

**STRATEGY
RESEARCH
PROJECT**

The views expressed in this paper are those of the author and do not necessarily reflect the views of the Department of Defense or any of its agencies. This document may not be released for open publication until it has been cleared by the appropriate military service or government agency.

**UNITED STATES NATIONAL AND SUPPORTING MILITARY
COUNTERDRUG STRATEGIES: A HISTORY AND ASSESSMENT**

BY

LIEUTENANT COLONEL JON E. STROBERG
United States Air Force

DTIC QUALITY INSPECTED 2

DISTRIBUTION STATEMENT A:

Approved for public release.
Distribution is unlimited

USAWC CLASS OF 1996

19960610 002



U.S. ARMY WAR COLLEGE, CARLISLE BARRACKS, PA 17013-5050

The views expressed in this paper are those of the author and do not necessarily reflect the views of the Department of Defense or any of its agencies. This document may not be released for open publication until it has been cleared by the appropriate military service or government agency.

UNCLASSIFIED

USAWC STRATEGY RESEARCH PROJECT

UNITED STATES NATIONAL AND SUPPORTING MILITARY COUNTERDRUG
STRATEGIES: A HISTORY AND ASSESSMENT

by

Lieutenant Colonel Jon E. Ströberg
United States Air Force

Colonel Andrew J. McIntyre
Project Adviser

U.S. Army War College
Carlisle Barracks, Pennsylvania 17013

DISTRIBUTION STATEMENT A: Approved for public
release. Distribution is unlimited.

UNCLASSIFIED

ABSTRACT

AUTHOR: Jon E. Ströberg (LtC), USAF
TITLE: United States National and Supporting Military
Counterdrug Strategies: A History and Assessment
FORMAT: Strategy Research Project
DATE: 15 April 1996 PAGES: 30 CLASSIFICATION: Unclassified

The National Drug Control Strategy and supporting strategy of the Department of Defense guide the efforts the United States and the Services in counterdrug operations. This study examines the origins of the national strategy and how the supporting military strategy was developed to work within the framework produced by Presidents Bush and Clinton. It explores the degrees of success achieved over the eight years the two strategies have been in existence, proposes a focus on the economics of the drug source countries as the center of gravity in counterdrug strategies of the future, and offers considerations for how military strategy could more effectively complement national strategy.

Introduction

For nearly 40 years, drug abuse in America has been one of our nation's greatest concerns. Once seen as a faddish diversion for the elite, drugs today have infested every social class and neighborhood in our country. Draining communities of already scarce resources and destroying the lives of our people, the effects of drug abuse are undeniably severe.

Like a slow spreading cancer, illegal drugs fed for centuries on the small organs of American society, but the problem took on a new, intensely more threatening dimension in the 1970s as crack cocaine filtered into mainstream communities.¹ In less than twenty years, annual consumption of this highly addictive, debilitating drug rose in the United States six fold - from less than 50 metric tons in 1972, to nearly 300 in 1992. As the disease spread, it not only destroyed the lives of the users, but also brought increasingly violent crime and skyrocketing costs to businesses and communities across the country.

Today drug abuse robs America's economy of over \$67 billion a year.² Incredibly, 70% of this amount is due to the costs of crime, with needless medical and health expenditures making up the rest.³ If that weren't enough, the secondary effects of lost productivity push the total even higher, adding to it an additional \$60 billion annually.⁴

Inside America, these effects, the explosion of drug-related violence, and the emergence of gang warfare brought substance abuse

to the forefront of national concern, but the situation was equally severe outside our borders. The growing influence of drug cartels in Latin American countries threatened to undermine the governments of key U.S. allies and destabilize the expansion of democracy in our hemisphere. So much did drug abuse and narco-trafficking affect U.S. foreign and domestic interests, that America developed an unprecedented, separate national strategy to provide vision to a new, concentrated counterdrug effort. The National Drug Control Strategy, (NDCS) first developed by President George Bush in 1989, formally recognized the grave threat drug abuse posed to America's well-being. His vision, and that of the Clinton Administration which followed, led to the development of primary and supporting counterdrug roles for many Federal agencies. The Department of Defense (DOD) was no exception.

This paper will examine the origins of the NDCS and how it was translated into a supporting military strategy to be executed by America's Armed Forces. It will assess the degree of success each administration has achieved in combating drugs, examine source country economics as a potential center of gravity for future strategy focus, and offer recommendations to enhance DOD's participation in future strategies for the national counterdrug effort.

National Strategy: The Beginning

Drug abuse is not new to America. Our society has experimented with, and become addicted to, narcotic substances from its outset. No doubt even the first explorers to the New World traded intoxicating and addictive substances with the indigenous tribes they met on their travels. However, it was in the 1960s and 70s, as Marijuana, Hashish, and LSD invaded the middle class American family, that the current American drug crisis began to receive serious attention.

Mainstream America's children had been infected. The slogans of the time, "Free Love" and "If it feels good, do it," portrayed the willingness of a generation to experiment with almost anything in the search for inner peace and personal pleasure. At the same time, advancements in technology made this generation highly visible, and images of its virtues and vices were easily transmitted around the nation, and the world.

Most prevalent of the images of this generation was undoubtedly its opposition to the war in Vietnam. Pictures of our "counter-culture" youth were beamed nightly across America - pictures which portrayed scenes of increasing violence as the anti-war movement grew in scope and intensity. As it grew, so did the generation's attitudes toward drug use. Illegal drugs offered a menu of "pleasure" from sedation to hallucination, and their acceptance among the youth became an icon of middle class, American children.

The effects were disastrous. Civilian industry and the Military both felt their impact in lost productivity, efficiency, and increased crime. Still, at the national level drug abuse continued to be seen as a problem of self-indulgence and Federal anti-drug programs lacked urgency and coordination.⁵

In other countries, the problem was seen much differently. Cocaine producers in Latin America and heroin producers in the Far East recognized America's growing illegal drug consumption as a lucrative market for their products. Not surprisingly, trafficking of these two hardcore drugs intensified, usage skyrocketed, and America reeled from an epidemic of gang warfare, violent crime, and an erosion of the fundamental American principles of family and decency.

Until the emergence of these hardcore drugs, official attempts to counter drug abuse in America were fragmented in coverage and limited in effectiveness.⁶ Various committees, offices, and departments formed to address the situation, but in the absence of any central guidance, most disbanded without progress.⁷ It took the secondary effects of crack cocaine and heroin abuse - crime, violence, and damage to communities - to provide the impetus for the first major step toward developing counterdrug policy on a national scale, the passage of the Anti Drug Abuse Act of 1986.

In signing the Act, then-President Reagan established the National Drug Control Program which provided funding and policy for many anti-drug related actions. Most notably, the Act mandated the

establishment of a National Drug Policy and the publishing of annual strategies that would provide the nation with a much-needed focus for its counterdrug efforts.⁸ Another Anti Drug Abuse Act followed in 1988 establishing the Office of National Drug Control Policy (ONDCP). It also required each administration to publish in its annual strategy "...reasonable and attainable goals for both the long and short run."⁹

It was with these Acts as a foundation, that the Nation's National Drug Control Strategy was formulated. In 1989, President Bush laid out, for the first time in U.S. history, a cohesive plan to counter a crisis that had become a greater fear to Americans than that of war itself.¹⁰

Eight Years-Two Strategies

Bush declares "War"

"The greatest threat facing our nation today...sapping our strength as a nation." With these statements, President Bush summarized how he saw the effects of illicit drugs in America.¹¹ It was a real threat with potentially disastrous consequences. In Colombia, narco-terrorists nearly brought the country, one of the hemisphere's oldest democracies, to complete destruction. Brutally murdering a presidential candidate, seven supreme court justices, and nearly 200 other lower-court judges, the Cali Drug Cartel spread violence to the highest levels of the nation.¹²

The Colombian situation validated President Bush's counterdrug

vision. The suppliers of illegal drugs posed a threat akin to war, and on that premise, the President developed a national counterdrug strategy with a wartime focus. He would wage a "drug war" - not a war in the metaphoric sense used by previous administrations (as in The Wars on Crime and Poverty), but a war utilizing law enforcement agencies and the military services in an unprecedented fashion.¹³

President Bush concentrated his forces against what he perceived to be the war's two fronts - one, the middle class casual user; and the second, the youth of the inner cities.¹⁴ He based his strategy on his administration's model of the "Epidemiology of Drug Abuse." Mainstream, casual use on the middle class front would decline, the Model said, with public awareness campaigns, education programs, and the personal tragedies of substance abuse.¹⁵ As a result, war on the casual use front was, the Model believed, winnable.¹⁶ This was not the case on the second front where success would be more difficult. The Model continued to say that as casual use declined among the middle class, drug dealers would move to prey upon the most vulnerable U.S. citizens - young disadvantaged, inner-city children.¹⁷ It was there, according to the 1989 strategy, on the drug war's second front, where the main effort of the attack had to be placed. This would be a hard-fought battle and for it, the President called for the full mobilization of a "...decent and responsible America..." to provide help to these people and their neighborhoods.¹⁸

All of America's resources, Federal, State, and Local were

called to arms. In doing so, the Administration sought to develop a "...comprehensive, fully integrated National Drug Control Strategy..." and a "...coordinated and balanced plan of attack involving all basic anti-drug initiatives and agencies."¹⁹

While the Bush strategy identified the need for treatment of the user and a reduction in demand for illegal drugs as its critical elements, it saw the center of gravity of the drug war as the suppliers, producers, and traffickers. These would in fact be the President's main targets, and attacking them formed the foundation of America's strategy from 1989 through 1992. Dr. William Bennett, the first Director of the Office of National Drug Control Policy, summed up the U.S. approach: "You can't win the drug war by treating casualties."²⁰

Clinton focuses on Demand

President Clinton came to office in 1993 with the belief that he had been elected to bring much needed change to America. This "mandate" extended to the previous administration's National Drug Control Strategy which the new President saw as being out of focus.²¹ He believed the key to the drug crisis was not in waging war on the supply side of the problem, but was instead in reducing the demand for illegal drugs at home.²²

President Clinton considered casual use to be the "...less complicated aspect of the drug problem..." and stated his efforts would focus on the hard core addict.²³ His strategy would

"...chart a new, realistic course that captures our national conscience and fortifies our national resolve."²⁴ This new direction contained four "straightforward initiatives" that would be "...the foundation for a new National Drug Control Strategy:"²⁵

1. Reducing demand through better and more prevention, education, treatment and rehabilitation.
2. Reducing Drug Related violence through more police, gun control, funds to help schools curb youth violence, and a credible sentencing policy in our criminal justice system.
3. Changing the way we do business - Ending philosophical discussions, identify and fund the programs that work, drop those that don't.
4. Provide international leadership and foster cooperation through a global alliance against the drug trade.

These then were the strategies that would guide America's efforts to reduce the debilitating effects of illegal drug abuse. Together they spanned eight years of vision, but a vision that was refocused as the beliefs, priorities and political aims of the two administrations changed. On the surface, the differences in vision implied significantly different supporting strategies for the Services. In fact, DOD developed a strategy that transcended them both.

Two Strategies, One Military

The wartime focus of President Bush's National Drug Control Strategy naturally led him to look to the Services and the capabilities they could bring to the fight. For many years, DOD had quietly resisted efforts to become deeply involved in counterdrug operations, but the Bush strategy made that no longer possible.²⁶ The creation of Service roles and missions utilizing all branches of the Military, including both the active and reserve components, was a key element of the President's vision.²⁷ But for the Services, the Drug War would be a peacetime operation against enemy forces unlike those they had traditionally faced. These forces were criminals - outlaws, thugs, and terrorists who operated across the borders of many foreign countries. They were not the military arm of a hostile government and U.S. Service actions against them would therefore be severely restricted. Legal elements of peacetime operations, both within and outside of U.S. borders, prevented the military from directly attacking the enemy on the ground, in the air, or on the sea with wartime force. Thus, DOD had a significant challenge: how to focus employing U.S. forces, designed to fight two Major Regional Conflicts with the most advanced technology weapons available anywhere in the world, in a legally constrained and limited manner against a wide-spread, apolitical, multi-faceted threat.

Six months after the President's vision was published, Secretary of Defense Dick Chaney unveiled his plan. His mission

statement was simple:

*Employing elements of the Armed Forces with the primary mission to cut the flow of drugs may, over time, help reduce the availability of illegal drugs in the United States.*²⁸

To support the NDCS, military strategy would center on U.S. Armed Forces assisting in the attack on the flow of drugs "...at every phase of their journey: in countries that are the sources of the drugs, in transit from the source countries to the United States, and in distribution in the United States."²⁹

Attack at the Source

DOD strategy for the first drug flow phase identified three roles for the Military, each dealing with drug production in the countries of origin. Given that the amount of drugs entering the United States is directly proportional to the amount being produced, the Strategy reasoned that if U.S. military efforts could lower production, then over time, the US would realize a lowered amount of illegal drugs within its borders.³⁰ In this stage, the United States would fight the war indirectly by providing assistance to the forces of the source nations. Three missions made up this phase: Assistance for Nation Building, Operational Support to Host Country Forces, and Cooperation with Host Country Forces to Prevent Drug Exports.³¹

Assistance for Nation-building. Criminal organizations frequently operate with the protection of their own armies. The threat they present is compounded by their being intertwined with insurgent forces seeking to overthrow the government of the country in which they are located. In the long term, the economic strength of a country is the key to its resistance to being overthrown. A strong economy helps negate the popularity of drug producing/trafficking activities. Here DOD's strategy envisioned a sustained, multi-year effort to provide economic, security, and law enforcement assistance to the governments of drug producing countries to counter these criminal/insurgent organizations.³²

Operational Support to Host Country Forces. DOD strategy also called for operational support to host country forces in the form of training, reconnaissance, command and control, planning, logistics, medical support, and civic action in connection with foreign forces' operations against the infrastructure of drug producing enterprises.³³

Cooperation with Host country forces to prevent drug exports. The third portion of the strategy for striking drugs at their source envisioned DOD resources assisting a foreign country's indigenous forces in attacking the export of drugs from that country. Direct DOD involvement was limited primarily to the provision of intelligence information to the appropriate authorities.³⁴

Attack in Transit

As in an attack of drugs at their source, the strategy of interrupting the drug traffickers' supply lines (interdiction) sought to reduce the amount of illegal drugs actually reaching the United States.³⁵ While military forces could not prevent all shipments of drugs from reaching American soil, this portion of the Military's strategy looked to place logistical hurdles in the traffickers' transit operations. If the difficulty of shipping drugs to America could be increased, then the costs and risks of transport would rise, perhaps for some, above the level where their drug activities would be worthwhile. Ideally, the producers would then seek other less difficult, and legal, enterprises.³⁶

Attack in the United States

The Military's role in this last phase of the DOD strategy, was centered in support to Federal, State, and Local law enforcement agencies. Prevented from taking any direct action within the borders of the United States, Service efforts would center on training and support to other agencies. The Military's wealth of knowledge and non-combative capability would serve as its weapons in this role.³⁷

Command and Control

To oversee the United States' efforts in conducting the drug war, President Bush designated the Department of State (DOS) as

lead agency for all operations in foreign countries,³⁸ the Drug Enforcement Agency (DEA) for the continental US effort,³⁹ and DOD for international maritime and air interdiction operations.⁴⁰

The DOD strategy was executed regionally through the Chairman, Joint Chiefs of Staff, to each of the Combatant Commanders (CINCs).⁴¹ By 1991, the military had fully assimilated the counterdrug mission into its command structure. Worldwide, each combatant command developed extensive infrastructures and, in some cases, subordinate Joint Task Forces to administer their counterdrug operations. While DOD's counterdrug effort was worldwide, the cocaine source and transit countries of Latin America presented the main threat to the United States. Accordingly, DOD's focus centered primarily on Southern Command in the international theater, and on Forces Command in the continental United States.⁴²

The priority of the counterdrug mission, and DOD's resultant command infrastructure transcended both the Bush Strategy and that of President Clinton. While there has been some change in DOD's supporting strategy, the original military vision of *assisting* in the control of drugs, remains in place.

Assessment: The Strategic Scoreboard

Strategies are like a game plan - long term visions for the road to success. America's game plan in the drug crisis has been running now for eight years. Although each administration placed

different weights of effort on specific drug control operations, both strove for improvements in three common areas: usage at home, interdiction in transit, and strength of commitment of international partners. An analysis of each area shows the degree of success the NDCS has achieved. Here's a look at the scoreboard.

Usage

During the first four years of national strategy, casual drug use declined to its lowest recorded level. Unfortunately, the trend did not continue. It reversed in 1993 and has continued to rise slowly ever since. Over the same time, annual U.S. cocaine consumption has remained relatively stable, but the percentage of overall use attributed to the hardcore addict is on the rise. Perhaps most tragic, adolescent drug abuse is skyrocketing. Across the board, inhalant, marijuana, LSD, and cocaine use by America's 8th, 10th, and 12th graders took a dramatic upturn between 1993 and 1994.⁴³ Increased drug use by this young population will provide a rich customer base for the illegal drug industry of the future. *Illegal Drugs 1, NDCS 0.*

Interdiction

International cocaine seizures increased from 1989 to 1992, but fell off in 1993. Under the Clinton Strategy, interdiction

efforts were intentionally reduced so that more effort could be directed toward action in the source countries, but the bottomline is that cocaine remains available in quantities many times the current demand.⁴⁴

Learning from the level of success and effect of its efforts, DOD modified its strategy for interdiction operations in the early 1990s. The first DOD strategy focused on seizures of individual ships and aircraft. Analogous to trying to eradicate a beehive, one bee at a time, the results were similarly limited in effectiveness. Instead, DOD increased its intelligence gathering and dissemination operations to track the individual bees back to their hive and, once locating it, direct host nation forces to strike at the heart of producer/trafficker operations.⁴⁵ This strategy has increased success in arrests of key drug cartel figures, but production and supply levels have not significantly decreased. Drug trafficking continues undeterred. *Illegal Drugs 2, NDCS 0*

Commitment of International Partners

Overseas, many high visibility arrests have been made, but the recent decertification of Colombia for alleged drug-sponsored corruption at the highest levels of its government attests to the strength and influence of the drug cartels. *Final score: Illegal Drugs 3, NDCS 0.*

The conclusion is clear. Four years of a conservative Republican approach and four years of a liberal Democratic approach have done little to reduce the drug abuse problem in America. Eight years of a national strategy, supported by Federal, State, and Local programs, law enforcement agencies and the Services, have not had a significant effect on reducing the levels of drug abuse, the shipment of illegal drugs into our country, nor corruption in the governments of the primary source countries.

An Economic-Based Strategy

The limited effectiveness of the national strategies of the last eight years suggests another focus should be found to guide U.S. actions in counterdrug operations. This new focus should aim at the heart, or center of gravity, of the drug crisis; the common thread that ties all aspects together from production through demand. Once that is done, supporting military strategy should be reviewed, and if necessary modified to reflect the guidance and priorities of the National Command Authority.

One area stands out as not adequately addressed in either the Bush or Clinton strategies: the dismal state of the source country economies and the relationship they have with the drug industry. Comments by Mississippi State University's Professor Donald J. Mabry at a Congressional Research Seminar to discuss

Andean Drug Strategy tell the story:

The Andean drug business is free enterprise capitalism that floats the economies of Bolivia and Peru and makes a substantial contribution to the economy of Colombia. In Bolivia, some 500,000 people, or 40% of the economically active population, depend upon the coca enterprise for survival. In Peru, some 15% of the economically active population do. In Colombia, hundreds of thousands of people earn money from some aspect of the coca enterprise. And further, coca cultivation and processing are spreading into Ecuador and Brazil.⁴⁶

Coca cultivation has become an integral part of the source countries' economies, but coca growers are not cartel gangsters. They are simply peasant farmers who cultivate coca leaves because the profits of the crop help counter the severe effects of the devastating poverty in which they live.⁴⁷ It is that poverty that has enabled drug production and trafficking to become a major industry in the source nations.

Drug cartels exist to make money. As with any business, the cartels wish to expand their customer base; a base which provides a rich source of income and enormous profit. To the cartels, that profit means influence; influence that can control a nation. The cartels can bring economic relief to impoverished farmers of their "home" regions, or provide a lifeline of funds to a struggling or desperate government. The influence they have is great, but it is only a symptom of the core problem - the extreme

disparity in wealth of the peoples of these countries. This is where the main thrust of future National Drug Control Strategy should be directed.

The U.S. has addressed, in limited fashion, the economic aspects of the drug crisis in the past, but its efforts have been misplaced, uncoordinated, and ineffective.⁴⁸ America has offered alternative crops for growers, but kept trade barriers in place that make the new crops unprofitable. That prevents success. Growing Coca, a peasant farmer can provide his family with food, clothing and maybe a few luxuries like a radio or television. Why should he change to a crop that barely enables him to feed his family?

America has offered economic aid to the governments of the source countries to build their strength and security, but it based continued aid on a certification process that measures a government's willingness to conduct counterdrug operations. That too prevents success. If a country loses certification, it loses aid. Loss of aid, in turn, puts more strain on the government and makes it more vulnerable to dependence on drug money. It is a vicious cycle and one that the recent decertification of Columbia will likely show.

For U.S. NDCS to be effective, future administrations should ensure our foreign trade and economic aid policies are effective and consistent. We must help build strong economies in those

countries that will face the loss of drug income as a rich source of funds. A strong economy gives the governments the capability to project their political will against the drug producers and traffickers within their borders.

To be successful, future NDCS should have as its central focus, coordinated foreign policy and aid programs that spur economic growth and reduce poverty levels in the source countries. A strategy that does not identify those economies as the center of gravity in the drug crisis will only be treating symptoms and will likely fail.

The Military's Role

Under such a national strategy, DOD's role could be simplified. Today the military complements national strategy through military-to-military contacts and training programs that aim to strengthen the fragile democracies of Latin America and help them resist threats to their security. In this regard, current DOD strategy is on the mark. These are the exact actions that DOD should continue to support. But DOD's strategy should be to remain a *supporting* agency complementing a larger strategy of assistance at all levels. This means that change will be needed in the Administration's designation of lead agencies.

In particular, DOD's current lead on counterdrug interdiction efforts is misplaced. The "bees or beehive" analogy

previously discussed shows the futility of track, search, and seizure of individual transport vehicles. Still, the effort has value. Interdiction doesn't prevent trafficking, but it does make it difficult. Increased risk means higher costs to the supplier and slows the rate that shipments arrive at our borders. Without interdiction in the international arena, illegal drug shipments would likely overwhelm the border patrol's inspection capacity.

Since international law and rules of engagement do not permit U.S. military units to force aircraft to land or fire on planes and ships that do not wish to be stopped, successful interdiction operations must end in a law enforcement, not a military, action. Future strategies should assign interdiction lead agency responsibilities to the traditional law enforcement arms of the United States Government for the area of operations concerned - the Coast Guard or Customs Service. The military's hands are too tied by lack of authority to be effective in this role.

Conclusion

Drug abuse in America remains a grave threat to U.S. national security. The drug industry feeds on corruption and violence. It destabilizes western hemisphere democracies, destroys countless lives, and erodes the very core of American

society. Operating throughout the world, unhindered by national sovereignty or law, it has become potentially the most formidable adversary ever faced.

America's counter to this threat has been guided by the visions of the last two American presidents who each developed and refined their own, unique drug control strategies. They were very different men and their strategies reflected those differences. President Bush based his vision on combat - attacking the suppliers in a wartime framework of operations. President Clinton has, for the last four years, sought to work the demand side of the crisis through better treatment programs for hardcore addicts.

The Services have played a fundamental role in both strategies. Accordingly, DOD developed supporting military strategy that focused on the effective and efficient use of its forces. Under the Bush strategy, a war on drugs fit well with the framework of DOD strategic planning. Service forces "attacked" illegal drug elements at their source, in transit, and at home. This strategy continued to serve well under the Clinton vision even though the thrust of his strategy was decidedly less "war" focused and more treatment-oriented.

Now, after eight years of effort, the National Drug Control Strategy appears to have been less than successful. Illegal drug usage, production, and supply have not been noticeably reduced.

Neither have the Latin American source nation governments demonstrated any sustained commitment to eradicate drug cartel operations within their borders. Clearly, neither attacking the product nor treating the user will alone solve the drug crisis.

America's NDCS needs new focus. It should be reviewed and redirected against the true center of gravity of the drug problem: the economy of the source countries. A new, long-term strategy that focuses on easing the desperate levels of poverty in those countries could erode the foundation of the illegal narcotics industry and finally provide the solution to America's drug problem. In turn, the supporting strategy of the Department of Defense should be reviewed and enhanced to take advantage of the Services' inherent strengths of knowledge and training, while working in a supporting role within the restrictions of peacetime operations.

We should seek tentative answers to fundamental questions rather than definitive answers to trivial ones.

- Dr. James Billington,
Librarian of Congress

ENDNOTES

1. George Bush, National Drug Control Strategy. The White House, (Washington D.C.: Government Printing Office, 1989), 3.
2. Bill Clinton, National Drug Control Strategy (Washington D.C.: Government Printing Office, 1995), 29.
3. Bush, National Drug Control Strategy 1989, 2.
4. Ibid.
5. Ibid.
6. National Interagency Counterdrug Institute. Resource Guide (San Luis Obispo, CA., 1994), 1-1.
7. Bush, National Drug Control Strategy 1989, 2.
8. Ibid., 9.
9. Ibid.
10. Ibid., 1.
11. George Bush, Progress in the War on Drugs. (Washington D.C.: Government Printing Office, 1993), 1.
12. Ibid.
13. Ibid., 5.
14. Bush, National Drug Control Strategy 1989, 5.
15. Ibid.
16. Ibid.
17. Ibid.
18. Ibid.
19. Ibid., 9 and 13.
20. Dr. John E. McAllister and Dr. Ron Hatchett, The Role of the Military in the Drug War. (San Antonio, TX., 1993), 12.
21. Bill Clinton, Breaking the Cycle of Drug Abuse, 1993 Interim National Drug Control Strategy. The White House, (Washington D.C.: Government Printing Office, 1993), 2.

²²·Bill Clinton, National Drug Control Strategy. The White House, (Washington D.C.: Government Printing Office, 1994), iii.

²³·Clinton, Breaking the Cycle of Drug Abuse, 2.

²⁴·Ibid.

²⁵·Ibid., 3.

²⁶·U.S. Congress. House. Committee on Armed Services, Defense Policy Panel. The Andean Drug Strategy and the Role of the U.S. Military. (Washington D.C.:Government Printing Office, 1990), 21.

²⁷·Bush, Progress in the War on Drugs, 5.

²⁸·McAllister, 4-4.

²⁹·Ibid.

³⁰·Ibid., 4-5.

³¹·Ibid.

³²·Ibid.

³³·Ibid., 4-6.

³⁴·Ibid.

³⁵·Ibid.

³⁶·Ibid., 4-7.

³⁷·Ibid., 4-9.

³⁸·George Bush, National Drug Control Strategy. The White House, (Washington D.C.:Government Printing Office, 1990), 55.

³⁹·McAllister, 2-7.

⁴⁰·Ibid., 1-12.

⁴¹·McAllister, 4-12 through 4-16.

⁴²·Ibid.

⁴³·Bill Clinton, National Drug Control Strategy. The White House, (Washington D.C.:Government Printing Office, 1995), 22 - 25.

⁴⁴·General George Joulwan, CINCSOUTH, Statement before the Senate Appropriations Subcommittee on Defense, 15 July 1993.

⁴⁵·Colonel Steve Hightower, U.S. Army War College Faculty, Interview by author 20 March 1996, Carlilse Barracks, PA.

⁴⁶·U.S. Congress, 12.

⁴⁷·McAllister, 7.

⁴⁸·Ibid.

BIBLIOGRAPHY

- Abbot, Michael H., COL. U.S. Army Involvement in Counterdrug Operations - A Matter of Politics or National Security? Thesis. Carlisle Barracks: U.S. Army War College, March 1988.
- Bush, George. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, September 1989.
- Bush, George. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, January 1990.
- Bush, George. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, February 1991.
- Bush, George. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, January 1992.
- Bush, George. Progress in the War on Drugs. The White House, Washington, D.C., Government Printing Office, January 1993.
- Clinton, Bill. Breaking the Cycle of Drug Abuse, 1993 Interim National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, September 1993.
- Clinton, Bill. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, February 1994.
- Clinton, Bill. National Drug Control Strategy. The White House, Washington, D.C., Government Printing Office, February 1995.
- Clinton, Bill. A National Security Strategy of Engagement and Enlargement. The White House, Washington, D.C., Government Printing Office, February 1995.
- Durden, Richard L., LTC. Role of the Military in the Drug War: Have We Exceeded Congressional Intent? Thesis. Carlisle Barracks: U.S. Army War College, April 1992.
- Dunkelberger, Thomas E., LTC. Measuring Department of Defense Effectiveness in Counternarcotics Support. Thesis. Carlisle Barracks: U.S. Army War College, April 1991.
- Gerlach, Stephen R. LTC. Military Forces and Intelligence in the Drug War. Thesis. Carlisle Barracks: U.S. Army War College, March 1987.
- General Accounting Office, Military Assistance for Drug Enforcement Agencies. Washington: United States General Accounting Office. 1988.

- General Accounting Office, Issues Surrounding Increased Use of The Military in Drug Interdiction. Washington: United States General Accounting Office. 1988.
- General Accounting Office, Capabilities for Interdicting Private Aircraft are Limited and Costly. Washington: United States General Accounting Office. 1989.
- General Accounting Office, Use of National Guard Aircraft in Counterdrug Activities. Washington: United States General Accounting Office. 1990.
- General Accounting Office, Status Report on DOD Support to Counternarcotic Activities. Washington: United States General Accounting Office. 1991.
- General Accounting Office, Observations on Counternarcotics Programs in Colombia and Peru. Washington: United States General Accounting Office. 1991.
- General Accounting Office, U.S. Drug Interdiction Issues in Latin America. Washington: United States General Accounting Office. 1994.
- General Accounting Office, Heavy Investment in Military Surveillance is Not Paying Off. Washington: United States General Accounting Office. 1993.
- General Accounting Office, Impact of DOD's Detection and Monitoring on Cocaine Flow. Washington: United States General Accounting Office. 1991.
- Gooch, Johnnie R. LTC. The Army's Role in the War on Drugs. Thesis. Carlisle Barracks: U.S. Army War College, April 1989.
- Hightower, Steve, Colonel, United States Army War College, Interview by Author, March 1996. Carlisle Barracks, PA.
- Institute for National Strategic Studies, Strategic Assessment 1995 U.S. Security Challenges in Transition, Washington, D.C., Government Printing Office, 1995.
- Joulwan, George A., General, Statement before the Senate Appropriations Subcommittee on Defense, 15 July 1993.
- McAllister, John E., Dr., and Dr. Ron Hatchett. The Role of the Military in the Drug War. Conference Summary. San Antonio, TX. 1993.
- National Interagency Counterdrug Institute. Resource Guide, San Luis Obispo, California, July 1994.

Shalikashvili, John M., General. National Military Strategy of The United States of America 1995, Washington, D.C., Government Printing Office, 1995.

US Congress. House. Committee on Armed Services, Defense Policy Panel. The Andean Drug Strategy and the Role of the US Military. 101st Congress, 1st session, Washington: US Government Printing Office, 1990.

U.S. Congress. Senate. Judiciary Committee and the International Narcotics Control Caucus, Fighting Drug Abuse: A National Strategy. Washington, D.C., Government Printing Office, January 1990.

U.S. Department of Defense, Office of International Security Affairs, United States Security Strategy for the Americas. Washington, D.C., Government Printing Office, September 1995.