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STUDENT PAPERS

FILE TITLE: Background Paper on the AF Urinalysis Program

AUTHOR: SMSgt Steven P. Folkertz, SNCOA Student, undated, circa 1993

Reviewed by:

AFEHRI Representative G.R. Akin date 29 Dec 97

EPC Representative Vee-Clay date 7 Jan 98

Scanner Operator Scary Rodden date 9 Jan 98

APPROVED BY:

Gary R. Akin
GARY R. AKIN, CMSgt, USAF
Director
Air Force Enlisted Heritage Research Institute

BACKGROUND PAPER

ON

AIR FORCE URINALYSIS PROGRAM

BY

SMSGt Steven P. Folkerts

In this paper I will explain how and why the urinalysis program was developed, how it was accepted in the field, some refinements that were made and finally the program today.

Drug abuse became a major problem in the United States in the early 1960's. Personnel entered the United States Air Force from this drug-cultured community and the problem directly influenced and affected the Air Force, especially the younger member under 25 years old. This was significant because most of the enlisted personnel entering the Air Force at that time were 25 years old or younger. It wasn't until the spring of 1970 that drug abuse "became news." Although it was important that people were becoming aware of the problem it was still largely regarded as a military problem. The primary cause for the drug problem in the military was because of the easy access to drugs in Southeast Asia. It became obvious there was a dire need for a national drug abuse control program. As a result in June 1971, President Nixon created the Special Actions Office for Drug Abuse Prevention. The creation of this office laid the groundwork for an eventual Air Force urinalysis program. An official urinalysis program was initiated in 1972 and was a mandatory screening process aimed at personnel ages 25 years old and younger. Initial acceptance of this new program was terrible at best.

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Commanders didn't like it because it tied their hands and dictated how they would conduct screening of their personnel for drug use. The enlisted corps certainly didn't like it because it was in fact aimed at them. Although on the surface it wouldn't appear as though that were the case but in reality most officers had to go through at least four years of college before entering the Air Force so consequently they were at least 22-23 years of age. Yes, they were in the right age group but still a minority when compared to the enlisted corps. It was perceived as unfair to enlisted personnel.

The program was in fact suspended. In a History of the Medical Service, Headquarters Strategic Air Command it was stated, "The Drug Abuse Urinalysis Testing Program was suspended in July 1974 as a result of the "court of military appeals" decision of 5 July 1974, in United States versus Ruiz. The Ruiz case holds that an order to provide a specimen for urinalysis of drugs is an illegal order for court-martial purposes." (3:30) Enlisted personnel felt they had won a small battle but their victory was short lived because on 24 February 1975, urinalysis testing resumed. The Joint Chiefs of Staff issued a message to Unified and Specified Commands directing that urinalysis testing will resume following the modification of DOD policy to utilize evidence developed by urinalysis testing for identification and rehabilitation only as opposed to disciplinary action. So the saga continued. Commanders were still concerned about the effect the program was having on the enlisted corps' morale and also the extremely high cost involved with

administering the program with only minimal results. In an interview on 3 March 1977 with Lt Col. Thomas T. Sizemore, Chief, 2750 Air Base Group, Social Actions Office, Wright-Patterson AFB, Ohio he stated "22,000 people ran through the testing program at Wright-Patterson AFB and it resulted in the identification of one individual." (4:6) The consensus from most everyone at that time echoed the same situation. On 1 October 1976 Congress terminated random urinalysis testing. Commanders still retained their power to sweep test their units or direct individuals to provide samples but it would no longer be mandatory to do so.

The most current revision of AFR 160-23 dated 31 July 1986 specifies only three types of tests. They are "probable cause, inspection, commander-directed." (6:3) It also further specifies that "inspection testing should be the predominate type of test used." (6:3) Anyway you look at it it is still random testing even though they are not calling it that. But at least now it is fair to everyone in the organization and not just specific age groups. According to AFR 30-2 dated 19 August 1988 "Deterrence is the primary purpose of the Air Force drug testing program. Other purposes include identifying military persons for rehabilitation or discipline and to obtain data on the prevalence of drug use. The possibility of being identified as a drug user via drug testing discourages individuals from using drugs." (5:25) The biggest problem with the current program according to SMSgt Maureen J. Ballard, 12th Operations Support Squadron First Sergeant, at Randolph AFB, Texas is that "the random selection procedure utilized at Headquarters Air Force Military Personnel Center is that it tends to pick some of the same people all the

time."(1:-) Although this may not be bad it is at the very minimum, inconvenient. Aside from inconvenience the program does seem to be working as a deterrent as SMSgt Barry R. Brown, Superintendent, Hospital Security Police, 394th Security Police Squadron, Lackland AFB, Texas states "it is obvious that the system is working because if you compare the number of incidents that we had back in the mid seventies with the number we have today the numbers are very small today."(2:-)

For the enlisted corps, the urinalysis program or "Golden Flow" has come a long way from where it was a couple decades ago. It is very effective as a deterrent and drugs are no longer the "thing to do" like they used to be. So as a result of the program the enlisted corps is a much more healthy and viable group within the United States Air Force.

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