

# S.A.F.E. HANDOUT

The purpose of this Handout is to provide a ready reference for information regarding substance abuse in the Coast Guard. This hand out is not intended to replace Commandant Instructions. Before taking any action, contact your unit Collateral Duty Addictions Representative (CDAR) and refer to the applicable Instruction.

## REFERENCES

- A. COMDTINST M1000.6(series) USCG Personnel Manual, Chapter 20
- B. COMDTINST M6200.1(series) USCG Health Promotions Manual, Chapter 2

## Policy

**Substance and alcohol abuse undermine morale, mission performance, safety, and health. They will not be tolerated within the Coast Guard. Thus, drug and alcohol screening is mandated by law, (10 USC 1090), to identify, treat, and rehabilitate members of the Armed Forces who are dependent on drugs or alcohol. Furthermore, the possession, use, or distribution of a controlled substance as defined in the Uniform Code of Military Justice (UCMJ), Article 112a, and (10 USC 912a), constitutes a serious breach of discipline. Effective leadership at all levels is necessary to curb substance and alcohol abuse in the Coast Guard. Each command must be prepared to identify and eliminate substance and alcohol abuse.**

**Objectives** The objectives of the substance and alcohol abuse prevention programs are to:

1. Reduce the incidence of substance and alcohol abuse by Coast Guard members;
2. Detect and separate from the Coast Guard those members who abuse, traffic in, or unlawfully possess drugs; and
3. Facilitate the identification, treatment, and rehabilitation of members who are found to be chemically dependent on drugs or alcohol prior to discharge from the Coast Guard.

All officers and enlisted members should promote responsible attitudes toward the use of alcoholic beverages, both on and off Coast Guard units. Coast Guard members are expected not only to comply with the law and not use illegal drugs, but also, as members of a law enforcement agency, to maintain a life-style which neither condones **substance** abuse by others nor exposes the service member to accidental intake of illegal drugs

<p><b>Alcohol Incident</b></p>	<p>Any behavior, in which alcohol is determined by the Commanding Officer to be a significant or causative factor, that results in the member's loss of ability to perform assigned duties, brings discredit upon the Uniformed Services, or is a violation of the Uniform Code of Military Justice, Federal, State, or local laws. The member need not be found guilty at court-martial, in a civilian court, or be awarded non-judicial punishment for the behavior to be considered an alcohol incident. <b>THE MEMBER MUST ACTUALLY CONSUME ALCOHOL FOR AN ALCOHOL INCIDENT TO HAVE OCCURRED.</b></p>
<p><b>Alcohol Related Situation</b></p>	<p>An alcohol related situation is defined as any situation where alcohol was involved or present, but was not considered a causative factor for a member's undesirable behavior or performance. A member does not have to consume alcohol to meet this criterion, purchasing alcohol for a minor does qualify. Commands shall not use the term "alcohol related situation" when the behavior in question clearly meets the criteria of an alcohol incident</p>
<p><b>Pre-Existing Condition</b></p>	<p>Members who are diagnosed with alcohol abuse or alcohol dependence within 180 days of enlistment are not physically qualified for enlistment (CG MEDMAN 3-D.35). CO/OinC will process them for discharge</p>
<p><b>Refusal of Treatment</b></p>	<p>Members refusing treatment deemed necessary will be processed for separation IAW PERSMAN 20-B-2.k.</p>
<p><b>E-2 Over Two</b></p>	<p>Members who have not advanced beyond paygrade E-2 with over two years of service will normally be processed for discharge following ONE Alcohol Incident.</p>
<p><b>Family Advocacy Program</b></p>	<p>Members involved in family violence incidents, where alcohol or drug use is suspected, will be referred for an alcohol/drug screening</p>

<p><b>Underage Consumption of Alcohol</b></p>	<p>Underage drinking is considered an alcohol incident. A member who receives an alcohol incident solely for underage drinking and did not use or abuse alcohol to such an extent that he/she was unable to perform prescribed duties or brought discredit upon the Uniformed Services may, after 3 years, predicated on positive performance, request via the chain of command that Commander (CGPC) remove the alcohol incident from his/her PDR. Removal requires that the member has had no further alcohol incidents in that 3-year period</p>
<p><b>First Alcohol Incident</b></p>	<p>The first time a member is involved in an alcohol incident, the Commanding Officer shall ensure that;</p> <ol style="list-style-type: none"> <li>1. The member is counseled on Coast Guard policy on alcohol abuse.</li> <li>2. Counseling is recorded on a CG-3307 entry in the member's PDR For officers, the record of counseling shall be by letter</li> </ol> <p><b>Any member who has been involved in an alcohol incident or has shown signs of alcohol abuse shall be referred for an alcohol/drug screening in accordance with the procedures outlined in the Health Promotions Manual, COMDTINST M6200.1 (series), Ch 2</b></p>
<p><b>Second Alcohol Incident</b></p>	<p>Members involved in a second alcohol incident will normally be processed for separation in accordance with REF.A Article 12.B.16. Commanding Officers retain the authority to request retention of those enlisted members who they believe warrant such exception.</p>
<p><b>Third Alcohol Incident</b></p>	<p>Enlisted members involved in a third alcohol incident shall be processed for separation from the Service</p>
<p><b>Self-Referral to Alcohol Treatment</b></p>	<p>Self-referral to alcohol treatment, by itself, is not considered an alcohol incident. Members who self-refer for alcohol abuse, without further incident, may request removal of the screening letter and treatment plan from his or her Personnel Data Record after successfully completing the prescribed aftercare. A permanent record of the screening and treatment will be kept in the member's Health Record in accordance with Chap 2, Health Promotions Manual, COMDTINST M6200.1 (series).</p>

<b>Treatment</b>	<p>Identifying alcohol abuse and responding to conduct or performance problems related to alcohol use are the command's responsibility. .          Treatment of alcohol abuse or dependency is a medical responsibility. Commanding officers shall seek appropriate treatment for members who have abused alcohol or have been diagnosed as alcohol dependent. Members with alcohol abuse diagnosis shall not have their scheduled separation delayed for the sole purpose of completing alcohol treatment.</p>
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<b>Unsuccessful Treatment</b>	<p>Members refusing to undergo prescribed substance abuse treatment deemed necessary by competent medical authority, failing to complete this treatment, or violating an alcohol rehabilitation aftercare plan are normally processed for separation</p>
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<b>Aftercare and Aftercare Requirements</b>	<p>The aftercare program is an essential part of the rehabilitation process. Members returning from inpatient or outpatient treatment shall be provided a written aftercare plan          For dependent members this plan shall be individually tailored to the member's needs and <b>must include</b>, but is not limited to:</p> <ol style="list-style-type: none"> <li>1. Abstinence from alcohol for the rest of their career. This is a requirement for alcohol dependent members who desire continued service;</li> <li>2. Contact with the CDAR on a weekly basis for 12 months</li> <li>3. Participation in Alcoholics Anonymous or a MLC (kma) approved support group, at least twice weekly (which may be increased, if required) for 12 months if operations permit</li> </ol> <p>Members who successfully complete an outpatient alcohol abuse treatment program who are not diagnosed as alcohol dependent are considered to have completed the necessary requirements for alcohol abuse treatment. (after the initial 90 days post-treatment). To assist these members in integrating the new skills acquired in treatment, their support plan should include:</p> <ol style="list-style-type: none"> <li>1. Abstain from using alcoholic beverages for the first 90 days;</li> <li>2. Meet with the CDAR on a weekly basis for 90 days;</li> <li>3. Participate in a twelve step support program at least twice weekly, if operations permit, for 90 days</li> </ol>
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<p><b>Driving Under the Influence</b></p>	<p>Driving privileges on Coast Guard installations are subject to suspension or restriction when a member is charged with or convicted of driving under the influence of intoxicants (DUI). Commands shall restrict a member's driving privileges aboard Coast Guard installations for a period of 1 (one) year after any of the following:</p> <ol style="list-style-type: none"> <li>1. A refusal to submit to a lawfully requested BAC test,</li> <li>2. A civil or military conviction, nonjudicial punishment, or civil revocation or suspension of driving privileges for DUI</li> <li>3. An apprehension based upon a BAC test whose level meets or exceeds 0.08%,</li> </ol> <p>When restrictions are imposed, all other Armed Forces facilities in the local area shall be notified of the suspension. When a Coast Guard member is transferred to a new duty station, the Commanding Officer shall notify the new Commanding Officer of the restriction. Members involved in a DUI shall be sent for an alcohol assessment screening.</p>
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<p><b>Performance Evaluations:</b></p>	<p>A special Enlisted Performance Evaluation to reflect a civil conviction, a military conviction, or the award of non-judicial punishment for occurrences of DUI is required for enlisted members. Alcohol incidents must also be documented in the member's PDR Officer. Evaluation Reports should reflect occurrences of DUI. Alcohol incidents involving officers shall be documented by letter, with a copy to Commandant (CGPC-opm).</p>
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<p><b>Drug Incident</b></p>	<p>Intentional abuse, wrongful possession of, trafficking in drugs or use of a drug or substance for other than its intended legal use. The member need not be found guilty at court-martial, in a civilian court, or be awarded NJP for the conduct to be considered a drug incident. If the conduct occurs without the member's knowledge, awareness, or reasonable suspicion or is medically authorized, it does not constitute a drug incident</p>
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<p><b>Drug Abuse Paraphernalia</b></p>	<p>Equipment, products, and materials of any kind that are used for trafficking, supplying, injecting, ingesting, inhaling, or otherwise introducing into the human body any drug or substance in order to abuse that drug or substance</p>
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<b>Urinalysis</b>	<p>Means to deter and detect drug abuse and may be conducted under the following circumstances.</p> <ol style="list-style-type: none"> <li>1. Administrative Inspections</li> <li>2. Voluntarily consents</li> <li>3. Probable Cause.</li> <li>4. Valid Medical Purpose</li> <li>5. Evaluation Testing.</li> <li>6. Competence-for-Duty Tests</li> <li>7. After Mishaps</li> <li>8. Reasonable Suspicion.</li> </ol> <p>For further information concerning the urinalysis program, consult COMDTINST M1000.6(series) USCG Personnel Manual, Chapter 20.C</p>
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<p><b>Indicators of Abuse</b></p> <p>Personality change when drinking</p> <p>Memory lapses</p> <p>Problems at home, at work or socially due to drinking</p> <p>Covering up drinking</p> <p>Increased tolerance</p> <p>Mistakes or accidents due to drinking</p> <p>Losing time from duties</p> <p>Angry and defensive about drinking</p> <p><b>When you KNOW there is a problem</b></p>
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Substance Abuse Program Administrator	202-267-6658
MLC Pacific Substance Abuse Program Representative	510-437-3959
MLC Atlantic Substance Abuse Program Representative	757-628-4370
Substance Abuse Prevention Team Pacific	707-765-7324
Substance Abuse Prevention Team Atlantic	757 856-2087
Substance Abuse Prevention Team Pacific Web Site	<a href="http://cgweb.tcpet.uscg.mil/saptp/index.htm">http://cgweb.tcpet.uscg.mil/saptp/index.htm</a>
Substance Abuse Prevention Team Atlantic Web Site	<a href="http://www.uscg.mil/tcyorktown/sapta/index.htm">http://www.uscg.mil/tcyorktown/sapta/index.htm</a>