

DRUG

Abuse



JUNEAU, ALASKA

Alaska State Legislature

Senate

May 20, 1975

J.R.

Drug Abuse 8.3

Mrs. Mary Beth Hilburn, Coordinator
State Office of Drug Abuse
Department of Health & Social Services
Pouch H
Juneau, Alaska 99801

Dear Mrs. Hilburn:

I am enclosing a resolution from the Bethel Service Unit Health Board regarding the Bethel Rap Center.

I would appreciate it if you would contact Alex Nick directly and explain the present situation and what solutions could be found to enable the center to continue its drug program.

Thank you for your assistance.

Sincerely,

George Hohman
State Senator

ld

May 17, 1975

Mr. Alex Nick, President
Bethel Service Unit Native Health Board
Box 287
Bethel, Alaska 99559

Dear Alex:

Thank you for sending me a copy of the Board's resolution regarding funding for the Bethel Rap Center.

I want to see funding for the Rap Center continued and will contact the appropriate officials and make our wishes known. I will request that they respond directly to you and provide me with a copy of their correspondence.

If I can be of further assistance, please do not hesitate to contact me.

Sincerely,

George Hohman
State Senator

GH:pt

Alaska Family House

A THERAPEUTIC COMMUNITY

2825 WEST 42nd PL. ANCHORAGE, ALASKA 99503
(907) 279-5502 OR 279-5503

8.3

February 15, 1975

George Hohman
Pouch V
Juneau, Alaska 99801

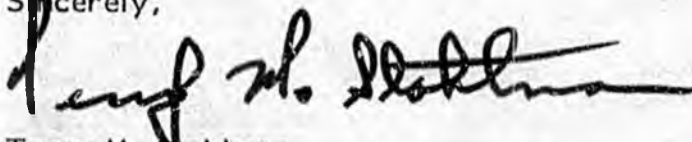
Dear Mr. Hohman:

This correspondence is to inform you of the annual Alaska Family House Telethon which begins February 25, 1975. The telethon will be broadcast live over KIMO-TV for five consecutive nights. We at this time invite your participation. You can participate in this community endeavor by appearing with us as we broadcast or by sending a letter or telegram which will be read by one of our civic leaders in the community. The Saturday night broadcast is being reserved for legislators who might be in town that evening.

Enclosed please find correspondence relating to this unique program endeavor. Alaska Family House is at all times available to answer any questions you may have in our area of knowledge in order to help you with the legislative process you are struggling with.

If I can be of any further assistance in regards to this matter, please feel free to contact me.

Sincerely,



Terry M. Stahlman
Director
Alaska Family House

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Pres. & Treas.
Dorothy M. Weniger
Executive Vice Pres.
Teresa Stahlman
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E. O. Hanson, N. E. of C.
Peggy Colletta

A LOOK AT FAMILY HOUSE

For Terry Stahlman, a former heroin addict, himself, fighting the need for another hit is a full-time job of self-understanding.

As Director of Alaska Family House, Stahlman is teaching, pressuring, cajoling and shaming many others to do the same.

That is what Family House is all about. The facility in the final analysis, is an institution that makes responsible citizens out of heroin addicts by treating addiction as a symptom of deeper personality problems.

To look at Family House's residents, which include four children, one would not think they are what Stahlman calls "dope fiends". Yet they all were convicted (except the children) of crimes that grew out of their addiction.

All the residents look as though they're well on the way to success in giving up heroin and can make it on the rolls of Family House's success stories.

Of all the addicts who have graduated from the Seattle house's two-year program, none has returned to heroin use.

"You come to Family House when you hit bottom", Stahlman said.

And you hit bottom as an addict, he said, "when you get tired of the repercussions of doing dope". In his case, the repercussions included the need to steal to feed his habit. He was doing time on a felony conviction when he sought out Seattle's Family House.

The addicts in the Anchorage facility all are there for the same reason: They've hit bottom and were assigned to the house in lieu of a prison term.

"We've been able to operate", Stahlman said, "only because of the progressive Alaska corrections system under Charles Adams".

When an addict is accepted at Family House, he literally becomes a part of the addict-treating-addict facility. In his first year in the program, the rules are stringent.

No television, books, newspapers, radio, games, or other diversions are allowed. Two rules apply all the time--no physical violence and no chemicals.

"We're treating the addict's behavior--we want him to change", said Stahlman. For that reason, the addict must concentrate all his waking hours in relating to himself as a person and to others as people.

It's a hard road to navigate. But it's needed, Stahlman said, because of the nature of most addicts.

Early in their lives, he pointed out, they probably were rejected as they tried to accomplish goals which society approved. After repeated failure, "you say the hell with it--you don't even try to climb the ladder of success anymore".

Instead, according to Stahlman, the potential addict turns to another ladder, one that leads to dope addiction and crime. His peers in this world reinforce his ego with every increasing dosage of dope or every daring robbery or theft.

The dope at first numbs feelings of rejection and visions of reality, but soon is needed just to stay physiologically normal. And the addict, by now, Stahlman said, probably steals up to \$1,000 in goods a day to feed his \$300 to \$500 daily heroin habit: "The fence doesn't give you the retail value of the goods you steal".

Soon, the dope is no longer worth the repercussions, Stahlman said, and that's where Family House begins.

The house starts the addict at the bottom rung of the socially-acceptable ladder.

An addict never experienced things that most people take for granted, Stahlman said. Like a family Christmas around a tree. Or changing an infant's diapers. Or cooking a balanced dinner. Or skiing, skating, football, basketball and baseball.

They began climbing the other ladder too soon to learn these things, Stahlman said, "and at first we treat them like children".

Family House's residents all have their assigned chores and the ladder to responsibility may start with the simple task of watering the plants daily.

The daily chores fall into departments and, as the addict learns what he never did before, he advances to department head or perhaps even the house's assistant director. His responsibilities are pyramided until he masters them and relates to the other residents.

Through it all, he is given positive reinforcement if his behavior is responsible.

If his behavior is irresponsible or antisocial, he is admonished, ridiculed, or penalized. Nevertheless, he is told he's liked as a person--it's his behavior that's wanting.

"The addict is sensitive and easily hurt", Stahlman said, and the key to "curing" him is showing him the way to cope with others, with setbacks and with his behavior. He is taught that he doesn't need dope as an escape.

Family House relies heavily on intensive group therapy sessions to move the addicts up their individual ladders. And during each session, the addict knows that everyone there has had the same experiences as he.

ALASKA FAMILY HOUSE

PROGRAM SUMMARY

The Alaska Family House will provide an extensive fifteen month to two year treatment program for drug abusers. The individual will "grow up" in a family environment, stressing individual responsibility and mutual caring. Residents will be men and women ages 16 and over. The majority will formally have been injectable drug users, (with a history of institutionalization), referred through the Criminal Justice System. Individuals will begin as residents in a highly structured treatment facility doing menial tasks, and work to responsible positions as part of resident staff. In the second year (the re-entry phase of the program, while residing in a less structured re-entry living situation), he will perform administrative duties for the Family House, and act as staff for a community project. Since the experience the individual acquires during his rehabilitation will be excellent training for low profile positions in the helping fields, the Alaska Family House will serve as a combination treatment/training program.

Services of the first year residential treatment section are:

- 1) Intake screening;
- 2) Structured therapeutic community having a family environment with 24 hour supervision including board, room, clothing, and sundries provided;
- 3) Supervised work positions of gradually increasing responsibility within the therapeutic community
- 4) Traditional therapeutic community activities:
 - a) "Morning Meeting" each day
 - b) 5 seminars per week (to improve intellectual and verbal abilities);
- 5) Formalized techniques of behavior confrontation;
- 6) Minimum of four (3 hour) group therapy sessions per week, plus additional specialized sessions for:
 - a) women
 - b) couples
 - c) parent-children
 - d) "peers" (individuals at approximately the same days of progress in the program);
- 7) Directed dialogues for improvement of inter-personal relationships (as necessary);
- 8) Bi-monthly marathon therapy sessions;
- 9) Individual counseling (informal);

- 10) Outside family counseling;
- 11) Developmental leisure (cultural and recreational activities aimed at developing constructive options for pleasurable experience), including retreats;
- 12) Instruction and training via work positions in: office procedures, administration of facility, group structure and leadership, record keeping;
- 13) Development of a community re-entry plan .

*NOTE: The Second Year Re-entry phase will not be implemented during the duration of this contract.

Dr. Abuse

Alaska Family House

A THERAPEUTIC COMMUNITY

2825 WEST 42nd PL. ANCHORAGE, ALASKA 99503
(907) 279-5502 OR 279-5503

March 26, 1975

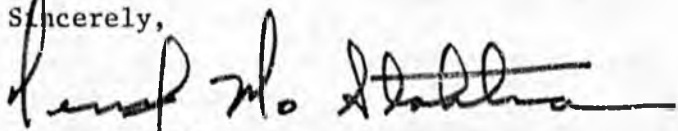
Sen. George Hohman
Pouch V
Juneau, Alaska 99801

Dear Sen. Hohman:

Enclosed please find a copy of some recent press relating to the Alaska Family House and its recent educational trip to view the legislative process, etc. in Juneau. At this time we wish to extend our sincere appreciation to you for your help and warm reception. Alaska Family House is proud of what you are doing to make this state a good place in which to live.

If I can be of any further assistance in regards to this, or any other matter, please feel free to contact me by phone (279-5502) or by mail.

Sincerely,



Terry M. Stahlman
Director
Alaska Family House

ADVISORS

Steve Agbaba
Rep. Helen Beirne
Bill Bittner, *Atty.*
Harry Branson, *Atty.*
Peggy Colletta
Rudy Ebenbeck
David A. Rogers

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Teresa J. Stahlman
Vice-Pres. & Sec.

ADVISORS

Katherine Fanning
David Froula, *C.P.A.*
William D. Gibson
E. O. Hansen, *N. B. of C.*
Jack R. Heesch
Jamie Love
Capt. George Weaver, *A.P.D.*

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

329 Barrow St., Anchorage, Alaska

~~DIVISION OF CORRECTIONS~~
DRUG ABUSE OFFICE

JAY S. HAMMOND, Governor

*Drug Abuse
Bethel*

February 24, 1975

Mr. Michael G. Moore, Technical Assistant
ANCADA
528 W. 5th Avenue
Anchorage, Alaska 99501

Dear Mr. Moore:

A memo by you regarding the Bethel Rap Center Program and Evaluation was brought to our attention today. In a phone conversation with Mr. George Barrail, Director of ANCADA, I learned that this memo represents only your own position and not that of your Agency.

Since much of the memo appears to differ from the information we obtained from the Bethel Rap Center, it seems appropriate that we clarify the following issues with you. You stated that:

1. "There was exactly one (1) staff member available to fill out the forms."

Though the Bethel Rap Center drug component chose to budget only one paid staff member, Mr. Tom Anderson, Executive Director; Mr. Louey Andrews, Contract Administrator; and Mrs. Ruth Jacobs, Secretary; were all also heavily involved in preparing forms and reports for the program.

2. "The training program for filling out the CODAP forms was apparently unsuccessful as Ms. Shortell returned forms from locations other than Bethel."

It is our appraisal that training workshop was successful. Though some forms were returned to other programs initially, all programs but Bethel's subsequently mastered the CODAP forms and have submitted them in an appropriate and timely fashion.

3. "The objections to the program appear to be all bureaucratic; that is, the Bethel program didn't correspond to what Ms. Shortell believed it should be. When she stated there was no counseling here, that apparently meant that no formal arrangement to see client on a regular basis was set up. She did not question any of the clients or complaints, or rather, didn't report it if she did.

Our areas of concern for the Bethel program were manifold and far exceeded bureaucratic considerations. The submitted document on Bethel Rap Center prepared for the Governor's Advisory Board on Drugs is available upon request. It is also of note that program expectations were the outgrowth of contractual stipulations.

including areas of conformity, all drug treatment programs have contracted for and measureable objectives the Bethel Rap Center themselves developed. Further, at no point in the evaluation report was it stated that "there was no counseling here". It was suggested on Pages Eleven (11) and Twelve (12) that a counseling program per se was not evident. That statement was premised on a commonly accepted concept of treatment programs and we would ask that you re-read that section for the purposes of clarification. Finally, a real effort was made to elicit client comments. More information on that issue may be found under point eight (8).

4. "Ms. Shortell was repeatedly asked by Mr. Fred Pete and Mr. Tom Anderson to show him how to fill out a CODAP form. According to Fred she did not do this, but rather kept telling him which items were incorrect but not how they should be corrected. She may have thought she did this, but communication was apparently lacking."

Mr. Pete attended a CODAP workshop on September 16, that was some six (6) to eight (8) hours long for the express purpose of learning how to complete CODAP forms. Subsequent to that session, Louey Andrew was in our offices and at least an additional two (2) hours was spent clarifying the forms with him. During the program visit November 25, 26, 27, 1974 several hours were spent with Mr. Pete and Mr. Andrew reiterating the method in which CODAP forms were to be completed. This process was repeated with Mr. Anderson during the January 2, 1975 visit. Unquestionably, Bethel Rap Center has had difficulty with CODAP forms, but they were instructed in how to complete these forms. Additional time was devoted to pointing out which items needed correction and how they were to be corrected.

5. "The lack of need cited in Ms. Shortell's report came from conversation with 'experts and professionals'. Coming out of the cafeteria at the dormitory for boarding school students here, I saw a reefer being passed. I wonder if Ms. Shortell bothered to look. I also visited the Ice Cream Parlor in Bethel about 2:30 a.m., February 8. As a former user and as one who wandered in the circles of drug users for several years, I was shocked to see symptoms which could and probably did involve use of various drugs and poly drug abuse. My shock stemmed from the severity and universality of the symptoms. I doubt if the social worker or the psychiatrist from PHS or Gail Shortell bothered to conduct this sort of investigation."

The evaluation report on Bethel did not suggest categorically that no need exists in Bethel for a drug treatment program. Instead it was stated that it was our feeling the need should be re-evaluated. It is not the task of SODA to establish this need but that of the Bethel community. The evaluation reported how certain agencies in Bethel saw the need. We would welcome funding proposals from Bethel, either from Bethel Rap Center when the areas of deficiency are corrected or from other interested parties.

6. "I discussed certain sections of the evaluation with the Executive Director of the Greater Bethel Council on Alcoholism. I learned that the passage, 'Despite Tom's protests, Fred Pete had gone to Denver as a representative of the Bethel School Board to observe the open classroom concept and then to San Francisco to attend the National Congress on Drug and Alcohol Abuse during December', could at best be termed a half truth, but is more correctly called

a baldfaced lie. Tom stated that he protested the objections voiced by Gail and Mary Beth and was very proud that Fred could go. I also learned that the passage, 'Tom further explained that he had considered terminating Fred,....' resulted from Tom's answer to Gail's direct question as to whether he had considered terminating Fred. Tom's reply was that he'd several times considered terminating everyone including himself. Incidentally, Fred told me that Gail and Mary Beth were supposed to be attending the National Congress, however, when Fred sought their advice on which workshops to attend he was unable to locate them."

It should be noted in direct testimony to the Governor's Advisory Board on Drugs in February in reference to the document prepared concerning Bethel Rap Center and the evaluation Mr. Anderson stated, "I think essentially the problems that have been outlined are essentially correct." He did not suggest to us then or since that any statements in the evaluation were incorrect though his comments were solicited. Additionally, we must take issue in the suggestion that the report contained a "baldfaced lie". This puts our integrity in question and suggests that SODA has a vested interest in maligning any of the programs. We are an agency concerned with helping people. It is therefore to our advantage to see to it that programs we fund remain viable. An examination of the number of technical assistance hours spent with the Bethel Rap Center will bear this out.

Mr. Anderson's reply regarding Mr. Pete's possible termination was in reply to a direct question I posed regarding what course of action had Mr. Anderson considered regarding the problems Mr. Pete was having with his position. As stated in the report, Mr. Anderson stated he had considered terminating Mr. Pete but has not because he feels he is a very good counselor, can speak Eskimo, and relates so well to the clients.

Mrs. Hilburn posted an information card for Mr. Pete on the "Message Exchange Board" at the National Congress of Alcohol and Drug Abuse. The card informed him of her presence at the meeting, her hotel, and her phone number. Three other participants on the Congress were able to contact Mrs. Hilburn via this system. It is unfortunate that Mr. Pete was unable to locate her.

8. "It's interesting to note that Nome's program was given a good rating, yet we're aware of a number of consumer complaints which SODA may or may not be aware of. The flimsy excuse that Fred's car broke down is indicative of the level of interest that is apparently exercised in seeing clients and looking at the issue of whether or not their needs are being met in evaluating drug programs."

Unquestionably, interviewing clients is a crucial aspect of evaluating a program's effectiveness and a component that is generally included in each evaluation this office has done. On our November visit with the Rap Center, we specifically and repeatedly requested that Mr. Pete set up at least one such interview. A series of replies: it would be "difficult", his clients would be "too uncomfortable" and unwilling to talk were offered and we were effectively prevented from completing this aspect of evaluation.

During the January 2, 1975 visit this request was made again. It was granted with the understanding that Mr. Pete would accompany me. When his car failed it took him some four hours to put it in running order.

Though we considered suggesting taking a cab to the interviews, the repair of the car seemed so imminent that we waited. As you well realize, simple matters such as the operation of a car become real issues when the temperature drops to forty (40) below. It is regrettable that our time was limited and precluded rescheduling the appointments. The factors were realities and do not reflect a low level of interest in client assessment.

"Also, I wonder why the only programs given really poor evaluations were native - administered?"

Other drug-treatment programs non-native administered have received critical evaluations. To suggest that only native programs receive critical evaluations is not an accurate statement. More correct might be that we feel evaluations provide an excellent growth opportunity for programs. Evaluations are designed to help programs improve their programming and service delivery to clients. Recommendations and technical assistance are always an integral part of the process.

It is the hope of SODA that the foregoing has been of interest to you and enable you to broaden your knowledge of the Bethel Rap Center. If in the future you should visit with other of our treatment programs, again in the capacity of a private citizen or on the behalf of ANCODA, we would welcome your comments.

Sincerely,



Gail Shortell

cp

cc: Senator Ted Stevens
Lt. Governor Thomas
State Senator George Holman ✓
Martin Moore
Margaret Wilmore
Dr. Nightingale
Dave Vallo
Herb Powless
Steve Labuff
Rick Weber
Dennis Tiepleman
Tom Anderson
Fred Pete
Gordon Jackson
Carl Jack
Charles Oxereok
George Barrail
Commissioner of Health & Social Services
Members of the ANCA/DA Board
Mary Beth Hilburn

STATE OF ALASKA
DEPT. OF HEALTH AND SOCIAL SERVICES
OFFICE OF THE COMMISSIONER

Rachel + D.A.
JAY S. HAMMOND, Governor

Pouch H01, Juneau 99811
~~FEDERAL BUREAU OF INVESTIGATION~~

March 20, 1975

Mr. Tom Anderson
Executive Director
Greater Bethel Council on Alcoholism, Inc.
P. O. Box 190
Bethel, Alaska 99559

Dear Mr. Anderson:

At the January 31, February 1 and 2, 1975 Governor's Advisory Board on Drug Abuse meeting, it was recommended to curtail funding of the Bethel Rap Center. The reasons are stipulated in Document #232, which explains non-compliance of program objectives and lack of compliance with recommendations made by on-site evaluators.

As of this date the Bethel Rap Center has received \$5,602.87 for services provided in the months of August, September, and October 1974. You are requested to submit billings to the State Office of Drug Abuse within ten (10) days of receipt of this letter for the months of July, November, December, 1974, January 1975, and expenses incurred in February 1975.

Sincerely yours,

Francis S.L. Williamson
Francis S.L. Williamson
Commissioner

Enclosure

April 3, 1975

Page 2

recommendations indicated on Document #232.

I take particular note that a position for Mr. Pete be found as this action puts him out of a job.

Also as there is no date on Document #232, recommendation #3 is not clear.

As this is the first correspondence I have had from you about this matter, and no specifics are called for, I shall comply as best as possible to your request for billings.

If you are willing to pay our program costs for the month of July 1974 this would be a most gracious action on your part, as we had no Contract in force for that month. Funds for the previous year were totally expended by June 30, 1974 and the effective date of the present Contract is 1 Aug 1974.

But I guess all of us can make mistakes when we try to interpret Contracts.

It is a happy coincidence that a Fiscal Auditor from Mrs. Blanchards Office was in my office when your letter arrived. He will insure, I'm sure, that the billings I will send to you are substantiated.

Till I hear from you.

Cordinally,



Tom Anderson
Executive Director
TA:rmj

c.c. Senator George Hohman

P.S. Good Luck on your confirmation.

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Bethel
+ D A

GREATER BETHEL COUNCIL ON ALCOHOLISM, INC.
P.O. Box 190
Bethel, Alaska 99559

PH: (907)543-2116

April 3, 1975

Mr. Francis S.L. Williamson
Commissioner
Department of Health & Social Services
Office of the Commissioner
Pouch HO1
Juneau, Alaska 99811

Dear Mr. Williamson:

We have received your letter as of April 3, 1975.

Although the recommendations of the Governor's Advisory Board on Drug Abuse have been noted I'm sure that the intention of this Board was not to deny service to the people of Bethel because of misunderstandings and shortcomings on the part of the staff of two organizations who are, in part at least, dedicated to the alleviation of problems created by the abuse of Drugs.

Nowhere in any of the Documents has it ever been indicated that the services have been denied or not available to clients. What we are trying to do is serve clients and I'm sure it's much easier to sit back and criticize an operation that one knows nothing about, that to really find out about it. If ever these criticisms had some constructive merit they would be greatly appreciated.

In the final analysis, whether or not a program exists in Bethel to serve the AVCP Region is up to you. The idea of closing a program is something that I would feel some trepidation about, without insuring that some other provider of the service in question was available. If you were to look into the past history of the Drug Abuse Board and the Office of the Commissioner, all of the Board's recommendations were not followed. The most notable of these was the Langdon Clinic decision.

I had hoped to see you about this matter during your planned trip to Bethel, as you had indicated your intentions to visit Bethel in the very near future. I would hope that if the intent of your letter is to terminate our contractual agreement with the State, that you also comply with the Contract and indicate what you are doing through the language of the Contract.

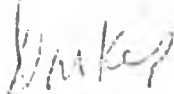
I suppose what I am asking for is some reference to this Contract in your letter of termination or suspension, whatever the case may be. In any case, I can find no provision in this Contract to cancel it on a retroactive basis. I also hope that your actions also will include the full

In administering this program, the state has no other choice but to follow the policies as established by the BIA. The state cannot modify a Federal policy by either regulation or law. Therefore, even if the state is fully agreed with the position you and Ms. Peters have taken, it could not correct or satisfy the adverse action alleged by Ms. Peters.

Several discussions have been held with the BIA since the policy modification was distributed on December 3, 1972. From these discussions, it is our understanding that the BIA does provide for certain specific needs of children in boarding schools in cases of extreme hardship. For details of what they will provide and to whom, I would suggest that you contact the BIA in Bethel.


I hope the above information is of some help to you in considering the States position on the BIA-Division of Family and Children Services contract. I will be happy to provide more information if it is desired.

Sincerely,



Don Kemp
Assistant Administrator
Assistance Payments

Approved by:


Freda H. Borchick, Acting Director

DK/div

cc: RAEM-NRO
Bethel District Office
BIA Social Services Bureau

Box 521
Cordova, Alaska 99574
January 31, 1975

2-17
file - Drugs/Marijuana
George H. Hohman
Box 100
Bethel, Alaska 99559

Dear Senator Hohman:

I believe you find the enclosed self-explanatory. You may well have already seen the article or one like it in another publication.

It does bring to mind one very important point, however, in that as you may recall, when the "Marijuana Controversy" began in the mid 60's many a scientist, medical doctor, psychiatrist and psychologist repeatedly stated "it will take twenty (20) years of usage before we will know what effects of "Pot" really are.

For the Public Servant who tends to view with suspicion all articles published by this particular periodical, I am sure more direct contact with the author would prove enlightening.

This article is particularly gratifying to me since I vigorously opposed the prior stance of Dr. Powelson when I was State Coordinator for Drug Abuse Education working out of Governor Miller's office.

It is extremely unfortunate that we constantly find ourselves placed in a position where we seemingly can only compare the merit or demerit of one drug as opposed to another. However, as long as certain rationalizations are expounded on at great length by a small vocal group of people wishing to "justify their personal actions", it therefore behooves those who know that "they aren't really telling it like it is" to make every attempt to make our unsuspecting and easily swayed youth and their less knowledgable parents at least partially aware of the trap that is being laid for them by other older youths and immature young adults. Unfortunately, all too often this type of action is viewed simply as confrontation.

One day, perhaps, we may actually get around to dealing with the problem. At present to my knowledge, this is not being done anywhere in Alaska. The main reason for this is that there are very few people, in or out of government, who actually understand the problem, and the remainder of those who would appear to be concerned are far more interested, for various and sundry reasons, in treating the symptoms of the problem or, failing in that, to bunglingly attempt to rehabilitate the visible and therefore socially unacceptable end result of the problem.

There is a workable solution to the problem but it is not a "quickie miracle" solution. It will take a lot of hard work for a lot of years. In short, it is the reverse of dependency - it is called building self-confidence, not pragadocio - just self-confidence

If you would tell me, as a lot of self serving bureaucrats have, in order to preserve their position or function, that a lot is and has been accomplished toward the goal of correcting the problem then I would say to you "let the public see the results and take heart".

If you sincerely wish to pursue a solution to the problem, I wish you good luck because in my view human resources are at least as important as are all of our other "natural" resources.

Very truly yours,

James F. Calhoon
James F. Calhoon

8.3

Alaska Native Commission on Alcoholism and Drug Abuse

528 West 5th Avenue, Suite 3
Anchorage, Alaska 99501
Phone (907) 274-7435

February 20, 1975

Office of the Governor
Governor Jay Hammond
State Capitol
3rd Floor, Pouch A
Juneau, Alaska 99801

Dear Governor Hammond:

This letter is an official communication of the Alaska Native Commission on Alcoholism and Drug Abuse. The Commission represents the twelve Native corporations in matters concerning alcoholism and drug abuse statewide as outlined in the state plan.

At various times throughout your campaign you spoke of implementing evaluation processes in alcoholism programs and we agree that in order for state funded programs to deliver services in a responsible manner this must be done. However, it cannot be done on a maintenance level budget which is again proposed for the coming fiscal year. We feel that in order to implement some kind of responsibility within the Office of Alcoholism, various steps need to be accomplished. Among these are the appointment as soon as possible of a coordinator for the State Office of Alcoholism. Also permanent and competent staffing for that office. This is not to say that the previous acting coordinator (Ms. Barbara Miklos) was not a competent administrator. We applaud her efforts as she did the best she could under the circumstances. However, the efforts of one person however competent that person may be is not enough to insure order and responsibility within that office. We believe also the Office of Alcoholism cannot function properly under the Department Of Family And Children Services and should be a department of it's own under the Department Of Health And Social Services.

I believe you have received communication from other programs within the state addressing these same problems and others which we will be speaking on in more detail on the 27th of February. We are scheduled to meet with members of the Health, Education & Social Services Committee on that date and we expect at that time that members of that committee will be aware of the problems as we program people have stated them. We look forward to meeting with either yourself or your representative while we are in Juneau.

Sincerely,



George Barril
Executive Director

GB/dd

cc: Lowell Thomas, Jr., Lt. Governor
Bob Palmer
Clem Tillion
Sue Green
Fred McGinnis
Stan Harris
Ben Iverson
Virginia Blanchard
Mike Bradner
Chancy Croft
John Keating
A. B. Colyar
Ed Stewart
Dennis Tiepelman
Members - Alaska Association of Alcoholism Professionals
Members - Governor's Advisory Board on Alcoholism
Members - Committees H. E. & S. S. House and Senate

8.3

Alaska Native Commission⁽²²⁾ on Alcoholism and Drug Abuse

"Mini-grants Program"

528 W. FIFTH AVENUE, SUITE 9
ANCHORAGE, ALASKA 99501

PHONE: 277-2578

February 13, 1975

TO: Ms. Helena M. Andree, Vice President ANCADA Board

FROM: Michael G. Moore, Technical Assistant *Michael G. Moore*

RE: Visit to Bethel Drug Abuse Program, February 5, 1975

I examined the Bethel Drug Abuse Program as administered by the Greater Bethel Council on Alcoholism February 5, 1975 as well as an "evaluation" of the program by Gail C. Shortell.

There are several facts of which you should be made aware:

1. There was exactly one (1) staff member available to fill out the forms.
2. The training program for filling out the CODAP forms was apparently unsuccessful as Ms. Shortell returned forms from locations other than Bethel.
3. The objections to the program appear to be all bureaucratic; that is, the Bethel program didn't correspond to what Ms. Shortell believed it should be. When she stated there was no counseling here, that apparently meant that no formal arrangement to see a client on a regular basis was set up. She did not question any of the clients for complaints, or rather, didn't report it if she did.
4. Ms. Shortell was repeatedly asked by Mr. Fred Pete and Mr. Tom Anderson to show him how to fill out a CODAP form. According to Fred she did not do this, but rather kept telling him which items were incorrect but not how they should be corrected. She may have thought she did this, but communication was apparently lacking.
5. The lack of need cited in Ms. Shortell's report came from conversation with "experts" and professionals. Coming out of the cafeteria at the dormitory for boarding school students here, I saw a reefer being passed. I wonder if Ms. Shortell bothered to look. I also visited the Ice Cream Parlor in Bethel about 2:30 A.M. February 8. As a former user and as one who wandered in the circles of drug users for several years, I was shocked to see symptoms which could and probably did involve use of various drugs and poly drug abuse. My shock stemmed from the severity and universality of the symptoms. I doubt if the social worker or the psychiatrist from PHS or Gail Shortell bothered to conduct this sort of investigation.

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6. I discussed certain sections of the evaluation with the Executive Director of the Greater Bethel Council on Alcoholism. I learned that the passage, "Despite Tom's protests, Fred Pete had gone to Denver as a representative of the Bethel School Board to observe the open classroom concept and then to San Francisco to attend the National Congress on Drug and Alcohol Abuse during December," could at best be termed a half-truth but is more correctly called a bald-faced lie. Tom stated that he protested the objections voiced by Gail and Mary Beth and was very proud that Fred could go. I also learned that the passage, "Tom further explained that he had considered terminating Fred, ..." resulted from Tom's answer to Gail's direct question as to whether he had considered terminating Fred. Tom's reply was that he'd several times considered terminating everyone including himself. Incidentally, Fred told me that Gail and Mary Beth were supposed to be attending the National Congress; however, when Fred sought their advice on which workshops to attend he was unable to locate them.
6. It's interesting to note that Nome's program was given a good rating, yet we're aware of a number of consumer complaints which SODA may or may not be aware of. The flimsy excuse that Fred's car broke down is indicative of the level of interest that is apparently exercised in seeing clients and looking at the issue of whether or not their needs are being met in evaluating drug programs.

The appearance to me is that the SODA personnel mentioned in this memo are professionals, are aware that they are professionals, and are impressed by the fact that they are professionals. They are unaware of the society in rural areas, ignorant of their lack of awareness, and stubbornly poised on their professional pride to refuse to admit that ignorance and lack of awareness. If this appearance is true the proper adjective to apply is STUPID.

P.S. Gail Shortell can't spell "Ekaiyurvik" even though it's on the front of the rap center in foot-high letters. Also, I wonder why the only programs given really poor evaluations were Native-administered.

MGM:lr

cc: Senator Ted Stevens
Lt. Governor Thomas
State Senator George Holman ✓
Martin Moore
Margaret Wilmore
Dr. Nightingale
Dave Vallo
Herb Powless
Steve LaBuff
Rick Weber
Dennis Tiepleman
Tom Anderson
Fred Pete

Gordon Jackson
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Commissioner of Health & Social Services
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