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THE WHITE HOUSE WASHINGTON

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Bill Cliver Mel Riddle

> KATHY TURNER Mike Kirsch

Barbara + Paul Meyer

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BACKGROUND ON STRAIKHT

1. Straight was founded in 1976 as a non-profit privately-funded treatment centre for young drug-users. It has programmes in Atlanta, Cincinnati and St Petersburg (Florida), as well as Greater Washington. There are plans to open programmes in Orlando, Boston and Detroit.

Mrs Reagan has visited the Straight operations in St Petersburg and Cincinnati and will visit the Springfield branch for the first time with the Princess of Wales. Straight was first established in Springfield, Virginia in October 1982 and treats young people from Maryland, Washington DC and Virginia.

CLIENT PROFILE

Most of Straight's clients are aged between 12 and 21. average age is 17; most started using drugs at 12. Sixty percent of the participants are boys. The average client comes from a middle-class suburban home and has an above-average IQ. The average young person uses drugs for two years before parents become aware During this time 96% commit minor crimes, 68% major crimes; most are undetected. The average client uses drugs for 4-7 years before entering Straight's programme; one in three participate unsuccessfully in other drug treatment programmes. The average graduate from Straight has been drug-free for two years, and 70% of intakes complete the programme which lasts on average for one year. The most common drugs used by Straight's patients are alcohol and marijuana, followed by cocaine, LSD, PCP, amphetamines and glue (by the younger ones). Any young people requiring de-toxification are sent to a hospital first; approximately 2% fall into this category. Expenses are covered by client fees (65%) and private donations (35%), The maximum fee is \$6,000. Some scholarship funds are available.

/Treatment

Treatment

- 3. The treatment consists of a family-oriented programme which takes young drug-users through five phases. Straight is not an in-patient facility but conducts intensive daily schedules of therapeutic sessions which rely heavily on the dynamics of peer pressure. Straight is staffed by adult professionals who supervise young staff members who have been through the programme and have subsequently been trained as counsellors. Before graduating a drug-user has to earn his way through the following five stages:
 - PHASE ONE lasts for a minimum of 14 days. The young person lives with a "host" family which has a child in an advanced state of the programme. The young person spends from 9 am-9 pm in the Straight building from Monday to Saturday and 7 hours there on Sunday. During this period the focus is on developing the young person's honesty about his/her past as a drug user and on the child's feelings and attitudes.
 - (ii) PHASE TWO lasts for a minimum of 7 days. The young person returns home but continues to spend 12 hours daily in the Straight building from Monday to Saturday, 7 hours on Sundays. Much attention is paid to family relationships during this period.

/(iii)

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- (iii) PHASE THREE lasts for a minimum of 7 days. The young person goes to school or work on weekdays and spends the afternoon/evening in the programme. He/she is in the building all day at weekends. The emphasis during this period is on achievement at work/school and consolidation of progress made during the first two phases. At this stage a young person may face peer pressure to take drugs again, and has to be ready to say "no" to friends proffering drugs.
- (iv) PHASE FOUR lasts for a minimum of 90 days, and is the time when the young person begins staged withdrawal from active involvement in the programme. He/she comes to the building after work/school on 3 weekdays and one of the two weekend days. The main objective during this period is towards the constructive use of leisure time.
- (v) PHASE FIVE lasts for a miminum of 60 days. It involves only 3 days a week in the building, during which time the young person assists staff. The emphasis at this stage is on service to others and social resposibility.
- 4. Rap sessions are an important part of the treatment. Based on the concept that peer pressure persuades a young person to use drugs in the first place, rap therapy uses supervised peer pressure to help him/her off drugs. Raps have 2 rap leaders (staff members) and have different themes.
- 5. Entire families are required to participate in the Straight programme. Open meetings are held twice a week which bring together those being treated, parents and siblings. Straight also conducts parent and sibling raps and counselling. 92% of siblings involved in the Straight programme never become involved with drugs.

Solon I Briefing Solon I Families Open through entrance Official photo

MEMORANDUM

THE WHITE HOUSE

WASHINGTON

November 4, 1985

MEMORANDUM FOR MRS. REAGAN

FROM:

KEN BARUN

SUBJECT:

Straight, Inc.

Mrs. Reagan, as you know you have visited Straight, Inc. on two occasions; one in Tampa, Florida on 2/15/82 and in Cincinnati, Ohio on 9/17/84. Both visits were extremely memorable and successful.

For your information, I have put together the following for your use:

Straight was founded in 1976 as a non-profit privately-funded treatment center for young drug users. It has programs in Atlanta, Cincinnati, and St. Petersburg, as well as here in the Greater Washington area. There are plans to open new programs in Orlando, Boston, and Detroit. Straight was first established in Springfield, Virginia in October 1982 and treats young people from Maryland, Washington D.C., and Virginia.

CLIENT PROFILE

Most of Straight's clients are between the ages of 12 and 21. average age is 17; most started using drugs at 12. Sixty percent of the participants are boys. The average client comes from a middle-class suburban home and has an above-average IQ. average young person uses drugs for two years before parents become aware of it. During this time, 96% commit minor crimes, 68% major crimes; most are undetected. The average client uses drugs for 4-7 years before entering Straight's program. One out of three have participated unsuccessfully in other drug treatment programs. average graduate from Straight has been drug-free for two years, and 70% of intakes complete the program which lasts on the average for about one year. The most common drugs used by Straight's patients are alcohol and marijuana, followed by cocaine, LSD, PCP, amphetamines and glue (by younger ones). Any young people requiring de-toxification are sent to a hospital first; approximately 2% fall into this category. Expenses are covered by client fees (65%) and private donations (35%). The maximum fee is \$6,000. Some scholarship funds are available.

TREATMENT

The treatment consists of a family-oriented program which takes young drug users through five phases. Straight is not an in-patient facility but conducts intensive daily schedules of therapeutic sessions which rely heavily on the dynamics of peer pressure. Straight is staffed by adult professionals who supervise young staff members who have been through the program and have subsequently been trained as counsellors. Before graduating, a drug user has to earn his way through the following five stages:

The First Phase starts with admission. The youth does not live at home, but with a "host" family which has a child in an advanced stage of the program. During first phase the therapeutic community and staff help the young person to slowly give up denial and deal with his or her drug problem and the adverse social and behavioral consequences.

In the Second Phase, the youth returns to his or her own family at the end of the day; the youth now works on family relationships which were fractured and in disarray while the young person used drugs.

The Third Phase: return to school or employment. In this phase, the youth faces "do drugs" peer pressure again.

In the Fourth Phase, the youth continues to work or attend school and begins to have days off to work on constructive use of leisure time and forming positive friendships. During fourth phase there is internalization of the message that drugs are harmful and not necessary to deal with emotions.

The Fifth Phase requires only three days a week participation in the treatment process. In this phase, the youth also assists the staff in conducting large group sessions.

The Princess of Wales has received a briefing package on Straight as well as a video tape about the program. I have also provided them with briefing information on both of your First Ladies' Conferences.

You will participate in a short greeting by the Board of Straight, a rap session with 2 teenagers (graduates of Straight, Inc.) and their parents, and an open meeting. At the conclusion of the meeting you will give your remarks. Following your statement, the Princess will be asked to join you. Both of you will receive T-Shirts and statuettes from residents of Straight. The Princess will make no remarks.



STRAIGHT, INC.

DRUG REHABILITATION FOR YOUNG PEOPLE

1. PHASES

The First Phase starts with admission. The youth does not live at home, but with a "host" family which has a child in an advanced stage of the program. During first phase the therapeutic community and staff help the young person to slowly give up denial and deal with his or her drug problem and the adverse social and behavioral consequences.

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The Fifth Phase requires only three days a week participation in the treatment process. In this phase, the youth also assists the staff in conducting large group sessions.

2. UNIQUE FEATURES

- 1. Moderate Cost of Program
- 2. Adolescent and Young Adult to Age 25
- 3. Medical and Psychiatric Supervision
- 4. Average length of program 14 months
- 5. Extensive intake evaluation:

Pediatrician examination

Psychosocial Assessment

Psychological Assessment

Millon Adolescent Personality Inventory

SCL-90

Beck Depression Inventory

Michigan Alcoholism Screening Test

- 6. Urine Toxicology For All Intakes
- 7. Group and Family Therapy
- 8. Structured Mandatory Six-Month Aftercare Program
- 70% of Intakes Complete the Program
 85-90% Drug-free and Excellent Psychosocial adaptation 1 year after graduation

STRAIGHT **National Headquarters** Tampa Bay 3001 Gandy Boulevard

St. Petersburg, Florida 33702 813/576-8929

STRAIGHT

Atlanta

2221 Austell Road Marietta, Georgia 30060 404/434-8679

STRAIGHT

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STRAIGHT

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STRAIGHT

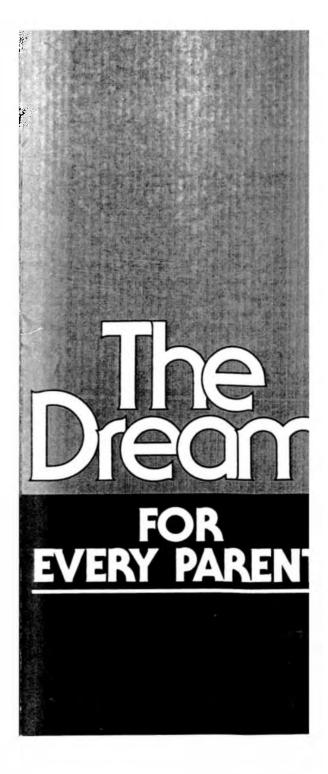
Greater Washington

5515 Backlick Road Springfield, Virginia 22151 _703/642-1980

 $\hbox{``Let me be the first to say that STRAIGHT'}$ is not only the best adolescent drug abuse treatment program in this area . . . it is the best in the country."

Robert L. DuPont, M.D.

Founding Director National Institute on Drug Abuse



Every parent

has a dream for their family. A dream of a home loaded with love, laughter, support, care, stability and warmth. For many families, their homes were just that until . . . something happened. One of the children became a stranger within the family. The dream became elusive and ugly, but at first no one knew why. Almost overnight, the dream became a nightmare. For no evident reason, love became anxiety. Laughter became silence. Support became suspicion. Care became worry. Stability became crisis. Warmth became anger.

This tragic pattern is typical for thousands of American families touched by the terrible epidemic of adolescents using drugs or alcohol.

GOOD FAMILIES IN BAD TROUBLE

Adolescent drug use is a disease, not a family failure. It is also very treatable! The family dream can still be realized!

Parents have often asked us, "How would I know?" They saw the following behavior without knowing why:

- The child withdrew from familyoriented activities.
- The quality of the child's friendships changed. The child preferred companions who were less acceptable to the family.

- © School performance dropped.

 Quitting school became more likely

 Talk of the future ceased.
- Family relationships become tentative and fragile. Honest communication ended.
- The child began to swing from anger to elation and swiftly back to anger. Loneliness was evident although the child was surrounded by people.
- Disrespect for authority grew to open rebellion. The child's world turned from positives to negatives.
- The parents saw a progressive deterioration in the behavior, attitudes, morals and personality of the child.
- Most parents never saw the child high, nor did they find evidence of drugs.
- The family settled for much less as the quality of their life folded and faded. Watching the decay set in, they began believing their dream had died.

Then they found STRAIGHT...



An Initial Visit Only Costs Time

The real value will be finding the road back to those lost dreams. Meet the professional staff. Talk to the young people. Talk to the parents. Experience their dreams coming true.

Call one of the locations listed on the back of this brochure. Don't give up on the child. Keep The Dream Alive.

Call STRAIGHT today.



In 1976, STRAIGHT was founded and dreams once again became reality for thousands of families. To date, over 3,000 young people and their families have entered STRAIGHT. Currently, over eight hundred young people are in treatment.

At STRAIGHT, we work every day with young people and their parents to regain the love, the laughter, the support, the care, the stability, and the warmth of a healthy family — the dream recaptured.

STRAIGHT, a privately funded, nonprofit organization, is a program for young people and families who have been hurt by adolescent drug use.

STRAIGHT combines the experience of professionals, parents and young people to help the family solve the problem. Love, honesty, responsibility, laughter, tears and open communication destroy the strongholds created by drugs.

STRAIGHT
A success
rate that
speaks for itself.

Why does STRAIGHT have such a high success rate?

STRAIGHT is recognized by the experts as an adolescent drug treatment program unique in its achievements. STRAIGHT has succeeded time and time again where other approaches have not. Why? What makes STRAIGHT special?

STRAIGHT is tailored to the adolescent (12 to 21) drug user.

STRAIGHT is supervised by professionals with years of experience in adolescent drug use counseling.

STRAIGHT deals with the problem, not the symptoms.

STRAIGHT works with the entire family.

STRAIGHT allows the child to move at his or her own pace. There is no arbitrary time limit for recovery.

STRAIGHT provides a drug free environment for recovery.

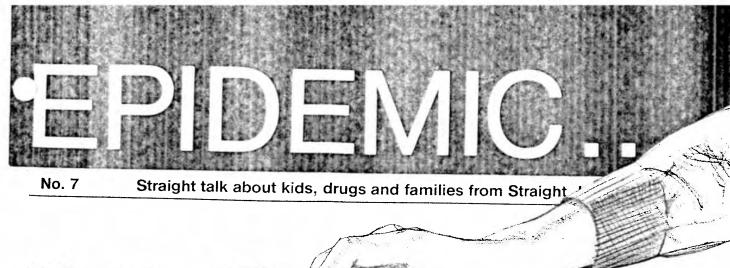
STRAIGHT staff members are drug free models for the young people.

STRAIGHT encourages and teaches honesty, integrity, and responsible living.

STRAIGHT provides an aftercare program and support group tailored for the needs of the entire family.

STRAIGHT teaches the young person how to deal effectively with personal problems, family relationships, school and work, friendships and constructive social activities.

STRAIGHT consists of professionals, parents and young people united in a common goal — the recovery of the family dream — a healthy home.



ALCOAOL

· · · is a Drug, too!

Fermented beverages containing alcohol have been consumed as far back in history as records exist. Today alcohol is still the most widely used drug in the world, with every major society using alcohol in some form or other. Use in America is such that the legal alcoholic beverage industry grosses over \$12 billion in sales each year.

Alcohol misuse also presents the greatest drug problem in the U.S. today. Between 6 and 10 million Americans are considered alcoholics - and 3 million of them are teenagers. "A great many more people are heavy drinkers - that is, they drink daily and become drunk several times a week. A few of the problems that alcoholism presents to society are the deaths and injuries which result from drunken driving; the millions of person-hours of absenteeism from work; loss of jobs by alcoholics; crimes and child-abuse associated with problem drinking; death and disability from cirrhosis of the liver (the 6th major cause of death in America); and chronic psychosis due to alcoholic brain damage which accounts for some 20% of the patients in state mental hospitals."

What is alcohol?

Alcohol is a central nervous system depressant — it slows down the body's functions and its effects are similar to those of a general anesthetic. Ethyl alcohol (ethanol) is the active ingredient in all alcoholic



...an Illegal Drug for Teenagers

"It seems like every kid drinks now nobody thinks it's a big deal to want to go out and get drunk. I think it's really sad."

Girl, 16

drinks. If you take any alcoholic beverage (whiskey, vodka, beer, etc.) and remove the ingredients that give it taste and color, you get ethyl alcohol. Remove the water from ethyl alcohol and you get ether. Ether is an anesthetic that works on the brain and puts it to sleep. The same symptoms a surgical patient experiences under ether—dryness in the mouth, euphoria, excitement, nausea—are those experienced by a person drinking alcohol. To get drunk is to overdose on the drug alcohol.

There is a common misunderstanding about the different forms of alcohol and their effects. Parents who feel less concerned about their children drinking beer or wine need to be aware of the following —

Each of these "social drinks" contain roughly the same amounts of alcohol:

- 4 ounce glass of table wine (12% alcohol)
- 12 ounce can of light beer (4% alcohol)
- 1 ounce vodka, on ice (100 proof or 50% alcohol)
- 4 ounce glass of champagne (24 proof or 12% alcohol)
- 1¼ ounce "shot" of whiskey (80 proof or 40% alcohol)
- 1½ ounce glass of aperitif liquor (25% alcohol)

(cont. on pg. 4)

Alcohol & Teenagers: An Interview

The following interview is with Dr. Donald Ian Macdonald, Administrator, Alcohol, Drug Abuse and Mental Health Administration, Washington, D.C.

Alcohol is America's drug of choice. How serious is America's alcohol problem?

It is serious in a number of ways. It is serious in terms of deaths — mainly highway deaths. It is estimated that 2 years ago 25,000 Americans died on our roads — with 8,000 young people involved in those accidents. It's a major concern related to its dollar costs — a recent survey estimated \$69 billion per year in alcohol costs. These costs were related to treatment, lost time, etc. Not included in that figure are costs related to family suffering ranging from poor relationships and neglect to child and spouse abuse.

What's happening with young people? We hear that drug use is on the decline with teenagers. What about alcohol use?

We have some indications that over the last few years alcohol use among kids is declining. The improvement has happened with an increasing national awareness of teenage drug and alcohol problems. In the class of 1984, high school seniors, 4.8% admitted to daily drinking. That's a considerable improvement from the high point of 6.9% in 1979. One of the problems we're most concerned about is binge drinking — having 5 or more drinks on one occasion. The survey question asked 'How many of you have had 5 or more drinks on one occasion within the last 2 weeks?' The response in the 1984 survey falls under 40% for the first time.

"I started drinking when I was 12. I used to take alcohol from my Mom and sit in my house and drink till I passed out."

Girl, 16

When asked how many of you have had 5 or more drinks, 3 or more times in the last 2 weeks — high school boys admitted to 26% — a shockingly high number. Not so shocking to young people when you ask them what's going on — they say that's the way it is.

Does alcohol affect young people differently than it does adults?

Yes. It affects them in a way related to reduced body size, so that a 12 year old who is drinking distributes an ounce of alcohol over a smaller body area, and tends to have more trouble with intoxication. It affects them in a developmental way in that the euphoria that comes with psychoactive

compounds is more frequently used by young people to deal with problems of life. One part of adolescence is learning about yourself through experimentation. So the young person who may begin what seems to him a normal experiment is frequently trapped in a cycle of chemical dependency that can lead to death. So, we're concerned about young people drinking because of body size, immature endocrine systems and developmental immaturity.

One of the public policy issues that has come before the state legislatures, this year and next year, is the legal drinking age. Why is there a legal drinking age?

The reason for the legal drinking age is protection of citizens, particularly people who travel the highways. The nation wide effort to raise the drinking age is due to the high rate of accidents involving intoxicated young people. One reason often given in defense of a lower drinking age is that if young people can go to war they should have rights to do other adult things. As a pediatrician, I have to say that there are developmental norms that have to be passed before people reach full maturity. A 3-year old should not cross the street and a 7-year old should not drive. And the age you give people full permission to engage in adult behavior should depend on their level of maturity. By waiting until age 21 many seem to do better.

The urge to try the "gateway" drugs — alcohol, marijuana and tobacco — may be very strong in young children. The age that most people begin their lifelong addiction to tobacco is in middle school. In looking at the numbers it's very clear that if you could hold off any use of these substances until age 21, long term involvement becomes less likely.

The issue of alcohol and drugs — particularly alcohol — seems to affect us at all levels of government — federal, state, local communities, parents and families. What is the hierarchy in dealing with the issue of kids and alcohol?

The child himself makes the decision whether to experiment or not. Those people closest to him influence him most. The main support systems in adolescence continue to be parents and peer group. Support, or non-support, is also received from his school and government. Major changes have been seen when parents movements address the issues of what is normal for kids — do we have to accept drunkenness and drug use as a normal phase of adolescence? Parents who mobilized and enlisted legal and school authorities in their efforts did very well.

A student once said to me "You're missing the point. Most of us don't want to be stoned or drunk, but we're not given a lot of options." What kids have asked for, and we haven't paid enough attention to them, is support in their efforts to stay drug free. Alcohol-free graduation nights have been appreciated by kids. We all need to work together, but I would put the focus on the kids and the parents.

"I think that alcohol is something you do when you feel lonely or you are going through problems and you think that getting drunk or just drinking a little will help you escape the way you feel."

Boy, 15

How about prevention?

I organize my thinking around what I call the 4 A's of Prevention. The first A is Age — we need to give special consideration to children because of their growth and developmental immaturity. The 2nd A is Acceptance or Attitude. If we as adults accept drunkenness as funny and intoxication as a part of life, we can expect kids to be involved. The 3rd A is Awareness — the awareness of risks. The more kids know about the risks of chemicals, both legal and medical, the less they are likely to use. The 4th A is Availability. The regular drinker or the social drinker can find alcohol easily it's not hard to get. But the non-drinker, the one we can do the most for, is put in a difficult position if alcohol is available at every party he or she attends. We can have keg-free parties and grad nights without alcohol — situtations where young people can grow to full maturity without having to make dangerous decisions. Very few of these non-using kids will go out of their way to look for alcohol.

As a doctor and a father, what would you recommend to a parent who said my teenage daughter came home drunk. How should they react? What should they do?

I think the first reaction might be relief that she came home drunk and not dead. I would hug her and love her and tell her you're glad she's home and make sure that she gets safely to bed. When she is in bed, parents need to discuss the problem and how they are going to deal with it in the morning. In the morning, when the child is sober, it must be made clear that drunkenness is unacceptable behavior and that as

concerned parents they have to reexamine their attitudes toward the child. The child has accepted parental permission to engage in certain social activities and obviously she's not handled them very well. It is a firm but loving statement to the child about her parent's concern for her and her future; that it is their responsibility to curtail unacceptable behavior.

Should they teach her to drink responsibly within the home? I've heard people say that they let their children drink at home so they can learn how to handle it.

I don't go along with that. The concept of responsible drinking, to most people, means teaching kids how to drink by giving them a little sip now and then. I would put that in the same class as teaching kids responsible sex by having them experiment at home under parental supervision. Responsible drinking, and responsible sex, are taught by the parents by example. In the case of both these important decisions, responsibility implies being old enough to make a decision in the light of, not only the law, but your own developmental maturity.

What is your reaction to the parent who says "My son or daughter is only drinking a couple of beers." What is acceptable for an adolescent, a 16 or 17 year old?

None is the acceptable level for a 16 or 17 year old. Obviously 17 is better than 13, but most 17 year olders are still not functionally mature. The 17 year older who is acceptably mature to drink — there are obviously some 17 year olds with their heads on better than others — should consider the 'my brother's keeper' angle. The mature 17 year old has a responsibility, not only because of the law, to remain abstinent as an example. To the parents I'd say that the child who admits to 2 drinks is usually involved with more. It is often the tip of the iceberg effect — what you see is not always what is there, and I'd treat it as a very serious sign.

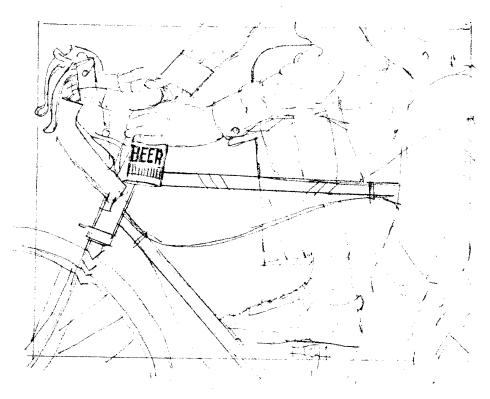
Let's take the family that's been through the whole cycle. They have had the incidence of their child's coming home drunk, of a DWI or auto accident. The child has survived, but obviously there's a problem. What should they do?

They should do whatever they have to do to save the child. You've described some pretty serious offenses, and I guess the bottom line is that the child has to get off alcohol. What we're trying to do is not only raise kids who are alcohol-free, but children

I started drinking at 7 years old. I was drinking at all times of the day and have really damaged my life, physically, mentally and spiritually."

Boy, 18

who feel good about themselves and can live up to their potentials. That is not likely to happen if they continue to use drugs and alcohol. You have to use whatever method works. Maybe having a talk and expressing your concern will be enough. You may have to organize or join a parent group that gives



the child peer support and parental support. Educational programs and counselling are available. The most mistakes are made in waiting too long.

I've heard Dr. Robert DuPont, and others, propose 4 drug-free zones in our society: car, school, workplace and home. What is your reaction to this? Is it a possibility that we can provide some sort of safe passage through the teenage years by focusing on these 4 areas?

Yes, I think those are well stated and doable. The car is the one I hope we can do the quickest. Very few states today have a rule, that I always believed was the law when I was growing up, that you can't have an open container of alcohol in the car. And I can really see no excuse for any state not to have such a restriction. The school should be the same. Obviously we should not tolerate alcohol in or around school. We're making efforts in the workplace also, with great help from companies like General Motors, who understand that employee assistance programs are cost beneficial. Not just in terms of lost days and broken equipment, but in employee loyalty. In the home, again, the parents have a responsibility by their own lifestyle to convey the message to their kids. Parents who drink moderately and show no intoxication give entirely different messages than those parents who do become intoxicated on a regular or irregular basis. Children watch what their parents do

If alcohol were invented today, would it be legal? Or would it fall in the category of heroin, cocaine, etc.?

I think it would fall into that category. It would be very hard to justify it. And the more you read about it — even the casual drinker should be worried — we know that there is memory loss in the intoxicated alcoholic, but we're starting to show some of that in the casual drinker too.

Thank you, Dr. Macdonald.

"I would like to see the legal drinking age raised to 21 or possibly 25, and higher stipulations placed on the breaking of this law."

Boy, 19

EPIDEMIC is published to inform and benefit the parents of teenagers and their families. To better serve you, we'd like to hear your comments on past issues and suggestions for future stories. Please take the time to write us—use a separate sheet of paper if you wish.

Subscription & Information

EPIDEMIC is published by Straight Inc. as a community service and depends on the support of families and friends of Straight. Your \$10 donation will be applied to a one year subscription and will also enable us to reach other parents and families.

Enclosed	is	mν	\$10	donation

Please send me information on Straight, Inc.	
--	--

Please add	the following na	ame to your l	EPIDEMIC
mailing list.			

Did You Know?

- The average age when most children start drinking is 121/2!
- 30% of high school seniors get drunk once a week!
- More than 3 million (3,000,000) teenagers are classified as alcoholics!
- There is a teenage alcohol or drug related traffic accident every FIVE seconds!
- The 2nd biggest source of income for the federal government, after income taxes, is alcohol!
- Enough alcoholic beverages were consumed in 1983 to give every man, woman and child over 14 years 2.69 gallons each!

Alcohol (cont. from pg. 1)

Alcohol and the Body

Metabolism of alcohol varies with time of day, previous drinking history, body weight, food present in the system, and whether the person drinks quickly or slowly. "Food tends to slow down the absorption of alcohol by slowing down the emptying time of the stomach. Carbonated beverages tend to speed the absorption by helping transport it more rapidly to the upper intestine. Either way, once alcohol is absorbed into the bloodstream, it is rapidly distributed throughout the body. It affects almost every cell, every organ, and every level of human functioning. It has been called the most active drug that affects the human body. Once alcohol is drunk its most profound early effect is on the central nervous system, where it acts as a sedative, producing relaxation and a sense of well-being. At the same time, it impairs the intellect, physical abilities and metabolism."2.

"When alcohol is taken regularly and in large amounts over many years, permanent physical damage is certain to occur. This damage is often aggravated by the lack of vitamins and food because most alcoholics have very poor eating habits. In addition, alcohol can damage the liver, brain and other parts of the nervous system. In the final stages of alcoholism, certain parts of the brain are permanently damaged and confusion, disorientation and psychosis inevitably result. The potential dangers of alcohol abuse are so great that many scientists believe that, if the drug had been discovered today, it would probably not be approved by the U.S. Food and Drug Administration."3

Alcoholism

Alcohol consumption is a learned behavior > no one likes the taste of alcohol at first. you learn to like it. People drink out of curiosity, because of custom (let's "toast" the bride and groom), and for escape — to replace an unpleasant feeling with a sense

of well-being and euphoria. Alcoholics are perceived as being weak people, having a bad habit, as being evil or even psychotic crazy. They are none of these things.

"I have a Dad that's an alcoholic, and because of alcohol my Dad beats and mistreats my Mom and his girlfriends. Because of that I can no longer see him because he's a bad influence on me and I cannot have a father-son relationship."

Boy, 17

"Alcoholism is the disease condition produced by the repeated misuse of ethyl alcohol. It is a Primary disease: it is not caused by some underlying psychological or moral flaw. It is a Chronic disease: it does not go away with time. It is a Progressive disease: it does not improve as long as one continues to drink. It is a potentially Fatal disease, if the drinking is not interrupted. A primary characteristic of an alcoholic is loss of control. Loss of control means in effect that once an alcoholic starts to drink, he or she is not able to predict how, when, or if he or she will be able to stop drinking. There are at least 10 million alcoholics in the U.S. today, and one person in ten who drinks at all will become an alcoholic. Approximately 25% of all people who drink will have problems because of alcohol sometime during their drinking career.

Alcoholism is one of the most treatable illnesses. For most people, recovery is not easy at first, but it is always worth the effort. As a common saying among A.A. members has it: for an alcoholic, the best day drinking is not as good as the hardest day sober."

 Our Chemical Culture: Drug Use and Misuse (Madison, Wisconsin; Stash Press, 1975), pg. 14.
 Premer, Robert, F., M.D., Medical Consequences of Alcoholism (Minneapolis, MN, Johnson Institute, Inc., 1982), pg. 6. 1982) pg. 6

Our Chemical Culture, pg. 16
Premer, pg. 14

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Straight, Inc. Orlando 2400 Silverstar Road Orlando, Florida 32804 (305) 291-4357

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What others say about STRAIGHT, INC.

"I have found it to be a unique treatment approach, offering unusually effective and affordable help to families caught up in the drug abuse epidemic... It focuses on teenagers and it actively involves parents in the treatment process. Straight is a tough-minded, drug-free program. It is intensive and effective... uses teenage peer pressure for positive goals, reversing the pressures of the drug culture... it also respects the individuality of each young person and each parent..."

"Straight is the best program of its kind in the country. What you do in the program helps the kids, helps the parents, and helps the community."

Robert L. DuPont, M.D., President American Council on Marijuana

"... a highly effective treatment program... an excellent example of people, not government, helping other people."

Congressman Frank R. Wolf (R.-Va.) U.S. House of Representatives

"I have been greatly impressed by the work of Straight, Inc., an organization which has helped many to give up drugs and brought families back together in supporting roles all over the country."

Congressman Charles E. Bennett (D.-Fia.) Chairman, Florida Democratic Delegation U.S. House of Representatives

"It's my sincere professional opinion that the Straight, Inc. program is one of the best treatment programs there is for kids who are abusing drugs."

Maxie C. Maultsby, Jr., M.D., Director Rational Behavior Therapy Center College of Medicine University of Kentucky

STRAIGHT, INC.

not-for-profit, privately funded, family oriented treatment program for drug-using young people and their families

P. O. Box 792, Springfield, Va. 22150 (703) 642-1980

PARENTS OF TEENAGERS

Have you observed

	School tardiness, truancy, declining grades
	Less motivation, energy, self-discipline
C	Loss of interest in activities, hobbies
	Forgetfulness, short- or long-term
	Short attention span, trouble concentrating
	Aggressive anger, hostility, irritability
	Sullen, uncaring attitudes and behavior
	Family arguments, strife with you, siblings
E	Disappearance of money, valuables
	Changes in friends, evasive about new ones
	Unhealthy appearance, bloodshot eyes
	Changes in personal dress or grooming
	Trouble with law in or out of school
	Unsually large appetite
	Use of Visine, room deodorizers, incense
	Rock group, drug-related graphics, slogans
L	Pipes, small boxes or containers, baggies, rolling papers, or other unusual items
	Peculiar odors or butts, seeds, leaves in

ashtrays or clothing pockets

THE PROBLEM

If your responses in the boxes on the previous page indicate some doubt about your child's behavior, the reason may be that he or she is using some kind of drugs.

Parents are usually not well informed about the vast amounts and varieties of substances available to young people today. Drugs and alcohol can be root causes of many persistent behavioral problems.

When parents confront young people about possible drug use, the answer will generally be denial: Of course not!" or "Prove it!" A young person using drugs is clever at getting around suspicions of both parents and professionals.

Parents must accept the fact young people cannot handle drug use on a casual basis. Once they have begun drug use regularly, it is unlikely they will "outgrow" the problem; in fact, they usually increase drug use over time.

Statistics tell us well over half of high school students are "doing drugs." Most of these young people and their parents need assistance to bring about a solution to their problem. Straight can help.

THE SOLUTION

Straight, Inc. is a family-oriented treatment program for drug-using young people and their families. It is one of America's most successful programs. Approximately 75% of all entrants go on to graduation, and will have been drug-free for between twelve and eighteen months.

Since Straight, Inc. began in 1976, over 3,000 young people and their families have completed the

program and are living free of drugs while enjoying restored family relationships.

机学生的 计分别编码 医克雷克氏病 经营业的 经基础的转换 医阴道

Total Family Involvement The drug-using young person is not isolated or institutionalized at Straight, but is always among others who are aware of his or her problem—loving, caring host families. Active involvement of parents is a key element in the program.

Kids Helping Kids The entire group of young people is involved in the therapeutic process and serves as a bridge to recovery through positive peer pressure. Straight's simple concept of kids helping kids works. Peer pressure is what gets young people into drugs, and at Straight, with professional supervision, peer pressure helps them get off drugs.

Focus On Youth Only a small percentage of drug treatment programs are for young people. The

average age of those involved in the Straight program is 17.

Cost Effective Straight incorporates a host home concept for participants during the first phase of the program. In later phases they live in their own home with their own families (or at a host home if their family is from out of the area). In addition to its therapeutic effectiveness, this approach dramatically reduces room and board expenses. During daytime hours, clients participate in therapeutic discussion groups at the Straight facility in Springfield, Va., full-time at first, then later after school or work

HOW STRAIGHT CAN HELP NOW . . .

ASSESSMENT SERVICES

Straight, Inc.'s Springfield, Va., facility offers drug use assessments to families to help identify and define problems of young persons. Parents may obtain more information and arrange an appointment by calling (703) 642-1980.

OPEN MEETINGS

These meetings occur each Monday and Friday evening. Please Address make prior arrangements, at least 48 hours in advance, by calling (703) 642-1980. Straight always welcomes guests.

OR WRITE STRAIGHT, INC. P. O. Box 792, Springfield, Va. 22150

Please send me more information.

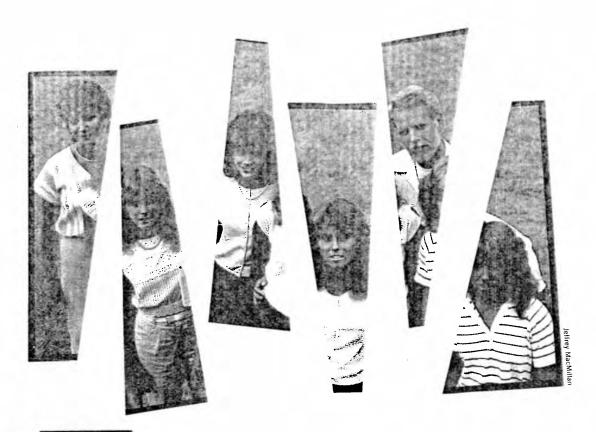
Name

HOME JOURNAL OCTOBER



OF AN AMERICAN

BY PATRICK PACHECO



his is the story of a family that came apart with much pain, and came together with much love. It is a story you won't forget.

It was a beautiful spring day five and a half years ago, and Jean Richwein spent most of the morning playing with the puppy instead of doing housework. Her four daughters, aged eight to fourteen, loved animals, and the Richweins' house in a suburb of Baltimore was home to a large menagerie.

Karyn, the eldest, said she wanted to be a veterinarian and continually dragged home wounded animals. Jean, thirty-seven, a registered nurse, tended their wounds

before trying to find them homes.

Thinking about Karyn, Jean wondered why lately everything was becoming such a battle with her. Just that morning, Karyn had argued endlessly because she wanted to wear a Black Sabbath rock band T-shirt to school. Muttering darkly, she'd finally left wearing the oxford cloth shirt Jean had laid out.

The telephone ring disturbed Jean's thoughts, and she almost tripped over the puppy on her way to answer it. Her pensive mood quickly turned to disbelief, then shock, as she listened to her caller. It was a woman from the vice-principal's office at Karyn's high school.

"Mrs. Richwein, we believe your daughter has ingested a dangerous substance. Please come to the high school as soon as possible."

The words burned in Jean's ear, and her legs buckled into a kitchen chair. Trembling, she misdialed her husband's office twice before she got through. But Roy, thirty-nine, an engineer, wasn't in. She fumbled for the car keys and raced to Mount Hebron High School in Ellicott City, Maryland, a small, historic town. She prayed aloud the entire way in a quavering voice. "Please, God. Please make it a mistake. Not Karyn. Not my Karyn."

Karyn was in the gym teacher's office, slumped in a chair. She was conscious, but her eyes were unfocused and she could barely stand. Jean, from her experience as a

nurse, recognized the symptoms of a drug overdose.

The vice-principal explained that Karyn had left the school grounds with her friend Sally. When she returned, it was obvious that she had taken something.

"Why did you do this, Karyn?" Jean asked more loudly than she had intended. "Why?" It was only much later that Jean realized why Karyn's clothes looked so odd: Jean could see Karyn's Black Sabbath Tshirt showing underneath her button-down shirt.

Once home, Jean learned from Sally's mother that the girls had discovered a bottle of Demerol, a potent painkiller, in the medicine cabinet in Sally's home. Karyn had taken four hundred milligrams, a potentially fatal dosage for a young girl. Jean immediately phoned the doctor and described Karyn's symptoms. The pediatrician was reassuring: "Drug reactions vary from individual to individual. It appears

that it would take a much larger dose to slow your daughter's racing motor, Mrs. Richwein." Watching Karyn playing with the puppy, Jean had to agree that the effects were wearing off.

"Mommy, do you have to tell Daddy?" Karyn asked, frightened. "He'll be angry and won't speak to me."

Jean dreaded telling Roy about the overdose. He did not come home until late that night, after Karyn and the other girls had gone to sleep. As he was undressing for bed and discussing his day, Jean interrupted him with the terrible news. He continued to undress in silence after his wife finished.

"Well, aren't you going to say anything?"

"I'm tired," Roy said curtly. "I've had a tough day. I'm going to bed."

"Your daughter almost died of an overdose and you have nothing to say to her?" she demanded. "What's your responsibility in all of this?"

Roy felt powerless and hated that feeling more than anything else in the world. It was important for him to always be in control—of his work, his emotions, his family.

Jean woke Karyn up and brought her into the room, and Roy recognized in her young face the fear with which he had always faced his own father. He wanted to say so many things to her: "Please don't hate me. I do love you. Please, please don't ever do it again." But all he could do was embrace his weeping daughter. For the first time, Jean saw tears running down her husband's cheeks. She left them alone and went out on the deck adjacent to the bedroom. She knew that though there were problems in their marriage, she would never love Roy as much as she did at this moment.

The day after the overdose, Jean and Karyn, who had been suspended from school for the rest of the week, painted the outside of the house. It gave them a chance to talk, and Jean prided herself on what she thought was an open, honest relationship with her daughter.

"Have you ever smoked marijuana?" asked Jean.

"No," replied Karyn too quickly.
"Well, yeah, but only once. Mom, it's not so bad, is it? Everybody says it isn't any worse than alcohol."

"Honey, people will always find reasons to do what they want to do," Jean answered. "It doesn't make it right. Marijuana, alcohol, all drugs are bad. Please promise me that you'll never do it again."

Karyn promised.

"My promise lasted for five days, then I started smoking again. I was twelve when I took my first puff of pot. By the time I got to Mount Hebron, I did drugs almost every day -mostly pot and alcohol. I was terrified of going to high school. I thought nobody would like me. Then I discovered if you did drugs, you were cool. On the morning I overdosed at school, first I took the pills at Sally's house, and when nothing happened, I took a couple more. Then later, we drank some Jack Daniel's. We made it back to school, but the next thing I knew I was on the floor and it felt like I was going to die.'

Even though Karyn had promised not to take drugs again, the Richweins took her to a drug counselor recommended by the high school. The counselor was reassuring. "Mr. and Mrs. Richwein, your daughter doesn't have a drug problem," she said. "She's just experiencing the normal adolescent emo-

tional difficulties.'

Karyn was restricted for the summer because of the overdose. She couldn't go out unless either Jean or Roy was with her. Jean watched her like a hawk, surprised that she took it so well. Even though there were ripples in the seeming calm—Karyn and her mother argued incessantly over clothes and makeup—the Richweins felt good about the resolution of the crisis. Each night when Karyn kissed her parents good night, Jean whispered a prayer of thanks.

On one such summer night, Jean awakened to hear a knocking at the door. She looked out the window to see a police car parked in front of the house. It was four A.M. She felt her stomach tighten as she and Roy scrambled downstairs.

"Mr. and Mrs. Richwein," said the officer, "we have your daughter Karyn down at the station. She and a boy were picked up joyriding in a stolen vehicle. Would one of you come with us?"

"I'm sorry, officer, but you're mistaken," protested Roy. "Our daughter is asleep in her bedroom downstairs."

The officer, who had heard this response many times from other parents, insisted he was correct. Still incredulous, Roy and Jean led him to Karyn's room at the far end of the house. The (continued on page 168)

There was a knock at the door. "Mr. and Mrs. Richwein," said the police officer, "we have your daughter down at the station." Roy protested, "You're mistaken, officer. Our daughter is asleep." Roy and Jean led the police officer to Karyn's room. The door was locked. With a sinking feeling, they realized she was gone. Roy forced the lock and they went inside. An autumn chill blew through the

AN AMERICAN FAMILY continued from page 113

door was locked. With a sinking feeling, they realized she was gone. Roy jimmied the lock and the door flew open. An autumn chill blew through the open window.

"After I was restricted for the summer because of the overdose, I'd wait till everybody was asleep, then I'd sneak out the window. I'd go joyriding with friends, kids from the neighborhood, in cars we'd 'borrow' from our families or neighbors. We usually did drugs—a hit of speed, a tab of acid, angel dust, a couple of joints or uppers or downers.

"Sometimes I'd go out alone. See, even though I ran around with this group at sc'hool, I felt lonely. When I overdosed in the spring, not one person came to see me, and I felt bad about that. I'd go sit in a field for hours, picking out the constellations in the sky and wondering where I fit into it all. My best friend was really my sister Sandi. I turned her on to drugs when she was about thirteen, partly to keep her from snitching, but mainly because she always wanted to do what I did. She liked what I liked; she looked up to me."

Seeing the stricken look on Jean's face, the policeman sought to comfort her. "Don't worry, Mrs. Richwein, it's just kids being kids."

Kids just being kids, thought Jean as she waited for Roy to return from the precinct. How much could "normal adolescent behavior" cover? At least there weren't any drugs that night. The police told Jean that they searched the kids and the car and had found none.

Roy was seething. The sight of his daughter in the holding cell hurt and angered him. "I was too soft," he decided. He had to run a tighter ship, turn this thing around before it got out of control.

"We weren't doing anything wrong!" screamed Karyn. "It was his sister's car. Didn't you ever go out looking for fun when you were a kid?"

"You're restricted again until I tell you otherwise," shouted Roy. He stormed off to bed, leaving Jean alone in the kitchen with her daughter.

"I'm sorry." Karyn was conciliatory. She looked like a lost urchin, and Jean felt her anger melting. She thought, If only she yelled and screamed at me like she does at her father, it would be easier to discipline her. But she knew that for the next two weeks at least, Karyn would do the housework, be charming and funny, and Roy's strictness would appear even more unfair.

Upstairs in the bedroom they shared, the two youngest girls lay apprehensively awake. "I wonder (continued)

what she did now?" said nine-year-old Wendy to her older sister Dianne.

"I don't know and I don't care." The reply was cynical for an eleven-year-old. "Go to sleep, Wen." Dianne was frightened. The police and everything. She cried softly into her pillow.

The Richwein home was becoming a battlefield. The more Roy cracked down—giving Karyn more and more chores to do and curtailing her social life—the more intractable she became, and Sandi was picking up some of the same bad habits. Jean felt alone and under siege; Roy used work more and more as an excuse to stay away from home, and she resented the way he came in, laid down the law and then left it to her to enforce it.

The rifts between Jean and Roy were widening, and Karyn and Sandi, now fifteen and fourteen years old, seemed to know exactly how to drive the wedge in deeper.

"Dave pulled out a gun and pointed it at me. I was frightened but fascinated. I knew it was going to be a different kind of joyride that night. The guys were trying to impress us with how tough they were. We're going to rob a 7-Eleven. Wanna come?' Candy and I didn't want any part of it, so I told them to drop us off at my boyfriend Robert's house and to come pick us up only if they didn't rob the store. I was really glad Sandi hadn't come with us that night. When the car pulled up later, we saw all these cartons of cigarettes $and\ cash\ in\ the\ back\ seat,\ but\ nobody\ said$ anything. A couple of weeks later I almost jumped out of my skin when Mom showed me a newspaper article about the armed robbery. Don't you know these guys?' she asked me. I answered something lame like, Yeah, what a shock! They're from such good families, too."

Jean was just about to go out the door when the phone rang. She'd taken the afternoon off from her part-time job at the hospital to spend several hours with Dianne and Wendy. It was their annual school field day.

The police were on the phone. They wanted her to pick up Karyn at school and bring her to the station immediately. Her name had come up in connection with the armed robbery she had read about in the papers.

Jean tried to keep her quaking voice under control. "I'm going to take you to school, but I can't stay. Karyn's in serious trouble, and I have to help her."

Wendy's large brown eyes became thoughtful. "Does this mean there's going to be a lot of yelling and crying when Daddy comes home?"

"I hate her!" snapped Dianne. "Why doesn't she go away and leave us alone!" "Dianne!" Jean took her daughter's face in her hands and held it close. "You don't mean that. There's not enough love in this family right now, and that's part of the problem. Please help me," she pleaded to both her daughters. "I promise you I'll make it right again, and there won't be any more screaming or yelling." As much as she meant it, the promise sounded hollow.

"I don't know what's going on, but I have a feeling you do," Jean accused Karyn as they drove toward the police station. She warned her, "If you've ever told the truth in your life, now is the time to tell it. I've always protected you, but this time it's out of my hands."

At the police station, fear erased Karryn's usually smug demeanor, and she answered the detective's questions honestly. Satisfied that she had no part in the robbery, he told Jean that no charges would be pressed.

True to her word, Jean saw that there was no more screaming and yelling at the house that night. There were a lot of slamming doors, however, and behind them, the family brooded in fear, anger and pain.

"I really felt awful when I hurt my family, especially my mom. But no matter how hard I tried to be good, I ended up making a mess of things. I'd work real hard at school and at the end of the term, I couldn't even pass gym. My parents decided that Sandi and I would transfer to Mount De Sales Academy, the Catholic school, and repeat our school year because our marks were so bad. They thought that it would get us away from the bad element, but the bad element is everywhere. I was the bad element; that's how I thought of myself.

"At Mount De Sales, I was determined to do good and even got some A's first term, then I just fell flat on my face. I felt even more worthless and hopeless. I was losing my self-esteem because of boys, too. Among the heads I hung around with, sex was expected.

"One day Sandi and I were at a party when a guy pulled out some cocaine and a needle and started to shoot up. "Can you do that to me?" I asked him, and he said sure. It was the most incredible high, and after that I started shooting up a lot. Then I began stealing money from family and friends, small amounts that weren't noticed.

"I wore long-sleeved blouses, but I never worried about Mom finding out. I mean, who checks a sixteen-year-old girl's arms for needle tracks?"

Jean had a strong suspicion that Karyn was on drugs, but she could get no help or confirmation from professionals. After they exhausted the resources of the school guidance counselors and drug counselors, the Richweins took

Karyn to a widely known psychologist, who again tried to allay their fears. "I wouldn't be unduly worried about drugs, Mrs. Richwein," said the psychologist. "Karyn has emotional problems at school and at home. You and Mr. Richwein have to learn to let go, stop imposing your morality on her. In time, these things have a way of clearing up on their own."

But the relief that Jean felt when a professional attempted to reassure her lessened as the months went by. Whenever she brought up the possibility of Karyn's continued drug use to a counselor, psychologist or teacher, they'd dismiss the idea.

When Karyn became ill with hepatitis, Jean braced herself again for confirmation that Karyn was on drugs. She knew that hepatitis could be transmitted through dirty needles, and was often an illness of addicts. She confronted the pediatrician who had cared for Karyn since she was six. "Is there any way this is related to drugs?" she asked.

"Only insofar as it's a reaction to a prescription I gave your daughter for that bad sinus infection, Mrs. Richwein," he replied.

Jean caught his eye and looked at him directly. "I meant street drugs."

"Not to my knowledge," the doctor replied, meeting her gaze. Once again, Jean seemed to be the only one who was convinced that Karyn's problems were drug-related.

"When I was a little girl, my father took me fishing. When I saw the fish flapping in the fish box, I screamed, 'They're suffocating!' and I threw water on them so they wouldn't die. That's the way I felt on drugs—like a fish flapping and dying in the hot sun. I couldn't complete a thought or a sentence, and I felt like my head was going to split open if I didn't physically hold it together.

"One day I came home from school tripping on acid. Voices in my head were screaming how worthless I was, so I tried to drown them out by turning on my stereo real loud. Dianne came in to tell me to turn it down. I picked up a pair of scissors and threw them at her, missing her by inches. She just stood there looking at me, terrified."

Jean was furious when Dianne told her about the scissors incident. She stormed into Karyn's room and confronted her daughter. "Get out! I'm tired of your selfishness, your lack of decency or regard for me or the family or for yourself. Pack your bags and leave this house now!"

Karyn raised her arm to hit her mother, and Jean slapped her hard for the first time in her life. Her hand stinging, she left the room, climbed five stairs and collapsed in sobs against the railing. Violence never solved anything, and she knew she had done it out of frustration and rage. Still, Jean fought back the urge to apologize. She wanted Karyn to know just how angry she was, and she resolved not to undermine her own authority as she had done so many times before.

That evening, long after everybody else had gone to bed, Jean stayed awake, lying on the living-room couch and thinking. It was there that Karyn found her mother. Karyn's face had been scrubbed clean and she wore a nightgown. Jean was always amazed at how young and innocent her daughters looked after they put away the hard, crude adult masks they wore during the day. She felt her anger melting and she opened her arms. Crying, Karyn laid her head in her mother's lap.

"Karyn, what is it?" asked Jean. She smoothed her daughter's hair as she had done so many times before.

"Mama, I think I'm going insane."
"You can tell me, Karyn. I'll understand."

Then, never once looking at her, Karyn told Jean about her drug-taking in a long, scorching litany, and concluded, "I was going to shoot up heroin this weekend. Mother, I need help."

As Jean listened quietly, she felt a nightmarish fog lift. She could see the landscape for the first time. It was a bleak landscape, but at least she felt as if she were seeing clearly. "You're precious to me, darling. I promise that your daddy and I will do everything to see that you will be well again. You never need to worry. It's all over." They lay there for hours in silence, Karyn in a fetal position on her mother's lap, until Jean went to tell Roy.

The next day, Roy and Jean called the family together and told them about the gravity of Karyn's problem. Then they decided that the best move would be to enroll Karyn in a drugrehabilitation program as quickly as possible. There were four thousand drug programs in the country to choose from. After a couple of days of frantic phone calls, the Richweins spoke with the parents of one of Karyn's classmates, who were pleased with the progress their daughter was making at a well-known psychiatric hospital in Texas. Jean and Roy were assured that their daughter would be well at the end of the treatment. (The Richweins still had no inkling that Sandi, too, was involved with drugs.) Just before she walked through the locked doors of the drugabuse ward of the hospital, Karyn turned to give her parents a weak smile. Jean lifted praying hands to her lips: "Dear God, help her.'

"I was terrified on that first day. Everyone was staring at me as I walked down the dormitory hall with my suitcase. A guy came up to me and asked me if I had any pot. I thought he was kidding. He wasn't. I spent most of my time there high on the prescription drugs the doctors gave me.

"When I left, they put me on lithium 'to even out my emotional peaks and valleys,' they said. I left Texas with a prescription, a new boyfriend and the feeling that I was really straight because I wasn't doing street drugs."

The hospital sent Jean and Roy regular reports of the therapies and medications that Karyn was receiving on a daily basis. It took a leap of faith for Jean to be convinced that treating drug abuse with another type of drugs was going to solve the problem. But any reservations that Jean had evaporated when Karyn came home. She was better dressed and her manner was congenial. She even looked healthier. Jean thought she had her daughter back again.

Karyn and Sandi began working at a local antidrug organization that Roy and Jean had started while

their daughter was in Texas. The girls spent every Friday night at the center, working as drug counselors and discussion leaders. There, two months after Karyns return, Sandi confronted her, "You're stoned aren't you, Karyn?"

Jean knew there was trouble again, too, and it made her feel like a fool. The replay of tensions and arguments at home took away the last vestiges of her hope. Instinct told her that Karyn was back on drugs and that Sandi was becoming deeply involved as well. While cleaning Sandi's room, she found a drawing that seemed to confirm her suspicions. It was of an eyeball dripping blood and tears.

The depth of her despair came to her one night while she waited up, as she always did, for Karyn and Sandi to return home from a double date. They were late-it was well past their midnight curfew-and she became fearful. She was shocked to find herself thinking, I hope there was an accident. I hope they are dead. Then, at least, it would all be over, finally over. At least that way she would no longer be imprisoned by hope. And she would know that nobody could hurt them, and that they could no longer hurt the family. The lights of the car interrupted her thoughts, and she felt guilty. Has it

Jean confided her fears to her husband. "I'm worried, Roy," she told him one night as they lay in bed. "I'm worried that we're not going to make it." That night Jean confided in Roy, pouring out feelings about their marriage

come to this? she thought.

that she had held in check for the twenty years they had been together. She was scared. She'd never been so open and honest with him, or so vulnerable. Please don't block me out, she thought.

Roy listened and then spoke softly. "I don't know how you've put up with me all these years, Jean," he responded tenderly. "I've always been terrified that you'd leave me. I know I'd be lost." But that night they talked until dawn.

In a diary entry from that weekend, Roy wrote, "As long as my wife and I love each other, no matter what happens to the kids, we can handle it."

"Sandi and I decided to run away when I was seventeen and she was sixteen. My parents had forbidden us ever to see our boyfriends, Dan and John, again, and so, because they were being evicted from their apartment, they said, 'Why don't you come with us to California?' That morning I went into Wendy's room. I hugged her and said, 'I love you very much.' I did the same to Dianne and my mom. I knew it would hurt them, but I thought, I'm a screw-up. They'll be better off without me."

Something snapped in Jean when she received the phone call from the high school telling her that the girls had been seen leaving school in a station wagon with two young men, and that a student had overheard them talking about their plans to run away to California. How could they do this to me? thought Jean. If they really loved me, how could they do this?

After the call, Jean went up to her daughters' rooms. She ripped down rock 'n' roll posters, tore clothes off hangers, and piled books, records and magazines in a heap in the middle of the floor, as if to torch the sordid past in a bonfire. Dianne came into the room and sat on the bed, watching her mother work with increasing frenzy. She was frightened. "Mom, our whole family is falling apart."

Jean stopped and remembered the promise she had given to her younger daughters, the promise to make things right again. What am I doing?, she thought. I have a family to take care of. She embraced Dianne tightly, and they wept in each other's arms. Strengthened by prayer, Jean plotted to bring everybody back together again. That was all that mattered.

Roy's reaction to the girls' running away was different. He was overcome with a fierce anger. Running away was the final, unforgivable outrage. As Roy saw it, Sandi was just a follower, but Karyn had jerked and pulled apart their lives for far too long. I don't even want a Christmas card or a birthday card or a Father's Day card from her, he

thought bitterly.

Knowing how strengly Roy felt about Karyn's betrayal, Jean decided to argue only on Sandi's behalf. She felt that if she could convince Roy to help Sandi, eventually she could reason with him to help Karyn, too. She told him, "This is the first time Sandi has really done anything so very bad. I think she deserves a chance." Roy agreed.

This time, the Richweins decided to look into a Florida-based drug-rehabilitation program called Straight Incorporated. Staff members from Straight had spoken at the local antidrug organization. Although Straight's methods are controversial, Jean had been impressed with the program's emphasis on family participation, the use of peer pressure, and the fact that, unlike the program in Texas, Straight was totally drug-free. She had told Roy, "If we need help again, this is where we'll go."

The Richweins flew to Florida to meet with the program directors.

The counselors at Straight told the Richweins that if they could get Sandi to the clinic, they would do the rest. When the meeting was over, Jean lingered in the office after Roy left to whisper that they would eventually be bringing in two of their daughters.

Three days after the girls had run away, Jean began to get calls from Karyn. They were brief, since the girls didn't want them to be traced. They were in St. Louis, they were in Las Vegas, they had arrived in San Francisco and were staying with the grandmother of one of the boys. When Karyn called again, Jean told her, "There's a prepaid ticket for Sandi at the San Francisco airport. It can't be cashed in. If she is not on the next plane for home, Karyn, you better start running, because I'm hiring a private detective to track you down and press charges. You'll be eighteen soon, but Sandi's underage. We'll prosecute you."

"I felt guilty about Sandi, so I made sure she was on that plane. Then Dan and I took off for Los Angeles. We stayed in Venice in the garage of a house that Dan's sister shared with a bunch of rock musicians. One day, walking along the beach, I remembered the time when I was a child and we were moving from Florida to Maryland. It was dark, early in the morning, and the four of us-I was six, Sandi was five and Dianne and Wendy were babies—were lying in the back of the station wagon, our limbs all tangled and warm. I remember looking up at the stars and feeling so secure and happy. Merry Land, I thought. We're going to Merry Land. When I came back to the garage, I didn't have any drugs, so I just took out this hypo I found on the dirty floor of a closet in the house. I

stuck it in my arm, withdrew blood, and then shot it back in again. I hoped an air bubble would travel to my heart."

Back home, Jean prayed as she paced back and forth, waiting for the phone to ring. She instinctively knew that Karyn would call that night, and she was ready. She and Roy had been shutling to and from Florida during Sandi's first weeks in Straight, going through parent orientation. They were scheduled for their last weekend. Impressed with the program and Sandi's progress, Jean convinced Roy that Karyn, too, deserved one last chance.

When the phone rang, Jean took a deep breath. "Karyn, Sandi's in a drugrehab center in Florida. We're going to visit her this weekend. If you can get away, why don't you join us there?" she said as nonchalantly as possible. "You can visit with Sandi, and I'll bring some clean clothes you can take back to California with you."

"I'll think about it and call you back," replied Karyn. Her

words were slurred and she'd dropped the phone.

How much more time does she have? Jean wondered as she knitted a scarf late into that night. She knew parents whose sons and daughters had been returned to them in coffins with an envelope of personal belongings. Drugs were such arbitrary killers.

When Karyn called back to tell her mother she'd meet them in Florida, Jean's heart didn't leap for joy; she just kept knitting quietly. A family can fall to pieces so quickly, she thought, and sometimes you can never patch it up again. Jean hoped she could pull her daughter back from the precipice on which she stood.

"Oh, my God!" gasped Jean when Karyn got off the plane at the Tampa airport. She looked like a skeleton. She'd lost twenty pounds, and dark circles shadowed her eyes. She wore threadbare jeans and plastic heels. Her bleached hair was a mess. Roy, satisfied that his daughter was on the plane, turned and went back to the car. Jean embraced her daughter warmly, feeling her ribs protruding from under her skimpy top. Then she grabbed her daughter's hand and held it tightly until they reached the motel. If I let go, Jean thought, I'll lose her forever.

The next morning Karyn was signed into Straight. When Jean came into the room to say good-bye to her daughter, Karyn indignantly said, "You lied to me!" Her mother smiled at the irony and gave her daughter the scarf she had knitted for her. "The nights can be cool." As she watched her daughter go through the doors, Jean leaned on Roy's shoulder and cried with relief and hope

for the first time in four long, battlescarred years.

"I felt like a wild animal in a cage at Straight. I punched and kicked and screamed, but they told me that even if I ran away, they could get a court order to force me back into the program. The first couple of days, you're not allowed to say anything in group. You have to listen to other kids talk about their loneliness and their problems with drugs. I realized that I wasn't alone. For the first time I could share my feelings. After three months, I was standing up in front of the group, and the director asked me, How do you feel about what you've done?' And I stood there, silent. I thought about all the pain I'd caused and all the hurt I felt, and I didn't know what to say. He asked again. And all of a sudden I was hit with these emotions and feelings, and I just started crying. I cried for what seemed like hours, wave upon wave of sobs. See, I never forgave myself for anything until that moment. I was dead inside. Now I was beginning to see something green and alive within me. Then, at another group session with parents present, they passed around the microphone and my father asked me to forgive him and then he told me that he forgave me and that he loved me. 'I love you, too, Dad and Mom,' I said, and I felt beautiful and worth something, really worth something."

It's been two years since Karyn and Sandi went into the Straight drug-re-habilitation program. The Richweins live in Glenwood, Maryland, now. They have left in Ellicott City the memories that are painful to recall even now. Karyn and Sandi graduated from the program after fifteen months. Today, the girls, who still live at home, are pulling top grades at a local community college and are active in church and community affairs. But the turnaround has not been easy, and it has involved every member of the Richwein family.

Officials at Straight made it clear that nothing less than a total family commitment was required for the program to work. Consequently, while the girls were confronting their own problems, Roy, Jean, Dianne and Wendy were individually and then collectively involved in a complementary family program. The rap sessions,

which took place at Straight (the organization now has a branch in nearby Virginia) and at the Richwein home, have continued each week since then.

"The most difficult thing for us to do, especially for me," says Roy, "has been to get in touch with our feelings after repressing them for so long. We were so rigid, which is common among families with drug problems. I always thought that being open, or admitting that I was wrong, was a sign of weakness."

In the long talks he has since had with his daughters, Roy says he was stunned to discover that all through the harrowing experience, Karyn never forgot that the one time she knew that her father loved her was when he cried with her after the overdose at school when she was fourteen. "She carried this memory like some weather-beaten memento. I've since learned that sharing your feelings is the only way to show somebody that you really care. Children shouldn't have to grab desperately at brief glimpses of love from their parents," he says emotionally.

"It takes humility to admit you're powerless to deal with this problem alone," adds Jean. "I always thought I could control the problem. Then when we went to Straight, I balked at the idea that we, the family, were sick." Jean winces. "It's hard to hear that I sometimes did and sometimes may be doing things that are not in the best interests of my family. But I've learned not to be threatened if my family knows that I'm not perfect, just human."

Jean says her desire for everything to be perfect led her to cover up and to deny what was happening for so long. She says that her biggest blunder was to assume the responsibility for Karyn and Sandi's mistakes. "They never had to accept the consequences of their drug-taking," says Jean. "I did. If chores didn't get done and Roy was due home. I'd do them just to keep peace in the family. Of course I resented it, but I'd vent my frustration on Roy, not the girls. The most important lesson we've learned is that your child must accept responsibility for what he or she is doing, not only to herself, but to the whole family, and not only accept responsibility, but do something about it.'

Looking younger than her nineteen years in a pink cashmere sweater and gray pleated skirt, Sandi admits that for a long time, she blamed everybody but herself for her problems. When she realized that she was doing drugs because she chose to do so, not because of her sister, or because her life was so terrible, she was able to grow beyond her bitterness and anger.

Sandi believes that the biggest mistake her parents made during her bout with drugs was to underestimate the girls' resourcefulness in keeping the truth from them. "We could play them against each other," she observes. "When they started acting as a team.

then we knew we couldn't get around that, so we ran away."

For Karyn, now twenty, accepting responsibility for what she did to her family took a long time, and the process still continues. Dressed in jeans and a sweater decorated with hearts, which she would have scorned in her drug phase, she speaks haltingly of the brutal experience that still haunts her.

She says that she regrets having irretrievably lost a whole chunk of her life to drugs. She is sorry she missed out on simple things, like her senior prom and having a girlfriend she could trust. And she has regrets about more serious matters as well, such as turning other people on to drugs.

She acknowledges that staying straight is not easy, because drugs have such a glamorous image in American culture. "It's easy to glamorize my past," she says, "but I've just got to remember the terrible feelings of worthlessness and self-hate, and I know I never want to go back to that."

Wendy and Dianne, now thirteen and fifteen, realize more than most kids their age the damage that drugs can inflict on a family. "I used to feel cheated," remembers Dianne. "I was frightened of my sisters and thought our family would never get together again. Now I think we're closer than other families because we talk a lot about how we feel."

"When kids at school talk about how cool drugs are," says Wendy, "I tell them that I don't think it's so great. It's not easy, and sometimes I chicken out and don't say anything, but I know what can happen."

For the Richweins, awareness is the safety net. "I don't think that short of keeping a twenty-four-hour watch you can prevent your child from doing drugs," says Jean, "but a parent can be better informed, more aware. Today we draw strength and courage from one another to meet the challenge of being honest and open."

The Richweins' commitment to continued growth as a family and the fight against drugs is a contract that is renewed every day. Jean and Roy believe that the worst is behind them, but they take nothing for granted. Each evening, as the family sits down to supper, everybody links hands and gives thanks, forming a family circle that is fragile yet beautiful.

Note: All names other than those of the Richwein family have been changed.

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STRAIGHT A Direction for Youth

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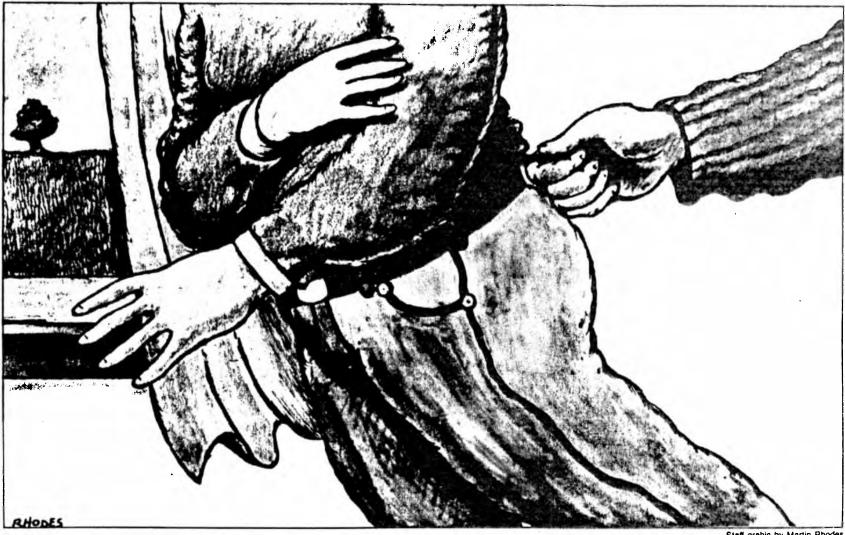
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STRAIGHT

Richmond Times-Dispatch

Sunday, January 13, 1985





Staff grahic by Martin Rhodes

Intensive, last-resort program helps drug abusers go Straight

By Joy Winstead Times-Dispatch staff writer

> hey sat in rows, 200 young people between the ages of 12 and 21, staring straight ahead. Their faces were scrubbed, their pants and shirts clean, their hairstyles neat, their eyes clear. They were singing

They stirred feelings of pride that America's torch would pass to such a generation.

Then the singing stopped and the litany began. The first boy stood up and took the microphone.

"My name is I'm 16 years old. I've been here two weeks. I started using drugs when I was 12. The drugs I've tried are pot, alcohol, speed, LSD, coke, hash, ludes, prescriptions ... "The list reached 18. He talked a moment about his past and his goals and sat down.

The next scrubbed, neat, clear-eyed boy stood up and repeated the litany. The names and ages changed but little else. He had tried marijuana at 11; his list of drugs totaled 14.

The microphone continued down the boys' rows, stopping here, skipping there. The recitation came first from newcomers, then from veterans.

Then the procedure was repeated for the girls' section. Facing the two groups, much like an opposing team, were parents, guardians and siblings of the substance abusers, plus a few visitors.

This was the Friday night open meeting in Springfield of Straight Inc.

Straight is different from other substance abuse programs, according to Richmond families in the program, because it relies heavily on peer pressure to change what has become a way of life for many young people.

If negative peer pressure led them into drugs, then

positive peer pressure can lead them out, they theorize. The "druggies," the term used by substance abusers at Straight, can't say to staff members, "You don't know what it's like." They do. Most junior staff members at Straight came to the center for help, graduated from the program and then were trained by adult professionals on the staff to be counselors. A druggie finds it hard to "con" a former druggie, they say.

Straight is long-term, non-institutional treatment that requires commitment from the whole family. There is no dropping off the youngster for a month and then picking up a drug-free youth. The average client is enrolled for a year.

For Richmonders, this means a twice weekly trip to Springfield for counseling during the first phase of the program. There are groups for parents and for siblings.

A major link in the rehabilitation chain is the host family, particularly for out-of-town participants such as those from Richmond. When a drug abuser signs into Straight, he or she is placed in the "host" home of another Straight youth, called an "oldcomer," who has progressed far enough in the program to help a newcomer.

A newcomer must earn every privilege. As a symbolic gesture, the oldcomer holds the newcomer's belt as he moves about the building or grounds. Until the new client begins to respond and participate, he is not allowed to speak or move without supervision.

The Straight program is divided into five phases:

Phase one — The participant works on himself — developing honesty about his past, his thoughts, his feelings and how he sees the world. The host parent drives the newcomer to the center by 9 a.m. and picks him up at 9 p.m. Monday through Saturday. On Sundays he stays seven hours at the center. Minimum time in phase one is 14 days, but some youths stay in the first phase as long as one year.

Phase two — A youth from the Washington area returns home but Richmonders stay with a host family for the duration of their rehabilitation. His hours at the center are the same but he begins to build family relationships. Minimum time: seven days.

Phase three — He adds working on achievement through school or a job to understanding himself and improving family relationships. Richmonders enroll in the Washington area school where their host family lives. Youths from the Washington area return to their regular schools where they face peer pressure from old friends to "do drugs" again. All go to the Straight center in the afternoon and evening and all day on Saturday and Sunday. Minimum time: seven days.

Phase four — Withdrawal from active involvement in the Straight program begins. The youth comes to the center after school three times a week and one of two weekend days. He works on constructive use of leisure time and friendships. With written permission, he may go to recreational activities with the family or friends in the program. Minimum time: 90 days.

Phase five — Youths go to the center three days and work on personal freedom and helping others. They also assist the staff in working with the group. Minimum time: 60 days.

Each participant decides when he is ready to make a phase change and then his group votes on whether he may move up. Throughout the five phases, Straight participants are involved in "rap therapy" led by two staff members. Topics may involve the group working together on one theme or working individually on different therapeutic tasks.

For example, a past-present-future rap goes from childhood to present to goals. A confrontation rap works on honesty and complying with rules, giving strong confron-Continued on page 5, col. 1

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Richmond Times-Dispatch, Sun., Jan. 13, 1985

Families part of Straight treatment

By Joy Winstead Times-Dispatch staff writer

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On an unseasonably warm winter day, smiling children were riding bikes along the county roads in the suburbs of Richmond. Parents were raking leaves or watching football games. It was a bit of Norman Rockwell Americana, 1980s' version.

But behind the front doors of two of those neat homes, carefully set midst trees and shrubs, were families in pain - pain caused by the agony of children on drugs. pain so great that they turned to the somewhat unconventional treatment of the Straight Inc. program in northern Virginia.

In the early stages of treatment, Straight can require parents to travel twice a week to Springfield, the nearest Straight center. It means involving the whole family - the "druggie," both parents and siblings - in a program that often pushes financial and physical resources to the limit for a year, sometimes more.

For two Richmond families, Straight also means a lifeline from the maelstrom of drug abuse to wholesome family living.

Family A ended at Straight via a circuitous route after years of school counselors, psychologists, psychiatrists, psychiatric hospitals, drug rehabilitation programs, halfway houses and juvenile detention centers. Family B went to Straight much earlier in the scenario.

To protect the younger children in the family from the taunts of others, the two families agreed to tell their stories in print if their names were not used. (The letters assigned to distinguish one family from the other have no significance.)



FAMILY The cast of Family A: father, five years of college, a transportation manager; mother, one year of college, a part-time secretary; three daughters, 17, 14, 13.

The story of their involvement with the oldest daughter's abuse of drugs, including alcohol, was pref-

aced by a backward look at her childhood.

At 9, the family was living in the Deep South. Their daughter was picked for a program for exceptional children, a choice they believed due to her high I.Q. and good, but not exceptional, grades. In retrospect, Mrs. A doubts that the assignment was based simply on intellectual potential.

"She brought home stories of strange behavior of the other kids," the mother said, "and I began to wonder if she was lumped in with kids who were behavior problems."

The family moved to Europe. By sixth grade, the oldest daughter was burying herself in library books, reading three or four per night.

Already problems were developing. She was attracted, according to her father, to older, "wild kids." Because she was big for her age and highly intelligent, she could bridge the gap sufficiently to be accepted by the older group.

Still, her parents believed she was simply a headstrong child who needed a highly structured life and a lot of challenge. She would not, her mother said, "stick to something" so her parents insisted that any new activity had to be pursued for at least one year. She had one year each of piano, violin, gymnastics and dance.

When the family moved to their present home five years ago, they had no inkling that their oldest daughter had started experimenting with marijuana and alcohol at the age of 12, while they were still living in Europe.

At 14, her parents found her behavior fluctuating wildly. She would swing from sensitive, caring daughter to cursing and throwing things at her younger sisters.

Late one August night, when they thought their daughter was watching TV in the basement, they received a call from an acquaintance at a nearby convenience store telling them that the daughter had just left with a boy. They went to the basement and found it Continued on page 4, col. 1



FAMILY The cast of Family B: father, master's degree, works in sales; mother, two years of college, a housewife, a recovering alcoholic; two sons, 17 and

> As a child, the 17-year-old had two problems, according to his parents. He was overweight and he tried too

hard to win his playmates' approval, usually by giving them treats.

The family moved frequently because of the father's work. By the time the older son reached his teens, he had developed what his parents now call undesirable friends and a "druggie type" appearance.

"He had long hair, he was sloppily dressed and he wore rock concert T-shirts," the mother said. "He was always carrying a radio around and listening to it. He wouldn't look you in the eye and talk to you."

At this stage, the parents presumed that he had tried marijuana and beer but were not aware of his deeper involvement with the drug scene.

Academically? "Just awful," the father replied. The son had to repeat the ninth grade and his parents felt they were working harder than the son. They made him take an assignment sheet every day to every teacher and saw to it that every assignment was done. If the son failed to carry out the instructions, he was grounded.

"We felt like we were in prison," the mother said. The first hint of violence came when he was 15. As punishment, the parents denied the son permission to attend a rock concert and he went on a slamming, kicking, screaming spree throughout the house that shocked them.

When the son was laid off from his first summer job, he was vague about the reasons. The parents did not press for an explanation. The focus of the son's life that summer was going to meet his friends down by the

The parents were convinced the son was using drugs but they had no proof.

The son's appetite declined. One morning after school had opened in the fall, he refused to eat breakfast.

"He got mad and I got madder," the mother recalled. "Suddenly, I thought, he's not eating because it's easier to get high on an empty stomach."

Continued on page 4, col. 1

Family A

Continued from page 3

empty. Her father located her partying at the home of a girl friend whose parents were away.

"They were using drugs then but we didn't know it," the father said.

By October the mother was convinced that her daughter was using marijuana and hanging out with teen-agers on drugs because of the way she dressed. Her grades slid to D's and F's with an occasional B.

Several incidents in December led the mother to search her daughter's room for a diary. She found it under the mattress; it went back 1½ years.

"The handwriting was almost unreadable," the mother said. "Some of it was bleak, despairing, Satanistic, pornographic, druggie slang. There were references to black tabs, LSD—in the margin it showed how many."

The latest entry showed five LSD hits in one school day.

"I was shocked, horrified," the mother said. "I screamed and screamed. It was real, horrifying. I called my husband's office and told him he had to come home right away. I never had the stomach to read all of it. He called the county juvenile office and told them we needed an assessment of our kid done immediately."

The rounds of seeking professional help began.

"Counseling isn't always the answer," the father said. "They would sit, listen and write reports. Just a sounding board. It doesn't make changes. They don't give you the information you need to make changes."

After Christmas, their daughter ran away. She was gone three days. They placed her in a psychiatric hospital where the professionals prescribed long-term behavior modification. After five months of hospitalization, she was placed in a home similar to a halfway house.

She began hitching rides home.

"She would beg us to take her back [home] and it was hard not to," the mother said, but the parents relied on professional advice.

Life got worse.

Attempted suicide. More running away. A stolen car. Back to the psychiatric hospital. Court appearances. Detention centers.

By November of 1982, almost a year after reading the diary, the parents decided to give their daughter another chance at living at home. There would be a six-month trial period.

The first week she started skipping classes. Her parents did not know because she went to school in the morning and came home in the afternoon on a regular schedule. She began to associate with women who had reputations as lesbians

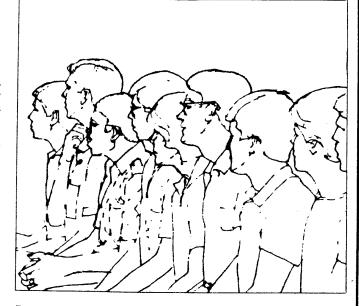
The secret was soon out because the parents tapped the daughter's telephone. A visit to school revealed the absenteeism and forged excuses.

The parents tried sending her to live with her grandmother in another state. She came back in six weeks to resume her old way of life, hanging out with her lesbian friends.

Through a mother in a "Tough Love" group for parents in the Richmond area, they heard about Straight. They felt they had tried everything else. They were desperate.

They phoned the daughter, now living with a couple in the Fan, and asked if she would like to look at a school in Northern Virginia. Just before she was guided toward Straight's Intake Room, she realized she was at another drug rehabilitation institution.

"It took three hours for kids just like herself to convince her to sign herself in," the mother said. When the parents were admitted to the Intake Room, they could see that the daughter had been crying. They hugged her, told her they loved her



Boys sit together, opposite parents in open meeting

and would see her in a few days. It was November.

It took one month for the daughter to earn the "privilege" of talking to her parents for five minutes in order to "make amends." By March she had reached phase two of the program and her parents could visit her at the host family's home or at a motel.

Not all of the daughter's days at Straight have been forward moves. When she reached phase three and was back in school, she ran away. But she returned to Straight and started over again in phase one.

Easily overlooked in the tug of war between parents and a daughter or son on drugs are the effects of the turmoil on other children in the family.

In the early stages, the daughter's two younger sisters refused to believe that the oldest sister was a substance abuser.

"I thought they made it up," said one younger sister. "We three were like a team ... I thought Morn and Dad should just leave her alone. I never thought she was an addict or anything."

As weeks stretched into agonizing months, the two younger girls no longer could deny the facts. During her second hospitalization, the oldest sister told them, "Don't screw up your life like I have. Drugs will only hurt you."

The younger girls readily admit that they resent the required trips to Straight because "we miss out on a lot of things here." After the open meeting, there are group sessions for siblings ranging from young children to those in their 20s. There they found that "other people went through what we did — we thought we were outsiders."

The father nodded his head.

"If people are willing to give up on kids, they can," he said, "but Straight has given us a ray of hope."

At this time, the oldest daughter is living with a host family and attending high school in the Washington area. Her grade point average is 3.5. She has been selected by Straight's adult professionals as a junior staff traince.

Family B

Continued from page 3

The son had to be at the bus stop at 6:50 a.m. At 7 a.m. the mother called the vice principal and told him that she wanted her son watched to see if he left school or was using drugs on school property. That morning a group of students were caught smoking pot at the edge of the woods near school.

Their son was not actually caught with pot in his hand and he told his parents he had been smoking cigarettes. The parents described his eyes as red-rimmed, his behavior "crazy." School officials said he could finish the day but then would be suspended for one week.

"He came home about 2 or 2:15 and obviously he was high," the mother said. "I had never seen him like this before. I was trying to caim down . . ., trying to control my voice. I confronted him. 'Just look at you!' He said he just need a little Visine. Murine. Visine. That's a good clue. They like to blame it [red eyes] on the pool."

The son had been seeing a psychologist for three months at this point. In a couple of family sessions, he had told his parents he occasionally used marijuana.

Parents seek support

After the suspension from school, he was required to undergo a drug treatment program. His parents turned to a local Tough Love group for support.

"Everything was on a contractual basis," the father said. "We spelled out everything and the consequences for it. We were foreseeing the worst possible scenario."

The Tough Love contract had shock value, the father said, and it "let him know we were serious." He was forbidden contact with those his parents considered to be "druggie friends."

They heard about Straight through parents in the Tough Love group and drove to Springfield to attend an open meeting last January.

"The minute we saw it, we knew that was what he needed," the father said. "His attitude had been a long time in coming. No four-week program was going to change that."

The son was "looking forward" to

The son was "looking forward" to attending a one-month local drug rehabilitation program, they said, and was dismayed to hear he was going to Northern Virginia instead. They left him in the Intake Room with his duffle bag and waited until other youths

convinced him to sign himself in.

It took one month at Straight for the son to earn permission from staff and his group to talk to his parents.

"These kids are not in a psychiatric hospital," the father said. "They are in a day-to-day program run by kids, designed and run by families, run by people in it. They are living with families there. We stay with host families where our kids are."

After the son enrolled in Straight, they found out the extent of his drug use. He had tried pot, alcohol, cocaine, amphetamines, over the counter and prescription drugs (anything he could find in a medicine cabinet). He even had tried to get high on inhalants for bronchitis.

When they thought their son was asleep in his room, he had been sneaking out, driving under the influence of drugs and without a driver's license. They were shocked to hear of the sexual activities of teens on drugs.

Son apologizes

The son has apologized to his little brother for his behavior when he was entrusted with baby-sitting. He had sent the child to bed immediately on his parents' departure and threatened him with violence if he told their parents anything. The younger son became terrified of his brother.

The older son was in phase one for six months (minimum is two weeks) before his group decided he was ready for phase two. The parents feel that the Straight regulation of having an "oldcomer" hold onto a newcomer's belt loops during that first phase, has a humbling effect as well as preventing runaway attempts.

"It was a good four months before we saw a change," the father said. "We could see emotion in talking with us. He no longer was interested in being a tough guy, a cool guy. He was not so interested in covering things up. Once that shell is broken ..."

When the son lived at home, he was always eager to go to school, the parents said, because drug dealers came to the bus stops and "kids on the buses were loaded with drugs to sell." Teenagers would take prescription and other medicines at random from home medicine cabinets and sell

them mixed without regard to what they were, the parents reported.

Straight principles

Two Straight principles stand out for Family B:

• Positive peer pressure on the "druggie" to reform.

 Involvement of the whole family, including siblings, in long-term therapy, usually a year or more.

"What's the point if you send a sick kid back to a sick home?" asked the mother. "It's a family disease. Irrational behavior has to become rational. When he comes home, I hope for honest, open communication instead of just stuffing our feelings — to learn to talk and act from the gut instead of intellectualizing everything."

In one year at Straight, the son climbed to the upper levels of phase four, slid back to three and is now starting over again in phase one — by vote of professional staff and his peer group.

Drug abusers learning to go Straight

Continued from page 2

tive feedback to individuals. A fun rap may cover off-beat topics such as ghosts or UFOs.

Morning rap for those in first and second phase covers the basic foundation tools of the program. After lunch, separate boys' and girls' sessions tackle topics more related to malefemale issues.

More oldcomers are involved in afternoon rap when higher phase members arrive from school or work. Specific issues are tackled such as responsibility, weaknesses and strengths. Confrontation increases.

Night rap features positive themes to end the day on an up note.

Open meetings for Straight clients and their families are held on Monday and Friday evenings. The number of meetings attended by the family depends upon the progress of the boy or girl enrolled in the program.

No dating or emotional involvement with members of the opposite sex is allowed during the Straight program.

Graduation from Straight is followed by a six-month Aftercare program that also involves the family.

In Aftercare, the Straight graduate attends a series of classes dealing with the problems now being faced—relationships, dating, goal setting, relapse symptoms. Graduates go to two classes per week for the first three months, one class a week for the last three months. Parents are required to attend one class per month with their graduate.

Straight was founded in 1976 by a group of parents and businessmen in St. Petersburg, Fla. There are treatment centers there and in Atlanta and Cincinnati in addition to the Virginia

facility, which opened Oct. 28, 1982.

Nationally, Straight has collected a lot of praise for its work, including visits and accolades from Nancy Reagan, but it also has drawn harsh criticism.

In 1982, Fred Collins, now a 22year-old industrial engineering student at Virginia Polytechnic Institute and State University, charged in a lawsuit that Straight Inc. held him against his will for more than four months in 1982. He said he did not have a drug problem. He won \$220,000 in damages.

According to news reports, a panel of the 4th U.S. Circuit Court of Appeals recently upheld the award but Straight wants the full court to hear the case and it may appeal to the U.S. Supreme Court.

The case attracted national television coverage and Collins was on "60 Minutes" and "20-20." He was transferred from St. Petersburg, Fla., to Virginia when the Springfield facility opened and escaped during a visit to his parents' home in Fairfax County.

He also claims that Straight subjects its clients to mental and physical abuse. Straight supporters deny the charges.

Collins' legal battle alienated him from his parents and his brother, a high school student who graduated from Straight. At present, they are trying to rebuild a family relationship.

"In phase one the kids don't go home at night — they go to a host family — because they have abused the privilege of living with their parents," Murden said. "It's up to them to make a commitment to get straight."

'Druggie' tale told easily: Lesson is hard

By Joy Winstead Times-Dispatch staff writer



y parents brought me up to Straight. I don't know why I trusted them. Yeah, I do. I knew that I had to have something better. I knew I was going to die

soon. I really did. Because I had nothing. . . I didn't want to face up to myself. . .to the terrible mess I had made of my life."

The 17-year-old girl, the oldest of Family A's three daughters, was home from Straight for a weekend. The recitation of her life story came easily. She had repeated it so many times to so many others - addicts and therapists, street people and judges, strangers and family members.

It was a story that started with marijuana and alcohol, continued into "hard" drugs, suicide attempts, running away, sexual promiscuity and crime. Before her parents hauled her off to Straight, she was convinced that she was

In telling her story, she wants to communicate two messages.

To boys and girls contemplating drugs and alcohol: "It may look like fun at first, but it will kill you in the long

To parents of kids on drugs: "Never give up on your kids. They are like little kids crying out for attention and love. If you suspect your kids are on drugs, follow them, tap their phone, search their room, take them to a drug rehabilitation center for assessment. Don't ask them if they take drugs. We lie."

No child of the ghetto, she had grown up in a middleclass family, a bright, attractive little girl. The family moved a lot because of the father's work. When she was 12, the family returned to the United States from Europe, this time to Richmond. She didn't want to leave and her parents allowed her to stay with another family until the school year ended. It marked the beginning of a five-year slide.

The 16-year-old brother of her girl friend introduced her to pot.

He was upstairs in their house in his room, playing old rock music and ... telling stories about Woodstock and concerts and things," she recalled. "He asked me if I'd like to smoke pot with him and ... I went ahead and I did it.'

A couple of weeks later, just before joining her family in the United States, she went to a farewell picnic and tried alcohol. Before the picnic ended, she was very drunk.

I did it basically because I didn't want to leave my friends," she said. "I was very angry with my family and I did not want to move back over here . . . At the same time I felt my family had deserted me when they left me overseas."

That summer, shortly after her arrival in Richmond. she got drunk on wine with two older teen-agers. She also began sneaking out at night "because I wanted to do something that my parents didn't know I was doing."

She started eighth grade and drinking bouts were a daily occurrence. She took alcohol from a supply her parents had brought back from Europe. They kept liquor for guests, she said, and didn't notice the diminishing supply.

She had sexual relations for the first time with a 17year-old boy, the brother of a girl friend, because "I was flattered that an older guy was paying me attention." The possibility of pregnancy "didn't enter my mind."

The summer before ninth grade, when she was 13, she began meeting older teen-agers at a place called "the lake." There she tried LSD for the first time. It became a weekend ritual.

To get money for LSD, she became a drug dealer, selling amphetamines. She also took "speed." four to six pills a day. She lost weight rapidly; with two "druggie friends." The days

slept little.

Her parents were ignorant of her substance abuse, she said, but they did not approve of her friends. By tenth grade, she was going out with young men in their 20s.

"I didn't think there was anything wrong with it," she said. "I thought it was cool. I was popular. A lot of guys liked me. By this time, I had gone to bed with a lot of guys.'

At 14, she began to worry about getting pregnant and started taking birth control pills. During first semester of 10th grade she skipped about half of her classes and school officials accepted her forged notes.

"Every morning my druggie friends would pick me up," she said. They'd bring the pot and I'd bring the wine and . . . we'd sit in the school parking lot before school and I'd go into school that way." She usually left school after home room and perhaps her first period class.

The confrontation with her parents came in December of 1981. She went to a rock concert in Hampton while her parents were out of state attending a relative's funeral. She took LSD and brought her friends home for a party.

When her parents returned, the deception was obvious and a family scene erupted. She ran away and ended up in a local hospital's drug rehabilitation unit for five months. She graduated from the chemical dependency program convinced that she did not want to "do drugs" again.

"I had tried to kill myself three times already in my past," she added, almost as an afterthought. Why? Depression, she replied.

Her therapist at the hospital had recommended a group home for longterm treatment. It was a decision marked by numerous runaway attempts.

She took her father's company car and drove it to another state to live

passed with drugs, alcohol, sex.

"There I was, 15, a wanted felon." She sold the \$12,000 car for \$100 and a beat-up old truck.

Some sights were shocking, even for her. She saw old men, desperate for alcohol, drinking Lysol and shaking with DTs.

When police found her, she was furious, screaming and fighting.

"I was in jail two weeks in solitary confinement because there was no provision for juveniles," she said. "I really thought I was losing my mind . I was cold, I was just dirty, I was just like a rat or something. I just pictured myself as a rat, just really awful. It scares me now when I even think about it, that I was that type of

Extradited to Virginia, she was sent to a detention center. She slit her wrists and went back to the hospital where she had graduated from the chemical dependency program.

person."

"I liked it there," she said. "I was safe from myself. I wasn't out in the real world. I could escape from reality anytime I wanted to.

After four months in the hospital, in November of '82, she went home on probation for six months.

She refrained from using drugs, went back to school and attended Alcoholics Anonymous regularly.

"In March I met - I feel very embarrassed saying this - this was really when I went the farthest down . . I met this lady one time, she was 21 when I met her, she was a lesbian, homosexual, and I fell right into it.'

When the teen-ager's mother found out, she reported a violation of the daughter's parole (skipping school) so the daughter would be sent to the detention center.

"She was trying to find any way to get me away from this lady," the teen-ager said. "My mom could see me going farther down."

When she got out of detention in

July, she went to another group home and resumed her relationship with the lesbian. They began drinking together.

"I got hooked into the excitement of it all," she said. "I was so rebellious toward society... I had found a new way that I could infuriate my parents, humiliate them." She adopted an the most extreme punk hairstyle, fashions and music.

One night, in tears, she called her dad and told him she had to get away. A grandparent, who lived in another state, offered to take her.

For six weeks, she abstained from drugs and alcohol and was making A's and B's in school. Then she started calling the lesbian who responded by calling her at her grandparent's home. They began writing every day.

"I would be like obsessed," she said.
"She became a drug for me. My dependency instead of chemicals was this person.

This one Christian guy was reaching out to me. He told me to turn my life over to God. . I wanted to believe that like I really wanted some faith in my life. . So I turned my life over to God one night and I accepted Christ

as my Savior. I remember I was so happy and was so proud of myself. I thought I can just leave her [the leshian] behind me, I can just leave Richmond behind me, everything behind me. I'm away from it. I thought geographical escape would help me . . .

She took the bus to Richmond and went to live with a young couple in a small apartment in the Fan, caring for their baby, so both could work. He was an active alcoholic and "shot up sometimes," she said.

At 16, she was alienated from her family, a school dropout, back on alcohol and drugs, and dependent on the lesbian for money.

Unexpectedly, her parents called. Would she like to try a private school near Washington? She thought they were putting her in another psychiatric hospital. She agreed.

Exhausted, she slept all the way to Springfield.

"I went into what they call the Intake Room and three girls came in ... They were [about my age]," she said. "We all started talking about when we did drugs ... They were saying that they felt ashamed, that

they felt guilty. And I had just been out of rehabs [rehabilitation centers] and learned all you needed to learn about the intellectual part of the drug problem and chemical dependency, but I didn't know anything about feelings. I didn't know a damn thing about feelings."

They took down her list of drugs and problems with family, school, the law and friends. An intake coordinator and an executive staff member assessed her case and she signed herself into Straight.

In phase one she was in therapy 11 hours a day. An "oldcomer" — another girl about the same age who held onto her belt loops whenever she tried to move — and a host family were assigned to her. She did not smoke, wear makeup or jewelry, date, watch TV, listen to the radio or read.

On her first day of summer school in the Washington area, she ran away. She believes that hospitalization for appendicitis triggered her old desire for drugs. She hitchhiked to Richmond and returned to the lesbian who responding by buying her clothes, food and cigarettes.

It was back to drugs and alcoh but not the gay life. Lesbianism : longer appealed to her. In an une pected turn of events, the lesbia called her parents and offered to he get her back into Straight.

Her father and another adulated her bodily back to Straig! She describes herself as drun screaming and cursing when si reached Re-Intake.

"An executive staff member can in and I broke down crying," she sai "I didn't fit into the past. I had choose — change or die. It still scar me sometimes. I know I'm wor more."

Phase one took 44 days. When si returned to a Washington area schoo she made top grades. She signed i for staff training. By Thanksgivii she had reached fourth phase.



Telling their stories is part of Straight's program



STRAIGHT FACTS

Facts on Straight prepared by Straight Inc. of Greater Washington:

- Expenses are covered by client fees (65 percent) and private donations (35 percent). Some scholarship funds are available.
- Maximum fee is \$6,000. After phase one, a room and board for an out-of-town client is negotiated with the host family, usually \$100 to \$150 per month. Coverage by insurance companies varies.
- Youngsters needing detoxification are sent to a hospital first. About 2 percent fall into this category.
- Most clients are between the ages of 12 and 21; the average age is 17. Most started using drugs at 12.
- Sixty percent of program participants are boys.
- The average treatment cycle is one year. About 70 percent complete the program.
- Mall youths must voluntarily admit themselves and must be accompanied by an adult. If a youth under 18 wants to sign himself out, parents may choose to give temporary custody to Straight.
- The average client comes from a middle-class suburban home (60 percent of the families have incomes over \$40,000) and has an above-average I.Q.
- The average youth used drugs two years before parents became aware of it. During this time, 96 percent committed minor crimes; 68 percent, major crimes. Most were undetected.
- One in three participated, unsuccessfully, in other drug treatment programs; three of four participated in family counseling and/or psychiatric treatment.
- The average client used drugs four to seven years prior to entering treatment.
- The average graduate has been drug free for two years.
- The geographical distribution of the youths' home addresses is Virginia, 55 percent; Maryland and District of Columbia, 35 percent; non-local, 10 percent.
- Mel J. Riddile, Ed.D., is program director. Straight's professional staff includes associate and assistant directors, a medical director, three counselors, a staff pediatrician and a family therapist. Other physicians are "on call."

Straight Inc. of Greater Washington is located at 5515 Backlick Road, Springfield, Va. 22150. Phone (703) 642-1980.

WORLD NEWS

British Antidrug Drive Highlights

'Sliding Slope' of Heroin Use

PRESERVATION COBY

Publicity Seeks to Tailor Message for Teen-Agers in Their Lingo

Last of two articles

By Karen DeYoung Washington Post Foreign Service

LONDON—On screen, a healthy-looking boy of 17 stands cockily, one hand on his hip. "Heroin," he says. "I dunno why there's all this fuss about it. It might be a problem for some people, but I could handle it."

The scene dissolves into others, with the boy looking progressively scruffier and sicker. As his speech deteriorates, he claims, "There's no way I'm going to become an addict."

Finally, he is sitting on the floor of an empty room, his body hunched and sweating. "Look, I've got this thing under control. I've just got a touch of the flu today. That's all." His voice is barely audible. "I could give it up tomorrow. Couldn't I?"

This is one of two television commercials—the other featuring a girl whose face breaks out and hair frazzles from heroin use—now being shown on programs with teen-age viewers all over Britain. Along with a series of advertisements in teen magazines like Blitz and Faces, it is part of a controversial, multimillion-dollar publicity campaign warning young Britons against heroin.

The British government has allocated nearly \$20 million to combat what law-enforcement agencies call a fast-spreading drug epidemic that nearly has tripled the number of heroin users in the country since 1979.

Once limited to a small core of several hundred addicts centered in London, heroin use now has become so common in schoolyards and neighborhoods throughout the country that Prime Minister Margaret Thatcher has warned that it threatens to "undermine a whole generation."

Because the problem is perceived to be greatest among the young, the publicity campaign has been tailored for teen-agers. But the overall antidrug offensive is comprehensive, targeted at the sources of the drug and its domestic traffickers as well as its users.

British officials, who see the United States as the pacesetter both in illegal drug use and the fight



PRINCESS DIANA
...urges teens to swear off drugs

against it, have consulted closely with their U.S. counterparts in planning strategy, and many elements of the program are patterned after continuing U.S. campaigns.

In a series of exchange visits across the Atlantic, "we've seen firsthand what the possibility was," said one government official here. "We were interested in how much [the Americans] could tell us about how to deal with a problem descending suddenly. They concentrated more on enforcement, and there is also a lot of interest here in task forces and confiscation of drug traffickers' assets.

"The United States is several years ahead of us," he said. "As often happens, in many respects, your problem always seems that much worse."

Among the measures adopted here, the government has begun stationing customs officers in countries like Pakistan that are primary sources of heroin, and contributing money for substitution of other crops for poppies abroad. The maximum penalty here for trafficking in narcotics has been increased from 14 years to life imprisonment. This fall, new laws, copied from U.S. leg-

islation, will be introduced to loosen banking and privacy regulations to allow investigation and seizure of drug-earned assets.

antidring cansacies, whose efforts a strate chose of Nancy Reagan's campaign. After Dians, the princess of Wales, appeared on a British Broadcasting Corp. television special last month, unincomplete calls by anxious parents to a special drug of time jammed national circuits.

Elements of the program have met with some disapproval, particularly among social service and law enforcement agencies, whose experience with drug smuggling and addiction predates the current wave of national concern. Customs officials have argued publicly that Thatcher's much-heralded appointment of special drug investigators has been at the expense of substantial cuts in the number of uniformed inspectors who apprehend most of the illegal drugs seized at ports and airports.

Drug treatment clinics say that the publicity and education programs have raised public fears as well as willingness among some addicts to seek help, but that Thatcher's overall clampdowns on public spending have meant that there is little-help to offer. So far, the government has offered about \$16 million for pump-priming of local treatment units over a three-year period. After that, communities are supposed to find money out of their own resources.

"I have to be fair to this government, and say that is the first that has handed out so much money," said Jeff Boyd, a social worker at Hackney Hospital Drug Dependency Unit in London. "But on the other hand, it's not much money, and we have a drug problem of immense size."

The Hackney unit is designed to serve five of London's poorest boroughs with a combined population of 1 million. Located in three basement rooms next to the hospital laundry, it currently is staffed by one psychiatrist, one social worker

See DRUGS, A22, Col 1

PRESERVATION COPY

PRESERVANDA CORP



PRESERVATION COP

It can also have some pretty nasty effects on your body. All of which you can start suffering long before you become addicted.

You'll probably start looking ill, losing weight and feeling like death. You'll begin to take heroin not to get high any more, but just to feel normal. And, as you lose control of your body's health, you could lose control of your mind too.

Until one day you'll wake up knowing that, instead of you controlling heroin, it now controls you.

So, if a friend offers you heroin, use your brain while you still can. And say no.

HEROIN SCREWS YOU UP

A London ad agency produced poster above for publicity campaign featuring the negative effects of heroin on the youn

FASSALATION OF

http://survivingstraightinc.com

re: PBS

62

YNN WYATT may hall from Texas, but she is just as much at home in the South of France or



WYATT

places where ' she and her husband Oscar have been spending much of their time lately. Lynn cle-

two

London.

brated her birthday in the Wyatts' St. Jean 🔩 Cap Ferrat villa, La Mau-

resque, which once belonged to Somerset Maugham.

The theme of the evening was

Indian - you can go to a party just about anywhere these days and be surrounded by curry and chutney.

Her dress for the evening was French, however: a Chanel that Karl Lagerfeld had made especially for her. The white top with gold silk and tight white pants with a gold belt were topped off by a white turban with pearls.

NEW YORK POST, MONDAY, JULY 22, 1985

The dinner dance was held out- Barbara Hutton and redecorated side, with tables covered in Indian fabric, on top of which were served curried lamb and chicken and 15 different kinds of condiments. Three orchestras played: one Brazilian, one with violins and the third all-American.

A new group of guests arrived at 2:30 a.m., and stayed until 4:30 a.m. Among the dawn revelers. were the Wyatts' houseguests, Kathy and Henry Ford; Stavros Niarches with his sons Spyre and Phillip; Barbra Walters and Marv Adelson; Prince Albert; Helmut Newton; Jesse and Rand Araskogs, and Estee Lauder.

Then the Wyatts made a quick trip to London for the party that Charles Price, our ambassador to the Court of St. James,' and his the Prince and Princess of Wales.

Dinner for the 70 guests was served at the very elegant Winfield House, which was donated by by Walter Annenberg.

The Annenberg family was represented by Walter and Lee Annenberg and Janet Hooker; other guests included Steve Forbes; Margaret Thatcher's daughter

and

Carol. Roger Luisa Moore. Silver pineapples, which are said to be lucky, held baby orchids. while guests enjoyed chicken curry without condi-

ments. PRINCESS Princess Ď١ dressed

cream-colored lace, told guests pretty wife Carol gave in honor of that she was looking forward to her upcoming American visit, and said that she was especially interested in visiting drug rehabilitation centers with Nancy Reagan.

FIRST DRAFT

SEQUENCE OF EVENTS:

PRIVATE DINNER

Their Royal Highnesses the Prince and

Princess of Wales

Saturday, November 9, 1985

TIME:

7:15 p.m. - 11:30 p.m.

LOCATIONS:

State Floor/Private Residence

DRESS:

Black Tie

FROM:

Linda Faulkner

7:15 p.m. Dinner guests begin to arrive the East Gate.

Coats are checked in the Family Theater.

7:20 p.m. THE VICE PRESIDENT and MRS. BUSH arrive North Portico and are escorted to the Red Room.

7:29 p.m.

THE PRESIDENT and MRS. REAGAN depart the living quarters (on cue from Mr. Rosebush) via elevator and proceed to the Diplomatic Reception Room, North Portico.

7:30 p.m.

Prince Charles and Princess Diana arrive the North Portico via the Northwest Gate and are greeted by THE PRESIDENT and MRS. REAGAN. THE PRINCIPALS then proceed to the Yellow Oval Room via the Grand Staircase.

Those members of Prince Charles and Princess Diana's accompanying party who are invited dinner guests are escorted to the Red Room to join the VICE PRESIDENT and MRS. BUSH.

7:33 p.m. Dinner guests are escorted by Social Aides to the State Floor.
(U.S.M.C. Orchestra)

7:45 p.m.

THE PRINCIPALS depart Yellow Oval Room and proceed outside the Treaty Room where the receiving line is formed in the following order (viewers left to right):

THE PRESIDENT Prince Charles MRS. REAGAN Princess Diana THE VICE PRESIDENT and MRS. BUSH and the foreign party in the Red Room are escorted to the bottom of the Grand Staircase and lead guests up the Grand Staircase, through the receiving line, and into the Yellow Oval Room and Center Hall where drinks and hers d'oeuvres will be served.

8:05 p.m.

Guests begin to proceed down the Grand Staircase and into the State Dining Room for dinner.

Once guests are seated, THE PRINCIPALS proceed down the Grand Staircase and into the State Dining Room.

8:20 p.m.

Dinner is served.

9:20 p.m.

Dessert is served, accompanied by the Strolling Strings.

9:40 p.m.

Following dessert:

Toast by PRESIDENT REAGAN

Toast by Prince Charles

10:00 p.m.

Following the toasts, THE PRESIDENT and MRS. REAGAN escort Prince Charles and Princess Diana from the State Dining Room to the Blue Room.

Coffee and liqueurs are served in the Color Rooms.

10:10 p.m. Cross Hall doors to the East Room are opened for guests to begin taking their seats.

10:20 p.m.

THE PRINCIPALS enter the East Room via the Cross Hall doors and proceed to designated seating.

10:22 p.m. Announcement of Miss Leontyne Price.

10:55 p.m. Performance concludes.

THE PRESIDENT and MRS. REAGAN proceed to the stage to thank Miss Price.

THE PRESIDENT and MRS. REAGAN then escort Prince Charles and Princess Diana to the Grand Foyer where they will begin the dancing.

After dancing, THE PRESIDENT and MRS. REAGAN escort Prince Charles and Princess Diana out the North Portico for departure. (The party accompanying the Prince and Princess will follow.)

THE PRESIDENT and MRS. REAGAN will they proceed to the Private Residence via elevator.

11:30 p.m. Remaining guests depart the State Floor via the Grand Staircase, the Lower Cross Hall, and the East Colonnade enroute the East Gate.

SUGGESTED SCHEDULE FOR NOVEMBER 11 VISIT

- 3:00 p.m. Guests Arrive-Escort to Conference Room A Introduction-(Program Orientation)
- 3:05 p.m. Escort down hall to front of Open Meeting Room First two rows will be reserved for guests

Open Meeting will consist of:

1 Fifth Phase Girl Introduction

Special Song Welcoming remarks and opening of meeting by Page Peary Meeting will be turned over to Group Staff 1 Newcomer Boy Introduction 1 Fifth Phase Boy Introduction 1 Newcomer Girl Introduction

20 Questions

1st Two Rows of parents will speak to their kids. It will be arranged that at least one set of "coming home" parents will be seated here so that guests will have the opportunity of seeing this.

Guests will be excused

Approximate time for this portion of Open Meeting- 40 minutes 3 30 3245 p.m.

Guests will be escorted to Sibling Room

Several upper phase young people will be assembled. This is the time when the guests will have some interaction with the young people.

(Depending on the number of press people invited, we will be able to escort them to this room).

4:00 p.m. Guests escorted out of building.

On that day all parents will park in the back parking lot so that the front parking spaces will be available for the guests.

PRESS ADVISORY

VISIT OF HER ROYAL HIGHNESS THE PRINCESS OF WALES

TO STRAIGHT DRUG REHABILITATION CENTER, MONDAY 11 NOVEMBER at 2.05PM

Location

Straight Drug Rehabilitation Center is at 5515, Backlick Road, Springfield, Virginia.

Schedule

1405

The Princess of Wales will meet Mrs Reagan at the White House and they will travel to Straight together. On arrival the Princess of Wales and Mrs Reagan will be met by the Clinical Director, Mr Page Peary, Regional and National Directors, Dr Mel Riddile and Mr Bill Oliver and escorted inside the building. They will be introduced to several people closely involved in the Straight operation. This will be followed by a briefing session with two children close to completing their Straight course.

1430

The main event of the afternoon will be an Open Meeting of the kind held twice a week during the regular Straight programme. This brings the children being treated together with their families and siblings in an open therapeutic session of personal testimony, peer pressure and parental involvement.

1500

The Princess of Wales and Mrs Reagan will leave separately.

There will be open coverage of the arrival of Mrs Reagan and The Princess of Wales from the edge of the carpark on Backlick Road at the entrance to Straight.

Inside the building, there will be a very small pool, writing press only, no cameras, to cover the initial briefing.

The main event is the Open Meeting which will take place in a large hall. Parents and children sit in two large blocks facing eachother. The action at the meeting mostly takes place in or in front of the children's half of the hall. Mrs Reagan and the Princess of Wales will sit in the front row of the parents block of seats. A small pool of TV cameras and still photographers (16) will be permitted to film the entry and departure of Mrs Reagan and HRH. For the duration of the meeting this small pool will join a larger fixed pool (40) of writers and photographers on a raised platform at the back of the hall behind the parents.

At the end of the visit Mrs Reagan and the Princess of Wales will leave by separate motorcades. Open coverage.

Press should arrive by 1300. White House passes will be required for US press.

Press Contacts

British Press: Andrew Burns (British Embassy) (202) 898 4395

US Press : Wendy Webber (White House) (202) 456 7136

Kay Ellis (Straight) (703) 941 DRUG

Background

The visit to Straight is included in the programme because of the Princess of Wales' interest in the problems of drug abuse, and Mrs Reagan's well-known involvement with many projects connected with drug rehabilitation and prevention. Straight programmes involve parents and peer groups in the rehabilitation of young substance abusers.

Background notes on Straight are attached.

Background: Leading Personalities

Mr Page Peary has been Director of Straight Inc of Greater Washington since May 1985. He first became interested in working in the field of substance abuse while serving as Clinical Supervisor in an Infantry Battalion in Vietnam. He later developed and published a series of lesson plans that are used throughout the US Army. Before joining Straight Mr Peary was Administrator of Alexandria Drug Abuse Services.

Dr Mel J Riddile has been Northeast Regional Director of Straight
Inc since May 1985. He was formerly Director of Straight in
Greater Washington. Before joining Straight in 1982 Dr Riddile was
Co-ordinator of Substance Abuse Prevention with Fairfax County Public
Schools. He is a consultant with the US Department of Education
Alcohol and Drug Abuse Education Programme.

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MR. PAGE PERRY (2 OF 2)

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1

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WALES, MR. PAGE PERRY (2 OF 2)

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B-6 Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
B-7 Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
B-8 Release would disclose information concerning the regulation of financial institutions ((b)(9)) of

B-8 Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA] B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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

THE WHITE HOUSE WASHINGTON

VISITED STRAIGHT

David Roycroft Asst. Private to the Pr. of Wales

Mr. Michael Shea Press Sec. to H.M. the Queen

Mr. Colin Trimming Chief inspector Royalty Protection Group Scotland Yard

Emabbsy

Mr. Andrew Burns

Ms. Sarah Gillett

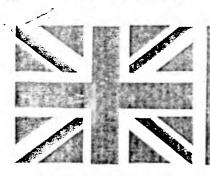
Department of State

Miss Catherine Murdock

Miss Mary Masserini

Mr. John Chornyak

Mr. Mike Consadine





URGENT

9 October 1985

Dear Colleague

ARRANGEMENTS FOR THE VISIT BY THEIR ROYAL HIGHNESSES THE PRINCE AND PRINCESS OF WALES: 9 - 13 NOVEMBER

As you will know, the Prince and Princess of Wales will be visiting Washington and Palm Beach in early November. They have accepted an invitation from President and Mrs Reagan to attend a dinner at the White House on Saturday 9 November. They will be visiting the National Gallery of Art on Sunday, 10 November for "The Treasure Houses of Britain" exhibition, of which they are the patrons. They have also accepted an invitation from the Board of the United World College of the American West to attend a dinner on 12 November in Palm Beach.

I attach a note incorporating all the available information on the visit. This visit will be the first formal visit together to the United States by Their Royal Highnesses the Prince and Princess of Wales, apart from a transit stop in 1981. As such we are naturally pleased that the visit to the nation's capital should coincide with the start of a unique exhibition on the art of the British country house at the National Gallery of Art. The visit to Palm Beach is in support of an international cause close to the Prince of Wales' heart; the dinner will directly raise funds for students from all over the world.

Media Facilities

Detailed arrangements are set out in the attached note. We have tried to be as helpful as possible within the inevitable constraints of a short visit. There will be no interviews, although the Prince of Wales will make some public remarks on certain occasions during the visit.

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The list of media facilities indicates both what will be available and who the contact points are. John Hughes, Nigel Ellacott and I will be happy to respond to any further questions at the Embassy (telephone no: 202-462-1340). Given the expected press interest, representatives of the US media are urged to contact the relevant US press contact to signify their interest in covering an event, even where the press facility is unlimited.

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The Queen's Press Secretary, Michael Shea, will be in attendance throughout the visit. He and I will give an open press briefing in the Rotunda of the British Embassy at 10.00 a.m. on Friday 8 November and on subsequent occasions during the visit.

Please note the arrangements for press accreditation. We cannot undertake this for the US press, but if your organisation intends to assign a particular correspondent to lead your coverage of the visit, then, in addition to any dealings with the press contacts noted in the attached papers, I should be grateful if you could let me know by letter as soon as possible.

Accreditation: British Press

All British correspondents who wish to cover the visit, whether resident in the US or visiting from the UK, have been asked to apply in writing to the British Embassy in Washington (Information Department). Unless they already have a White House pass, they should enclose 2 passport photographs, name, organisation, passport number, place of birth and date of birth, by 25 October.

The Department will clear these applications with the State Department. Press passes valid for Washington and Palm Beach will be issued at the Press Briefing in the Embassy Rotunda on Friday 8 November at 9.00 a.m. Press passes for Palm Beach will also be available at the Press Centre at the Royce Hotel in Palm Beach from Sunday 10 November.

Accreditation: Commonwealth Press

Any Commonwealth correspondents should apply, in writing, in the same way as the British press.

Accreditation: US Press

In Washington. The only recognised credentials will be passes from the White House, State Department, US Capitol, USIA or Voice of America. Correspondents without such passes should consult the relevant US press contact at each programme event about access.

In Palm Beach. Until October 31 written requests for US accreditation should be send to the United World College News Office, 1747 Pennsylvania Avenue, NW, Third Floor, Washington DC 20006. The request, written under the letterhead of the news organisation, should include the name and social security number of the news persons assigned to cover the event and

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...../

ARRANGEMENTS FOR THE VISIT OF THEIR ROYAL HIGHNESSES THE PRINCE AND PRINCESS OF WALES TO WASHINGTON DC AND PALM BEACH 9 - 13 NOVEMBER

This note brings together the latest information on the visit by the Prince and Princess of Wales to Washington and Palm Beach from 9 - 13 November, together with the media arrangements that will be available during the visit.

Outline Itinerary

The Prince and Princess of Wales will arrive in Washington (Andrews Air Force Base) at 8.45 a.m. on Saturday 9 November aboard an Australian Air Force plane. This will follow a two week visit to Australia, the main part of which will be devoted to celebrating the 150th Anniversary of the State of Victoria.

Their Royal Highnesses will be staying at the Residence of the British Ambassador and Lady Wright on Massachusetts Avenue. They will go to the White House at 11.00 a.m. on Saturday 9 November for a private meeting over coffee with the President and Mrs Reagan.

Thereafter they will return to the British Embassy to meet Embassy staff and take part in a tree-planting cermeony in the garden of the Residence. After a quiet lunch at the Residence, Their Royal Highnesses will undertake separate afternoon programmes.

The Prince of Wales will pay a visit to the American Institute of Architects at 3.00 p.m. for a briefing and discussion on community architecture with groups from the Institute, Baltimore and Savannah. He will also view the 1814 Treaty of Ghent in the Treaty Room of the Octagon where President Madison ratified the Treaty which brought to an end Anglo-American hostilities in the war of 1812. (In the Octagon there is also an exhibition of British country house designs "The Architect and the British Country House 1620-1920").

At 3.10 p.m. the Princess of Wales, in the company of Mrs Barbara Bush, will visit The Washington Home and Hospice which provides long-term care for the chronically and terminally ill. The Princess of Wales, who takes a close interest in the subject of medical care, will unveil a plaque. Members of the British Embassy and their wives have participated actively in the volunteer programme of the Home over many years.

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Later in the afternoon of Veteran's Day at 4.05 p.m. the Prince and Princess of Wales will visit Arlington National Cemetery. The Prince of Wales will lay wreaths at the Tomb of the Unknown Soldier and at the memorial to Field Marshal Sir John Dill.

Field Marshal Sir John Dill was the head of the British Joint Staff Mission in the United States during World War II and the senior British member of the Combined Chiefs of Staff. He died in 1944 and, like a number of other British military personnel, was buried at Arlington National Cemetery.

In the evening Their Royal Highnesses will attend a dinner in the West Building of the National Gallery of Art at the invitation of the Trustees. They will arrive at the entrance at 6th Street and Constitution Avenue. After dinner they will join a larger reception in the East Building and will depart from the 4th Street entrance of the East Building.

The Prince and Princess of Wales will leave Washington, from Andrews Air Force Base, at 10.10 a.m. on Tuesday 12 November. They will fly on a British VC 10 of The Queen's Flight to Palm Beach International Airport (Butler Aviation Terminal), where they will arrive at 12.30 p.m.

At 3.00 p.m. the Prince of Wales will play in a friendly polo match at the Palm Beach Polo and Country Club, where he last played in 1980. The Princess of Wales will present a trophy to the winners.

In the evening at 8.00 p.m. Their Royal Highnesses will attend a reception and dinner at the Breakers Hotel in Palm Beach, given by the Board of the United World College of the American West in honour of Dr Armand Hammer, in recognition of his contribution to that cause. The United World Colleges, of which there are now six, including one in Montezuma, New Mexico, were started in the United Kingdom in 1962 to promote international understanding and peace through education.

Their Royal Highnesses will stay overnight privately at the Polo and Country Club before leaving for London at 10.00 a.m. on Wednesday 13 November from Palm Beach International Airport (Butler Aviation Terminal).

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9 October 1985-

TRH THE PRINCE AND PRINCESS OF WALES I - VISIT TO WASHINGTON MEDIA FACILITIES: DETAILED ARRANGEMENTS

FRIDAY 8 NOVEMBER

10.00:

Press briefing by Mr Michael Shea, The Queen's Press Secretary and Mr Andrew Burns, Counsellor (Information) at the British Embassy. The briefing will cover the visit as a whole and be the occasion when British correspondents can pick up press and pool passes. The briefing will be in the Rotunda of the British Embassy, 3100 Massachusetts Ave NW, Washington DC 20008. Buses will ferry the British press to and from the Watergate Hotel, leaving at 09.30.

Contact: John Hughes (Embassy)

SATURDAY 9 NOVEMBER

8.45 :

TRH The Prince & Princess of Wales will arrive at Andrews Air Force Base. Met by: US Chief of Protocol, British Ambassador and others.

Photo-opportunity: open coverage from platforms on tarmac.

Press should arrive by 07.45. British press buses leave Watergate at 07.00 and return about 9.15 to the White House.

Contacts: British Press: John Hughes (Embassy)

US Press: Major Stepp (202-981-4424)

X 25/26)

11.00:

TRH arrive at South (Diplomatic) Portico of the White House to meet the President and Mrs Reagan.

Photo-opportunity: Open coverage on the lawn of the arrival.

No press coverage of inside or departure.

Press should arrive by 10.00. British press
buses arrive from Andrews Air Force Base and depart
for Watergate Hotel at about 11.15. White House
passes only.

Contacts: British Press: John Hughes (Embassy)

Secretary and Mr Andrew Burns, Counsellor (Information) at the British Embassy. The briefing will cover the visit as a whole and be the occasion when British correspondents can pick up press and pool passes. The briefing will be in the Rotunda of the British Embassy, 3100 Massachusetts Ave NW, Washington DC 20008. Buses will ferry the British press to and from the Watergate Hotel, leaving at 09.30.

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11.00: TRH arrive at South (Diplomatic) Portico of the White House to meet the President and Mrs Reagan.

Photo-opportunity: Open coverage on the lawn of the arrival.

No press coverage of inside or departure. Press should arrive by 10.00. British press buses arrive from Andrews Air Force Base and depart for Watergate Hotel at about 11.15. White House passes only.

Contacts: British Press: John Hughes (Embassy)
US Press: Wendy Webber (White
House): (202)-456-2100

Press should arrive by 14.30.

Press bus leaves Watergate Hotel at 14.15 and returns about 16.15

Contacts: British press: John Hughes (Embassy)

US press: Andrea Heid
(Washington Home) Tel No (202) 966 3720

16.30 Media Reception at Residence of British Ambassador and Lady Wright. By personal invitation only. Off the record. No cameras, microphones or notebooks.

No press coverage.

British press bus leaves Watergate Hotel at 15.15.

17.00 <u>Press Briefing</u> at Rotunda of British Embassy. Pool passes issued for British press.

British press bus leaves Watergate Hotel 17.00. Both buses leave Rotunda for White House at 18.30

19.30 TRH arrive at North Portico of White House for private dinner with the President and Mrs Reagan.

- : open coverage of arrival of TRH at 19.30
- : very small pool coverage of toasts at dinner
- : no press coverage of departure

White House passes only

British press buses leave for Watergate Hotel at 20.00

Contacts: British Press: John Hughes (Embassy)
US Press: Wendy Webber White House
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No press coverage.

British press bus leaves Watergate Hotel at 15.15.

17.00 <u>Press Briefing</u> at Rotunda of British Embassy. Pool passes issued for British press.

British press bus leaves Watergate Hotel 17.00. Both buses leave Rotunda for White House at 18.30

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White House passes only

British press buses leave for Watergate Hotel at 20.00

Contacts: British Press: John Hughes (Embassy)
US Press: Wendy Webber White House
(202)-456-2100).

Gallery of Art covering:-

- a) welcome by Trustees and others;
- b) welcome by Director and Curator
- c) visit to Exhibition
 "Treasure Houses of Britain"
 (3 fixed positions).
- d) short meeting with the press at which the Prince of Wales will answer questions (12.30)
- e) departure past Gallery staff and children (12.40)
- : open coverage of departure from National Gallery of Art from west side of Plaza only (12.45).

Press should arrive at the National Gallery Press Centre in the Cafeteria in the Lower Concourse by 09.30 at the latest. Press Centre will be open from 07.00. Briefings and pool passes will be given from 09.00. Pools will move into position soon after 10.00.

British press buses leave Washington Cathedral at 10.15 and Watergate Hotel at 09.00. They return to Watergate Hotel at 13.00.

Contacts: British press: Andrew Burns and John
Hughes (Embassy).
US press: Neil Heath (National
Gallery) (202) 842 6353.

Press Briefing at Rotunda of British Embassy.
Pool passes issued for British press.

British press buses leave Watergate at 15.45 and return at 17.00.

20.00 Arrival of guests (not TRH) for dinner at Residence of British Ambassador and Lady Wright: 3100 Massachusetts Ave NW.

Photo-opportunities: Small pre-positioned pools to
cover:-

a) arrival of quests

- (3 fixed positions).
- d) short meeting with the press at which the Prince of Wales will answer questions (12.30)
- e) departure past Gallery staff and children (12.40)
- : open coverage of departure from National Gallery of Art from west side of Plaza only (12.45).

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16.00 <u>Press Briefing</u> at Rotunda of British Embassy. Pool passes issued for <u>British press</u>.

British press buses leave Watergate at 15.45 and return at 17.00.

20.00 Arrival of guests (not TRH) for dinner at Residence of British Ambassador and Lady Wright: 3100 Massachusetts Ave NW.

Photo-opportunities: Small pre-positioned pools to
cover:-

- a) arrival of guests
- b) reception line (no TV cameras)
- c) arrival of Vice-President and Mrs Bush .
- d) toasts (21.45)

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13.45

Prince of Wales arrives Library of Congress (Jefferson Building) - 1st St and Independence Avenue, SE for discussion on aspects of the US Constitution.

Photo-opportunities: - open coverage of arrival and departure (15.00)

: pool facility in Great Hall inside the Library to cover arrival and departure.

British press bus will leave Watergate at 13.00 and depart Library of Congress for Arlington Cemetery at 15.05 prompt.

Contacts: British press: John Hughes (Embassy)
US press: Nancy Bush (Library of
Congress (202) 287 9190

14.05

Princess of Wales and Mrs Reagan arrive at Straight Drug Rehabilitation Centre 5515, Backlick Road, Springfield, VA. Met by Mr Page Peary, Clinical Director, Dr Mel Riddile (Regional Director, and Mr Bill Oliver (National Director).

pool facilities inside Straight
to cover:-

- a) initial briefing(very small writing pool, no cameras).
- b) open house.

Press should arrive by 13.00. White House passes required. British press bus will leave Watergate at 12.30 and depart for Arlington Cemetery at 15.05 prompt.

Contacts: British press: Andrew Burns(Embassy)
US press: Wendy Webber(White
House). (202) 456 2100 and Kay Ellis
(Straight) 703-941-Drug.

16.05 TRH arrive at Arlington National Cemetery to lay \a wreath on the Tomb of the Unknown Soldier and at the

inside the Library to cover arrival and departure.

British press bus will leave Watergate at 13.00 and depart Library of Congress for Arlington Cemetery at 15.05 prompt.

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US press: Nancy Bush (Library of Congress (202) 287 9190

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Princess of Wales and Mrs Reagan arrive at Straight Drug Rehabilitation Centre 5515, Backlick Road, Springfield, VA. Met by Mr Page Peary, Clinical Director, Dr Mel Riddile (Regional Director, and Mr Bill Oliver (National Director).

Photo-opportunities: open coverage of arrival and departure (15.00) from car-park outside.

pool facilities inside Straight
to cover:-

- a) initial briefing(very small writing pool, no cameras).
- b) open house.

Press should arrive by 13.00. White House passes required. British press bus will leave Watergate at 12.30 and depart for Arlington Cemetery at 15.05 prompt.

Contacts: British press: Andrew Burns(Embassy)

US press: Wendy Webber(White

House). (202) 456 2100 and Kay Ellis
(Straight) 703-941-Drug.

16.05

TRH arrive at Arlington National Cemetery to lay a wreath on the Tomb of the Unknown Soldier and at the Memorial to Field Marshal Sir John Dill.

Open coverage from press position at top of Memorial steps

TRH THE PRINCE AND PRINCESS OF WALES II - VISIT TO PALM BEACH MEDIA FACILITIES: DETAILED ARRANGEMENTS

TUESDAY 12 NOVEMBER

10.00 Press briefing at press centre at Royce Hotel, 1601
Belevedere Road, West Palm Beach - where credentials
and pool passes will have been issued.

Press buses leave at 11.30 for Palm Beach International Airport (Butler Aviation Terminal)

12.30 Arrival of TRH at West Palm Beach from Washington Met by local dignatories and the British Consul-General

Press should arrive by 11.45. Press buses will depart for Polo and Country Club at 13.00

Contacts: British press: Andrew Burns (Embassy)
(202) 898 4395 until 7 November
from 7 November contact Gill Cooper
Press Centre Royce Hotel (305) 689 6400

US press: Jack King (202) 857 3035 until 7 November. From 7 November (305) 689 6400. (Press Centre Royce Hotel).

Polo match (friendly) at Polo and Country Club 13198 Forest Hill Boulevard, West Palm Beach, Florida 33414.

Photo-opportunities: open coverage from fixed positions in the stands to cover:-

- a) initial ceremonies
- b) the polo game
- c) the presentation of a Trophy by the Princess of Wales (16.55).

Press should be in position by 14.00. They will be restricted from moving to the Club House or ponylines, but are invited to lunch in the press tent. Press buses will return to Royce Hotel at 17.30 (45 minutes trip).

and pool passes will have been issued.

Press buses leave at 11.30 for Palm Beach International Airport (Butler Aviation Terminal)

12.30 Arrival of TRH at West Palm Beach from Washington Met by local dignatories and the British Consul-General

<u>Photo-opportunity</u>:- open coverage from raised platforms on tarmac.

Press should arrive by 11.45. Press buses will depart for Polo and Country Club at 13.00

Contacts: British press: Andrew Burns (Embassy)
(202) 898 4395 until 7 November
from 7 November contact Gill Cooper
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WEDNESDAY 13 NOVEMBER

09.55

Arrival of TRH at West Palm Beach International Airport (Butler Aviation Terminal) for departure at 10.00.

Photo-opportunity: Open coverage of departure from raised platforms on the tarmac

No special transport arrangement for press

Contacts: British press: Andrew Burns (Embassy)

(202) 898 4395 until 7 Nov.

Gill Cooper (Royce Hotel Press Centre)

(305) 689 6400 from 7 Nov.

US press: Jack King (202) 847 3035 until 7 Nov. Royce Hotel Press Centre (305) 689 6400 from 7 Nov.

9 October 1985