

SCOMM

#6: 18

ALCOHOL ABUSE AND ALCOHOLISM

Continuing efforts to deal with the impact of alcohol abuse on the quality of life in Alaska resulted, during 1976 and 1977, in a number of approaches and suggestions. A "Governor's Inter-departmental Coordinating Committee on Alcoholism" made its final report to the Governor in January, 1977.

Many of the recommendations were incorporated in an extensive package of bills prepared as a part of the CJPA's Standards and Goals project. This legislation, which emphasized issues of taxation and local control as prevention measures, was not passed by the Tenth Alaska Legislature and is in committee to be heard in the second session.

The CJPA has identified seven areas of immediate concern to the criminal justice system.

1. Establishment of non-medical detox centers

The Uniform Alcoholism Act (which decriminalized public intoxication) was adopted in 1972 without adequate development of facilities to serve as alternatives to jails. The resulting problems were particularly acute in rural areas, where detox and sleep-off facilities were virtually nonexistent. The ninth Alaska legislature passed what was intended as remedial legislation which provided that public inebriates may be taken into protective custody and, as a last resort, held involuntarily for up to twelve hours in a "state or municipal detention facility", i.e. jail.

No data is available concerning the effect of this legislation on jail intake in either urban or rural areas. One innovative application is found in the operating procedures of the North Slope Borough Department of Public Safety, which describes its "Drunk Release Program" as follows:

Operating Procedures Manual Reference: Chan. 214 and 301

A. "Drunk Release Program"

A major part of our crime prevention program is the detention of those persons so intoxicated as to represent a definite threat to themselves and a lesser threat to others. Of the following purposes behind this program, one additional feature will be added:

1. Protection of the person intoxicated
2. Protection of others from intoxicated persons
3. Non-criminal detention, processing and release

The additional feature will be an attempt to reduce "returnees" to this system by making referrals to the Barrow Council on Alcoholism for interviews, counseling and treatment. While it is assumed that no enforcement of this diversion method can be made, there is room for a very light push in the general direction-- that push being in the form of "voluntary referrals" directly from their release. These referrals will be a consistent part of this program.

The method of "voluntary referrals" will be as follows:

- A. At time of release by any officer, the person detained will receive a direct invitation (with officer assistance) to meet with personnel of the Barrow Council on Alcoholism presently located in the Youth Center. They are to be encouraged to go directly from release to BCA for initial intake.
- B. Since there is no legal provision for enforcement of referrals, a strong recommendation by the officer releasing will be encouraged.
- C. An alternative method is to call up the BCA and ask for a staff person to come to the station and make the request and invitation directly to the person released from detention.

The Governor's Inter-departmental Coordinating Committee on Alcoholism made the following recommendations:

- Amend the Uniform Act (AS 47.37) to allow sleep-off facilities to hold "intoxicated persons" and/or "incapacitated persons" for up to 72 hours involuntarily.
- Provide the funds to operate a statewide network of sleep-off facilities...
- Require all sleep-off facilities to employ at least one person with Emergency Medical Training on each shift seven days a week.
- Require an initial medical examination within 24 hours.
- Require hospitals and physicians to admit intoxicated persons to hospitals if they also present other severe complicating medical problems.
- Require sleep-off facilities to conduct an evaluation for the purpose of disposition and referral of the patient prior to his release at the end of 72 hours.

The Committee recommended the establishment of sleep-off centers in Juneau, Ketchikan, Valdez, Yakutat, Wrangell, Petersburg, Seward, Unalaska, Cordova, Kotzebue, Barrow and Kenai. An estimate for establishment of these centers in single or double-wide trailers was \$439,050 in capital expenditures and \$2,193,750 in annual operating expenses (including 117 total staff).

The report also recommended a needs assessment to determine whether sleep-off centers should be established in Dillingham, Galena, Fort Yukon and Glenallen-Copper Center, should funds be available. The report encouraged other communities without jails or sleep-off centers to develop statistics which could be used to determine the need for and probable utilization of sleep-off centers.

At a June, 1977 meeting of the Governor's Advisory Board on Alcoholism, it was decided to establish detox facilities in Kenai, Kotzebue and Juneau, and to expand the existing facility in Bethel.

2. Establishment of alcohol prevention and rehabilitation programs in rural areas

The lack of effective alcoholism treatment programs in rural areas is widely acknowledged. The Alaska Federation of Natives, in their 1976 Resolutions, point out that:

- there are inadequate and inefficient alcoholism treatment centers in rural Alaska
- there are no current alcoholism prevention programs
- there is a lack of emphasis in existing alcoholism, drug abuse and mental health programs specifically relating to the treatment of juveniles
- group homes, receiving homes, and alcoholism treatment facilities are not available for the treatment of non-delinquent youths in most of the regional service centers of Alaska.

Among the AFN recommendations were:

- that the Department of Health and Social Services establish as a top, on-going priority, alcoholism prevention programs for rural Alaska, and that the Department work closely with local communities to determine the kind of treatment facilities needed and the appropriate kind of alcoholism services.
- that the problem of treatment of alcoholism as it relates to juveniles and families in rural Alaska be addressed; that more emphasis be placed on research and treatment of juveniles.

- that group homes, receiving homes and alcoholism treatment facilities be made available on a regionalized basis and that the Legislature make financing available so that small communities can develop programs that will deal with juveniles before these children enter the juvenile justice system, and that they be funded on a regionalized basis (i.e., Nome, Kotzebue, Ft. Yukon, Bethel, Dillingham, Barrow, Kodiak, Yukon Delta, Copper Center and Ketchikan, etc.);

Information provided by the State Office of Alcoholism, the National Council on Alcoholism/Alaska Region and the Alaska Native Commission on Alcohol and Drug Abuse shows that there are "prevention" programs of one type or another in a number of rural areas, and that more are planned in the near future (see Available Systems and Resources for Prevention/Diversion). Thus the AFN statement that "there are no current alcoholism prevention programs" must reflect a sense of frustration with the performance of current programs, or perhaps with the fact that no one, as yet, has actually found an effective way to prevent alcoholism which has universal, or even widespread, application.

The Governor's Interdepartmental Coordinating Committee on Alcoholism noted that nationally some of the most successful residential treatment programs are those that do not use government grants for funding, but which rely primarily on reimbursement for services given. They add:

The size and stability of existing rehabilitation programs in the state are not adequate to meet the needs of this type of service. Patients who can pay and/or who have insurance coverage for this kind of care are typically transported "outside". It would be a functional and economic benefit to the State to have such a facility/program available within Alaska. It would afford existing smaller local programs with an inpatient resource within the State. It would also keep the money paid for treatment within the State.

The Coordinating Committee recommended:

- The State should provide funding for the establishment of a quality, short-term residential, intensive treatment program which is directed primarily toward those rural and urban clients who are covered by public or private insurance or able to pay their own way.
- This facility should be centrally located but not directly adjacent to a large metropolitan area.
- This facility should not exceed 70 beds and should have an average patient stay of 30 days.
- The program should be available to residents from throughout Alaska and serve both urban and rural populations.

The report also recommended establishment and initial operation of a long term domiciliary care and rehabilitation facility for the chronic public inebriate.

- The primary client population for this program should be the court-committed chronic public inebriate and/or those addicted individuals in need of long-term in-residence care who choose to commit themselves voluntarily for a period of 90 days or longer.
- The program should be operated by the State for a period of five years, at the end of which the program should be evaluated to determine whether or not it should be contracted to the private sector.

Realistically, perhaps, Alaska should work to get one stable residential facility in a central location, and then move to establish community-operated residential facilities in the regional service areas.

The Interdepartmental Coordinating Committee on Alcoholism made the following recommendation: "Because of the predominance of alcoholism problems in rural communities, because of the limitation on available resources in rural communities, and because of the importance of skilled help for the alcoholic:

- It is recommended that the primary direction and identity of the Community Mental Health outpatient program be that of an alcoholism treatment service.
- Rural alcoholism, drug abuse, and mental health professionals and paraprofessionals should be cross-trained in all three areas.
- It is our recommendation that rural alcohol, drug abuse, and mental health outpatient services maintain their separate identities and budgets but that they colocate in order to facilitate cooperation in patient care and facilitate cross-training for personnel in all areas.
- Existing local community alcoholism programs should provide information and referral services on an ongoing basis as part of their normal activities.
- Existing local community alcoholism programs should be required to develop formal referral networks with all health, social services, judicial and law enforcement agencies in their local catchment area.

Currently, the strategy of the State Office of Alcoholism is to establish major rehabilitation centers in Fairbanks, Anchorage, and an as yet to be determined site in Southeast. Existing programs in Fairbanks and Anchorage will provide the nucleus for these programs. Programs in other areas will utilize these treatment centers.

A spokesman for the State Office of Alcoholism indicates that most rural areas share a set of social/cultural/economic/political processes which have created conditions leading to high rates of alcoholism but which are not amenable to rehabilitative efforts. The Office recognizes two major areas for prevention efforts as (1) local control and (2) an apparent lack of recreational opportunities, particularly during the winter months.

3. Establishment of screening and treatment programs for alcohol offenders

There are a variety of programs in urban areas in Alaska which presently provide or have the potential to provide alcohol screening treatment services. Presently these programs operate independently and may be duplicative or may leave gaps in services needed in a particular community. Through an LEAA discretionary grant the Criminal Justice Planning Agency has recently funded a TASC (Treatment Alternatives to Street Crime) program for the Anchorage area. One of the major functions of this project is to coordinate the efforts of the many alcohol-related services in the Anchorage area. The State Planning Agency should monitor the project closely to determine if its techniques can be transferred to other communities or regional areas through the use of the State's Technical Assistance Program.

Very little is known about the extent of alcohol screening and treatment programs available in smaller cities and rural areas of Alaska. Existing data does demonstrate the need for these services. According to surveys conducted by the Corrections Task Force for Standards and Goals and the Public Opinion surveys conducted by the Criminal Justice Planning Agency, the problem of alcohol related crime is more severe in rural areas than it is in urban areas. In a survey of police chiefs throughout rural Alaska, the Corrections Task Force found that rural communities attributed from 36% to 98% of all arrests to the problem of alcohol abuse. Victimization rates in rural northwest Alaska were higher than Southeast, Anchorage or Fairbanks. Also, rural respondents in the statewide survey of public opinion felt that alcohol was a basic cause of crime (22% for crimes against people; 13% crimes against property) whereas less than 3% of the respondents from more urban areas surveyed identified alcohol as a basic cause of crime.

The Criminal Justice Planning Agency should compile all data regarding alcohol abuse programs in all regions of the state which may provide screening and/or treatment services to the criminal justice system. The gaps in services should be identified, and a method for coordinating existing services must be established.

4. Development of alcohol abuse curricula

There is general agreement that long-range planning in the area of alcohol abuse must focus on primary prevention and that the schools provide the logical focus for such efforts. At present three approaches are being taken to the development of alcohol abuse curricula, and are at various stages of development.

The core of a kindergarten through 12th grade curriculum has been developed by the National Council on Alcoholism/Alaska Region, and is currently in use on an experimental basis in Kenai and Fort Yukon. The curriculum has also undergone preliminary review in the Anchorage area. The Council estimates that it would take one year of work by an educator (who would consult with students, parents, educators and agency staffs statewide) to complete the curriculum, prior to training teachers to use it.

A sub-committee of the Governor's Interdepartmental Coordinating Committee on Alcoholism recommended the development of an academic curriculum package by the State Department of Education. This is seen as a three-year program with the first year devoted to the initial development of the curriculum and the beginning of teacher training, the second year for field testing and further teacher training, and the final year for duplication of multi-media curriculum packages and on-site regional training. The three-year program would have a price tag of somewhat over \$300,000 and would aim at reaching 52 school districts and 93,000 students in grades K through 12. The curriculum would coordinate other existing programs (including the NCA curriculum described above and a program currently in use in Anchorage, described below).

Wonder Park Elementary School in Anchorage is currently using a curriculum prepared in Washington and which may be made available free of charge by the National Institute of Alcohol Abuse and Alcoholism in the near future. This program, which has been enthusiastically received, is called, "Here's Looking at You" (Teachers Edition) and is now available for \$15.00 from:

Educational Service District #110
1410 S. 200th St.
Seattle, Washington 98148

Wonder Park is one of seven Anchorage elementary schools participating in a Teacher Training Program prepared by the University of Alaska Center for Alcohol and Addiction Studies. This program provides instruction in the dynamics of human behavior and how they relate to alcohol and drug use and other forms of deviancy. The approach is aimed at providing incentives for the development of community programs and involves both parents and teachers. It is currently being broadcast by KAKM in Anchorage once a week for ten weeks. Parents were invited to participate and may either view the programs in their homes or go to the schools where they participate with the teachers in group discussions and activities related to the training materials. Participating teachers receive graduate credit from the University. The complete training program has also been provided in Tok.

An Office of Alcoholism FY '78 budget item to provide a curriculum was not funded, but will be resubmitted in FY '79.

5. Improvement of correctional treatment programs

The Interdepartmental Coordinating Committee on Alcoholism recommended to the Governor that the Division of Corrections should:

- provide treatment within correctional facilities for alcoholic inmates
- ensure that appropriate aftercare and follow-up are provided for all alcoholic inmates upon their parole
- make referral and aftercare available to alcoholic inmates who have completed their full sentence.

It is the position of the Criminal Justice Planning Agency that while alcoholism training should certainly be made available to correctional personnel, it would be counterproductive for the Division of Corrections to have to develop a cadre of trained alcoholism counselors. Both management of treatment and continuity of care can be improved by the use of existing community resources. Corrections' clients should have access to services funded either through the state Office of Alcoholism or by local communities. These services should be provided within institutions, and should also be available to clients when they return to their communities. The role of Corrections personnel should be to make referrals and encourage participation in community programs. The State Office of Alcoholism agrees with this position, and has instructed all local programs to work closely with the Division of Corrections and other components of the criminal justice system.

The Criminal Justice Planning Agency is presently funding two alcoholism counseling programs in Corrections as described in "Available Resources". In one, funding has been provided for a Corrections staff member to establish and run A.A. groups (and related courses and activities) in the Anchorage area. It is the intent of the grant that inmates will be encouraged, on their release from jail, to return to the A.A. meetings as community members.

The second approach, currently being used in Juneau, is to provide funds to a local alcoholism treatment agency (the Juneau Alcoholism Central Agency) to make services available to the population of the Juneau Correctional Center. Continued service is thus automatically available when an inmate is released on parole or completes his sentence. Community services are available to probationers as members of the community.

The eventual success of either of these approaches will depend on the involvement and support of probation/parole officers, who can do a great deal to ensure continuity of the programs.

During 1979 CJPA will support a comparative evaluation of the two approaches to include recommendations for the course of future development of alcoholism programming in corrections.

6. Strengthen enforcement capacity of the Alcoholic Beverage Control Board

At present the Alcoholic Beverage Control Board has a staff of five investigators with three based in Anchorage and two in Fairbanks. Licensed establishments are distributed as follows:

1st Judicial District (Southeast)	252
2nd Judicial District (Northwest)	26
3rd Judicial District (Anchorage, Valdez)	663
4th Judicial District (Fairbanks)	245

The Board's investigators work with local and state law enforcement agencies to investigate applications before licenses are issued. They perform routine surveillance of licensed establishments and investigate complaints.

Although no statistics are available, ABC staff estimate on the basis of complaints and observations that 75% of licensed establishments serve intoxicated persons and about 25% are serving minors.

Revenue sharing provides that municipalities with law enforcement capability will receive the revenues from their licensing fees for the purpose of enforcement. This is seldom carried out, however, and enforcement is generally seen as the responsibility of the ABC Board.

Various resolutions to the problem of enforcement have been proposed: the Governor's Management and Efficiency Review (May, 1975) indicates that, "the activities mandated to the Board are being carried out effectively. However the investigative staff needs to be enlarged to provide adequate coverage for Southeast Alaska." The Review Committee recommends the addition of one investigator.

On the other hand, Convention Resolution #76-27 of the Alaska Federation of Natives (1976) states that the "level of staffing and funding is absolutely disgraceful considering the ABC Board's statewide enforcement responsibilities--especially in rural Alaska." The resolution recommended:

- that the Governor and the Legislature increase the ABC Board's funding to at least \$1,000,000; and
- that sufficient positions of that funding be devoted to providing adequate enforcement of State and local alcohol beverage control laws in rural areas, and
- that sufficient portions of that funding also be devoted to investigate and overhaul the present alcohol control procedures and to develop new and better coordination of control procedures throughout the State; and
- that such procedures should be enacted as law and fully funded no later than July 1, 1978 (FY 79).

The recent Director of the ABC Board recommended, in April 1977, the re-organization of the enforcement staff to include an upper level administrative position (Range 21 or 22) to be responsible for the activities of five investigators in Anchorage, three in Fairbanks and two in Southeast. She feels that the administrator of the enforcement unit should be experienced in investigation of "white collar" and organized crime.

The State Office of Alcoholism and the CJPA concur regarding the need to strengthen the ABC Board, and to diversify its membership to represent a broader spectrum of interests.

7. Use of alcohol as a mitigating circumstance; penalties for driving while intoxicated

The law states that voluntary intoxication is not to be used as a mitigating circumstance except in "specific intent" cases. It is commonly felt, however, that it is quite frequently used by both judges and juries. There is less agreement as to whether or not it is appropriate.

Senate Bill 206, "An act relating to sentencing", currently in committee, attempts to strengthen the existing law and to address the issue of whether intoxication is "voluntary" in the case of an alcoholic. This bill, commonly referred to as the "Presumptive Sentencing Bill", defines conditions that may be considered aggravating or mitigating in the determination of sentences.

In no event may punishment be mitigated or reduced because of voluntary alcohol or other drug intoxication or chronic alcoholism or other drug addiction.

Current pending legislation also addresses penalties for operating a motor vehicle while intoxicated. Senate Bill 38, "An act relating to driving under the influence of intoxicating liquor or drugs", amends AS 28.35.030 as follows:

1st conviction--a minimum sentence of not less than three days shall be imposed (in addition to the previous fine of not more than \$1,000 or imprisonment for not more than one year or both).

2nd conviction--within five years of first, imprisonment not less than ten days (from three days presently required).

3rd or subsequent conviction--within five years of second, imprisonment not less than 30 days (from ten days presently required).

The Division of Corrections estimates the impact of this legislation on their facilities in the first year at an average of six prisoners a day x 365 days x \$48 a day per inmate, or a total expenditure of \$105,000. This cost estimate does not address the issue of already-crowded short-term holding facilities. Neither does it address the problem of small communities where the state does not have contracts for jail services.

The proposed legislation does nothing to reduce discretion on the part of police and D.A.'s, and thus to ensure that those with money and/or influence are as likely to be prosecuted as those with "nothing going for them".

Problem Statements

20. At present there are a total of seven alcoholism programs in the state (only one in a rural area) with either detoxification or sleep-off capability. In other areas intoxicated individuals who are held in protective custody must be housed in local jails where they may be held for twelve hours.
21. There is a need for coordination and consolidation of efforts to ensure that at least one quality curriculum is available for use on a statewide basis. This should involve careful evaluation of already available materials and approaches.
22. Effective prevention and rehabilitation programs are generally not available in rural Alaska. Additional emphasis needs to be placed on juvenile problems of alcoholism and drug abuse.
23. There is a need to provide alcohol screening and treatment services throughout the State of Alaska and to coordinate the efforts of existing services.
24. The present enforcement capacity of the Alcohol Beverage Control Board is insufficient to regulate and control the liquor industry.
25. Many feel that the use of intoxication as a mitigating circumstance is contrary to a perceived "sense of justice". Proposed legislation which increases penalties for OMVI is an attempt to force the public to take the issue of drinking and driving more seriously. To be effective, the legislation should be amended to reduce opportunities for plea-bargaining, sentence reduction, and discretion in charging.
26. Alcoholism treatment programs are generally inadequate within correctional settings, and must be provided by the Division of Corrections when community services are not available. Community-based programs, funded locally or by the State Office of Alcoholism, should be extended to provide services within correctional institutions, as well as upon the offender's return to the community.