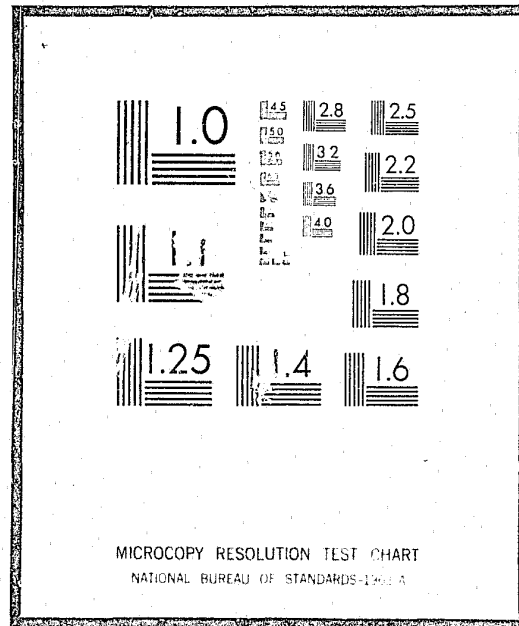


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ALTERNATIVE APPROACHES TO THE PUBLIC INEBRIATE PROBLEM IN METROPOLITAN AREAS: A SUMMARY OF FINDINGS FROM ATLANTA AND BALTIMORE

U.S. DEPARTMENT OF HEALTH, EDUCATION AND WELFARE
NATIONAL INSTITUTE ON
ALCOHOL ABUSE AND ALCOHOLISM
NATIONAL CLEARINGHOUSE
FOR ALCOHOL INFORMATION

CITATION: NO AUTHORS ALTERNATIVE APPROACHES TO
THE PUBLIC INEBRIATE PROBLEM IN
METROPOLITAN AREAS: A SUMMARY OF
FINDINGS FROM ATLANTA AND BALTIMORE.
1974. 11 P.

ACCESSION NO.
NCAI019534
DOCUMENT QUALITY
STANINE 5
(RAW SCORE 79)

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SUBJECT: INTOXICATION AS A CRIME (0725); ECONOMIC FACTORS (1110); ECONOMICALLY DISADVANTAGES PERSONS (1430)

A SUMMARY OF A STUDY ON THE PUBLIC INEBRIATE, COMMISSIONED BY THE SPECIAL PROJECTS BRANCH OF NIAAA, IS PRESENTED. INFORMATION IS PROVIDED ON: (1) ESTIMATES OF THE CURRENT COSTS OF HANDLING PUBLIC INEBRIATES; AND (2) PROJECTIONS OF THE FUTURE COSTS OF MAINTAINING EXISTING APPROACHES AND IMPLEMENTING NEW SYSTEMS FOR HANDLING PUBLIC INEBRIATES IN 2 METROPOLITAN AREAS - ATLANTA, GEORGIA AND BALTIMORE,

MARYLAND. BASED ON COMPARISONS OF THE APPROACH TO THE PUBLIC INEBRIATE IN THESE 2 AREAS, IT IS CONCLUDED THAT REHABILITATION IS A MORE COST EFFECTIVE APPROACH TO THE PROBLEM THAN A PUNITIVE APPROACH UTILIZING CRIMINAL JUSTICE AGENCIES. COORDINATION OF REHABILITATION SERVICES AND PROVISION OF SERVICES SUFFICIENT TO DEMAND IS STRESSED. IMPLICATIONS FOR OTHER METROPOLITAN AREAS ARE DISCUSSED. 5 REF.

THE HUMAN ECOLOGY INSTITUTE

NCAI 019534

ALTERNATIVE APPROACHES TO THE PUBLIC
INEBRIATE PROBLEM IN METROPOLITAN AREAS
A SUMMARY OF FINDINGS FROM
ATLANTA, GEORGIA, AND BALTIMORE, MARYLAND

THE HUMAN ECOLOGY INSTITUTE
7416 Chapel Hill Road
Raleigh, North Carolina 27607
919-851-4677

January 1974

Sponsored by
Special Projects Branch
National Institute on Alcohol Abuse and Alcoholism
United States Department of Health, Education, and Welfare
Rockville, Maryland

FINDINGS AND IMPLICATIONS RELEVANT TO METROPOLITAN AREAS

Specific findings from Atlanta and Baltimore included:

- Introduction of a rehabilitation system for public inebriates in Atlanta could produce a total estimated savings of \$1.4 to \$5.8 million over an eight-year period.
- The largest public savings resulting from a rehabilitative approach to public inebriates will accrue in the criminal-justice agencies in Atlanta. These agencies could realize an estimated annual savings of 15 to 74 percent if rehabilitation programs were introduced.
- Baltimore currently spends \$3.5 million for public inebriates. These costs are expected to increase slightly over the next eight years.
- Doubling the enrollment rate for public inebriates in rehabilitative services in Baltimore will produce 1-1/2 times the current cost but the rehabilitation rate of inebriates will be twice as high.

Implications from this study for other metropolitan areas are:

- The process of arrest and incarceration of public inebriates is a more expensive and less effective approach to the problem than a rehabilitative approach.
- The savings to the legal system resulting from a change to rehabilitation rather than incarceration will not likely result in budget reduction for criminal-justice agencies but in: (1) an increase in the level of police protection, and (2) a slower growth rate in budgets for these agencies.
- Plans for implementing a system of rehabilitative services in a metropolitan area should include: (1) a reliable estimate of likely development and operation costs, and (2) a statement of desired effects the system should produce.
- A well-defined, coordinated system of comprehensive rehabilitative services for public inebriates will produce better results than a partially coordinated system of services.

THE PROBLEM ADDRESSED BY THE STUDY

For many years the public inebriate in our society has had to depend upon private agencies such as rescue missions and hospitals to provide short-term, emergency care. Society's historical primary response to the public inebriate has been to arrest and incarcerate the offender. Both of these methods of dealing with public drunkenness have resulted in a high recidivism rate and, consequently, the costs of public inebriation have continued to increase.

Because of these costs and because these traditional responses to the problem have not reestablished the inebriate as a productive member of society, public decision makers are seeking information about alternative approaches, particularly with respect to likely benefits and costs. Decision makers lack the necessary information upon which to base any decision about changes in either legal statutes or the allocation of funds to new programs and, naturally, are reluctant to underwrite new rehabilitation programs without some concrete evidence that the new programs will yield long-term savings when compared with the existing system.

This is a summary of a study commissioned by the Special Projects Branch of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) to provide (1) estimates of the current costs of handling public inebriates, and (2) projections of the future costs of both maintaining existing approaches and for implementing new systems for handling public inebriates in two metropolitan areas, Atlanta, Georgia, and Baltimore, Maryland.

Atlanta was selected as a study site because it exemplifies the traditional approach of heavy reliance on criminal prosecution of public inebriates. In Atlanta, arrests by the city police for public intoxication have been as high as 60 percent of total arrests (1962), one of the highest percentages in the Nation. In 1972, total public intoxication arrests were 31.1 percent of all criminal arrests in the city.

Baltimore was selected as a study site because in 1968 the Maryland State law was changed to prohibit charges for public intoxication, which has consequently resulted in the development of an extensive network of rehabilitative services for the public inebriates in that state.

ATLANTA FINDINGS

Total current costs for handling public inebriates in Atlanta are almost \$2.5 million annually. Costs to criminal-justice agencies (\$1.61 million annually) are almost twice the social and medical costs, which reflect the emphasis of the city on a corrective/legal rather than a rehabilitative approach.

For this study, several alternatives in addition to the current approach were explored for Atlanta using computer simulation projections of costs and effects.¹ The alternatives explored are illustrated in this report by:

- Strategy 1: Corrective/legal approach -- continuing "business as usual" where the major response to public inebriates is arrest, incarceration, and fine by criminal-justice agencies.
- Strategy 2: Coordinated system of services using NIAAA components with limited capacity -- implementing a network of services for public inebriates which functions as a true system, seeking to find the best mix of services for each client. The system would contain the components recommended by NIAAA for a comprehensive program² and all inebriates who are picked up by the police with no other criminal charges would be routed into rehabilitative services. The service capacities of components would be constrained by limited resources such that additional clients could not be served when capacities were reached.
- Strategy 3: Same as Strategy 2 but sufficient resources are assumed available to enable capacity to expand to meet demand for service.

Observations obtained from this analysis of alternative strategies include the following:

1. The annual total costs for handling public inebriates in Atlanta continued to increase over the period of simulation for Strategy 1 ("business as usual") but stabilized for Strategy 2 (coordinated services with limited capacities), and declined for Strategy 3 (coordinated services with expanding capacities). The cost patterns for implementing comprehensive rehabilitative services reflect the capability of such services to stabilize the situations of public inebriates and increase their self-sufficiency. A strategy where capacity is always sufficient to demand is less costly over a longer period because no one is turned away and the rehabilitation rate is higher. See Figure 1 below.

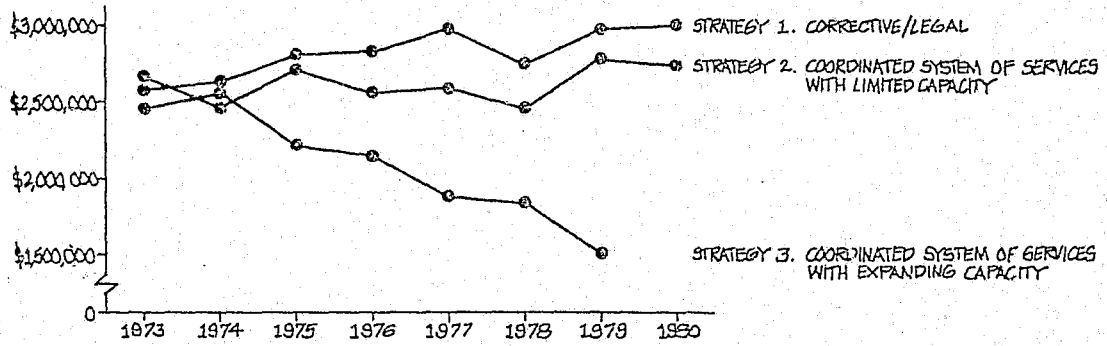


FIGURE 1. PROJECTED TOTAL COSTS FOR HANDLING PUBLIC INEBRIATES IN ATLANTA

- Introduction of rehabilitation programs for public inebriates in Atlanta could realize an estimated \$1.4 to \$5.8 million savings over an eight-year period. Based on average total costs for "business as usual" compared with an introduction of a comprehensive service system, the estimated annual average cost savings was as much as 25.7 percent over continuing the present arrangement. The average annual costs for "business as usual" were \$2,824,000 compared to \$2,645,000 for a coordinated system with expanding capacity. See Figure 2.

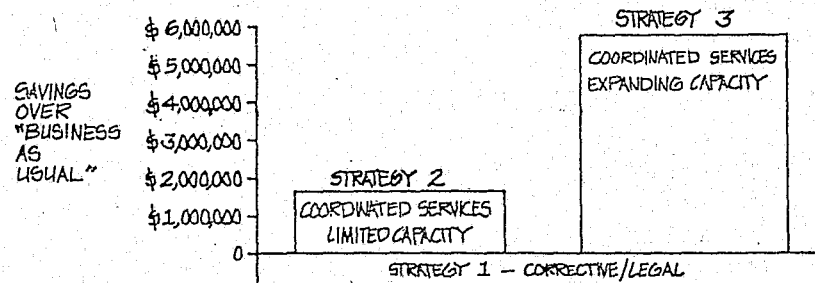


FIGURE 2. TOTAL EIGHT-YEAR SAVINGS BY THREE ALTERNATIVES FOR ATLANTA

- If rehabilitation programs are introduced into Atlanta, criminal-justice agencies could realize an estimated annual savings of 15 to 74 percent. This cost reduction results from decreased arrests, processing, holding, trial, and incarceration costs. A graph of total criminal-justice costs for each of the three strategies is shown in Figure 3.

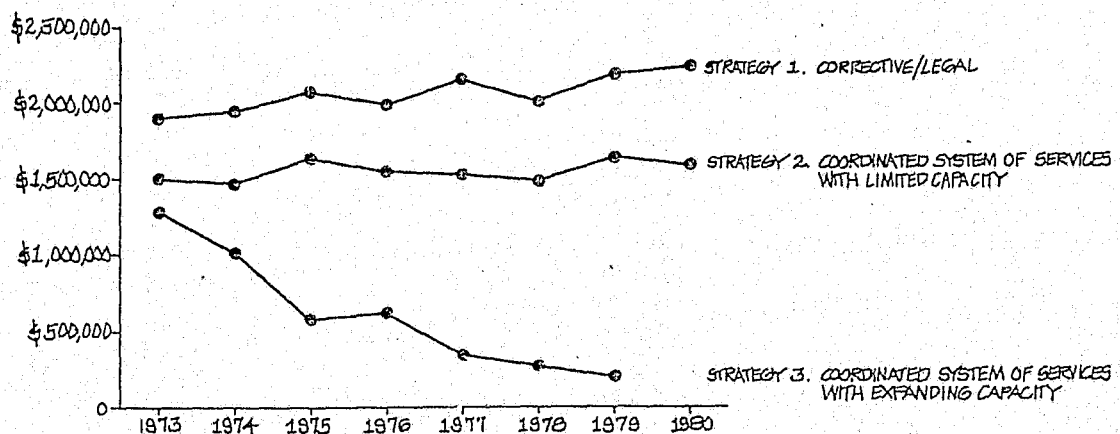


FIGURE 3. CRIMINAL/JUSTICE COSTS FOR HANDLING PUBLIC INEBRIATES IN ATLANTA

BALTIMORE FINDINGS

In 1968 the Maryland State Legislature acknowledged alcoholism as a public health problem and removed responsibility for its control from the criminal-justice system. The effects of this change in the law have been to reduce police involvement with public inebriates by approximately 2/3 from its 1965 level, to promote the development of numerous alcoholic treatment programs, and to create supervisory bodies for coordinating alcoholism programs. However, it is still possible for the public inebriate to be detected and apprehended by law enforcement personnel. According to officials interviewed in this study, many public inebriates are arrested on "surrogate" charges associated with public drunkenness, such as disorderly conduct or disturbing the peace. Public inebriates are also detained unofficially as "lodgers" and referred to rehabilitation programs in the area.

Current costs for handling public inebriates in Baltimore were estimated at \$3,740,303 in 1972. Of the total costs, legal sector costs accounted for 22 percent, and rehabilitative service costs comprised 78 percent.

Since the public inebriate law has been changed, all alternatives examined for Baltimore were rehabilitative rather than corrective/legal. The current network of services in Baltimore includes the NIAAA recommended components, but it does not function as a totally coordinated system of services. The relationships between service components are often informal and negotiable. This means that the network does not respond to the unique needs of each client and that there exists no central means to coordinate and deploy existing services in the most cost/effective manner. Consequently the alternatives examined reflected efforts to improve the current system.

The strategies investigated can be summarized as:

Strategy 1: Partially Coordinated System of Services -- continuing "business as usual" in the present network in Baltimore with no substantial changes.

Strategies 2-4: Well-Coordinated System of Services -- altering the current system in ways to increase the admitting rate for clients and changing referral patterns to those more suited to client needs.

Following are some observations based on computer simulation projections of costs and effects for the various strategies examined:

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1. Continuing the present partially coordinated system of services has a projected lower average cost than any other strategy examined. The average annual costs for "business as usual" were projected to be unchanged over current costs, i.e., \$3,741,000. Increasing the amount of service the system delivers to public inebriates increases costs up to 52 percent higher than current costs.
2. A strategy of increased enrollment is more effective than the current system in reducing the number of public inebriates in Baltimore. "Business as usual" yielded an average annual population size of 11,769. With increased enrollment, the average size was 2 percent lower. Furthermore, under the increased detection strategy the population size increased over the six-year period at a rate of only 3 percent, compared with 9 percent for "business as usual," and showed a marked decrease in 1978. See Figure 4.

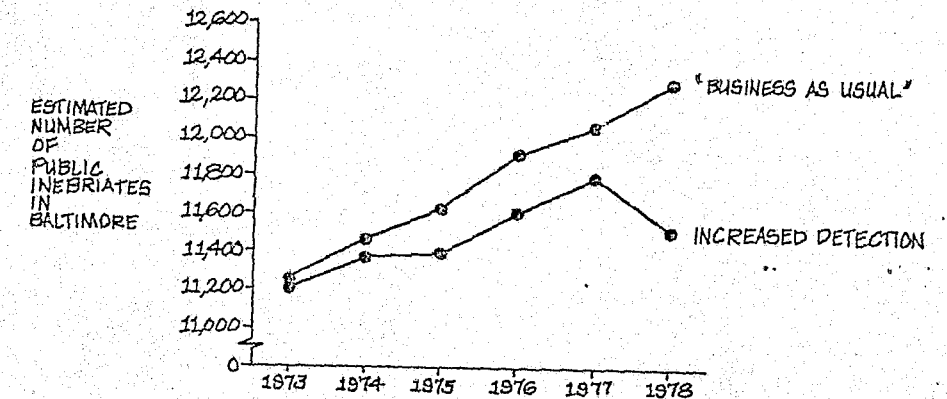


FIGURE 4: PROJECTION OF ANNUAL PUBLIC INEBRIATE POPULATION GROWTH FOR "BUSINESS AS USUAL" AND INCREASED DETECTION IN BALTIMORE

3. The increased enrollment strategy is a feasible alternative to "business as usual." Although the increased detection is more costly than "business as usual," it is considerably more effective. Furthermore, implementation of the increased detection strategy should eventually stabilize the size of the public inebriate population so that the number of public inebriates entering service will be less than the number for "business as usual," and the resulting costs will be lower after 1978. In the long term, lower system costs should be due to a smaller, stabilized population of inebriates.

COMPARISONS OF ATLANTA AND BALTIMORE

The results to this point have been from the separate analysis of two metropolitan areas with distinctly different approaches to the public inebriate problem -- one which primarily utilizes the criminal-justice agencies and one which primarily utilizes social and rehabilitative agencies. A comparison of the two areas has important implications for other metropolitan areas.

Three distinct alternatives were compared:

- A. The corrective/legal approach which emphasizes arrest, trial, incarceration and fine for public inebriates and no purposeful deployment of social and rehabilitative services. Analysis was based on computer projections of the current situation in Atlanta.
- B. A system of rehabilitative services in which the components are not well coordinated. Service capacities are limited and are often insufficient to the demand. The NIAAA-recommended components are included. Data from computer projections of the current network of services for Baltimore were used.
- C. A system of rehabilitative services in which components are well coordinated and service capacities are able to expand to meet demand. No clients are denied service. The NIAAA-recommended alternatives are included. The data from computer projections for the current network plus the proposed new system for Atlanta were used.

To make results comparable, the expenditure per capita of each city's total population for public inebriates was used. Figure 5 shows a plot of the projected annual per capita costs for each alternative for the period 1973-1980.

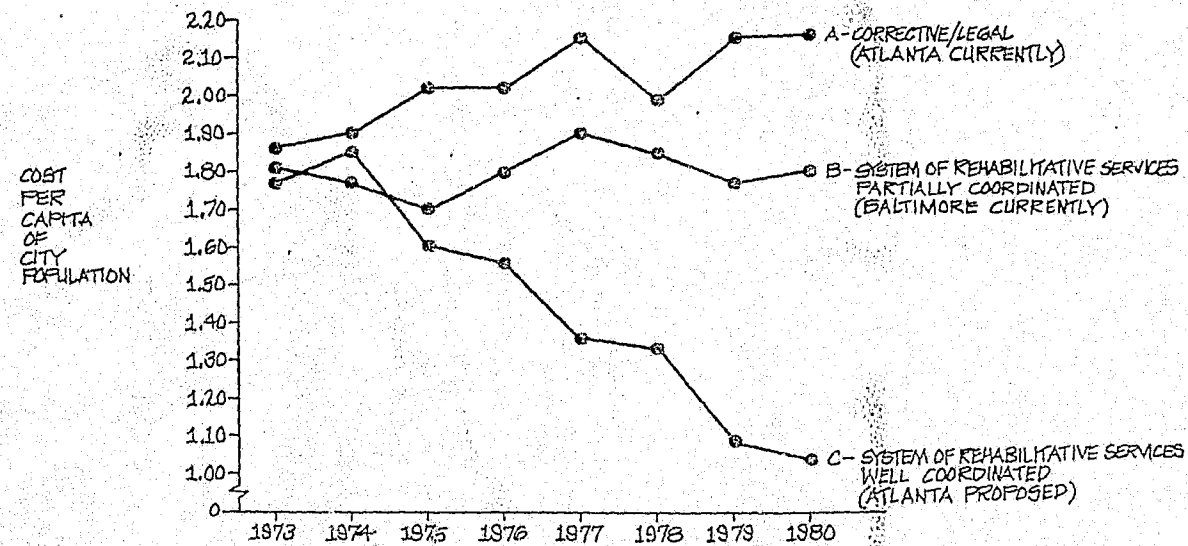


FIGURE 5. COSTS PER CAPITA FOR THREE ALTERNATIVE APPROACHES TO THE PUBLIC INEBRIATE PROBLEM

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The average per capita costs for public inebriates were \$2.03 for A (corrective/legal approach), \$1.80 for B (rehabilitative approach with partially coordinated components), and \$1.45 for C (rehabilitative approach with well-coordinated components). See Figure 6. In other words, continuation of a punitive approach to handling public inebriates will cost 32 percent more per capita than utilizing a well-defined system of rehabilitative services with resources sufficient to demand.

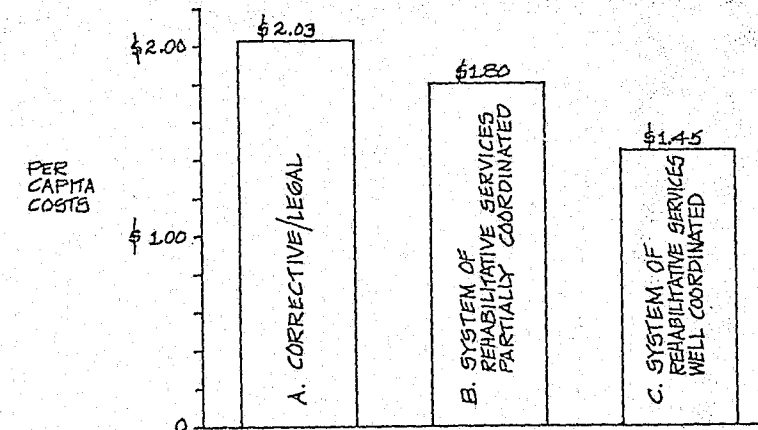


FIGURE 6. COMPARISON OF AVERAGE PER CAPITA COSTS FOR ALTERNATIVE APPROACHES

The following conclusions can be drawn from these comparisons:

- Rehabilitation is a more cost/effective approach to the problem of public inebriates in metropolitan areas than a punitive approach utilizing criminal-justice agencies.
- The better the rehabilitation system of services is coordinated the more effective it can be in reducing the number of public inebriates in a community.
- The rehabilitation rate of a system is increased by its ability to provide services sufficient to demand, rather than turning clients away when capacity is reached.

IMPLICATIONS FOR METROPOLITAN AREAS

- The process of arrest and incarceration of public inebriates is an expensive and ineffective approach to the problem. Most public inebriates in the population of a metropolitan area utilizing this approach will continue chronic drinking behavior with marginal self and economic support. With no preventive or early intervention, new public inebriates will constantly enter the population to replace those who migrate to other areas or die.
- The introduction of a system of rehabilitation services will in the long term be less costly and more effective in rehabilitating public inebriates than a punitive approach. Rehabilitative services have the capability to stabilize and thus reduce disruptions in the short term and rehabilitate and increase self-sufficiency for public inebriate clients in the long term.
- The largest public savings resulting from rehabilitation of public inebriates will accrue in the criminal-justice system. Legal cost savings are not likely to result in an actual reduction in the police and city court budgets. Rather this reduction in cost is more likely to be expressed in at least two other ways: (1) an increase in the level of police protection as a result of reducing officer time (particularly of street patrolmen) involved in handling public inebriate arrests, improved court processing, and freed jail space, and (2) a slower growth rate over time of the budgets for criminal-justice agencies due to redeployment of personnel. Even if a rehabilitation program exists and/or the law is changed to eliminate criminal charges for public intoxication, it is likely that police officers will still encounter inebriates who may require medical attention or transportation to a rehabilitation center; thus, all legal contact and associated costs (as the simulations indicated) can not be eliminated.

In summary, the decision by a metropolitan area to introduce a comprehensive rehabilitation program can be best supported through consideration of:

Increased level of protection against crime resulting from criminal-justice resource savings

The improved economic and social contribution of rehabilitated alcoholics

The overall economic costs to the area of both public and private agencies

Community desires in responding to problem drinking in a therapeutic vs. punitive manner

- Communities planning to implement a system of rehabilitation services should explore a number of alternative designs and seek a system which most effectively coordinates all services. While a rehabilitative system of services will be more cost/effective than a punitive approach, a better return for investment in such services will be obtained through careful examination of alternatives via such cost and effective projection techniques as computer simulation. Decision makers should have reliable estimates of development and operational costs and a statement of the desired effects for any new rehabilitative system.

If a comprehensive public inebriate system is operational but has no prior specification of expected costs and results, the system is unlikely to yield the best return for its cost, for local program managers have no means to push their systems toward improved performance each year.

The recommended steps in a development process for a system of services are:

- (1) Development of an effect specification for any system of services for public inebriates, expressed as the expected impact on clients.
- (2) Preparation of a feasibility study to determine the long-term costs and effects of alternative system designs to locate one which fits community needs and resources. Decision makers then know what costs and results they can expect.
- (3) Design, implementation, and pilot operation of the selected system to determine actual costs and effects and to make corrections.
- (4) Full operation of the system with feedback of costs and effects.

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FOOTNOTES

¹Computer simulation projections were obtained by constructing a model of the actual system in Atlanta (later in Baltimore) using real data. This model was simulated by having the computer "act like" the real system for a period of eight years and provide data on expected annual costs and effects.

²Components included were: 24-hour walk-in service, transitional-residential treatment, intensive short-term inpatient rehabilitation, sheltered living or domiciliary care, detoxification, and outpatient rehabilitation.

ACKNOWLEDGEMENT

The Human Ecology Institute wishes to express appreciation to all the community representatives from Atlanta and Baltimore who cooperated with our project. Without their assistance, it would have been impossible to obtain the information needed to carry out the analysis summarized in this report. Special thanks are extended to Dr. John Wolfe and Mr. James Kissko of the Special Projects Branch, NIAAA, for their support and encouragement.

END