enemy of the good. And without exception from north to south, even those who aren't here, spoke out with let's get the Central Valley HIDTA set up. So I want to particularly pay my respects to the gentlemen here because they were very vocal about that as well as their colleagues.

But I am interested specifically as to what the House of Representatives in its fiscal capacity can do to assist with creating or expanding the current Central Valley HIDTA to address the issue. And my rationale is as follows. As the Central Valley HIDTA comes into existence and becomes more and more effective, those who would otherwise traffick in methamphetamines or other things are going to go to an area where there is less attention being paid, which naturally would lead them further north on I–5 or 99 into my area. When they get here, I want to be ready. I want to deal with it now, but I don't want to open the door if you will.

So my question again gets back to the fiscal reality we face. And that is how do we in Congress provide—Mr. Bruce, how do we provide you the resources to address this? And my specific question is, I think, as I understand it the current HIDTA, according to the gentleman McCaffrey, requires $2.5 million to operate and be staffed effectively. Is that accurate?

Mr. RUZZAMENTI. Yes.

Mr. OSE. If we were to expand that current HIDTA, what would you need in terms of fiscal support from the Federal Government over and above the $2.5?

Mr. RUZZAMENTI. If we in fact got $2.5 for fiscal year 2001, we could do some limited expansion with that. In other words, we could probably incorporate another initiative if we got a full $2.5.

Mr. OSE. In addition to the three you have at this time?

Mr. RUZZAMENTI. In addition. Realistically, it won't be anything extravagant. But we could probably support another initiative if we got the full $2.5 million funding. If you are talking about all the northern counties, then that would be significantly more appropria-

tions. I would think just roughly you are probably looking at least $5 million.

Mr. OSE. From the Federal Government?

Mr. RUZZAMENTI. Yes.

Mr. OSE. OK. Mr. Bruce, do you agree with that?

Mr. BRUCE. Yes, I do. One thing—and you get into the conversations of adding on initiatives to the already formed HIDTA as opposed to—I know that came up earlier as opposed to a totally separate HIDTA. With that, of course, you have all the same commensurate administrative set-up and expenses and things, which take a substantial amount of funding also. But my understanding is—and I came into the process rather late when the Central Valley HIDTA was being formed—that from the initial aspects of it as you mentioned was that they would be all-inclusive throughout the eastern district at the point it could be. But funding and resources are always the bottom line. Whether it is deputies in Sutter County or whether it is DEA agents or whether it is funding to put initiatives together. It all gets down to resources, and it is tough. I mean, the competition right now is very, very tough. Whether it is for Burn Grants or whether it is the competition I am in with 20 other domestic divisions and the foreign offices for agent resources in my organization. It is a tough thing.

Mr. OSE. If I may, Mr. Chairman. If I understand your point earlier, the $1.487 million that you have got now, you've got some going to setting up an intelligence center and some to actual intelligence in the field, three initiatives and then administrative costs. If we expanded the HIDTA, we would not need a new intelligence center. So that is not going to be a mirror image. So we wouldn't have that. We would arguably need the intelligence resources in the field, so we might still have that quarter remaining. The administrative costs might go up some, but not on a dollar-for-dollar mirror. Is there administrative capacity to run an expanded HIDTA in the Central Valley?

Mr. RUZZAMENTI. I wish I could tell you yes. Right now, we are just setting up. So basically the entire administration of the HIDTA is sitting here.

Mr. OSE. You are doing fine.

Mr. RUZZAMENTI. I just hired an administrative assistant who starts to work today. So we have got that working. And we just hired a fiscal person who just started work about a week ago. So we are building that sort of structure. With the increase in counties and the increase in the funding for the projects that we have going on, that is somewhat labor intensive as far as making sure the money is spent appropriately and audited appropriately and those kinds of functions. So there would be additional administrative costs, but I don't think they would be excessive. Right now, each initiative compartmentalized, we are looking at about $250,000, and all that covers—this doesn't cover it all—overtime for the police officers and the sheriffs department and some moneys for purchasing evidence and paying informants, but very minimal, and that is about it. That really is the bulk of where the money is going. So it is somewhat of a shoestring operation.

Mr. OSE. I appreciate your comments and I know my good friend has questions as to who makes the decision as to whether or not

to expand the HIDTA, assuming Congress provides the resources. But I do not want to get away from your point, Sheriff Denney, about providing the fiscal support rather than local resources. We will come back to this, Mr. Chairman, if you will allow a second round of questions. With that, I will give it back.

Mr. MICA. Thank you. I yield now to the gentleman from Indiana, Mr. Souder.

Mr. SOUDER. First I wanted to say to Sheriff Denney, you have the most interesting job title I have heard of—sheriff, coroner and public administrator. I assume if you come to someone's door, they certainly hope you are coming as a public administrator.

Sheriff Parker, I had a question. In your data, you start off with the methamphetamine seizures, but in fact you seize almost twice that in marijuana as well as other drugs. Is the percentage of meth increasing? Is that why you stressed that more? Why is there so much discussion? Because in the other statistics we heard as well, marijuana is still a greater problem than methamphetamine.

Mr. PARKER. I talked about meth because TAGMET mainly deals with the meth problem. I didn't even mention the amount of marijuana that both Glenn County and Tehema County Sheriffs Department seized.

Mr. SOUDER. Well, you have in your written statement, at least, that TAGMET agents seized 27.65 pounds of methamphetamine and 47.65 pounds of marijuana. Even the TAGMET interdicted twice as much marijuana.

Mr. PARKER. Yes, marijuana is a big problem in the North State. And like I said, we have our own marijuana eradication team.

Mr. SOUDER. In addition to the TAGMET?

Mr. PARKER. Oh, yes. And so does Glenn County.

Mr. SOUDER. And is the marijuana staying the same level problem vis-a-vis methamphetamines or do you see the ratio shifting?

Mr. PARKER. Actually, I see marijuana has increased in the last few years, and unfortunately part of that problem is probably the teen, which has to be addressed sometime. But still we have a major problem with methamphetamine, and it is not just being shipped in by I–5. We have a lot of labs in our own county that is producing it. It is a major problem.

Mr. SOUDER. Then on behalf of Indiana, I want to say that your problem in California has unfortunately spread to the rest of the country by implying it is a health issue, when we could probably find a health subcomponent of tobacco and we could probably find a health subcomponent of alcohol and we could find a health subcomponent of a number of things. By putting the term medicinal in front of marijuana, we have really weakened our ability to communicate messages in the schools and elsewhere.

Mr. Scott, in your testimony, you said that from the Shasta Interagency Narcotics Task Force that meth arrests accounted for 76 percent of arrests and that 72 percent of the kids on probation tested positive for meth. Would marijuana have similar figures? In your county is it a different mix?

Mr. SCOTT. Well, with respect to the arrests, our sheriffs department has the marijuana eradication team which handles the bulk of the large growths and things of that nature. I don't want to say exclusively on methamphetamine, but in terms of cocaine, heroin

and methamphetamine, there is no comparison. There is simply no comparison between the amount of methamphetamine that it handles in relation to the other "hard drugs".

Mr. SOUDER. Mr. Ruzzamenti, if the No. 1 problem is marijuana, why is your HIDTA only focused on methamphetamine?

Mr. RUZZAMENTI. Well, the Central Valley HIDTA is focused on methamphetamine because that is by far and away the No. 1 problem in the nine counties that are overseen by the Central Valley HIDTA.

Mr. SOUDER. You are saying that more people use methamphetamines than marijuana or more arrests in those nine counties?

Mr. RUZZAMENTI. It is a much more insidious drug as far as the violence incurred and as far as the organization structure of the organizations that are marketing it and transporting it through the areas. It has a more significant impact on the sheriffs departments, both manpower and time as far as lab clean-up sites and environmental hazards. It is the most significant drug in those counties from a law enforcement standpoint.

Mr. SOUDER. Could you explain that a little more? In other words, the potency of the meth as opposed to the potency of the marijuana, cocaine and heroin?

Mr. RUZZAMENTI. Well, it is just a totally separate drug. Methamphetamine is not only being used, but the resulting problem like the lady was talking about endangered children. That is a problem for the family. It is just impacting the areas in a number of different fashions. And that is not saying that these areas don't have problems with marijuana and they don't have problems with heroin, because they do. But the most significant problem is methamphetamine, and that is what the HIDTA is targeted to go after. We have limited resources and we had to—decisions had to be made and that was the decision to take it in that direction.

Mr. SOUDER. Did you say this is the only HIDTA that is targeted?

Mr. RUZZAMENTI. No. The new HIDTAs that came about in fiscal year 1999, of those I think two of them were methamphetamine specific. And then the other ones were general in nature.

Mr. SOUDER. If you expanded this HIDTA, would you—do you know which counties you would propose including?

Mr. RUZZAMENTI. No. We would have to sit down with each of the sheriffs and the law enforcement administrators in the counties. Sit down with them and see what their problems were and how we could best——

Mr. SOUDER. I believe you made an allusion before to the fact that the way you chose the counties you have in it were based on the percentage of methamphetamine usage. In other words, wouldn't that criteria have to be there if you expanded your HIDTA?

Mr. RUZZAMENTI. Not specific usage but the laboratories.

Mr. SOUDER. The labs.

Mr. RUZZAMENTI. The major labs are in those nine counties, as far as the labs that are the super labs, if you will, that are producing the 100 pounds of methamphetamine at a time or 50 pounds

of methamphetamine at a time. These kinds of super labs are primarily in and around Fresno and in that area.

Mr. SOUDER. And that is the kind of criteria you would apply as you added counties?

Mr. RUZZAMENTI. If it was to continue to be methamphetamine specific, I think you would have to be consistent with that kind of criteria. You would have to look at the counties consistently and what is their methamphetamine problem.

Mr. SOUDER. And if it wasn't methamphetamine specific, you would have to go up to the $2.5 million base. Part of the reason you have the $1.487 is because you are specific and not a broad based HIDTA?

Mr. RUZZAMENTI. That is correct.

Mr. SOUDER. And so then you would have to start with a different base before you added the other counties.

Mr. RUZZAMENTI. Yes. Technically, I don't know how ONDCP would do that.

Mr. SOUDER. But you haven't had any discussions at this point with ONDCP about how to do that?

Mr. RUZZAMENTI. I have had preliminary discussions with ONDCP as far as trying to up the ante on this thing to $2.5 million. And in those preliminary discussions, we have indicated that there were counties to the northern part of the State that are interested in joining the HIDTA. And that if additional funds were available that new initiatives in the northern counties would be a possibility.

Mr. SOUDER. Thank you. I know my time is up. Mr. Bruce, I wanted to thank you for the specifics in your testimony. It was very helpful and hopefully we can followup.

Mr. MICA. Thank you, gentlemen. I will recognize Mr. Herger.

Mr. HERGER. Thank you, Mr. Chairman. Just as a followup to this. Mr. Ruzzamenti, if it might be possible in the next couple of weeks, I believe the chairman indicated that we would have the record open for questions. And it would help us very much on the committee and as Members of Congress as far as budgeting is concerned if it might be possible to perhaps give us an outline or a skeletal budget of what you feel it might take to include Congressman Ose's and my districts or the northern part of the State. It would be very helpful to us in making recommendations.

Again, I want to thank everyone who is here. The fact that we have so many sheriffs and so many law enforcement people and district attorneys not only on the panel but a number who in fact have shown up and are here in the audience this morning from throughout our area certainly indicates how incredibly important this issue is to us.

We are having some questions on perhaps the difference between methamphetamine and what it does than that of marijuana, which is also a major concern. District Attorney Scott, if I could ask you, if I would, if you would relate. I know you have set up a pilot program or a program that you have initiated on methamphetamine. What have been some of your experiences on the clients, if you will—those that you have run into as far as their disposition, those who are on methamphetamines.

Mr. SCOTT. I think the principle thing which distinguishes methamphetamine from certainly marijuana and the other drugs is the level of violence which accompanies use of the drug. One of the statistics I included in my written presentation was that for a 4-year period of time in Shasta County, 40 percent of our murders involved some use of methamphetamine. I think that is a startling statistic when you stop and think about it.

The second aspect of it was spoken to by Ms. Webber-Brown this morning with respect to the drug becomes all encompassing. It literally takes over the life of the person who becomes addicted to it. So that literally their children don't matter to them as much as the drug does. And those two things really stand out to me in my experiences with methamphetamine. It is a startling thing to stand in court at an arraignment of a person who has been arrested for a methamphetamine related offense and to literally see the shell of a human being. A person who is emaciated, sores on their body, scratching and itching constantly, no concept of where they are or what is going on. It really is the devil's drug. That is what people call it. The users call it that and it is a very appropriate title.

Mr. HERGER. So it is horrendous, as all these illegal drugs are. Methamphetamine particularly we are seeing causing problems. That is quite startling I think of all the murders in Shasta County that almost half are methamphetamine related. So it certainly, I think, would indicate a reason why we, if anything, could use a specific program that has grown so much here in our area. How much would an expanded HIDTA program help us in northern California in your County of Shasta and the adjoining counties that you are familiar with if we were to be able to do that?

Mr. SCOTT. I think it would be a tremendous help. I think I speak for most of the counties, if not all, when I say that we are literally tapped out in terms of the use of local and State resources to battle the methamphetamine problem. We have all applied for grants from the State and we have all gotten grants from the State and we have gotten the grants that we can from the Federal Government. And this is really the next step in our ability to do something about the problem. We have got to have a coordinated response between all levels of government, not just the locals and the State governments, but the feds, the State and the local government.

One of the key things, and there are several, is the I–5 corridor. It has been addressed here before, but one of the essential problems we have is that we literally are stopping on a daily basis drug traffickers who are ferrying drugs to the northwest from the Bay area and lower Central Valley and Los Angeles. We bear the cost of the investigation, prosecution and incarceration for those persons who are sent to State prison, when it is truly an interstate problem that we technically under the Constitution don't have responsibility for. And so the expansion of the HIDTA, along with the opening of a branch regional office of the DEA, preferably in the north state, Redding, would really go a long ways toward tying division of the responsibility for that interstate drug trafficking to the feds as well as the State and locals, and really be the next step, as I said, in what we are trying to do. We all come from communities that are seriously devoted to doing something about this problem, and we

need the help from the feds. Because we have taken it as far as we can and the next level has to come from your end.

Mr. HERGER. Thank you very much for pointing that out. I know that had been pointed out earlier. But the fact that so much of the problem we have is really that Interstate 5 is a major corridor between Mexico, actually international, through Oregon and Washington into Canada, as well as 99, which passes up through Marysville and Yuba City, and these corridors do tend to attract those who would be involved in this.

And I just have to restate again the importance. I want to thank you. I mentioned earlier just speaking with Sheriff Charlie Byrd, who is sitting in the back. And every sheriff I talk to or law enforcement within our counties, this is such a major problem and really just crying out for assistance and help to combat this. So, again, thank you very much for your testimony. And Mr. Chairman and members, thank you very much.

Mr. MICA. Thank you, Mr. Herger. Additional questions, Mr. Ose?

Mr. OSE. Thank you, Mr. Chairman. I want to come back to the two questions I have. First, and this falls to you primarily. I notice in Mr. Ruzzamenti's testimony that you are the chair of the Executive Committee for the Central Valley HIDTA. What I am trying to determine is to which executive or where in the executive branch will the decision be made as to whether or not to expand the existing Central Valley HIDTA?

Mr. SEAVE. Within ONDCP.

Mr. OSE. It would be made by General McCaffrey or some other——

Mr. SEAVE. Someone working for General McCaffrey. That is assuming the funding is there.

Mr. OSE. Correct, on that assumption. Is the Executive Committee of which you are the chair of play a role in that?

Mr. SEAVE. We play a role in so far as we submit our requests for here are some initiatives that we have and we need additional funding. But I can assure you that every HIDTA is doing the same thing. So the decision, as far as I can tell, comes from McCaffrey and his staff.

Mr. OSE. OK. From your experience, could you share with us some of the specific qualifications or requirements that our counties must establish in order to make an acceptable case for expanding the current Central Valley HIDTA?

Mr. SEAVE. One of the factors that McCaffrey and his staff look at is is this just a local problem or is this a problem that goes beyond the regional area and beyond the State? Is there a national impact? As far as that goes, of course you have heard about I–5. So this is more than simply a local problem. As a number of people have mentioned, we anticipate that as we have success in driving the labs out of the southern part of this district, they are going to move to the northern part of the district. Just as they are moving now from the Los Angeles area up to this area. I guess they have been in business a lot longer than we have and they are having some success. So I think that is one of the major factors that they look at.

Mr. OSE. Two final questions. I asked Mr. Ruzzamenti and Mr. Bruce, I will get to you. The $2.5 million for the current Central Valley HIDTA, are you comfortable with that for operations on an annual basis?

Mr. SEAVE. Yes.

Mr. OSE. What number for an expanded HIDTA that might include Congressman Herger's and my districts should we keep in mind?

Mr. SEAVE. I think Mr. Ruzzamenti mentioned $5 million. But equally important is the lack of DEA agents in the northern part of the State. I think they go hand-in-hand.

Mr. OSE. Would that be part of the $5 million or would that be on top of the $5 million?

Mr. SEAVE. That is apart from the $5 million.

Mr. OSE. And that would be how much for the DEA establishment?

Mr. SEAVE. I would have to ask DEA for that.

Mr. OSE. Mr. Bruce.

Mr. BRUCE. I am not sure exactly what the formula is now per agent cost. But that of course would be a whole separate appropriation through DEA and DEA's funding for the agents. My understanding on that process, the last 2 years anyway, is that our agent increases—I have heard the number 44 this year for 2000. Those were all congressionally mandated. So even as an agency, I don't think we had any choices there in where those agents went. They were congressionally mandated for certain programs. So there is a number of ways Congress deals with these things. Either straight appropriation to increase the number of agents for the agency to handle it, or congressionally mandating where those agents are placed by virtue of giving the increases.

Mr. OSE. Generally speaking, is that $125,000 an agent or $60,000 an agent or $200,000 an agent?

Mr. BRUCE. I would think $125,000 probably. Because you are talking about not only obviously salary, but you are talking about opening an office. Although we have had, even when I was in Sacramento for 4 years in the late 1980's or early 1990's, at that point we had invitations for agents in Redding. And I know a couple of agencies would be more than happy to let us squat in their facilities even if we had to. I would say, in talking about cars and guns and everything that goes to equip an agent, $125,000 per agent is probably a pretty good figure.

Mr. OSE. And that would just be the Federal share, and that would not affect perhaps the associated costs for the local agency interacting with DEA? That would just be the Federal per agent number?

Mr. BRUCE. Ordinarily the way this goes—what we just did in Modesto this last year—ordinarily what DEA does initially is open what they call a posted duty, which are two agents. Two agents in a posted duty. And that is the initial step. Many of those posted duties, like in Medford, OR, for instance, which is just across the line in Oregon, went from a posted duty and subsequently became a resident office, which of course gets a larger facility and more manpower. But the first step would be a posted duty probably with

two agents assigned to—the most reasonable location, at this point would be Redding.

Mr. OSE. Thank you, Mr. Chairman.

Mr. MICA. Do you have some questions, Mr. Souder?

Mr. SOUDER. I had a couple of quick questions on methamphetamine itself, probably for Mr. Bruce or Mr. Ruzzamenti but anybody else. Is this a drug that is more heavily used by adults than kids at this point in your region? Or are the adults who are doing the labs selling it to the kids?

Mr. BRUCE. I think from our experience, the age of methamphetamine abuse just gets younger and younger constantly. We are seeing it down into the primary grades now.

Mr. SOUDER. Is it a drug that somebody would start with marijuana and switch over or is it a separate track? Usually you hear tobacco, marijuana, cocaine, heroin. How does methamphetamine fit into this track?

Mr. BRUCE. I think it is a matter of opportunity for a lot of kids, especially given peer pressure and the situation. I think just the availability creates—I think we saw that in the Midwest over the last few years. The fact of availability and an illicit substance becoming available. People are going to take advantage of it and traffic in it.

Mr. SOUDER. But users move back and forth between it.

Mr. BRUCE. Oh, certainly.

Mr. SOUDER. In other words, it is not like it is a separate track. Once you move into looking for artificial stimulants, you could move in any different direction?

Mr. BRUCE. That is certainly the way I see it over 34-some years in this business. We sometimes facetiously talk about the drug du jour. But the situation is so dynamic and that is why I kind of presented a little bit on several of the drugs. There is no question that methamphetamine is a major problem at this point. This too shall change.

Mr. SOUDER. It is storming the Center Plains area, Kansas City and St. Louis. We are still over in cocaine and heroin when you move into the Detroit, Chicago and Indiana circle. I mean, we have more murders related to cocaine than what I have heard here from methamphetamine. I am from a city that is not so much larger than anything here.

One last thing. I noticed in your data that the California marijuana, the THC, you estimate twice the potency of imported Mexican because it is being watered down or what?

Mr. BRUCE. No. Just the way it is produced and grown.

Mr. SOUDER. So it is not like the ditch weed we would see in Indiana?

Mr. BRUCE. Right. Highly cultivated marijuana uses a cincemia plant, which is virtually a sterile plant. So everything goes to the concentration of production of THC. The potencies now are probably four or five times what they were in the 1960's or 1970's when both of us came on the job.

Mr. SOUDER. So we are not talking like the hippie days of the late 1960's when I was in college.

Mr. BRUCE. No, not at all. I am not going to say you were.

Mr. SOUDER. Not me. I have always been a square.

Mr. BRUCE. The price was not $5,000 or $6,000 a pound either.

Mr. SOUDER. I not only didn't inhale, I didn't smoke. I yield back.

Mr. MICA. Thank you, Mr. Herger. I would like to take this opportunity to thank each of the panelists and witnesses we have had today that are on the front line of this battle. We particularly appreciate and salute your efforts. We honestly try to do the best we can in Washington in trying to address these problems and see how we can work in a cooperative effort. As Mr. Scott said—he is gone now, but it does take a concerted local, State and Federal cooperative effort. Much of the war on drugs as we know it was closed down between 1993 and 1995. I inherited the responsibility from the current Speaker, Mr. Hastert, who is a great ally and was really an initiator in getting us back to meet our Federal national responsibility to bring this situation under control. I have worked so closely with Mr. Souder, who has been on the subcommittee with me for some years and now joined by Mr. Ose, who has been a tireless supporter of our efforts, which we appreciate. Because it takes 218 votes to do this in the House of Representatives, I am pleased with Mr. Herger's interest in expanding the HIDTA and his support for our efforts along the way. It is very difficult in trying to get attention focused appropriately and balanced.

I might say that I did have a chance on Friday to visit the West Coast JATF, Joint Agency Task Force, which operates out of the San Francisco Bay area. And they did point out that the West Coast has been neglected in this effort, and we need to focus through this visit and through the hearing we are doing here today and then in southern California tomorrow on the situation here, which appears to be very serious. You have a unique problem that certainly warrants national attention and cooperation.

So there being no further business, Mr. Ose has requested that the record be left open for a period of 2 weeks. And without objection, that is so ordered. We will be asking additional questions and we can proceed for those—and I know this is a limited forum given the constrained time requirements. In fact, our staff will be leaving in just a few minutes to prepare for the next hearing in San Diego. But we do welcome additional comments for the record and will leave it open. You can contact Mr. Ose, and he will see that it is made part of the complete record. And everything that has been said here today and submitted will be part of a permanent record and used by the committee and Congress hopefully in its future decisionmaking in a wise fashion.

There being no further business to come before the Criminal Justice, Drug Policy and Human Resources Subcommittee at this time, this meeting is adjourned.

[Whereupon, the subcommittee was adjourned.]

[Additional information submitted for the hearing record follows:]

MAR 15 2000

SISKIYOU COUNTY SHERIFF'S DEPARTMENT

CHARLES "CHARLIE" BYRD
Sheriff-Coroner

311 Lane Street
Yreka, CA 96097-2942
(530) 842-8300

March 10, 2000

MAR 21 2000

Congressman Wally Herger
2433 Rayburn House Office Building
U. S. House of Representatives
Washington, D.C. 20515

Dear Congressman Herger:

As we discussed in Woodland, California on Monday, March 6, 2000, there is a need for a North California High Intensity Drug Trafficking Area. It is imperative that Northern California be kept under one tent when it comes to a H.I.D.T.A. description as we all have either a methamphetamine consumption or a production problem, or both.

As you know, Siskiyou County is the largest geographic county in Northern California and the fifth largest in California. In the past we have had a problem with large bulky laboratories in Siskiyou County but like any other industry, labs are now more sophisticated, compact, and mobile; therefore, they have been spotted more in the metropolitan areas.

If we are successful in receiving a Northern California H.I.D.T.A. designation, it should not be an extension of the Central California H.I.D.T.A. It should stand on its own and not have a checker board effect by designating certain counties in Northern California as H.I.D.T.A.s and others not receiving the designation. This effect would just move the methamphetamine problem into other counties.

I say it is time for the Federal government to try and get in front of the problem and designate all counties north of Sacramento as H.I.D.T.A. recipients. I would request that you enter my letter into the Congressional Record.

Sincerely,

CHARLES BYRD, Sheriff-Coroner

CB:sg

cc: Siskiyou County Board of Supervisors
O. J. "Bud" Hawkins, Law Enforcement Liaison
for Attorney General Bill Lockyer