

LESSON PURPOSE PLAN

STOP ILLICIT DRUG USE
GUIDED DISCUSSION

VALUES-BASED LEADERSHIP

4/28/2015

1. TOPIC OVERVIEW

INSTRUCTOR NOTE

Members of the armed forces cannot always distance themselves from the substance use problems, which so commonly affect the rest of society. Although illegal drug use is substantially lower among U.S. military personnel than the civilian population, drug misuse still exists within our ranks. Use of illicit drugs adversely affects judgment, self-control, emotion, motivation, memory, and learning. Jobs performed by Marines and Sailors are far too important to allow our abilities to be impaired. Additionally, drugs can lead to physical and emotionally painful addiction for Marines, which may ultimately result in separation from military service, incarceration, or death. Any time we lose someone it detracts from overall combat readiness and effectiveness, but it is especially troubling to lose someone to a preventable issue such as drug use.

Use this time to present the topic of the guided discussion to your group. Cover why this topic is important to the Marine Corps, as a whole, and vital to the individual Marine. You may use the above paragraph to help introduce the topic, or develop a completely unique introduction. Aspects of your attention-gainer should focus on your discussion topic.

Ensure you have followed the Instructor Preparation Guide (IPG), familiarized yourself with the subject, and reviewed the references.

Definitions by Marine Corps Order 5300.17, *Marine Corps Substance Abuse Program*:

Drug: Any chemical compound, which may be used on or administered to humans or animals that modify their physiological or psychological behavior or function.

Illegal drug: Drugs prohibited by law or lawful drugs when obtained or used without proper authority.

Drug abuse: Misuse or wrongful use of a substance; whether or not used therapeutically, legally, or prescribed by a physician.

Zero Tolerance Policy: The distribution, possession, use, trafficking or distribution of illegal drugs or drug paraphernalia is contrary to the effective performance of Marines and to the Marine Corps mission, and will not be tolerated.

2. METHOD

INSTRUCTOR NOTE

Inform your class that the instructional method you will be using for today's lesson is a guided discussion and that this method has been selected to actively involve students in the learning process.

The guided discussion can be effective at altering awareness and behaviors of participants. The goal of the guided discussion method is to drive group participation through leadership and encouragement. To learn more about guided discussions refer to Marine Corps Reference Publication (MCRP) 6-11B W/CH 1 - *Marine Corps Values: A User's Guide for Discussion Leaders*.

It is up to you, as the discussion leader, to use your best judgment and adapt this period of instruction to make it most suitable to your unit and the experience level of the participants. Be prepared for controversy, and form a plan to deal with conflicting viewpoints in order to keep the discussion progressing.

The guided discussion should last approximately 25 to 35 minutes. Spend a few minutes on the introduction; and, the majority of your time on the discussion questions within the body. Do not go too far over your time, as you may start to lose the attention of the participants. Too much information can start to overwhelm what is intended to be a simple and focused session. Remember to allow a few minutes for reflection and the summary of your lesson.

Determine what aspect of the topic you want to concentrate your discussion towards. Design learning outcomes, or "takeaways," which participants should grasp at the end of this discussion that best exemplify your intended focus. You can create your own learning outcomes OR use one, or more, of the examples listed below.

Example learning outcomes are:

- (a) Understand how illicit drug use can adversely affect your career in the United States Marine Corps.
- (b) Be able to identify indicators that someone is using illegal drugs or misusing prescription drugs.
- (c) Understand how Marine Corps' core values relate to using illegal drugs or misusing prescription drugs.
- (d) Be able to explain where Marines and Sailors can seek education, information, and help on drug misuse.
- (e) Understand how illicit drug use is inconsistent with the Marine Corps' leadership traits and principles.

3. INTRODUCTION

INSTRUCTOR NOTE

Use this time to introduce yourself to the group if necessary, and to ensure the group is familiar with each other. This is also the time to introduce any ground rules, which will establish what behaviors are expected during the guided discussion. Some example ground rules are: everyone participates fully; permit participants to express themselves without becoming recipients of personal attacks from anyone regarding their views; keep language clean, as not to offend others; make head-calls, as needed, without disrupting the rest of the participants;

etc.

4. **BODY**

INSTRUCTOR NOTE

Start the discussion by giving your participants the learning outcome you developed for the guided discussion.

a. **Gain Attention**

INSTRUCTOR NOTE

A few attention-gaining stories are provided, but you are encouraged to personalize the attention-gainer to fit your personality, audience, and your desired learning outcome. You may use one of the provided stories, or conduct research in order to find others more applicable to your learning outcome.

(1) Drug Experimentation

You are currently a staff sergeant and one of your sergeants comes to you following the random unit-sweep urinalysis. The sergeant claims stress at home caused him/her to experiment with heroin for the only time in their life, and they deeply regret it. The results of the urinalysis, however, turn out to be negative.

(2) Spice Use

Leaders of Marine Corps Base Camp Lejeune and Naval Criminal Investigative Service are prosecuting those who use, make or sell Spice, a synthetic cannabinoid, throughout the base and surrounding area.

The Drug Enforcement Agency updates restrictions frequently on substances that are similar to and produce the same effects as illegal narcotics. Military drug testing has expanded to check for Spice and substances with a similar chemical makeup.

The effects of Spice on the individual are not limited to legal problems, "Some have suffered significant psychological damage," said Heather Powers, the Assistant Special Agent in Charge with NCIS. Powers reported that Spice users experienced drastic mental changes, and exhibited suicidal, violent, and very unpredictable behavior. "Spice is so new; nobody really knows what the long term effects of the drug are."

Spice not only affects the individual using it, but also affects the Marine Corps' unit cohesion and morale.

Many apprehended users reported using the drug in plain sight, including in barracks rooms, smoke pits and vehicles, by replacing the innards of cigars or cigarettes with Spice.

Reference:

Perez Rivera, Lance Corporal Jackeline M. "NCIS cracks down on spice." *MARINES.com*, 23 Jul. 2013.

[<http://www.lejeune.marines.mil/News/tabid/1099/Article/513307/ncis-cracks-down-on-spice.aspx>]

(3) Injectable Steroid Use and Distribution

Federal agents with the Marine Corps are investigating reports of drug and steroid use by firefighters at the Miramar Air Station.

Court records detail a reported drug sale on base and allegations of steroid use by Aircraft Rescue and Firefighting (ARFF) personnel.

The federal search warrant stated that agents from the U.S. Marine Corps Criminal Investigation Division (CID) received a report on 27 June [2013] of "drug distribution by... Marines assigned to the Aircraft Rescue Firefighting (ARFF) Section."

Agents later discovered evidence that Miramar firefighters were "injecting themselves, and possibly each other, with steroids as well as sharing steroids with other Marines assigned to the ARFF," according to the search warrant.

Records indicate that two Marines who live at an El Cajon apartment were held in the Miramar Brig after agents found incriminating text messages and a cell phone photograph depicting steroid use at the apartment.

Reference:

Gotfredson, David. "Marines investigate alleged drug & steroid use by Miramar firefighters." *CBS8.com*, 10 July 2013.

[<http://www.cbs8.com/story/22800099/marines-investigate-drug-steroid-use-by-miramar-firefighters>]

(4) Raves and Club Drugs

"Ecstasy," the most popular street name for methylenedioxymethamphetamine or MDMA, has become one of America's designer drugs after showing up in the mid-80s dance scene. It has turned into a "party drug" or "club drug."

Its presence at popular all night dance parties, called raves, has increased dramatically in the past few years, and the use of ecstasy has spread throughout the community.

"Ecstasy has increased threefold or even more than that," said Robin Knapp, special agent for the Naval Criminal Investigative Services. "Ecstasy has become a front liner of drugs used by young adults."

Manufacturers of ecstasy can produce the drug easily with knowledge of basic college chemistry and a small amount of lab equipment.

Ingredients can include, but are not limited to: ammonia, calcium oxide, sulfuric acid, ether, copper chloride, nitric acid, methanol, muriatic acid (a swimming pool chemical) and anhydrous ethanol (Everclear).

Whether you call it "E," "X," "XTC," "the love drug," or "love trip," ecstasy can be very dangerous despite its seemingly harmless name. [Other names for Ecstasy include "Molly," "Scooby Snacks," "Candy," "Happy Pill," and "Disco Biscuits."]

"A lot of people think ecstasy will not hurt you," said Knapp. "Ecstasy can have all kinds of things in it, LSD, methamphetamines, cocaine, heroin. People don't realize it can contain so many things."

Ecstasy comes in many different forms. It can be sold in powder form, in gelatin capsules and pressed tablets. The tablet pill form can be pressed with a logo or icon, (often falsely) identifying it to the buyer as to the type of ecstasy that it is. Various types out on the market are "green triangle," "dolphin," "three-leaf clovers," "superman," "sun," and "running rabbit."

It affects the body in two ways, acting as both a stimulant and a hallucinogenic. It has been known to produce feelings such as closeness, empathy and relaxation.

Friendliness, excitability, increased sensory perception and laughing are a few other signs of someone who is on ecstasy. Negative effects can be teeth clenching, increased heart and breathing rate, nausea, excessive sweating, insensitivity to pain and dizziness.

"A lot of times you will see kids sucking on lollipops or pacifiers due to the clenching of their teeth," said Knapp.

Signs of overdose include dehydration, hypertension, elevated temperature, vomiting, and faintness. After prolonged use, users can suffer brain damage, memory loss, depression, insomnia, seizures, kidney failure, liver failure, cardiac complications, bleeding disorders and psychosis.

Navy researchers found in the ten-year period between 1991 and 2000 that there were 20 [Department of the Navy] deaths from the use of Ecstasy, and most were due to heat stroke or cardiac arrest.

"MDMA is a very serious problem," said Knapp. "The popularity of rave parties and ecstasy has dramatically increased."

Reference:

Martinez, Lance Corporal Valerie. "'Rave Drug' growing problem for Marine Corps, Camp Lejeune" *Camp Lejeune News*, 7 July 2000.
<http://www.lejeune.marines.mil/News/tabid/1099/Article/511554/rave-drug-growing-problem-for-marine-corps-camp-lejeune.aspx>

(5) Inhalants and Sudden Sniffing Death Syndrome

Inhaling or "huffing" products such as glue, paint thinner, and gases such as freon, butane, propane and helium produce effects that are similar to alcohol intoxication. The initial effects of huffing may include: euphoria, drowsiness, lightheadedness, and a loss of inhibition. Further huffing of inhalants can cause dizziness, delusions, impaired judgment, and apathetic feelings.

Long-term huffing of inhalants can have damaging health consequences. When inhaling the gas found in "canned air," it deprives the brain of oxygen. This creates the high that soldiers are after and the reason that it is often misused. However, inhaling too much of the gas found in "canned air" can cause an overdose. An overdose can cause heart failure and can even be fatal. Death can occur from heart failure, asphyxiation, aspiration, or suffocation.

Navy Lieutenant Commander Sean Swiatkowski, deputy medical examiner for the Armed Forces Medical Examiner's Office, said several service members have died from huffing, and the use, while mostly associated with young, unmarried people, appears to cut across age and socioeconomic backgrounds.

Swiatkowski believes the deaths, and occasions when other users were left brain-damaged, were accidents caused by people who did not realize how harmful misusing such products can be. "People think it's not harmful because they use it to clean their homes and desktops," he said. "To them, there are no potential injuries to themselves because these are things you get around the house, or buy in the store."

Many products used in huffing contain 1,1 dichloroethane, a chemical highly toxic to the heart that is produced to remove grease, paint and varnish, and to make other chemicals, according to the U.S. Centers for Disease Control.

The problem, Swiatkowski said, is that the chemical's reaction in the body is volatile, and people can get a false sense of security from using it without experiencing a toxic reaction. "You could use it one time and it causes a toxic event, or you can use it a hundred times, and on the 101st, it kills you," he said.

Reference:

Daniel, Lisa. "Dangers Abound With Huffing Chemicals, Using 'Spice'." *DoD News*, 01 Oct. 2010.

[<http://www.defense.gov/News/NewsArticle.aspx?ID=61110>]

(6) Oral Steroid Use and Distribution

You see Marines in a small group in the gym locker room getting ready to start a workout and passing around a small, unmarked baggie of pills. They look nervous before taking the pills, hide the baggie away, and then go out and start lifting some heavy weights. The fact that they seem nervous about taking the pills suggests that it is likely the pills may be illicit. Oral Steroid use is common in people trying to increase their muscle mass.

Unfortunately, what these Marines may not know about is the long list of side effects from anabolic steroids that include high blood pressure, heart attack and stroke, high cholesterol, rage, violence, aggression, and increased incidents of liver disease and liver cancer. Additional side effects from anabolic steroids for men include shrinking of testicles, gynecomastia (male breast enlargement), low sperm count, increased hair growth, and deeper voice, while women may suffer reduced breast size.

Marines caught with illegal steroids face non-judicial punishment, loss of pay, loss of rank, and a potential for a general court martial, which could result in a jail term of up to two years and a dishonorable discharge.

(7) Drug Use Altering Judgment

Those who use Spice, a synthetic marijuana, are dangerous not only to themselves, but to others. Synthetic marijuana can lead to extremely violent behavior due to the paranoia, hallucinations, and extreme agitation that accompanies synthetic marijuana use.

Marine Sergeant Michael Poth was smoking synthetic marijuana just previous to stabbing Philip Bushong, another Marine. After being detained for murder, detectives quoted Poth as saying "...he punched me in my face, so I stabbed him..." Documents also state that Poth, after hearing a radio transmission about Bushong being transported to the hospital, said "...good, I hope he dies."

For many, an argument between two Marines that escalated into a fatal stabbing is troubling. "They're (U.S. Marines) a member of the community that creates a kind of order on the street," says Deborah

Shore, who has lived in the neighborhood for three decades. "This is really a terrible thing to have happen, for them and for us."

"Sad. Two families... now destroyed," says Carolyn Eaves, who works a block from the stabbing scene.

Prosecutors, cited military officials saying the 20-year-old had been belligerent with other Marines, and had been caught smoking Spice, which is banned in the Marine Corps.

Reference:

Reeve, Richard. "Marine who Smoked 'Spice' Held in Murder of Fellow Marine." *To the Maximus Blog*, 24 Apr. 2012.
[<http://tothemaximusblog.org/?p=975>]

(8) Prescription Drug Misuse

What some service members may not realize is that drug misuse and abuse not only includes the use of illegal drugs but also any inappropriate use of pharmaceuticals, even if they are prescribed by a healthcare provider. Understanding how to take prescription drugs appropriately can keep a Sailor or Marine safe and fit for duty, and also save their career.

All medications have potential side effects. Healthcare providers recommend prescription medications after a careful analysis of the risks and benefits of taking the medications properly while also factoring in other considerations such as health status, medications already being taken, etc. Additionally, there is clinical oversight by the provider while the individual is taking the medication. Ultimately, however, it is the service member's responsibility to ensure they are taking prescription medicine properly.

Scenario:

One of your Marines injures his leg in a car accident and after a few weeks of rehabilitation you notice he is acting erratically and has recently become bad-tempered. One of his co-workers tells you they think the Marine is getting extra painkillers and other pills to deal with their leg pain, but they have no proof.

b. Potential Discussion Questions

INSTRUCTOR NOTE

The provided questions can be altered, but all questions should be carefully formulated to focus the discussion toward your desired learning outcome. It is the facilitator's responsibility to provoke thought, foster discussion and involvement on the part of the participants, manage the group, and keep discussion flowing. Choose several questions from the following list, which will help accomplish your learning outcome in the specified time.

The discussion format is intended to have the majority of the input come from the participants. Ensure you conduct comprehensive research on this topic using the provided references. Having a comprehensive understanding of the subject material is essential in order to clarify portions of the discussion that may be confusing, and to ensure only accurate information is disseminated during this exchange. This is not intended to be a lecture, so keep your comments direct and focused to keep the group discussion moving.

Do not insert too many of your own convictions, as it may cause the group to skew their input just to mirror your positions, and may not be a true representation of the participants' thoughts. Ensure you have writing material throughout the discussion so you can capture key elements of the discussion, which arise in each segment, in order to create follow-on questions and to summarize each key point.

As the facilitator, you may use a question to initiate a topic for discussion. After the discussion develops, follow-up questions can be used to guide the discussion. Follow-up questions may help a participant to explain something more thoroughly, or enable you to bring the discussion back to a point from which it has strayed.

Questions are so much a part of teaching, they are often taken for granted. Effective use of questions may result in more student learning than through use of any other instructional technique. In general, you should ask open-ended questions, which are thought-provoking and require more mental activity than simply remembering facts. Questions should require students to grasp concepts, explain similarities and differences, and infer cause-and-effect relationships.

Plan at least one lead-off question for each of your desired learning outcomes. While preparing questions, remember the purpose is to stimulate discussion, not merely to get answers. Avoid questions, which require only short categorical answers, such as "yes" or "no." Lead-off questions should usually begin with "how" or "why."

(1) How would you define the word, "drug?" What thoughts come to mind with the word, "drug?" What positive associations come with the word, "drug?" What negative connotations are associated with the word, "drug?"

(2) What do you think are some of the drugs commonly used in America? Is alcohol considered a drug? What legal drugs can be hazardous if used incorrectly? Who can describe a situation where a legal drug left them unsteady, nauseous, and/or delirious?

(3) Why do you think that some drugs have been made illegal? How would you define, "illegal drugs?"

(4) People often learn to form opinions and habit patterns based upon their upbringing. Many of you have formulated opinions, ideas, or practices based upon how you were raised, or your family attitudes towards drug use. What, if any, experiences did you have growing up seeing people deal with drug use? What was your family's attitude toward drug use? How did this shape your opinions on illegal drugs?

(5) Outside of the Marine Corps, what are the most common reasons to try or start using illegal drugs? At what age do you think people start experimenting with drugs, and why then?

(6) What events in the Marine Corps might lead someone to try, start, or return to using drugs?

(7) Explain if you think illegal drugs are easy or difficult to obtain in today's culture, and why.

(8) Describe what effect an illegal drug use story in the media has on the way the American people view the Marine Corps.

(9) Some states have made marijuana legal. Explain why you feel that the Department of Defense should or should not follow and allow marijuana in the Marine Corps.

(10) What drugs do you feel should be illegal, which are not at this time? What, if any, illegal drugs do you think should be legalized and why?

(11) If steroids make you stronger and faster, explain why you think the Marine Corps should or should not allow Marines to use them to get into better shape? What are the dangers of steroid use?

(12) What health risks are associated with [insert illicit drug] use?

(13) Describe the circumstances that you have seen or heard, which involve Marines or Sailors using illegal drugs or misusing prescription drugs. What were some indicators that they were on drugs? What drug did someone take, and what specific symptoms did they exhibit afterwards?

(14) What does the Marine Corps "zero tolerance" policy toward substance misuse mean to you?

(15) Explain why the possession, use, trafficking, or distribution of illegal drugs, or drug paraphernalia is not consistent with our core values of honor, courage, and commitment.

(16) Explain if you think exposure to illicit drug use in television and movies (e.g., Breaking Bad, Weeds, Shameless, Fear and

Loathing in Las Vegas, 21/22 Jump Street, The Wolf of Wall Street, etc.) promotes or deters drug use. How?

(17) What occasions have you seen the most drug use (house parties, music concerts, Mardi Gras, etc.)? What issues result from a Marine getting high at a concert and getting arrested while driving home? What issues will this cause you as that Marine's leader? What administrative or punitive actions could the Marine face as a result of their behavior? What long-term career consequences could the Marine face?

(18) Have you seen anyone misuse drugs? What effect did it have on that person and their family?

(19) How much money do you think it costs to support an illicit drug habit? What else could you be doing with that money?

(20) Knowing the serious effects drugs can have on concentration and reaction/response times, explain why you would or would not trust a Marine or Sailor who you know misuses legal or uses illegal drugs to perform their MOS or billet?

(21) Why do you think that the person in the attention-gainer used drugs? Can you, or anyone you know, relate to that person? Why do you think that the person from the introduction story did not reach-out for help? Explain how a 'zero defect' Marine mentality can deter a Marine from seeking assistance.

(22) Explain whether you think a Marine that is caught using small amounts of an illegal drug for a long period of time can be rehabilitated, or if their use of drugs poses too big a risk to other Marines to retain them in the Corps?

(23) How would you respond to a Marine if they admitted to using drugs once and promised never to do it again? What message would your actions, or non-actions, communicate to other Marines in your unit?

(24) What resources are available to Marines if they are struggling with drug use? What resources can they get off-base? What resources are on base from the base Consolidated Substance Abuse Counseling Center (CSACC) or unit Substance Abuse Control Officer (SACO)?

(25) What are some reasons you think someone with a drug problem would not want to get help?

(26) Do you feel there is a difference between someone who possesses/uses small amounts of drugs for personal use and someone who does not use drugs, but sells large quantities of drugs for profit? Explain if you think the Marine Corps should be more lenient for one or the other.

(27) Whether you are dealing with drug issues yourself or assisting a fellow Marine, which of the Marine Corps Leadership Traits or Principles apply, and how?

5. **REFLECTION**

INSTRUCTOR NOTE

Incorporate reflection questions here, in order to prompt the participants to re-evaluate the issues discussed and topics covered. The more mentally involved each participant is in the active review of the topic, the greater their retention of the subject will be.

Reflection questions should be meaningful in relation to the experiences of the students and should bridge the gap between their discussion involvement and the abstract issues discussed in class. Questions posed during reflection are for personal consideration, as the participants may be uncomfortable openly sharing responses.

Reflection questions can be broken down into the following categories:

1. What? Ask the participants to re-examine in detail the content of the discussion.
2. So, what? What difference did the event make to their perceptions of the issue?
3. Now what? How will the participants think or act in the future as a result of this new perspective?

6. **SUMMARY**

INSTRUCTOR NOTE

Provide overview of main ideas covered. No questions should be asked here. Provide closure that is relevant to MOS, the Marine Corps, or applicable to the participants in some other manner.

INSTRUCTOR REFERENCE MATERIAL

Definition of 'Drug' by MCO 5300.17: Any chemical compound, which may be used on or administered to humans or animals that modify their physiological or psychological behavior or function.

Definition of 'Illegal drug' by MCO 5300.17: Drugs prohibited by law or lawful drugs when obtained or used without proper authority.

Definition of 'Drug abuse' by MCO 5300.17: Misuse or wrongful use of a substance; whether or not used therapeutically, legally, or prescribed by a physician.

For descriptions of most illegal drugs, you can go to this website: <http://www.drugabuse.gov/drugs-abuse>

Zero Tolerance Policy by MCO 5300.17: The distribution, possession, use, trafficking or distribution of illegal drugs or drug paraphernalia is contrary to the effective performance of Marines and to the Marine Corps mission, and will not be tolerated.

Suggested Resources:

- Your Chain of Command
- Your unit Substance Abuse Control Officer (SACO) [Get the name and contact information for your unit prior to discussion]
- CSACC [provide the participants with a location and phone number for the base CSACC]
- Military OneSource [<http://www.militaryonesource.com/>]
For Immediate Help 24/7, Phone 1-800-342-9647
- Marine Corps Community Services (MCCS) Substance Abuse Program [<http://www.usmc-mccs.org/subabuse/?sid=fl>]

Guidance:

- Marine Administrative Message 520/01: Substance Abuse Prevention
- Operational Navy Instruction 5350.7: Drug and Alcohol Abuse Program Management for Office of Chief of Naval Operations (CNO) and CNO (OP-09B) Claimancy
- Secretary of the Navy Instruction 5300.28_: Military Substance Abuse Prevention and Control
- Marine Corps Order P1900.16_: Marine Corps Separation Manual
- Marine Corps Order 5300.17: Marine Corps Substance Abuse Program
- Marine Corps Warfighting Publication 6-11, *Leading Marines*
- National Institute on Drug Abuse [<http://www.drugabuse.gov/drugs-abuse>]