

**REPORT OF THE DEPARTMENT
OF MENTAL HEALTH, MENTAL RETARDATION
AND SUBSTANCE ABUSE SERVICES ON**

**The Impact of
Public Inebriates on
Community and Criminal
Justice Services Systems**

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 20

**COMMONWEALTH OF VIRGINIA
RICHMOND
1993**



COMMONWEALTH of VIRGINIA

DEPARTMENT OF

Mental Health, Mental Retardation and Substance Abuse Services

KING E. DAVIS, Ph.D., LCSW
COMMISSIONER

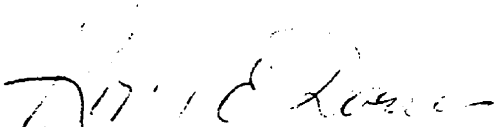
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January 13, 1993

TO: The Honorable Lawrence Douglas Wilder, Governor of Virginia,
and Members of the General Assembly:

House Joint Resolution 174, adopted by the 1992 General Assembly, directed the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) with the assistance and cooperation of the Department of Criminal Justice Services (DCJS) to "study alternatives to repeated arrests of public inebriates." In addition, HJR-174 requested the development of a definition of "repeat offenders," alternatives that provide for conviction and incarceration of repeat offenders, an investigation of cost-effective approaches to treatment for incarcerated and non-incarcerated public inebriates and appropriate recommendations for submission to the 1993 session of the General Assembly. Our agencies identified a group of individuals with expertise in this area, interviewed community officials, reviewed the literature on this issue and analyzed arrest and jail commitment data. We have the honor of submitting herewith the report on the "Impact of Public Inebriates on Community and Criminal Justice Services Systems."

Respectfully submitted,


King E. Davis, Ph.D., Commissioner
Department of Mental Health, Mental
Retardation and Substance Abuse Services

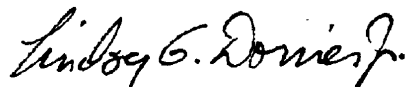

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Table of Contents

I.	Preface	i
II.	Executive Summary	1
III.	Study Design	3
IV.	Arrest and Jail Confinement Data	5
V.	Synopsis of Interviews with Community Representatives	7
VI.	Literature Search and Discussion	10
VII.	Findings and Recommendations	15
VIII.	Appendices	
	Appendix 1 - House Joint Resolution 174	17
	Appendix 2 - List of Individuals Interviewed	18
	Appendix 3 - Suggested Continuing Resolution	20
	Appendix 4 - Va. Public Intoxication Laws	21
	Appendix 5 - Arrest and Jail commitment Data	26
	Appendix 6 - Bibliography	40

PREFACE

This study was undertaken in response to House Joint Resolution 174 requesting the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) with the assistance and cooperation of the Department of Criminal Justice Services (DCJS) to "study alternatives to repeated arrests of public inebriates."

The Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Criminal Justice Services wish to recognize Ken Batten and Tony Casale, co-directors of the study and the individuals of the study group who contributed their time and expertise to this effort. The members of the study group were: Joseph A. Walker; Michael Costanzo; Patty Gilbertson; Clyde Vandivort; Robert G. Jackson; Linda Stewart; Jim Davis; Allen Barley; and David G. Speck.

The Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Criminal Justice Services are appreciative of the assistance rendered by Lynette Thornhill of the DMHMRSAS and Meredith Farrar of DCJS, Candice Cason - Alexandria Community Services Board, Marlene Stevens, Margo Kiely and Joanie Garman - Mental Health Services of the Roanoke Valley and Jim May - Richmond Community Services Board in setting up interviews with community officials in their localities.

Finally the Department of Mental Health, Mental Retardation and Substance Abuse Services and the Department of Criminal Justice Services express their gratitude to all the community leaders and officials who presented information about the problems associated with chronic offenders in the Commonwealth.

EXECUTIVE SUMMARY

The Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) and Department of Criminal Justice Services (DCJS) established a work group (DETOXIFICATION TASK FORCE) in May of 1991 to study issues related to diversion of public inebriates into public inebriate centers and social detoxification programs. This task force was asked to broaden its study to include the tasks requested by HJR-174, 1992.

House Joint Resolution 174 requested a "study of alternatives to repeated arrests of public inebriates," development of a definition of "repeat offenders," alternatives that provide for conviction and incarceration of repeat offenders, and an investigation of cost-effective approaches to treatment for incarcerated and non-incarcerated public inebriates.

The Task Force identified several key areas for the study. They were: incidence of public intoxication; definition of "repeat offenders;" availability of services for public inebriates; impact of public inebriates on police, jails and the judicial system; and cost effective alternatives to incarceration for this population.

The Task Force conducted a review of literature, data, and historical documents. The members reviewed laws related to public intoxication in the Code of Virginia. The Task Force also interviewed community officials throughout the Commonwealth to determine the impact of public inebriate arrests on various community systems. Alexandria, Roanoke and Richmond were selected as regional sites for these interviews.

The Task Force found that while arrests for public intoxication are declining, the cost of the chronic repetitive public inebriate on medical, business, treatment and criminal justice systems is considerable and is increasing. Present treatment systems are not equipped to reduce significantly the impact of this population. In addition the Task Force determined that social detoxification or public inebriate centers are cost effective alternatives in diverting the majority of public inebriates from the criminal justice system.

It is estimated that approximately \$5.5 million was expended by various elements of the criminal justice system for public inebriates during 1991. However, this does not include local contributions for jail operations, nor does the estimate include health care and substance abuse treatment costs.

The Task Force offers three recommendations:

Recommendation 1:

The study of the public inebriate problem should be continued to 1994. The continuing study should focus on the review and strengthening of the civil and criminal statutes that relate to public intoxication. In particular the statutory review should consider incarceration and/or treatment for an extended period for chronic offenders.

Recommendation 2:

The Department of Mental Health, Mental Retardation and Substance Abuse Services should develop a cost effective program model to provide long term services for chronic alcoholics.

Recommendation 3:

The Department of Mental Health, Mental Retardation and Substance Abuse Services with the assistance of the Department of Criminal Justice Services should review data on public inebriate arrests throughout the Commonwealth and develop cost estimates to implement programs in areas of high incidence and to expand the capacity of current public inebriate and social detoxification programs.

STUDY DESIGN

The following people serve as members of the Detoxification Task Force established by the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) and Department of Criminal Justice Services (DCJS):

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Alexandria City Council

Robert G. Jackson, Director
Residential Program
Alexandria Virginia

Carrie Eddy, Analyst
Office of Licensure
DMHMRSAS

* Added to Public Inebriate Study

The Task Force identified several key areas for the study. They were:

- Incidence of public intoxication
- Definition of "repeat offenders"
- Availability of services for public inebriates
- Impact of public inebriates on police, jails and judicial system
- Cost effective alternatives to incarceration for this population

The Task Force conducted a review of the literature regarding public inebriate problems and current and historical data. The members interviewed community officials in three localities in the Commonwealth to determine the impact of public inebriate arrests. Alexandria, Roanoke and Richmond were selected as regional sites for these interviews.

Representatives from the community identified as knowledgeable about public inebriate problems were:

- law enforcement and jail representatives
- general district court judges
- chambers of commerce/merchants associations
- rescue squads personnel
- hospital emergency room physicians
- city managers
- city council members
- magistrates
- commonwealth attorneys
- local community services boards' substance abuse directors
- detoxification program administrators

ARREST AND JAIL CONFINEMENT DATA

The arrest and jail confinement data for the offense of public intoxication was based on a 1990 report entitled, "An Analysis of the Need for Public Inebriate Centers" prepared by the DCJS for the Commission on Prison and Jail Overcrowding (COPJO). COPJO requested a study of "...the localities and regions in greatest need of alternatives to jail for those arrested for being drunk in public or for driving under the influence of alcohol and/or drugs."

According to the report, arrests for the offense drunk in public increased about 12% from CY 1986 to CY 1989. In addition, 28 localities (14 cities and 14 counties) accounted for an average of 60% of the total statewide arrests during the period studied. Roanoke City led the state in arrests for public intoxication and had the highest arrest rate per 100,000 general population. Fairfax County, with over seven times the population of Roanoke, was second. The arrest rate analysis revealed that arrests for drunk in public accounted for "up to 40% of the total arrests for Part II crimes in many localities," and that for many small counties and towns within their boundaries, the offense drunk in public accounted for the major portion of both arrests and general law enforcement activity. The 14 counties and cities with the highest rates of arrests are listed in Appendix 5 of this report. The report revealed that during FY 1989 there were 45,524 statewide commitments to jail for the offense drunk in public; 45,408 were committed to jail awaiting release on bond or awaiting trial. When compared to the 60,317 arrests for CY 1989, it appears that about 75% of all individuals arrested for drunk in public are brought before a magistrate and committed to jail.

The difference in the number of arrests and jail commitments is the result of the comparison of calendar to fiscal year data and commitments to police-run lockups, which do not report admissions. It is important to know that during the year analyzed, 99% of all commitments were released from jail, usually within the first 24 hours of commitment. Magistrates released about 81% (36,669) of those committed, to bail on bond, while judges released another 6% (2,774) by court order. Another 12% (5,283) were found innocent or not guilty and released.

Of the total pretrial admissions to jail during FY 1989, only 42 were sent to state hospitals for treatment. Less than 0.5% of all committed to jail were convicted and less than half of them were reported as committed to serve jail sentences, presumably for violations of court-ordered interdiction or for contempt for failure to pay court ordered sanctions, such as fines and costs, in the time allotted.

The review of the data was updated by an analysis of the trends in arrests for the past two (2) years, from CY 1990 to CY 1991, and by a comparison of total arrests for CY 1991 to total commitments to jails for drunk in public for FY 1991. A separate analysis of the 14 counties and 14 cities identified as target sites for needed services in the COPJO report comparing arrests and jail commitments for 1991 was also prepared. Statewide arrests for drunk in public increased 10.5% from CY 1989 to 1990. From CY 1990 to CY 1991, however, there was a

11.6% decrease in statewide arrests for drunk in public. The study team has discussed the decline in arrests with law enforcement officers in about 12 jurisdictions. According to the officers, the major reason for the decline was local government budget reductions. Most of the budget cuts were made in the overtime category which in many police departments, supports evening and mid-night shift patrol. This is the time when high arrests for drunk in public and related offenses occur. Overtime also supports court attendance by police officers. With reduced resources, law enforcement agencies tend to concentrate efforts on combating Part I crime and the more serious victim related Part II offenses such as "other assaults," and public safety offenses such as "driving under the influence" and, of course, "drug crime." Other participants in the regional interviews suggested that the greater availability of shelters for the homeless, especially during the fall and winter months, may also have contributed to reduced arrests by getting public inebriates off the streets for the night.

SYNOPSIS OF INTERVIEWS WITH COMMUNITY REPRESENTATIVES

The representatives interviewed in Alexandria, Roanoke and Richmond fell into four major categories. The categories were criminal justice, business, medical and treatment systems.

The criminal justice representatives consisted of police, commonwealth attorneys, judicial officers and jail staff. Jail staff report individuals arrested for drunk in public (DIPs) spend an average of four to six hours in jail and are usually held until they appear to be sober. During this time, they are responsible for the majority of suicide attempts that occur in jail. They are responsible for the majority of altercations in the booking area, either as perpetrators or as victims, and are a tremendous drain on the medical budgets of the jail. One sheriff reported a fourfold increase in his medical budget due to public inebriates and that the average jail is not equipped to provide the proper care DIPs need. Jail staff indicate that DIPs do not belong in jail and that alternatives need to be developed.

Police officials report that a great deal of time is consumed by police arresting and processing DIPs when they could be devoting time to more serious criminal activity. They indicate that in addition to the minimum of one hour spent on arrest, transport, and booking, endless hours are spent taking injured inebriates to emergency rooms and investigations relating to injury on public property. Police indicate that a small group of "repeat" offenders is responsible for a significant percentage of the total arrests. For example, one area indicated that 13 individuals were arrested 12 or more times, accounting for 24% of all DIP calls. Another area reported one individual with over 109 arrests for DIP. A study conducted in 1981 in another area indicated that 126 individuals were responsible for 86% of all public inebriate arrests in one year, and that currently DIPs constitute 34% of total arrests.

Commonwealth attorneys discussed attempts to address public inebriate problems through use of "interdiction" (§4-51). Their experience indicates that the present implementation of the process is not effective in removing DIPs from the revolving door of arrests, court hearings and repeated incarcerations. Preparation of interdiction cases involves a significant amount of man hours. Since jails are chronically overcrowded, the amount of time that "interdicted" public inebriates have to serve is often reduced, regardless of the length of the original sentence and does not provide enough return on the investment of prosecutorial time. They further indicate that jails are being used for pre-trial housing of inebriates and are consuming significant resources that would be better utilized in other areas.

Judicial representatives echoed statements made by the law enforcement officials which indicate that DIPs are consuming a disproportionate amount of resources. In addition, judges reported different experiences in using interdiction and imposing sentences for repeat offenders. For example, a member of the Richmond judiciary reported that arrests for DIPs has dropped significantly since interdiction was initiated in the city. In 1981, arrests were around 6,000 per year. In 1992, arrests have dropped to about 3,000 per year. In Alexandria, the judiciary

indicated that giving sentences for repeat offenders is not solving the problem and indicate that the civil and criminal laws need to be changed to expand current options that are available to them.

Business representatives reported that public inebriates have a significant impact on their operations in downtown areas. In a recent survey of the business community in Roanoke 40% stated that public inebriation and panhandling are the biggest problems in the downtown area. Problems are not only confined to normal business hours. Since many public inebriates are also homeless, many businesses have to clean up their storefront areas every day to make the shopping area presentable. The business community reported this problem as one of the chief reasons they leave downtown areas. They do not believe that the present criminal justice approach to addressing this problem is working. They feel that some alternatives must be developed to remove chronic public inebriates from the streets. The business community also indicated a willingness to share in the cost of providing those alternatives.

A medical representative (emergency room physician) reported that many people sustain injuries while intoxicated. When they are brought to the emergency room, physical examinations are conducted and several tests may be ordered depending on the nature of the injury. In cases of head, neck or abdominal injury, it is not unusual for x-rays and CT scans to be conducted. Many cases also need to be observed for a period of time, so not only are costs for diagnostics high, cost in terms of man hours are also high to serve this population. Emergency rooms see many of the same people repetitively. Significant savings would result if only the frequency of emergency room visits were reduced.

Representatives from treatment agencies report that there are three groups of individuals arrested for public intoxication. The first group represents individuals who do not display an extensive history of drinking alcoholic beverages, drink mostly on weekends or special occasions and do not function well when intoxicated. They are usually younger and do not present significant problems of withdrawal from alcohol. They pay their fines and do not clog up the court system. However, this group presents the most risk for suicide in the jail and for undetected personal injury to themselves. The presence of other drugs is not uncommon with this group and presents additional problems.

A second group consists of individuals who drink regularly and have developed a tolerance to alcohol or other drugs. They are more difficult to detect since their public behavior is less severe and may have other arrest charges. They may have mild withdrawal symptom, and pose significant risk for injury and suicide. The first two groups are more likely to be younger and are also the most likely to be combative and present the most risk of injury to police, jail staff and health care workers. They also constitute the majority of the arrests for DIP.

The last group are those who have chronic problems with alcohol. They are the most visible and are repeatedly arrested for public intoxication. Many in this group have chronic health problems and are often homeless. They experience significant problems as a result of withdrawal from alcohol, which in many cases may be life threatening. An arrest of this type of public

inebriate is often a welcome respite from living on the street and an opportunity to receive adequate primary health care. While there may be fewer of these individuals than in the other two groups, they are over-represented in arrest statistics.

The treatment representatives report that the primary services used by all of these groups are short term detoxification and residential rehabilitation when available. This is typically followed by some form of outpatient counseling. Several communities report some successes in diverting arrests from the criminal justice system. These public inebriate/social detoxification centers receive cases directly from the police, emergency rooms or other community agencies. The physical condition of individuals is assessed upon entry to the facility. They are monitored closely during their stay (4 to 6 hrs.). Since most of these facilities are connected to extended detoxification centers, those who need further treatment may choose to stay. While these services are effective and meet the needs of the first two groups, they only serve as a temporary respite for the chronic alcoholic. The treatment representatives report that this group revolve through their services as frequently as they do through the criminal justice system and stay for only short periods of time.

It is the consensus of all the representatives that current efforts of the criminal justice and health care systems are not successfully addressing the needs or the problems of the chronic repetitive public inebriate. While programs are in place in several communities that divert DIPs from the criminal justice system (Winchester, Newport News, Virginia Beach, Charlottesville and Alexandria), they lack the capacity to meet the need and do not reduce the impact of the public inebriate on the business community. All representatives indicated that a method should be developed to interrupt the "revolving door" cycle of the chronic public inebriate. Those interviewed believe that current civil and criminal law must be strengthened to provide involuntary ways of keeping public inebriates off the street for an extended period of time. They indicated that business, the treatment community, and the criminal justice system must work together to solve these problems.

LITERATURE SEARCH AND DISCUSSION

The task force conducted a literature search to provide data about repeat offenders, the chronic public inebriate offender, and to identify the cost of providing services to these individuals. In addition, the literature search provided information concerning the major service needs of the chronic population and "what works" as it relates to the treatment of these individuals. The literature spanned 35 years and covered topics ranging from hospital based studies of chronic alcoholics and incarcerated populations in the late 1950's to the development of detoxification center programs initiated during the 1970's and 1980's.

Chronic Repeat Offender Public Inebriate

Miller (1975), in a study of 10 chronic public drunkenness offenders, used the definition of "chronic" as having a minimum of 8 public drunkenness arrests during a previous 12 month period. Willenbring et. al. (1990), stated that the "term chronic public inebriate refers to that combination of chronic alcohol abuse, unemployment, homelessness, poverty and poor physical and emotional health. On the mental health side, Richman (1984), revealed that "70% of inpatient alcoholics were readmitted within 2 years, and that 17% of ambulatory detox patients repeated within one month." The National Institute on Alcohol Abuse and Alcoholism (NIAAA) in 1982 stated, in one of their publications that "the average person arrested for public inebriation has been arrested 12 times before."

The literature supported information revealed in our regional interviews, that a very small number of individuals make up the chronic repeat offender. While we could not determine what percent this population was, Shore (1984), put this number at 3 to 5% of the problem drinkers.

Repeated hospitalizations and admissions to community detoxification centers, in addition to multiple arrests and convictions for public drunkenness, are common occurrences for the chronic offender. According to Finn (1985), "in some detoxification centers, 25% of admissions represent inebriates who have been admitted at least 10 times within 3 to 24 months."

The literature search identified several factors which characterize habitual offenders of the public intoxication statute. The factors are as follows:

- Multiple arrests for public intoxication in accordance with §18.2-388 of the Code of Virginia;
- Multiple transports to a court-approved detoxification center in lieu of arrest pursuant to §18.2-388 of the Code;
- Multiple commitments to jail by any judicial officer, as an unreasonable danger to

himself or the public as the result of intoxication, in accordance with §19.2-120 of the Code;

- Multiple convictions of public intoxication pursuant to §18.2-388, either as the result of a hearing before a judicial officer or in absentia, in accordance with §19.2-258 of the Code;
- Multiple convictions of drinking in public pursuant to §4-78 of the Code;
- Multiple convictions of driving under the influence pursuant to §18.2-266 or §46.2-341.24 of the Code;
- Multiple failures to comply with court imposed sanctions following a conviction of public intoxication pursuant to §18.2-388 of the Code;
- Interdiction(s) for being an habitual drunkard, in accordance with §4-51 of the Code;
- Violation(s) of an interdiction order pursuant to §4-51 of the Code;
- Multiple admissions and treatment at an emergency room for medical problems or injuries occurring as the result of being intoxicated in public pursuant to §18.2-388 of the Code or due to the ingestion of alcohol; and
- Multiple admissions, voluntary or otherwise, to any facility as defined in §37.1-1 and §37.1-217 of the Code for the treatment of alcoholism or alcohol induced psychosis;

Time and Cost Factors

While everyone interviewed shared the belief that the chronic public inebriate accounted for a significant utilization of limited resources, specific cost data for Virginia was very limited. Willenbring (1990), revealed that "a 1984 feasibility study determined that the service utilization patterns and associated costs over a one year period for 43 chronic public inebriates randomly selected from the Hennepin County (Minnesota) detox center population totalled \$15,900 per person per year for medical and psychiatric costs and \$6,940 per person per year for legal and social services expenditures, for a total of \$22,840 per person per year." Willenbring further stated that "approximately 450 were considered active, thus the total public expenditures that we could directly account for amounted to over \$9.7 million per year for less than 500 people."

As noted earlier in this report, the Commission on Prison and Jail Overcrowding (COPJO) report identified in 1989, 60,317 arrests and 45,524 commitments to jail for public drunkenness in Virginia. In 1991, arrests decreased to 58,954 but, due to an improved jail data assessment, there were 52,226 commitments to jail for public drunkenness. These commitments accounted for slightly less than 58,300 reported prisoner days. An estimate

of the daily contribution by the State Compensation Board for a "reported day" during that year was approximately \$31, inclusive of jail administration, jail and treatment officers, medical costs, and operating costs reimbursed through the "per-diem" paid for local prisoners and state responsible felon prisoners. Therefore, the state paid approximately \$1,810,400 to house public inebriates in local jails in 1991.

In addition to jail costs, public inebriates utilize a significant amount of law enforcement officer time. Officials in Fairfax County stated that it cost at least \$30 for each hour of a law enforcement officer's involvement with a public inebriate. In an article in the July 26, 1992 edition of the Richmond Times-Dispatch, entitled "Are Jails Becoming Detox Centers?," Richmond City Police were reported to have indicated that it cost between \$20.53 and \$26.80 per hour, depending on the time of day, for law enforcement involvement with public inebriates. The article noted Richmond City Police indicate that about 2 3/4 hours can be spent on each public inebriate arrest, including transportation, lock-up and court time.

Gallant (1973), revealed that "a drunk arrest in New Orleans can take 2 1/2 to 4 hours of police department time for transportation, booking, court appearance and correctional officer time for each convicted alcoholic. This amounts to \$100 to \$130 per arrest/conviction, \$1,400 to \$1,800 annually, and between \$700,000 to \$1,100,000 of non-treatment costs for the arrests of 210 chronic alcoholic municipal court offenders."

Based on the aforementioned cost factors associated with public inebriate arrests in Virginia, the following model was developed.

1 3/4 hours at \$20 per "law enforcement hour" =	\$35.00
1/2 hour at \$15 per "magistrate hour" =	\$7.50
<u>1/2 hour at \$255 per "judge/court hour" =</u>	<u>\$127.50</u>
2 3/4 Hours/arrest incident	
Cost Per Inebriate Arrest	\$140.00

Therefore \$ 35.00 x 58,954 arrests =	\$2,063,390.00
7.50 x 52,226 pretrial confinements =	391,695.00
127.50 x 9,320 handled by court =	<u>1,188,300.00</u>
	\$3,643,385.00
Compensation Board payments	<u>\$1,810,400.00</u>
Total Public Inebriate Costs	\$5,453,785.00

Approximately \$5.5 million was expended by the criminal justice system for public inebriates during 1991. This however, does not include the local contribution for jail operations, nor does this estimate include medical emergency, mental health and substance abuse treatment costs. Wells (1985), indicate that "the chronic public inebriate utilizes public service significantly out of proportion to his numbers, and accounts for a disproportionate share of

alcoholism treatment costs." It is clear from both the literature and the regional interviews that a significant number of the arrests for public drunkenness can be attributed to a small number of individuals. It is estimated that between 3,000 and 12,000 individuals, who are chronic and repeat offenders, account for the majority of arrests and associated criminal justice costs.

Policy Issues

In many states where decriminalization, or reduced sanctions, for public drunkenness has been implemented, "the revolving door of the drunk tank has been replaced by more costly revolving doors at detox centers," Finn (1985). However, even the researchers cannot agree on the effectiveness of this policy. Richman (1984), stated that "there is some evidence that custodial care and protection of the alcoholic may have been accomplished more effectively by a stay in jail than a stay in a detox center." Pitman (1958), in a study of 1,356 individuals committed to the Monroe County penitentiary in New York for public intoxication, concluded "that jailing had not deterred them from further drinking."

Treatment professionals similarly disagree. Finn (1985), notes that "to date no methods of alcohol rehabilitation appear to be effective for the 'skid row' inebriate." Referring to community based short term treatment, Gallant (1973), arrived at the conclusion that "compulsory inpatient treatment showed no superiority over other treatment approaches." His major decision factor was overall cost. Richman (1984), felt that "detox loopers," the modern day equivalent of the revolving door chronic public inebriate offender, "sought care, shelter and asylum," but reject treatment. Therefore, he felt that "the social setting or outpatient detox (short term services) may be inappropriate when an alcoholic seeks asylum instead of a bridge to rehabilitation." With cost, again, a mitigating factor, he concluded that repeated detoxification of persons who do not commit themselves to entering rehabilitation is of minimum benefit to the patient and absorb resources. We know from the literature and from Virginia experience that 95% of alcoholics can be detoxed by outpatient social setting procedures," Richman (1984). In addition a 1966 study by Dolen indicated that "80% of all street drunks consistently accepted admission to detox." Chronic public inebriates are not, however, the majority of individuals arrested for public intoxication.

Public Inebriate and Social Detoxification Facilities

Woogh (1986), cites a 1979 Ontario, Canada Ministry of Health report which states, that "during the past 30 years...the most visible group of alcoholics in the community has been the chronic drunkenness offenders whose actions were considered to be "self-destructive behavior, warranting arrest and incarceration in jail." The Ministry, which developed the program model for social setting detoxification, also cautioned that, "It must be recognized that a detoxification center is only the initial phase, without rehabilitation and follow up services it offers little more than a comparative period in jail." These factors indicate that the majority of public inebriates can be safely diverted from the jails and lockups into public inebriate centers or social detoxification facilities. Such diversion could result in significant

reductions in the number of individuals arrested for drunk in public, especially for the non-repeat offender. Many law enforcement and correctional professionals agree that jail is not an appropriate setting but that public inebriate/detoxification centers would be more appropriate.

An analysis of the decline in total arrests for drunk in public from CY 1990 to CY 1991 indicates that cities accounted for 62% of the decline in total arrests and that Newport News and Virginia Beach were responsible for 49% of the total reduction. Newport News experienced a 31% decline in arrests during the past year, attributable to an 18 month effort by the Capo' Detoxification Center to increase the number of direct law enforcement referrals to their facility. The center provides both public inebriate "sobering-up" and social setting detoxification services. The City of Virginia Beach had even more dramatic results with a 42% decline in public inebriate arrests during the past year. Staff from their detoxification program (The Recovery Center) worked for a year with precinct commanders to increase direct law enforcement referrals. Detox staff located at two of the city's precincts screened inebriates brought to the sub-station lock-ups and diverted those suitable for "sobering-up" and social detoxification services. In addition, the workers also provided intervention services for police in domestic situations where drug or alcohol abuse was suspected.

The public inebriate center in Winchester (Starting Point) is another example of what can be done with public inebriates. Starting Point began services on July 1, 1982 as an outgrowth of a detox program in Front Royal, previously funded by federal Law Enforcement Assistance Administration (LEAA) funds. Prior to that year, total annual arrests for drunk in public in the three localities served by the facility ranged between 2,000 to 3,000. At the end of FY 1983 the three localities reported only 196 arrests for drunk in public while the facility reported 3,722 admissions, of which 60% were by law enforcement staff. While arrests for drunk in public have doubled during the past 10 years in these localities, admissions to Starting Point have grown to between 4,000 and 5,000 annually, about 90% of which are now direct law enforcement.

While diversion of the public inebriate addresses part of the problem, it will not address the problems of the chronic repeat offender who has the most impact on the business community. The controversy about "what works" is summed up by Finn (1985), who states, "there is a need for special housing facilities for those men who cannot live independently and yet do not require institutionalization." Not only is there a need for "special housing facilities" but civil and criminal measures may need to be developed to keep them in the facilities involuntarily.

FINDINGS AND RECOMMENDATIONS

While arrests for public intoxication are declining, the cost of the chronic repetitive public inebriate on medical, business, treatment and criminal justice systems is considerable and is increasing. Present treatment systems are not equipped to significantly reduce the impact of this population.

Recommendation 1:

The study of the public inebriate problem should be continued to 1994. The continuing study should focus on the review and strengthening of the civil and criminal statutes that relate to public intoxication. In particular the statutory review should consider incarceration and/or treatment for an extended period for chronic offenders.

Recommendation 2:

The Department of Mental Health, Mental Retardation and Substance Abuse Services should develop a cost effective program model to provide long term services for chronic alcoholics.

Social detoxification and public inebriate centers are cost effective alternatives in diverting the majority of public inebriates from the criminal justice system and screening cases from hospital emergency services.

Recommendation 3:

The Department of Mental Health, Mental Retardation and Substance Abuse Services, with the assistance of the Department of Criminal Justice Services, should review data on public inebriate arrests throughout the Commonwealth and develop cost estimates to implement programs in areas of high incidence and to expand the capacity of current public inebriate and social detoxification programs.

APPENDICES

APPENDIX I

House Joint Resolution - 174

1992 SESSION

LD4141156

HOUSE JOINT RESOLUTION NO. 174

Offered January 21, 1992

Requesting the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), with the assistance and cooperation of the Department of Criminal Justice Services, to study alternatives to repeated arrests of public inebriates.

Patron—Cohen

Referred to the Committee on Health, Welfare and Institutions

WHEREAS, public intoxication is punished as a Class 4 misdemeanor, an offense for which the offender cannot be incarcerated, and

WHEREAS, public inebriates may be arrested repeatedly and convicted of the crime, and

WHEREAS, the crime of public intoxication is not deterred by such repeated arrests, and

WHEREAS, public intoxication is as much a public health concern as a criminal offense; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the DMHMRSAS, with the assistance and cooperation of the Department of Criminal Justice Services, be requested to study an alternative to repeated arrests of persons for public intoxication.

The DMHMRSAS should (i) consider the development of a definition of a "repeat offender" public inebriate, (ii) consider an alternative which provides for the arrest, conviction and incarceration of an individual deemed a repeat offender, (iii) investigate cost-effective avenues of treatment of a person who is a repeat offender which do not necessarily involve incarceration or which accompany incarceration and (iv) make appropriate recommendations.

The DMHMRSAS should complete its work in time to submit its recommendations to the Governor and the 1993 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for processing legislative documents.

APPENDIX 2

LIST OF INDIVIDUALS INTERVIEWED

Representatives interviewed in Alexandria were:

Harriet Reed Williams, Arlington Community Services Board
Richard Kauffman, Alexandria Recreation Department
Larry Black, Arlington Magistrate's Office
David Bogard, Arlington Sheriff's Office
David Speck, Alexandria City Council
Mike O'Brien, Prince William County Criminal Justice Services
John Blake, Arlington County, Police Department
Steve Holl, Arlington County, Police Department
Jerry Lesko, Prince William County, Police Department
John E. Kloch, Commonwealth Attorney, Alexandria
Tim Harmon, Fairfax-Falls Church CSB Alcohol and Drug Services
Joan Volpe, Fairfax-Falls Church CSB, SAS Director
Linda M. Ghitton, ARHA
Archie Alexander, ARHA
Brian Moran, Asst. Commonwealth Attorney, Arlington
Jim Dunning, Alexandria Sheriff's Office
Goodman Ohpang, Alexandria Office of Housing
Bill Brown, Fairfax County Police Department
Lenny George, Alexandria Police Department
Dan O'Flaherty, Alexandria District Court
Linda Eichenbaum, Alexandria Adult Probation and Parole

Representatives interviewed in Roanoke were:

Bobby D. Casey, Magistrate's Office
Gerald S. Holt, Sheriff's Office Roanoke County
Harold A. Phillips, Roanoke County Police Department
Don Shields, Roanoke City Police Department
Jim Phipps, Court-Community Corrections
Donald Caldwell, Roanoke City Commonwealth Attorney
Eddie Blair, Mental Health Services Roanoke Valley
Henry Altice, Mental Health Services Roanoke Valley
Harris Greene, Roanoke City Jail
Margo Kiely, Mental Health Services Roanoke Valley
George Snead, Director of Public Safety, City of Roanoke
Ellen Brown, Director, Total Action Against Poverty
Vic Robinson, Mental Health Services of Roanoke Valley

Anthony Reed, Mental Health Services of Roanoke Valley
Kathleen Carroll, Mental Health Services of Roanoke Valley
Amy Mason, Downtown Roanoke Incorporated
R. M. Surrusco, M.D., Emergency Room Medical Director
Roanoke Memorial and Community Hospitals
John Chambliss, Roanoke County

Representatives interviewed in Richmond were:

Marty Tapscott, Chief of Police, City of Richmond
Susan Crump, Vice President, United Way Planning Division
James C. May, Ph.D., Substance Abuse Director,
Richmond Community Services Board
Phil Jordan, Richmond Crisis Intervention
Nancy Gowen, Outreach Case Manager, Homeless Services
James Hopkins, Director, Rubicon Intake Services
Larry Everette, Employee Assistance Counselor,
Richmond Public Schools & Past Chair, Richmond Community Services Board
Mary Winfree, Central Richmond Association & St. Paul's Episcopal Church
Karen B. Redford, CSAC, Supervisor, Treatment Alternatives to Street Crime (TASC)
Lenora Vann, Richmond Crisis Intervention
Judge Ralph Robertson, Richmond General District Court
Aldine R. West, Team Leader, Richmond Community Services Board
Beulah Forbes, Substance Abuse Counselor, The Daily Planet
Christi L. Schroeder, Working Supervisor, Richmond Police Department
Virginia Ritchie, President, Central Richmond Association
D. Eugene Cheek, Judge, Richmond General District Court, Criminal Division

Appendix 3

SUGGESTED CONTINUING RESOLUTION

HOUSE JOINT RESOLUTION NO.

Requesting the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), with the assistance and cooperation of the Department of Criminal Justice Services, to continue the study of alternatives to repeated arrests of public inebriates.

WHEREAS, public intoxication is punished as a Class 4 misdemeanor, an offense for which the offender cannot be incarcerated; and

WHEREAS, public inebriates may be arrested repeatedly and convicted of the crime; and

WHEREAS, the crime of public intoxication is not deterred by such repeated arrests; and

WHEREAS, public intoxication is as much a public health concern as a criminal offense; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the DMHMRSAS, with the assistance and cooperation of the Department of Criminal Justice Services and with consultation from the Office of the Attorney General, be requested to continue the study of alternatives to repeated arrest of persons for public intoxication.

The DMHMRSAS should: (i) consider the development of a definition of a "repeat offender" public inebriate; (ii) develop recommendations to strengthen existing laws relating to public intoxication and repeat offenders; (iii) recommend cost-effective avenues of treatment for people who are chronic repeat offenders; and (iv) develop cost estimates to expand capacity of public inebriate diversion programs.

The DMHMRSAS should complete its work in time to submit its recommendations to the Governor and the 1994 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for processing legislative documents.

Appendix 4

VIRGINIA LAWS RELATED TO PUBLIC INTOXICATION

ARTICLE 1.1.

Detoxification Center Program.

§ 9-173.1. Establishment of programs; purpose; rules and regulations. — A. The Department of Criminal Justice Services shall promulgate rules and regulations, no later than October 1, 1982, the purpose of which shall be to make funds available to local units of government for establishing, operating and maintaining or contracting for local or regional detoxification center programs to provide an alternative to arresting and jailing public inebriates.

B. The Department of Criminal Justice Services shall promulgate rules and regulations for the implementation of such programs.

C. Detoxification center programs established or operated pursuant to this section shall be governed solely by the rules and regulations promulgated by the Department of Criminal Justice Services therefor. The Department of Criminal Justice Services shall establish a grant procedure to govern the award of funds as may be appropriated for such purposes to local units of government. (1982, c. 666.)

§ 9-173.2. Definitions. — The following terms, whenever used in this article, shall have the following meanings:

"Detoxification center program" means any program or procedure whereby a local governing body, or any combination of local governing bodies, establishes, operates or maintains or otherwise arranges or contracts for the establishment, operation or maintenance of a facility, whether operated by the locality or by a private agency, for the placement of public inebriates as an alternative to jailing such persons. A judge of the district court in the jurisdiction in which the facility will be located shall approve specific methods and means of transportation available to law-enforcement officers for transporting public inebriates to such programs.

"Public inebriate" means any person who is drunk in a public place and would be subject to arrest for drunkenness under § 18.2-388. (1982, c. 666.)

§ 4-51. *Interdiction of intoxicated driver or habitual drunkard.* — (a) *Entry of order of interdiction.* — When after a hearing upon due notice it shall be made to appear to the satisfaction of the circuit court of any county or city, or the judge thereof in vacation, that any person, residing or sojourning within such county or city, has on or after March 21, 1934, been convicted of driving or running any automobile, car, truck, motorcycle, engine or train while intoxicated or has shown himself to be an habitual drunkard, the court, or the judge thereof in vacation, may make an order or interdiction prohibiting the sale of alcoholic beverages to such person until further ordered. The court or judge entering any such order shall cause a copy of the same to be forthwith filed with the Board.

(b) *Publication of order.* — Upon such order of interdiction being filed with the Board, it shall cause a copy thereof to be published at least once in a newspaper having a general circulation in the county or city in which the court which issued the order is held, and in such other newspaper as the Board may direct. It shall thereafter as long as such order shall remain in effect be unlawful, as provided in § 4-62, for anyone to sell alcoholic beverages to such interdicted person except in accordance with the provisions of §§ 4-48 and 4-50.

(c) *Amendment or cancellation of order.* — The court or judge entering any order of interdiction may thereafter at any time alter, amend or cancel the same as in its judgment it shall deem proper. A copy of each such alteration, amendment and cancellation shall be filed with the Board and published as hereinbefore provided as to orders of interdiction.

(d) *Private hearing.* — Any hearing or investigation under this section by any court or judge may be held in private if the court or judge or person accused shall so direct. (1934, p. 123; 1936, p. 427; Michie Code 1942, § 4675(35); 1956, c. 53; 1982, c. 66.)

The term "habitual drunkard" clearly encompasses one who is admittedly in the continual habit of being intoxicated from alcohol. *Fisher v. Coleman*, 486 F. Supp. 311 (W.D. Va. 1979), *aff'd*, 639 F.2d 191 (4th Cir. 1981).

Plaintiff lacked standing to challenge the interdiction provisions of this section on vagueness and overbreadth grounds in light of his 59 convictions for public drunkenness over a period of slightly more than two years prior to his interdiction, which conduct fell clearly within the challenged language. *Fisher v. Coleman*, 639 F.2d 191 (4th Cir. 1981).

A person who had 59 convictions of public drunkenness during a period of slightly over two years and whose counselor at the local alcoholic treatment center described him as an incorrigible public drunkard was without standing to allege that the term "habitual drunkard," as used in this section governing interdiction of habitual drunkards, was void for vagueness, since claims of overbreadth and vagueness may not be brought by persons whose actions fall clearly within the terms of the statute in question. *Fisher v. Coleman*, 486 F. Supp. 311 (W.D. Va. 1979), *aff'd*, 639 F.2d 191 (4th Cir. 1981).

Application of section not unconstitutional. — Although this section, governing interdiction of habitual drunkards, does not precisely define the term "habitual drunkard," it was not unconstitutionally vague as applied to a particular person, in light of that person's admitted alcoholism for 14 years and 59 convictions of public drunkenness in slightly more than two years, and his failure to make efforts to respond to court-ordered medical treatment, especially where he made no contention that had the statute's coverage been known to him, he would have acted differently. *Fisher v. Coleman*, 486 F. Supp. 311 (W.D. Va. 1979), *aff'd*, 639 F.2d 191 (4th Cir. 1981).

Purpose of publication of order is to give actual notice. — There is nothing in either this section or § 4-62 to indicate that the purpose of the publication of the order of interdiction is other than to give notice to one who might actually see it. There is no suggestion that all persons selling alcoholic beverages are to be charged with notice of such publication irrespective of whether they may have seen it. *Calamos v. Commonwealth*, 184 Va. 397, 35 S.E.2d 397 (1945).

Applied in *Colvin v. Deaton*, 577 F. Supp. 925 (W.D. Va. 1984).

§ 4-52. Interdiction for illegal manufacture, possession, transportation or sale of alcoholic beverages; possession by interdicted person unlawful. — (a) When any person has been found guilty of the illegal manufacture or the illegal possession or the illegal transportation or the illegal sale of alcoholic beverages or maintaining a common nuisance as defined in § 4-81, the court or the judge thereof trying the case, may without further notice or additional hearing enter an order of interdiction prohibiting the sale of alcoholic beverages to such person for one year from the date of the entry of the order, and thereafter if further ordered. Such orders of interdiction shall be published in the same manner and shall have the same effect as orders of interdiction provided for in § 4-51.

(b) The possession of alcoholic beverages, except such alcoholic beverages as may have been, or may be, acquired in accordance with the provisions of §§ 4-48 and 4-50, or either of them, by any person who has been interdicted under the provisions of this chapter, shall be unlawful, and any interdicted person found in possession of alcoholic beverages in violation of the provisions of this section shall, notwithstanding any other provision of this chapter to the contrary, be guilty of a misdemeanor and punished as provided in § 4-92. (1938, p. 264; Michie Code 1942, § 4675(35a); 1954, c. 484; 1982, c. 66.)

Sale without knowledge of interdiction. — A seller should not be interdicted for selling alcoholic beverages to an interdicted person when he had no actual knowledge of or reason to believe the fact of the purchaser's interdiction. *Calamos v. Commonwealth*, 184 Va. 397, 35 S.E.2d 397 (1945).

Evidence of possession. — Evidence held insufficient to sustain conviction for unlawful possession under this section. *Charles v. Commonwealth*, 184 Va. 63, 34 S.E.2d 136 (1945).

Applied in *Patterson v. Commonwealth*, 187 Va. 913, 48 S.E.2d 357 (1948).

§ 4-62. Persons to whom alcoholic beverages may not be sold; penalties; forfeiture. — A. If any person shall, except pursuant to the provisions of § 4-48 or § 4-50, sell any alcoholic beverages to any person and at the time of such sale shall know or have reason to believe that the person to whom the sale is made is (i) less than twenty-one years of age, except as to beer as provided herein or (ii) interdicted, or (iii) intoxicated, he shall be guilty of a misdemeanor. If a person shall sell beer to another person and at the time of such sale shall know or have reason to believe that the person to whom the sale is made is less than twenty-one years of age or had not attained the age of nineteen years by July 1, 1985, he shall be guilty of a misdemeanor.

B. If any person to whom an alcoholic beverage may not lawfully be sold under this section shall purchase or possess any alcoholic beverage, except pursuant to the provisions of § 4-48 or § 4-50, he shall be guilty of a misdemeanor. In addition to the penalties otherwise prescribed for a violation of this section, upon conviction, such person's license to operate a motor vehicle in this Commonwealth may be suspended for a period of not more than one year. Any alcoholic beverage purchased or possessed in violation of this section shall be deemed contraband and forfeited to the Commonwealth in accordance with the provisions of § 4-55.

The provisions of this subsection shall not be applicable to (i) the possession of alcoholic beverages by a person less than twenty-one years of age making a delivery of alcoholic beverages in pursuance of his employment or an order of his parent or (ii) any regularly employed member of a state, federal, or local law-enforcement agency when possession of an alcoholic beverage is necessary in the performance of his duties. (1934, p. 126; 1936, p. 433; Michie Code 1942, § 4675(42); 1970, c. 686; 1974, c. 460; 1979, c. 537; 1981, c. 24; 1982, c. 66; 1983, c. 608; 1985, c. 559; 1990, c. 771.)

The 1990 amendment redesignated former subsection (1) as present subsection A. and redesignated clauses (a) through (c) as clauses (i) through (iii) in the first sentence therein; redesignated former subsection (2) as present subsection B. and in the second paragraph of subsection B. deleted the former designation (3) at the beginning, added clause designation "(i)," and added the language beginning "or (ii) any regularly employed member" at the end of the paragraph.

Law Review. — For a comment on Virginia's dramshop immunity, see 10 Geo. Mason L. Rev. 285 (1988).

Section does not create cause of action, etc.

A third party does not have a claim for relief against seller of intoxicating beverages for injuries sustained as a result of the intoxication of the vendor's patron, even if the patron is a minor. *Bvrd v. Gate Petroleum Co.*, 845 F.2d 86 (4th Cir. 1988).

§ 4-92. Punishment for violations of chapter or regulations; requiring bond; appearance by attorney for Commonwealth. — (a) *Punishment prescribed.* — Any person convicted of a misdemeanor under the provisions of this chapter without specification as to the class of offense or penalty therefor, or convicted of violating any other provision thereof, or convicted of violating any regulation made by the Board under the provisions of this chapter, shall be guilty of a Class 1 misdemeanor.

(b) *Requiring bond.* — In addition to the penalties imposed by this chapter for violations thereof, any court before whom any person is convicted of violating any provision of this chapter may require such defendant to execute bond, with approved security, in the penalty of not more than \$1,000, conditioned that the defendant will not violate any of the provisions of this chapter, for the term of one year. If any such bond is required and is not given, the defendant shall be committed to jail until it is given, or until he is discharged by the court, provided he shall not be confined therefor for a longer period than six months. If any such bond required by a court is not given during the term of the court by which conviction is had, it may be given before the judge thereof in vacation or before the clerk of such court.

(c) *Cancellation of license.* — The provisions of this chapter shall not be construed to prevent the Board from canceling the license of any person convicted of violating any provision of this chapter.

(d) *Appearance by attorney for Commonwealth.* — The attorneys for the Commonwealth are hereby directed to appear and represent the Commonwealth before the court trying any person for any violation of this chapter in their respective jurisdictions, except for drinking in public. No court shall hear such a case unless the respective attorney for the Commonwealth or his assistant is present or has been duly notified of such a case pending. (1934, p. 132; Michie Code 1942, § 4675(62); 1984, c. 603.)

Cross reference. — As to punishment for Class 1 misdemeanors, see § 18.2-11.

The bond authorized by this section is intended as a precautionary measure to prevent future violations of the law by a convicted person who is likely to be guilty of such violations. But where a man of good character has violated one of the provisions of the act, and there is no evidence indicating that he is likely again to do so, it is not proper to require him to execute a bond conditioned that he will not violate any of the provisions of the act for the term of one year. *Snarr v. Commonwealth*, 131 Va. 814, 109 S.E. 590 (1921).

And the imposition thereof is within

discretion of trial judge. — The exercise of the authority given by this section to impose a peace bond upon conviction of a violation of the Alcoholic Beverage Control Act, is left to the sound judicial discretion of the trial judge, and is only conditioned upon there being a conviction. *Sutherland v. Commonwealth*, 171 Va. 485, 198 S.E. 452 (1938).

When bond not required or vacated. — After an acquittal, or a final conclusion of the case favorable to the accused, no bond may be required. And a final judgment reversing the conviction vacates a peace bond required to be given under this section. *Sutherland v. Commonwealth*, 171 Va. 485, 198 S.E. 452 (1938).

§ 18.2-11. Punishment for conviction of misdemeanor. — The authorized punishments for conviction of a misdemeanor are:

(a) For Class 1 misdemeanors, confinement in jail for not more than twelve months and a fine of not more than \$2,500, either or both.

(b) For Class 2 misdemeanors, confinement in jail for not more than six months and a fine of not more than \$1,000, either or both.

(c) For Class 3 misdemeanors, a fine of not more than \$500.

(d) For Class 4 misdemeanors, a fine of not more than \$250. (1975, cc. 14, 15; 1990, c. 788.)

The 1990 amendment substituted "\$2,500" for "\$1,000" in subdivision (a), substituted "\$1,000" for "\$500" in subdivision (b), and substituted "\$250" for "\$100" in subdivision (d).

§ 18.2-388. Profane swearing and intoxication in public; penalty; transportation of public inebriates to detoxification center. — If any person profanely curses or swears or is intoxicated in public, whether such intoxication results from alcohol, narcotic drug or other intoxicant or drug of whatever nature, he shall be deemed guilty of a Class 4 misdemeanor. In any area in which there is located a court-approved detoxification center a law-enforcement officer may authorize the transportation, by police or otherwise, of public inebriates to such detoxification center in lieu of arrest; however, no person shall be involuntarily detained in such center. (Code 1950, § 18.1-237; 1960, c. 358; 1964, c. 434; 1975, cc. 14, 15; 1979, c. 654; 1982, c. 666; 1983, c. 187; 1990, c. 965.)

The 1990 amendment, in the first sentence, substituted "curses or swears or is intoxicated in public" for "curse or swear or be drunk in public," and inserted "whether such intoxication results from alcohol, narcotic drug or other intoxicant or drug of whatever nature."

Appendix 5

ARREST AND JAIL COMMITMENT DATA 1986 - 1991

ANALYSIS OF ARRESTS FOR DRUNK IN PUBLIC

In calendar year 1989 there were 60,317 arrests reported to the Virginia State Police for the offense of being Drunk in Public. This represented 15.4% of all arrests, and 18.1% of the total Part II arrests which include the non-serious felony and all of the criminal misdemeanor offenses. In 1989 DIP arrests ranked number 1 of the total reported for Part II offenses.

The ranking of the top 10 Part II arrests, exclusive of the category called "All Other, except Traffic", is as follows:

1. Public Drunkenness-	60,317	6. Liquor Laws-	11,082
2. DUI-	46,977	7. Disorderly Conduct-	11,010
3. Other Assaults-	40,012	8. Weapons:Possession-	6,254
4. Fraud-	17,175	9. Vandalism-	6,041
5. Narcotics:Possession-	14,715	10. Narcotics:Sale/Manu.-	5,578

Drunk in Public arrests according to Table I, which is on the next four pages; increased 11.8% from calendar year 1986 to 1989, while total arrests increased 17.9%. During these four years, public inebriety accounted for 15 to 16% of the total statewide arrests. In 1983, the year the DCJS Detoxification Center Program (PIC program) was implemented, DIP arrests accounted for 18.5% of the total and for 20.5% during 1975, the first year that UCR data was available.

TABLE I

TOTAL ARRESTS FOR DRUNK IN PUBLIC BY LOCALITY FOR CALENDAR YEARS
1986 THROUGH 1989 *

<u>Counties</u>					<u>1989</u>
<u>Locality</u>	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>Total Population</u>
Accomack	34	56	76	108	32,200
Albemarle	119	129	140	147	63,200
Alleghany	137	83	110	97	13,300
Amelia	8	3	5	1	8,500
Amherst	148	140	128	154	28,900
Appomattox	18	7	12	16	12,400
Arlington	957	1,140	1,167	1,409	159,000
Augusta	82	114	122	165	51,600
Bath	14	16	16	17	5,000
Bedford	82	98	132	68	41,500
Bland	47	19	61	101	6,400
Botetourt	46	56	52	62	25,300
Brunswick	14	11	9	10	16,000
Buchanan	412	558	526	458	34,200
Buckingham	3	8	9	7	12,600
Campbell	141	140	119	128	46,900
Caroline	130	108	119	107	19,300
Carroll	187	158	217	226	27,500
Charles City	2	3	3	2	6,600
Charlotte	31	16	21	21	11,800
Chesterfield	494	699	677	851	187,100
Clarke	33	46	47	61	10,800
Craig	4	6	1	7	4,100
Culpeper	262	215	164	274	25,800
Cumberland	6	3	5	2	8,100
Dickenson	293	264	326	275	18,900
Dinwiddie	40	49	53	50	21,100
Essex	21	23	32	29	9,000
Fairfax	4,084	4,527	5,186	6,137	759,300
Fauquier	298	258	260	369	46,100
Floyd	45	57	46	16	12,000
Fluvanna	7	6	4	7	12,100
Franklin	215	212	258	260	40,900
Frederick	78	62	80	122	39,900
Giles	232	248	232	272	17,100
Gloucester	154	220	206	157	30,600
Goochland	14	19	18	16	13,500
Grayson	73	47	65	54	16,200
Greene	57	50	59	42	9,100
Greensville	75	41	29	28	9,200
Halifax	31	30	34	14	29,400
Hanover	173	230	269	340	59,000
Henrico	672	684	738	816	205,200
Henry	193	275	230	283	58,100

TABLE 1- CONTINUED

<u>Locality</u>	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1989</u> <u>Total Population</u>
Highland	2	9	9	21	2,600
Isle of Wight	37	34	44	50	25,500
James City	118	99	99	170	32,800
King & Queen	7	2	3	1	6,300
King George	29	35	60	29	12,500
King William	16	12	6	8	10,600
Lancaster	20	21	4	14	11,000
Lee	426	406	398	537	25,500
Loudoun	594	675	663	855	75,200
Louisa	25	32	50	38	19,800
Lunenburg	120	77	67	48	12,100
Madison	7	13	25	21	11,000
Mathews	44	45	39	23	8,800
Mecklenberg	134	152	128	141	29,700
Middlesex	9	19	8	22	8,700
Montgomery	787	774	792	788	67,000
Nelson	41	46	41	32	12,600
New Kent	15	19	10	17	11,100
Northampton	7	43	29	43	14,200
Northumberland	21	16	22	21	10,300
Nottoway	79	53	95	98	14,900
Orange	159	158	187	209	20,900
Page	227	207	159	138	20,600
Patrick	110	110	118	98	17,400
Pittsylvania	192	187	164	173	55,400
Powhatan	7	13	5	6	14,000
Prince Edward	122	81	100	73	17,600
Prince George	17	9	8	7	27,100
Prince William	923	1,242	1,395	1,512	197,700
Pulaski	860	802	669	590	34,000
Rappahannock	31	31	27	53	6,400
Richmond	8	10	7	16	7,400
Roanoke	476	445	352	373	75,500
Rockbridge	60	64	77	78	17,900
Rockingham	457	493	442	506	56,100
Russell	552	429	446	401	31,100
Scott	485	513	461	586	25,100
Shenandoah	168	171	252	296	29,600
Smyth	607	489	442	445	32,500
Southampton	27	24	26	16	18,100
Spotsylvania	87	145	141	157	44,000
Stafford	250	284	322	362	55,900
Surry	1	1	1	3	6,500
Sussex	36	41	29	35	10,300
Tazewell	1,101	953	738	803	48,300
Warren	442	369	494	434	25,100
Washington	794	615	441	678	47,000

TABLE 1- CONTINUED

<u>Locality</u>	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>Total</u> ¹⁹⁸⁹ <u>Population</u>
Westmoreland	59	88	88	99	15,000
Wise	737	827	538	592	42,900
Wythe	328	294	254	318	25,600
York	198	247	260	259	4,300
TOTAL	22,250	23,064	23,302	26,080	3,752,000

Cities

Alexandria	647	1,069	1,236	1,156	107,600
Bedford	63	109	113	117	6,100
Bristol	695	668	611	482	17,700
Buena Vista	53	49	73	94	6,400
Charlottes- ville	832	1,090	1,149	1,023	42,100
Chesapeake	748	761	863	941	147,100
Clifton Forge	123	98	119	86	4,900
Colonial Heights	87	71	69	102	17,500
Covington	127	120	92	84	7,400
Danville	1,578	1,433	1,707	1,595	53,700
Emporia	163	139	127	129	5,800
Fairfax	350	440	456	526	20,100
Falls Church	134	173	184	235	10,100
Franklin	100	90	82	114	7,500
Fredericks- burg	317	611	794	779	21,500
Galax	411	280	321	275	6,900
Hampton	1,740	1,863	1,942	1,609	129,700
Harrisonburg	614	628	738	988	27,600
Hopewell	359	310	218	278	24,200
Lexington	155	152	188	102	6,900
Lynchburg	858	834	634	685	69,900
Manassas	381	357	624	717	23,300
Manassas Park	85	79	83	95	7,300
Martinsville	316	303	262	239	18,000
Newport News	1,769	1,335	1,569	2,166	162,800
Norfolk	2,125	2,496	2,129	1,711	290,900
Norton	172	136	124	148	4,400
Petersburg	646	593	350	471	41,100
Poquoson	39	25	45	52	11,000
Portsmouth	903	739	692	883	110,500
Radford	347	404	511	412	13,400
Richmond	4,817	4,506	3,760	3,231	214,500
Roanoke	4,449	5,551	5,272	6,146	98,600
Salem	313	357	459	353	24,200
South Boston	157	144	64	62	7,000

TABLE I- CONTINUED

<u>Locality</u>	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1989</u> <u>Total Population</u>
Staunton	459	457	504	438	24,100
Suffolk	594	631	657	707	52,800
Virginia					
Beach	3,169	3,287	3,881	4,124	364,300
Waynesboro	285	265	247	311	18,300
Williamsburg	187	147	137	230	12,400
Winchester	341	367	386	311	22,400
TOTAL	31,708	33,167	33,479	34,237	2,262,000

STATE DIP ARRESTS

TOTAL	53,958	56,231	56,781	60,317	6,015,100
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	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>
STATE TOTAL				
ARRESTS	332,185	346,171	375,430	391,503

STATE TOTAL

PART II

ARRESTS	284,599	295,597	320,139	333,686
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TOTAL GENERAL POPULATION

1986	5,800,150
1987	5,874,310
1988	5,948,380
1989	6,015,100

* From Crime in Virginia : Virginia Department of State Police;
Calendar Years 1986 through 1989.

Table II lists the 136 political subdivisions reporting in Crime in Virginia ranked by highest number of arrests for Drunk in Public. Of these localities, Fairfax at 6,137 was the county reporting the highest number, while Roanoke City lead all of the cities, at 6,146.

The top 14 localities(10%) in volume of arrests are as follows:

Counties		Cities	
1.Fairfax	8.Montgomery	1.Roanoke	8.Alexandria
2.Prince William	9.Washington	2.VA Beach	9.Charlottesville
3.Arlington	10.Wise	3.Richmond	10.Harrisonburg
4.Loudoun	11.Pulaski	4.Newport News	11.Chesapeake
5.Chesterfield	12.Scott	5.Norfolk	12.Portsmouth
6.Henrico	13.Lee	6.Hampton	13.Fredericksburg
7.Tazewell	14.Rockinham	7.Danville	14.Manassas

It is easy to understand why large urbanizing counties and urban population centers like Fairfax County and Virginia Beach and Norfolk would lead the state in arrests. It is also interesting to note that some of the smaller-to medium-sized counties have relatively high number of annual DIP arrests, and that Roanoke City leads the entire state with 9 more annual arrests than Fairfax County, which has about 7.5 times the general population.

TABLE IICALENDAR YEAR 1989 ARRESTS FOR DRUNK IN PUBLIC RANKED BY LOCALITY

<u>Counties</u>			
<u>Locality</u>	<u>1989 Arrests</u>	<u>1989 Total Population</u>	<u>Rate Per 100,000</u>
Fairfax	6,137	759,300	808.2
Prince William	1,512	197,700	764.8
Arlington	1,409	159,000	886.2
Loudoun	855	75,200	1137.0
Chesterfield	851	187,100	454.3
Henrico	816	205,200	397.7
Tazewell	803	48,300	1662.5
Montgomery	788	67,000	1176.1
Washington	678	47,000	1442.6
Wise	592	42,900	1380.0
Pulaski	590	34,000	1735.3
Scott	586	25,100	2334.7
Lee	537	25,300	2105.9
Rockingham	506	56,100	902.0
Buchanan	458	34,200	1339.2
Smyth	445	32,500	1369.2
Warren	434	25,100	1729.1
Russell	401	31,100	1289.4
Roanoke	373	75,500	494.0
Fauquier	369	46,100	800.4
Stafford	362	55,900	647.6
Hanover	340	59,000	576.3
Wythe	318	25,600	1242.2
Shenandoah	296	29,600	1000.0
Henry	283	58,100	487.1
Dickenson	275	18,900	1455.0
Culpeper	274	25,800	1062.0
Giles	272	17,100	1590.6
Franklin	260	40,900	635.7
York	259	4,300	6023.3
Carroll	226	27,500	821.8
Orange	209	20,900	1000.0
Pittsylvania	173	55,400	312.3
James City	170	32,800	518.3
Augusta	165	51,600	319.8
Gloucester	157	30,600	513.1
Spotsylvania	157	44,000	356.8
Amherst	154	28,900	532.9
Albemarle	147	63,200	232.6
Mecklenburg	141	29,700	474.7
Page	138	20,600	669.9
Campbell	128	46,900	272.9
Frederick	122	39,900	305.8
Accomack	108	32,200	335.4

TABLE II - CONTINUED

<u>Locality</u>	<u>1989 Arrests</u>	<u>1989 Total Population</u>	<u>Rate Per 100,000</u>
Caroline	107	19,300	554.4
Bland	101	6,400	1578.1
Westmoreland	99	15,000	660.0
Nottoway	98	14,900	657.7
Patrick	98	17,400	563.2
Alleghany	97	13,300	729.3
Rockbridge	78	17,900	435.8
Prince Edward	72	17,600	414.8
Bedford	68	41,500	163.0
Botetourt	62	25,300	245.1
Clarke	61	10,800	564.8
Grayson	54	16,200	333.3
Rappahannock	53	6,400	829.1
Dinwiddie	50	21,100	237.0
Isle of Wight	50	25,500	196.1
Lunenburg	48	12,100	396.7
Northampton	43	14,200	302.8
Greene	42	9,100	461.5
Louisa	38	19,800	191.9
Sussex	35	10,300	339.8
Nelson	32	12,600	254.0
Essex	29	9,000	322.2
King George	29	12,500	232.0
Greensville	28	9,200	304.3
Mathews	23	8,800	261.4
Middlesex	22	8,700	252.9
Charlotte	21	11,800	178.0
Highland	21	2,600	807.7
Madison	21	11,000	190.9
Northumberland	21	10,300	203.9
Bath	17	5,000	340.0
New Kent	17	11,100	153.2
Appomattox	16	12,400	129.0
Floyd	16	12,000	133.3
Goochland	16	13,500	118.5
Richmond	16	7,400	216.2
Southampton	16	18,100	88.4
Halifax	14	29,400	47.6
Lancaster	14	11,000	127.3
Brunswick	10	16,000	62.5
King William	8	10,600	75.5
Buckingham	7	12,600	55.6
Craig	7	4,100	170.7
Fluvanna	7	12,100	57.9
Prince George	7	27,100	25.8
Powhatan	6	14,000	42.9
Surry	3	6,500	46.2
Charles City	2	6,600	30.3

TABLE II - CONTINUED

<u>Locality</u>	<u>1989 Arrests</u>	<u>1989 Total Population</u>	<u>Rate Per 100,000</u>
Cumberland	2	8,100	21.7
Amelia	1	8,500	11.8
King and Queen	1	6,300	15.9

Cities

Roanoke	6,146	98,600	6233.3
Virginia Beach	4,124	364,300	1132.0
Richmond	3,231	214,500	1506.3
Newport News	2,166	162,800	1330.5
Norfolk	1,711	290,900	588.2
Hampton	1,609	129,700	1240.6
Danville	1,595	53,700	2970.2
Alexandria	1,156	107,600	1074.3
Charlottesville	1,023	42,100	2429.9
Harrisonburg	988	27,600	3579.7
Chesapeake	941	147,100	639.7
Portsmouth	883	110,500	799.1
Fredericksburg	779	21,500	3623.3
Manassas	717	23,300	3077.3
Suffolk	707	52,800	1339.0
Lynchburg	685	69,900	980.0
Fairfax	526	20,100	2616.9
Bristol	482	17,700	2723.2
Petersburg	471	41,100	1146.0
Staunton	438	24,100	1817.4
Radford	412	13,400	3074.6
Salem	353	24,200	1458.7
Waynesboro	311	18,300	1699.5
Winchester	311	22,400	1388.4
Hopewell	278	24,200	1148.8
Galax	275	6,900	3985.5
Martinsville	239	18,000	1327.8
Falls Church	235	10,100	2326.7
Williamsburg	230	12,400	1854.8
Norton	148	4,400	3363.6
Emporia	129	5,800	2224.1
Bedford	117	6,100	1918.0
Franklin	114	7,500	1520.0
Colonial Heights	102	17,500	582.9
Lexington	102	6,900	1478.3
Manassas Park	95	7,300	1301.4
Buena Vista	94	6,400	1468.8
Clifton Forge	86	4,900	1755.1
Covington	84	7,400	1135.1
South Boston	62	7,000	885.7
Poquoson	52	11,000	472.7

TABLE IV
COMMITMENTS TO JAIL FOR DRUNK IN PUBLIC - FY 1989

<u>Month</u>	<u>Await Trial</u>	<u>Serve Sentence Weekend</u>	<u>Serve Sentence General</u>	<u>Total</u>
JUL	4,164	4*	17	4,185
AUG	3,999	3*	16	4,018
SEP	4,233	2	14	4,249
OCT	3,890	0	8	3,898
NOV	3,327	4*	4	3,335
DEC	3,453	2	2	3,457
JAN	3,375	0	11	3,386
FEB	2,886	0	4	2,890
MAR	3,866	1	7	3,874
APR	4,070	1	5	4,076
MAY	4,236	0	7	4,243
JUN	<u>3,909</u>	<u>2</u>	<u>2</u>	<u>3,913</u>
TOTAL	45,408	16	97	45,524

***NOTE:** Includes one(1) commitment each reported as #36 Reason Confined: Serving Sentence-Work Release. This category is #35 and since there were no offenders released as #41, Serving Sentence-Work Release it was assumed to be a data entry error.

TABLE V

RELEASES FROM JAIL FOR DRUNK IN PUBLIC - FY-1989

<u>Month</u>	<u>To Bond</u>	<u>By Court Order</u>	<u>Not Guilty Innocent</u>	<u>To State Hospital</u>
JUL	3,409	258	408	3
AUG	3,264	237	436	2
SEP	3,425	288	422	11
OCT	3,171	235	489	2
NOV	2,661	211	415	1
DEC	2,804	160	384	2
JAN	2,771	218	406	1
FEB	2,253	197	378	2
MAR	3,069	229	499	4
APR	3,314	214	487	4
MAY	3,427	243	496	3
JUN	<u>3,101</u>	<u>284</u>	<u>463</u>	<u>7</u>
TOTAL	36,669	2,774	5,283	42

<u>Month</u>	<u>Serve Sentence Weekend</u>	<u>Fine & Cost Paid</u>	<u>Sentence Served General</u>	<u>Total</u>
JUL	1	19	8	4,106
AUG	3	13	14	3,969
SEP	2	8	10	4,166
OCT	0	14	9	3,920
NOV	1	8	8	3,305
DEC	0	13	18	3,381
JAN	1	4	11	3,412
FEB	0	19	6	2,855
MAR	1	2	11	3,815
APR	1	2	13	4,035
MAY	2	5	10	4,186
JUN	<u>0</u>	<u>3</u>	<u>2</u>	<u>3,860</u>
TOTAL	12	110	120	45,010

STATEWIDE JAIL CONFINEMENT DATA FOR FY 1991
FORM DC J/7 DATA FOR THE OFFENSE "DRUNKENESS" NCIC CODE
4200/4299

Total Confinements: 49,557
 + estimated 2,669 due to reporting in wrong category
 52,226

Total Releases: 49,603
 + estimated 3,183 due to reporting in wrong category
 52,786

Total Prisoner Days: 55,595
 + estimated 2,686 due to reporting in wrong category
 58,281

Aver. Daily Population: 152.3
 + estimated 7.4
 159.7*

* This is the equivalent of the ADP for the Piedmont Regional Jail

RELEASES BY TYPE OF CONFINEMENT FOR FY 1991*

Reason Confined	Reason Released							
	To P/P	To Bond.	By Court	State Hosp.	Dis. N. G.	Sent. Serv.	Othr Jail	All Othr
Viol. Prob/Par.								
18	18							
Juv. as Adult								
3		3						
Await Trial								
49,448		39,557	3,058	25	6,142	36	175	453
Await. App.								
15		15						
Weekend								
12						12		
Serve Sent.								
53		5	3			39	5	1
Fed/Othr State								
54		3				2		49

Two (2) individuals committed to jail Awaiting Trial were released under the category "Died of Natural Causes"

In addition, of those committed to jail, in error, for "Drinking in Public", 1017 were released "on bond"; 204, "by court"; 2. other.

**JAIL CONFINEMENT BY RELEASE PROFILE FOR DRUNK IN PUBLIC
FOR 28 LOCALITIES WITH HIGHEST ARRESTS FOR PUBLIC DRUNKENNESS**

TYPE OF RELEASE

JAIL	On Bond By Crt.	Not Guilty Dismissed	Sent/Serv	State Hosp..	Other
ALB/CH'VILLE	1,098	0	2	0	1
ARLINGTON	1,322	0	2	1	1
CHESTERFIELD	874	0	0	0	6
FAIRFAX	4,871	1	0	0	22
HENRICO	1,005	0	0	0	5
LEE	392	0	0	1	0
LOUDOUN	793	2	1	0	7
MONTGOMERY	960	0	1	0	0
PRINCE WILLIAM	1,631	1	3	0	2
PULASKI	682	0	1	1	4
ROCKINGHAM	1,113	0	1	0	1
SCOTT	479	0	0	0	0
TAZEWELL	870	1	1	1	4
WASHINGTON	385	0	1	2	5*
WISE	703	0	0	0	0
ALEXANDRIA	1,429	8	0	0	12
CHESAPEAKE	992	4	3	0	3
DANVILLE	1,778	0	1	0	2
RAPP/SEC/CTR.	4	0	0	0	0
AT FREDERICKSBURG**					
HAMPTON	1,332	0	0	0	5*
NEWPORT NEWS	955	0	0	0	1
NORFOLK**	20	0	3	0	1
PORTSMOUTH	928	6	0	0	1
RICHMOND	2,850	0	8	0	2
ROANOKE CITY	40	6,110	3	7	51
VIRGINIA BEACH	2,786	0	14	0	3
TOTAL	30,292	6,133	45	13	138

* Includes one defendant released as "died of natural causes".

** For the Rappahannock Security Center Regional Jail, there were an additional 1,223 releases on bond or by court for the offense "drunk in public, which was reported as another offense.

Norfolk City jail indicated that they took over the operation of the lockup from the Police Department in November of 1990. Due to the new procedure, offenders committed for drunkenness may have not been reported or reported in another category. Data errors were corrected in FY 1992.

COMPARISON OF PUBLIC DRUNKENNESS FOR 28 LOCALITIES VERSUS STATE

	STATE	28 LOCALITIES	% OF STATE
ARRESTS:	58,954	42,617	72.3%
CONFINEMENTS:	52,226	39,240	75.1%
RELEASES	52,786	39,804	75.4%
TOTAL PRISONER DAYS	58,281	43,371	74.4%

LENGTH OF STAY OF RELEASES FOR DRUNKENNESS FOR 28 LOCALITIES

<u>NUMBER OF RELEASES</u>	<u>NUMBER OF DAYS</u>
36,334	1 DAY
98	2 DAYS
37	3 DAYS
18	4 DAYS
14	5 DAYS
8	6 DAYS
9	7 DAYS
33	8 TO 14 DAYS
39	15 TO 30 DAYS
19	31 TO 60 DAYS
5	61 TO 78 DAYS
1	93 DAYS
1	275 DAYS
5	365 DAYS

Appendix 6

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