Downtown Derelicts

The situation has existed for some time, and more people have stumbled into this world — a hazy existence on the edges of society.

Municipal health and social services officials have been hampered by lack of funding and facilities in Anchorage.

Anchorage needs to be on the alert for this problem.

Some say it is worse now that so many people are coming into Anchorage with no place to go and no money.

The term behind providing food and shelter is that it will give people a chance to end up on that place.

Fourth Avenue is a problem for many, according to Mayor Bert Hall.

It's a place that's going to be a problem for people who live and work there.

Many people are finding themselves without a place to live.

Theory behind providing food and shelter is that it will give people a chance to end up on that place.

It's a place that's going to be a problem for people who live and work there.

Many people are finding themselves without a place to live.

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It's a place that's going to be a problem for people who live and work there.

Many people are finding themselves without a place to live.
Municipality of Anchorage
MEMORANDUM

DATE: January 12, 1981

TO: Mayor

FROM: Director, Department of Health and Environmental Protection

SUBJECT: FINAL REPORT ON "BEYOND 4TH AVENUE: ALTERNATIVES TO MISERY, PHASE II

As you are well aware, the Department of Health and Environmental Protection has sponsored a conference on the Downtown Public Inebriate problem. The conference, entitled "Beyond 4th Avenue: Alternatives to Misery, Phase II" was held January 7 and 9, 1981.

A select Committee including representatives from the alcohol treatment system, the social service system, the courts, police, elected officials, business leaders and the public was assembled to hear testimony from expert witnesses and the public. At the end of the public phase, the Committee reviewed all the testimony with the assistance of Dr. Leonard Blumberg, a nationally respected expert on urban skid row problems from Philadelphia. As a result of those discussions, the Committee has developed the following series of policy recommendations for consideration by your office and the Assembly:

1. We should clean up 4th Avenue.

2. We support quickly amending legislation to streamline the existing voluntary commitment (procedures) looking to innovative methods.

3. We should not, at this time, consider recriminalization of "Drunk in Public."

4. Comprehensive services should be provided.

5. The hours of operation of the liquor distributors in Anchorage should be reduced.

6. There should be more visible law enforcement.

7. There should continue to be a group like this that helps implement the policy statements suggested.
Additionally, the panel developed suggested considerations for implementing most of the recommendations. They are listed in Section V. This report includes background information, summaries of expert and public testimony, a description of the process used by the Committee in developing these recommendations and other information developed in the conference.

Respectfully submitted,

Robert A. (Bert) Hall
Director

RAH.1
BEYOND 4TH AVENUE: ALTERNATIVES TO MISERY
PHASE II
JANUARY, 1981
FINAL REPORT

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>SECTIONS</th>
<th>PAGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Introduction and Summary of Committee's Charge</td>
<td>4</td>
</tr>
<tr>
<td>II. The Committee on the Downtown Public Inebriate</td>
<td>5</td>
</tr>
<tr>
<td>a. Description</td>
<td></td>
</tr>
<tr>
<td>b. Names and Affiliations</td>
<td></td>
</tr>
<tr>
<td>c. Attendance</td>
<td></td>
</tr>
<tr>
<td>III. The Process Used to Develop Consensus Policy Recommendations</td>
<td>7</td>
</tr>
<tr>
<td>IV. Names and Affiliations of Witnesses, January 7, 1981</td>
<td>9</td>
</tr>
<tr>
<td>V. Final Committee Recommendations</td>
<td>11</td>
</tr>
</tbody>
</table>

ATTACHMENTS

| A. Text of Mayor's Speech, Wednesday, January 7, 1981 | 15    |
| B. Schedule of Expert Witnesses, Wednesday, January 7, 1981 | 19    |
| C. Staff Summary of Friday, January 9, 1981 Testimony | 20    |
| D. Schedule of Friday, January 9, 1981, Committee Session | 32    |
| E. Transcript of Dr. Leonard Blumberg's Friday, January 9, 1981, Morning Address and Summary of Testimony | 34    |
| F. Independent Recommendations of Dr. Leonard Blumberg | 51    |
| G. Press Clippings                               | 54    |
| H. Background Material Sent to Committee on The Downtown Public Inebriate |       |
SECTION I

Introduction

At 8:30 a.m. on January 7, 1981, Municipal Health Director, Bert Hall convened the Anchorage Committee on the Downtown Public Inebriates. The Panel, composed of representatives from the alcohol treatment system, the social service system, the courts, police, elected officials, business leaders and the public was assembled to hear testimony from the expert witnesses and the public.

The Mayor, in his opening remarks, charged the Committee "to provide a set of recommended policies that can guide our future efforts in solving this critical problem. Some of the recommendations you develop will probably require legislation. We all know, for instance, that the existing process for involuntary commitment is cumbersome and unworkable. One of my expectations, therefore, is that you will recommend amendments to existing State laws to make it possible for the courts to deal more adequately with the people from 4th Avenue. The recommendations of the Committee will, in large part, be the foundations of the Municipal policy on how to further deal with the public inebriate." The complete text of the Mayor's speech is shown in Attachment A.
The membership on the Committee was chosen from a variety of disciplines representing the balance of skills and perspectives necessary to develop an acceptable policy on the public inebriate/skid row problem. Individuals were chosen from each discipline to insure a balanced panel, who were responsible for receiving public testimony and expert opinion toward the goal of developing a series of recommendations for the Mayor's review.

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Name</th>
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<tbody>
<tr>
<td>1. Business</td>
<td>Frank VanZant Anchorage Chamber of Commerce</td>
</tr>
<tr>
<td>2. Medical Community</td>
<td>Francis Phillips, M.D. Alcoholism Treatment Specialist Consultant</td>
</tr>
<tr>
<td>3. Alcoholism Programs</td>
<td>Dr. Raymond Dexter, Director Salvation Army Comprehensive Alcoholism Services</td>
</tr>
<tr>
<td>4. Criminal Justice System</td>
<td>Allen Bailey, Municipal Prosecutor Municipal Department of Law</td>
</tr>
<tr>
<td>5. Public Safety</td>
<td>Brian Porter, Chief of Police Anchorage Police Department Ron Otte, Field Operations Anchorage Police Department</td>
</tr>
<tr>
<td>7. Alaska State Legislature</td>
<td>Senator Arliss Sturgulewski</td>
</tr>
<tr>
<td>8. Rural Alaskan</td>
<td>Henry Oyoumyk</td>
</tr>
<tr>
<td>9. CHAR</td>
<td>Robert Johnson</td>
</tr>
<tr>
<td>10. Anchorage Assembly</td>
<td>Don Smith</td>
</tr>
<tr>
<td>11. Downtown Merchants</td>
<td>William Pargeter</td>
</tr>
</tbody>
</table>
Some of the Committee members were unable to attend the full two day session. The following summary describes only those sessions missed:

<table>
<thead>
<tr>
<th>Name</th>
<th>Schedule</th>
</tr>
</thead>
</table>
| Arliss Sturgulewski | Wednesday - all day  
|                | Friday, 3:00 to 5:00 p.m.                |
| Brian Porter   | Wednesday and Friday, Ron Otte substituted for full session |
| Mike Meehan    | Wednesday - 8:30 a.m. to 2:30 p.m.       |
| Frank VanZant  | Wednesday - 1:30 p.m. to 3:00 p.m.       |
| Allen Bailey   | Friday - 8:30 a.m. to 11:30 a.m.         |
The Committee on the Downtown Public Inebriate problem was composed of a wide range of disciplines and interests with the intent of developing broad-based consensus policy recommendations for the Mayor and the Assembly's consideration.

The first day, the Committee heard testimony from expert witnesses. Each of the experts was asked to present testimony to the Committee on assigned topics. Following the completion of the schedule of expert witnesses, the public was asked to give their views to the Committee. The testimony of the expert and public witnesses is described in Section IV of this report. The schedule of witnesses is shown in Attachment B.

On Friday morning, the Committee reconvened to review the testimony presented during the Wednesday hearings and to arrive at a set of consensus policy recommendations for the Mayor's review. Bert Hall, the Director of the Department of Health and Environmental Protection served as the Moderator.

The Wednesday testimony was summarized by Dr. Blumberg. He presented some additional factual data that he felt could be useful in the Committee's deliberation as well as the critical points raised during the testimony on Wednesday and during interviews he personally conducted during his visit in Anchorage. A summary of his comments is included in Attachment E. Testimony presented on Wednesday was summarized by the Behavioral Health Division staff and is presented in Attachment C.
The Committee was divided into three groups. Each group listed issues or policy statements that it felt should be addressed and sent to the Mayor for his review. Dr. Blumberg circulated among the different groups acting as a resource person. The Department's Behavioral Health Division staff served as recorders for the three groups. The group then synthesized the three committee lists into seven basic policy questions that they would address before the close of the day.

During the afternoon session, the Committee again divided into three groups. Each group discussed the implications of two of the policy questions developed in the morning. The last question of the future of the Committee and the efforts to resolve the public inebriate problem was assigned to each group. Dr. Blumberg again circulated among the groups as a resource person and the Behavioral Health Division staff served as recorders.

Toward the end of the day, the Committee met as a whole and reviewed the policy recommendations arising from the small group discussions. The Moderator worked with the Committee to develop seven consensus statements. A draft schedule which was to assist the Moderator in organizing the days activities is presented in Attachment D.

Following the development of consensus statements, the panel asked Dr. Blumberg if he had specific recommendations to make. He agreed. They are summarized in Attachment F.
SECTION IV

NAMES AND AFFILIATION OF INDIVIDUALS
GIVING TESTIMONY FOR
BEYOND 4TH AVENUE: ALTERNATIVES TO MISERY, PHASE II
JANUARY 6, 1981

1. Robert Johnson
Cabaret Hotel and Restaurant Owners Association, Anchorage

2. Marie McDonald
Emergency Services Supervisor,
Salvation Army Clitheroe Center

3. Ralph Amouak
Regional Technical Officer
Cook Inlet Native Association

4. Jerry Reagan
Police Officer

5. Rinna Poshen
Regional Technical Officer, ANCADA
Anchorage Association for Stranded Rural Alaskans

6. Leonard Nugen, Director
Studio Club

7. Judge Ralph Moody
Presiding Judge
Third Judicial District
State of Alaska

8. Pat Anderson, Chairman of the Board
Bean's Cafe

9. User of 4th Avenue

10. User of 4th Avenue

11. Mike Hansen
Community Service Patrol
Salvation Army Clitheroe Center

12. Phillip Briggs, Assistant Superintendent
Sixth Avenue State Correctional Center

13. Gladys Thompson
Community Support Project for the Mentally Ill
14. Dr. Bernie Segal  
   Center for Alcohol Addiction Studies  
   University of Alaska, Anchorage

15. Ken Hume, Executive Director  
    Downtown Merchants Association

16. Bob Spindee  
    Division of Corrections

17. Maureen McDonald  
    Anchorage Association for Stranded Rural Alaskans

18. Cliff Kompkoff  
    Alaska Native Commission on Alcohol and Drug Abuse

19. Gilbert Hendrickson  
    Anchorage Association for Stranded Rural Alaskans

20. John Purcell  
    Alaska Native Commission on Alcohol and Drug Abuse

21. Barbara Lewis  
    Resident of Southeast Alaska

22. Elliott Robinson,  
    New Start Center, State Division of Corrections

23. Howard Scammon  
    Alaska Council on the Prevention of Alcohol and Drug Abuse

24. Pat Sharrock, Director  
    Alcohol Beverage Control Board

25. Fred Morgan  
    Public Citizen

26. Pat Hiebert  
    Public Citizen

27. William Kalfas  
    Cabaret Hotel and Restaurant Association

28. Maxine Whaley  
    Anchorage Resident
Seven propositions or policy issues were developed by the Committee during the morning session. In the afternoon, the Committee divided into three groups to discuss the issue and formulate a draft response for consideration by the entire body. After discussion, the Committee agreed to forward the following statements to the Mayor and the Assembly. The policy issues are presented first; the Committee's responses are taken verbatim from the tapes of the Conference.

1. "Do we want to clean up 4th Avenue?"

   We should clean up 4th Avenue.

2. "Should we streamline the involuntary commitment procedures?"

   We support quickly amending legislation to streamline the existing involuntary commitment (procedures) looking to innovative methods.

3. "Should we recriminalize "Drunk in Public?"

   We should not, at this time, consider recriminalization of "Drunk in Public."

4. "Should comprehensive services be provided?"

   Comprehensive services should be provided.

5. "Should availability of alcohol be reduced?"
The hours of operation of the liquor distributors in Anchorage should be reduced.

6. "Should there be stronger law enforcement?"

There should be more visible law enforcement.

7. "Where do we go from here?"

There should continue to be a group like this that helps implement the policy statements suggested.

There was additional information not included in the policy recommendations. They are included in this report as clarifications, amplifications or considerations designed to present a more complete account of the Committee's work.

1. We should clean up 4th Avenue.

Consideration should be given to reducing the concentration of the liquor outlets in the area.

2. We support quickly amending legislation to streamline the existing voluntary commitment (procedures) looking to innovative methods.

   a. The commitment process could be streamlined through the development of civil commitment procedures. Legislation should be drafted to accomplish this.

   b. A statewide system of protective care centers to provide comprehensive treatment for the "skid row" populations should be developed. This may also require additional legislation.

   c. If the civil commitment procedures fail through court intervention, criminal procedures should be used to remove the 4th Avenue population into protective care or centers for treatment.
3. We should not, at this time, consider recriminalization of "Drunk in Public."

a. Nothing is legally wrong with being drunk in public. Recriminalization would only be a cosmetic solution to the problem.

b. Jails are already over crowded, and cost of such an action would be prohibitive.

c. Enough legal mechanism already exists, such as drinking in public, DWI, etc.

d. Recriminalization raises serious legal problems regarding the due process and moral and ethical questions concerning an individual's rights and freedom.

4. Comprehensive services should be provided.

a. A comprehensive array of health and social services should be developed using a "systems approach" similar to the Yakima model.

b. Elements of the system should include: housing, medical services, vocational rehabilitation, job training, money management skills, information and referral, detoxification, short-term housing, social and recreational centers, "hospices", beer bars, and protective care centers.

c. An emphasis should be placed on prevention.

d. A comprehensive system should be managed by a non-profit umbrella agency, funded by local and state sources with guaranteed long-term funding commitment.

e. A comprehensive system must emphasize evaluation through measurable goals and objectives.

5. The hours of operation of the liquor distributors in Anchorage should be reduced.

a. New zoning ordinances can reduce the concentration of liquor outlets in the area.
b. The Municipality can acquire "skid row" property by eminent domain.

c. The Comprehensive Plan for the Central Business District should encourage the development of commerce, rather than the liquor industry.

6. There should be more visible law enforcement.

Suggestions included: more foot patrolmen, additional legal tools to allow police to get public inebriates off the street; additional ABC inspectors to enforce the existing laws; and additional corrections support where appropriate.

7. There should continue to be a group like this that helps implement the policy statements suggested.

The Committee suggested that local and state governmental agencies should be alerted to what has been done and involved in a statewide conference of a similar nature to be held in July, or near the end of the current legislative session, to acknowledge the statewide nature of this problem.
SKID ROWS AROUND THE COUNTRY ARE GENERALLY THOUGHT OF AS COLLECTIONS OF AGED, HOMELESS PEOPLE WHO HAVE REACHED THE BOTTOM STRATA OF SOCIETY. ALCOHOL HAS ALWAYS BEEN CONSIDERED TO BE ONE OF THE MOST SERIOUS PROBLEMS THAT THIS GROUP FACES. ANCHORAGE IS NO EXCEPTION. YOU ALL KNOW THAT THE SKID ROW IN ANCHORAGE IS NOT MORE THAN A HUNDRED YARDS AWAY FROM WHERE WE SIT RIGHT NOW. OUR SKID-ROW POPULATION IS ESTIMATED TO BE BETWEEN 6 AND 700 PEOPLE. THIS SMALL GROUP OVER THE YEARS HAS CREATED MORE VISIBLE SOCIAL AND ECONOMIC PROBLEMS THAN ANY OTHER GROUP OF ITS SIZE IN OUR COMMUNITY. THESE PROBLEMS ARE VISIBLE TO ALL OF US: THE DOWNTOWN MERCHANT, THE PARAMEDIC, THE FIREFIGHTER, THE POLICE OFFICER, AND ESPECIALLY THE ANCHORAGE FAMILY THAT WANTS TO ENJOY SHOPPING IN OUR DEVELOPING DOWNTOWN CENTRAL BUSINESS DISTRICT.

OUR PROBLEMS ARE CREATED BY A GROUP OF PEOPLE WHO ARE NOT SIMILAR TO THE AGED OLDER PEOPLE THAT CHARACTERIZE MOST URBAN SKID-ROW POPULATIONS. THE ANCHORAGE SKID-ROW PERSON IS MUCH YOUNGER ACCORDING TO SAMPLES TAKEN IN OTHER CITIES, THE AGE RANGE IN ANCHORAGE IS BETWEEN 26 AND 35, COMPARED WITH THE LATE 40'S AND MIDDLE 50'S IN OTHER URBAN COMMUNITIES. THERE IS A GREATER PROPORTION OF FEMALES IN ANCHORAGE. ALMOST 60% OF THE SKID-ROW POPULATION IN ANCHORAGE IS NATIVE OR OTHER MINORITY. THERE ARE OTHER NOTEABLE DIFFERENCES. OVER HALF THE SKID ROW POPULATION IN ANCHORAGE HAS COMPLETED HIGH SCHOOL; AND, FROM THIS GROUP, ONE OUT
OF FIVE HAS COMPLETED SOME COLLEGE. OVER HALF THE GROUP HAS INCOME FROM STEADY WORK OR ODD JOBS.

THIS IS A GROUP OF PEOPLE WITH A GREAT POTENTIAL FOR REALIZING THEIR OWN DREAMS AND FOR BECOMING PRODUCTIVE MEMBERS OF OUR COMMUNITY, BUT FOR SOME REASON, THEY HAVE COME INTO THE DOWNWARD SPIRAL OF THE SKID-ROW POPULATION. MOST OF THIS IS CHARACTERIZED BY HEAVY DRINKING. WHILE THE TOTAL NUMBER OF PEOPLE ON SKID ROW IS CLOSE TO 700, ONLY ABOUT ONE OUT OF SEVEN WOULD BE CHARACTERIZED AS "CHRONIC PUBLIC INEBRIATE" - VISIBLE TO ALL.

THE 90 TO 100 HARD CORE PUBLIC INEBRIATES ON 4TH AVENUE HAVE COST THIS CITY MILLIONS AND MILLIONS OF DOLLARS. DOWNTOWN MERCHANTS COMPLAIN OF REVENUES LOST BY PEOPLE NOT SHOPPING IN DOWNTOWN STORES BECAUSE THEY DON'T LIKE TO SEE OR IN SOME CASES BE ACCOSTED BY THESE DOWNTOWN DRUNKS. PARENTS OF YOUNG CHILDREN DON'T LIKE TO HAVE TO EXPLAIN WHAT IS WRONG WITH THAT MAN LYING ON THE PAVEMENT. THEY WOULD PREFER TO AVOID IT ENTIRELY SO DON'T COME DOWNTOWN. I HAVE HEARD THAT IN THIS HOTEL WHERE YOU ARE HAVING THIS CONFERENCE MANY PEOPLE REFUSE TO BE PUT ON THE 4TH AVENUE SIDE BECAUSE THEY DON'T WANT TO SEE OUR SKID-ROW POPULATION IN ITS NIGHTLY PARADE. ALTHOUGH, I'M TOLD SOME TOURIST ENJOY IT FOR A SHORT TIME!

WHILE WE'RE UNABLE TO ESTIMATE THE REVENUES LOST TO THE DOWNTOWN MERCHANTS, MY STAFF INFORMS ME THAT WE HAVE DEVELOPED PRELIMINARY COSTS OF PROVIDING SERVICES TO THIS POPULATION. IN 1979, IT IS ESTIMATED THAT THE CITY AND THE STATE SPENT APPROXIMATELY 1.7 MILLION DOLLARS ON THIS GROUP OR ALMOST $20,000 PER EACH PUBLIC INEBRIATE ON THE STREET. THIS SUM INCLUDES THE PROVISION OF MEDICAL AND SOCIAL SERVICES AND THE COST OF THE POLICE PERSONNEL. LAST YEAR WE SPENT
A RECORD AMOUNT FOR THE PROVISION OF ALL ALCOHOLISM SERVICES. THE PUBLIC INEBRIATE, THE MOST VISIBLE PART OF OUR ALCOHOLIC POPULATION HAS BEEN VISIBLY IMPACTED BUT NOT ENOUGH POSITIVE CHANGE HAS OCCURRED.

THE MUNICIPALITY HAS BEEN TRYING TO DO SOMETHING ABOUT THIS PROBLEM FOR YEARS. SOME SIGNIFICANT INROADS HAVE BEEN MADE. FOR EXAMPLE: THE COMMUNITY SERVICE PATROL HAS FREED UP THE FOOT PATROLMAN TO PERFORM OTHER PUBLIC PROTECTION SERVICES RATHER THAN HANDLING THE DRUNK ON 4TH AVENUE. WE HAVE FUNDED A CENTER CALLED BEAN’S CAFE WHERE THE SKID-ROW POPULATION CAN COME INTO A WARM, HEALTHY ENVIRONMENT FOR A NUTRITIOUS MEAL. WE HAVE PROVIDED ADDITIONAL SLEEP-OFF BEDS AIMED AT MEETING THE NEEDS OF THE “WET DRUNK”, THE FALLING DOWN, INCAPACITATED DRUNK WHO BY BEING SEVERELY DEBILITATED COULD END UP ENDANGERING HIS OWN LIFE.

BUT WE HAVE FOUND THAT THESE EFFORTS ARE NOT ENOUGH. THEY APPEAR TO BE PIECEMEAL AND, OFTEN TIMES, NOT AS EFFECTIVE AS THEY SHOULD BE. OUR EFFORTS, AS A COMMUNITY, HAVE BEEN HONEST AND HUMANE EFFORTS, HOWEVER, THEY HAVE JUST NOT PRODUCED THE KINDS OF RESULTS THAT OUR CITIZENS WANT. THE NUMBER OF COMPLAINTS THAT I RECEIVE HAS NOT GONE DOWN -- PEOPLE ARE STILL VERY CONCERNED. IT'S TIME TO RETHINK THE PROBLEM -- ITS TIME THAT WE COLLECTED THE EXPERTS ONCE AGAIN AND HAVE THEM REVIEW THEIR THOUGHTS WITH THE COMMUNITY. TO MAKE THIS HAPPEN, A SPECIAL COMMITTEE FOR THE PUBLIC INEBRIATE PROGRAM IN DOWNTOWN ANCHORAGE HAS BEEN CONVENEDED. THIS COMMITTEE WILL HEAR THE TESTIMONY OF THE EXPERTS, AS WELL AS THE PUBLIC. WITH ALL OF THIS INFORMATION AND WITH THE HELP OF THE HEALTH DEPARTMENT AND OUR TECHNICAL CONSULTANT DR. LEONARD BLUMBERG, I EXPECT THE COMMITTEE TO PROVIDE A SET OF RECOMMENDED POLICIES THAT CAN GUIDE OUR FUTURE EFFORTS IN SOLVING THIS CRITICAL PROBLEM. SOME OF THE RECOMMENDATIONS YOU DEVELOP WILL
PROBABLY REQUIRE LEGISLATION. WE ALL KNOW, FOR INSTANCE THAT THE EXISTING PROCESS FOR IN VOLUNTARY COMMITMENT IS CUMBERSOME AND UN WORKABLE. ONE OF MY EXPECTATIONS THEREFORE, IS THAT YOU WILL RECOMMEND AMENDMENTS TO EXISTING LAW TO MAKE IT POSSIBLE FOR THE COURTS TO DEAL MORE ADEQUATELY WITH PEOPLE FROM 4TH AVENUE. THE RECOMMENDATIONS OF THE COMMITTEE WILL, IN LARGE PART, BE THE FOUNDATIONS OF THE MUNICIPAL POLICY ON HOW TO FURTHER DEAL WITH THE PUBLIC INEBRIATE.

NINETY HARD CORE PUBLIC INEBRIATES CANNOT OVERSHADOW OUR EFFORTS AT REVITALIZING DOWNTOWN ANCHORAGE. I AM DEPENDING UPON THIS COMMITTEE TO SIFT THROUGH THE EXPERT AND PUBLIC TESTIMONY AND DISTILL FROM IT A SERIES OF POLICY RECOMMENDATIONS. THROUGH YOUR EFFORTS, I AM CONVINCED THAT WE CAN HAVE A POSITIVE, LONG-TERM IMPACT ON THE ANCHORAGE SKID-ROW.
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:35 - 8:50 a.m.</td>
<td>Welcome - Bert Hall</td>
</tr>
<tr>
<td>8:50 - 9:00 a.m.</td>
<td>Mayor's Speech</td>
</tr>
<tr>
<td>9:00 - 9:15 a.m.</td>
<td>Robert Johnson, CHAR Representative</td>
</tr>
<tr>
<td>9:15 - 9:30 a.m.</td>
<td>Marie McDonald, Salvation Army Clitheroe Center</td>
</tr>
<tr>
<td>9:30 - 9:45 a.m.</td>
<td>Ralph Amouak, Health Department</td>
</tr>
<tr>
<td>9:45 - 10:00 a.m.</td>
<td>Anchorage Police Department</td>
</tr>
<tr>
<td>10:00 - 10:15 a.m.</td>
<td>Alaska Native Commission on Alcohol and Drug Abuse</td>
</tr>
<tr>
<td>10:15 - 10:30 a.m.</td>
<td>Ken Hume, Downtown Merchants Association</td>
</tr>
<tr>
<td>10:30 - 10:45 a.m.</td>
<td>Judge Moody, Presiding Judge, Superior Court, State of Alaska, Anchorage</td>
</tr>
<tr>
<td>10:45 - 11:00 a.m.</td>
<td>Donna Whitman, Bean's Cafe</td>
</tr>
<tr>
<td>11:00 - 11:15 a.m.</td>
<td>Fourth Avenue Users (2)</td>
</tr>
<tr>
<td>11:15 - 11:30 a.m.</td>
<td>Mike Hansen, Salvation Army Clitheroe Center, Community Service Patrol</td>
</tr>
<tr>
<td>11:30 - 11:45 a.m.</td>
<td>Phillip Briggs, Assistant Superintendent, Division of Corrections, State of Alaska</td>
</tr>
<tr>
<td>11:45 - 1:30 p.m.</td>
<td>Lunch Break</td>
</tr>
<tr>
<td>1:30 - 1:45 p.m.</td>
<td>Dr. Segal, Center for Alcohol and Alcohol Addiction, University of Alaska</td>
</tr>
<tr>
<td>1:45 - 2:00 p.m.</td>
<td>Alaska Native Commission on Alcohol and Drug Abuse</td>
</tr>
<tr>
<td>2:00 - 2:15 p.m.</td>
<td>Vern Caulkins, Deputy Director, Division of Corrections, State of Alaska</td>
</tr>
<tr>
<td>3:00 - 5:00 p.m.</td>
<td>Public Testimony</td>
</tr>
</tbody>
</table>
ATTACHMENT C

SUMMARY OF TESTIMONY
FOR
BEYOND 4TH AVENUE: ALTERNATIVES TO MISERY, PHASE II

Robert Johnson
Cabaret Hotel and Restaurant Owners Association

Mr. Johnson said that the Cabaret Owners had a stake in cleaning up skid row. He mentioned that skid row is unique. It is not in a run down area, nor isolated, but in the midst of a rebuilt and revitalizing downtown business area. He said that it was not new.

He noted that the concept of the alcohol problem being a health and not a legal problem was the result of court decisions. His first suggestion was to revise existing legislation regarding the involuntary commitment procedures. He felt they should be removed completely from the court system. He suggested establishing a screening panel made up of five individuals; a physician, a psychiatrist, a lay person, and two at large members, one from the Native community and one at large. This group would operate under the auspices of local government. If an individual is involved in incidents three times in twelve months, he will be subject to screening. On the third time, the person would not be subject to the action but rather the recommendation of the panel. The fourth time within twelve months, the panel would be able to commit the individual for up to 90 days. Every repetitive time from that instance on within a twelve month period, they could commit the individual for up to 180 days. At the first commitment, the individual would have the choice of private treatment, if it was available, and if he had the funds to pay for it. After the individual had been committed once, the individual would no longer have the free choice of selecting his or her own treatment agency.

He also discussed the Task Force recommendations of the Education Commission of the United States. Part of the funding for the Education Commission of the United States comes from DISCUS which is an alcoholism industry funded organization. He made several references and quotes from the Task Force report including that alcohol abuse has a direct relationship to daily living, and is not the result of a single problem but rather is interweaved in society.
He also felt that there should be an increased emphasis on a program devoted to education at all levels. He quoted from the report stating that education holds a long-term best hope and recommended a team work approach. He indicated they intend to launch a "Saints and Sinners Program" similar to one in San Francisco that would deal with the problems of alcohol abuse. This group would lend influence and support in the development of educational programs. Other quotations he made from the Task Force report on the Education Commission of the United States was:

A. changing existing laws and regulations of the sale of alcohol had little effect on the problem;

B. the report indicates the hours of availability have nothing to do with the stopping its consumption;

C. any plan must incorporate free choice so as to follow our democratic principles. There is no evidence that individual restrictions effect decision-making regarding the use of alcohol; and

D. unusual, unconventional programs are ineffective and suggested that only education would work.

In summary, he indicated that CHAR recommends that alcohol be viewed as a health problem and taken out of the court system, and that educational programs focusing on prevention would be a benefit and there should be a Saints and Sinners organization created.

Marie McDonald
Emergency Services Supervisor,
Salvation Army Clitheroe Center

Ms. McDonald provided some statistics from their program, the Salvation Army has a a readmission rate of 60% in the detoxification component. She felt that their biggest problem was involved in the provision of protective custody. When placements are made by Salvation Army Clitheroe Center, they find that quickly the clients are back on 4th Avenue. She noted that the problem with clients on 4th Avenue is not always alcohol; in many cases, they were displaced persons from out of town. She said there is a small percentage of people that come from the villages which return to the village. She also indicated that individuals who they know originally came from villages but have been in Anchorage over long periods of time, still claim the village as their home and not Anchorage.
Mr. Amouak noted that CINA had formed a 4th Avenue Committee. He explained that Anchorage has approximately 12,000 Natives. He presented to the Committee a list of recommendations of the Committee and further indicated there were three areas that the Committee had focused on: 1) social; 2) medical; and 3) the "bar problem." Methods treating each individual as a person, not just an alcoholic is important. He suggested the City Administration and Mayor examine rezoning the area of the 4th Avenue bars and to increase the enforcement of the regulation of bars by both the Municipality and the State. He suggested that the Municipality creates zoning laws which prohibit bars being within 100 feet of one another. He suggested that the issue of the 4th Avenue problem be put to a public vote. The apparent intent of this was to solidify public support for active solutions or to see if the 4th Avenue problem was strictly a downtown business problem rather than a community-wide problem. He then described a process of "hand carrying" people through the urban system who are new to Anchorage from the bush. This type of outreach is what helps people avoid getting caught in the 4th Avenue syndrome.

Officer Reagan spoke as a private citizen and not as a representative of the Police Department. Said he has been on the Police Force since 1969 and started on 4th Avenue. Things have changed a little bit from the standpoint that there are fewer bars, it's not as rough for the police. He said that in 1969, there were more laws available to the officer to use in dealing with the drunks. For example, it was illegal to be drunk in public. Now, you can only be arrested for drinking in public. He indicated that the problem existed then and its still there today. He mentioned that there is no place to take "wet drunks" other than the Salvation Army facility. He appeared to be convinced that stricter laws would not help solve the problem.

Ms. Poshen is a Regional Technical Officer with Alaska Native Commission on Alcohol and Drug Abuse. She stated that AASRA
started in December of 1979 and has been meeting monthly since it began. She related her upbringing in the village of 500 and how living in Anchorage was somewhat of a traumatic experience. She said that people from the bush do not have the urban survival skills to cope with a city such as Anchorage. She described the ASSRA program as trying to set up voluntary homes as well as an orientation program and information for people coming into the city. New arrivals would stay in one of the voluntary homes for three days. If their stay in Anchorage was longer than three days, they would be shifted from home to home. She related some incidents of individuals coming into Anchorage who had no knowledge of the city or transportation and how they were lost and wandered the streets waiting for services.

Leonard Nugen
Director of the Studio Club

Mr. Nugent related the fact that he has been working in the field of alcohol for twenty-one years and is well aware of 4th Avenue and its problems. He felt there appeared to be loop holes between the courts, attorneys, and treatment programs. He cited an incident involving an individual who had been at their program for 23 days under court order and when the court order was released, the individual left. Mr. Nugent's major thrust was the need for long-term care facility for the individuals on 4th Avenue. He stated that it was possible to remove a 4th Avenue, but it would merely appear somewhere else. He said, "Live for the next bottle—thats 4th Avenue." He said that he is currently discussing with Commissioner Helen Bierne the possibility of taking over the Ridgeview Correctional Center when the State no longer has need of it. He is supporting streamlined involuntary commitment procedures. One of the problems currently is the Studio Club is trying to deal with these people in intermediate care and what they need is long-term care. He also talked about the Studio Club's contract for $433,000 for long-term care facility which is expected to open on March 15th. They anticipate being able to serve 30 individuals this contract year and expanding to 60 individuals in the second contract year.

Judge Ralph Moody
Presiding Judge, Third Judicial District

Judge Moody said in the mid 1940's, individuals with alcohol problems such as those described at 4th Avenue were placed on the "honor farm" for up to 30 days. He said they were at
least healthy when they came back out. The State must recognize the need to give these individuals treatment and if they leave the treatment program to put them back in. However, the Court would have to hold appropriate hearings for the individual and view the process from the standpoint of protecting the individuals from killing themselves. Judge Moody further indicated there should be a number of different programs available, otherwise things are at an ad-hoc basis and are a waste of money and resources. He indicated we would need to pass laws through the Legislature and they would be challenged in the courts. However, if public sentiment still remains as it is, the courts would eventually have to recognize and bow to the sway of public will. The Judge, using the example of the mental health laws that were passed by the 1947 Territorial Legislature, indicated that at that time, there was a separate program for committing individuals. He said he was personally reluctant to put individuals with such alcohol problems in jail as they were not responsible for themselves. He felt they should be given every chance available. He did not call them criminals and felt the worst thing that was being done was to tell them that they were ill and thus they receive sympathy. He said there is a need to require them to change their lives and to give up their drinking. He said it may be harsh but it is still the only thing that seems to work. He suggested he was not there advocating more business for the courts and if another method could be identified, he would be in support of it. He also supported the issue of streamlining the involuntary commitment procedures.

Pat Anderson
Chairman, Board for Bean's Cafe

Mr. Anderson presented an outline of the services that Bean's Cafe provides and a brief historical view of how Bean's came into existence. He views Bean's as providing alternative services with no compensation required for users of the service. Alcohol is a problem and 4th Avenue is merely a manifestation of the problem. He said that approximately 60% of the individuals using Bean's Cafe are people with drinking problems, 40% are not public inebriates, and as much as 30% of this group may not use alcohol at all. He agreed with many of the statistics contained in the background material provided to the Committee. He indicated that one of the key features of Bean's Cafe is an attempt to stave off malnutrition. He said that some have serious mental health problems and are able to fit into the social structure of 4th Avenue, and that there is violence within and without on the individuals that inhabit 4th Avenue. Many have behavioral
problems, few job skills, low educational experience, and some are transient. He questioned the effect of closing bars at earlier hours and indicated that many of the individuals know how to use the existing social services. He called for a long-term approach of solving the problem.

**Users of 4th Avenue**

Two individuals who are the residents of 4th Avenue and who make use of Bean's Cafe, one, a young Native man who stated he had been on 4th Avenue since 1976, said that it is a very rough life. His drinking got heavier since he has been there. He said that using alcohol helps you lose your will. He said he became discouraged because it was difficult to find work, had little to do to pass the time and did not know how to associate with others. He said that in the summer it was not difficult to find a place to live but in the winter it was. He had no suggestions to make and stated that people at Bean's Cafe helps out a great deal. He also stated that the focus, should from his perspective be on the individual helping themselves or wanting to have help.

The second individual, a Caucasian indicated that housing was a problem for him at times because he had no place to go and since he was not religiously oriented, he did not want to have to attend religious services every night. He said that in the winter time, a buddy system usually operates on the Avenue where one person has a place and others crowd into it. He said that sleeping and wearing the same clothes was not pleasant--"when you have to go for a job interview it is difficult if you smell bad like you just came from the jungle." When asked what the impact was, he said he resented it. He said he had gotten involved with the court system and went to treatment and then stayed in Anchorage for 9 months. He said, "just to survive, it became necessary to drink." He said many of the people on the Avenue want to get off but don't know how. He estimated that 60% that drink would like help or get rehabilitated. He indicated that one of the things that is important in going into treatment is to get help in getting a job so that you have something once you come out of treatment.

**Mike Hansen**

Community Service Patrol
Salvation Army Clitheroe Center

Mr. Hansen said there are several different groups or subgroups within the 4th Avenue crowd. He said that while the public inebriate population was relatively stable, there were
also some individuals who were recreational/binge drinkers who become part of the 4th Avenue picture. There are some who are not drinkers at all, but have mental health problems, limited coping skills and no place else to go and use the Avenue for socialization. He recounted that, in some cases, the individuals have suffered organic brain syndrome and little can be done to help them. He indicated that at times all the Service Patrol can offer is symptomatic treatment for things such as cuts, bruises, and are not allowed to take individuals against their will. He said that many drink in the alleys and go into the bars to warm up. He said that he viewed 4th Avenue as a small piece of what the overall alcohol problem in the community is. He supported more streamlined involuntary commitment procedures, and better enforcement of ABC Regulations.

Phillip Briggs
Sixth Avenue State Correctional Center

Mr. Briggs indicated that many of the individuals that are public inebriates are brought into the institution primarily under misdemeanor charges. He said the largest impact aside from space that the inebriates have on the jail are their medical needs. They present a medical problem and also present a problem for the guards and for inmates, in terms of safety. He said they do a lot of detoxification at the jail and if the individuals are seriously in trouble, they have to be shipped to the hospitals. He said the cost to the city for each public inebriate housed is $27.50 a day and estimated the city's monthly bill at between $800 and $1,000 for these services. Many of the individuals that come in are unable to answer questions but staff is familiar with repeaters and recognize them as do the medical staff. He estimated that 80% of the individuals brought into the jail have alcohol problems and that at least 15% of these are folks from 4th Avenue. He indicated that counseling staff of the jail try to work with them and the treatment programs and during the winter time. Individuals with charges plead not guilty and as a result spend longer periods of time in jail than they would have if they would plead guilty. He said they do this in order to stay in where they are protected from the elements and have food and shelter during the winter months. In many cases, during the winter time, they see cases of frost bite, open wounds and infection. Medical staff spend most of their time dealing with public inebriates.

Gladys Thompson
Community Support Project for the Mentally Ill

Ms. Thompson said that their project dealt with the broader issues of individuals such as those typified by 4th Avenue and that mental health costs for incarceration of an individ-
ual within a mental health setting run as high as $200 per
day. She said the Committee avoid a narrow approach and look
at the broader issues of alcohol disabled individuals as well
as the mentally ill and the need for a community support
system. She said that the initial emphasis of their group
started on housing but over a period of time discovered there
was a need for medical and other types of services including
outreach and supportive care. Her main question was—who was
responsible for these types of people, especially the ones
that do not meet the criteria for API and who have no place
to go and no one to go to? These individuals often have
limited skills and therefore are unable to secure employment.
If they receive financial assistance, they may be beaten up
or taken advantage of for their money. She suggested that
some process be set up for humane treatment system and won-
dered what would happen as far as outsiders coming in and
raise the residency issue. She also asked the question of
how one assumes responsibility, through court commitment,
through guardianship, etc. She then cited various laws which
is the Social Security Act, licensing a family facility, etc.
Her main thrust was a need for a central core services
agency.

Dr. Bernie Segal,
Center for Alcohol Addiction Studies,
University of Alaska, Anchorage

From a psychologist point of view, alcohol is not the problem
but really a symptom. He said alcohol may or may not play a
significant role in the problem. He indicated that the
detoxification program needs to be closer to where the
action is, i.e., 4th Avenue. He indicated that drinking is
used to avoid reality, and he suggested that the Committee
look at the broader role of alcohol in the community rather
than just alcohol on 4th Avenue. He cited the fact that
almost 5 gallons of absolute alcohol per person over age 18
in Alaska is being consumed and this consumption is linked to
auto fatalities, accidents, homicides, rapes, assaults, and
other types of crimes of violence. He said alcohol is not
just a Native problem. He suggested that consideration be
given to the hours of availability, as alcohol is currently
available 21 hours a day at the present time. He suggested
re zoning as a possible way of dealing with the problem. He
suggested moving the skid row population elsewhere was
nothing but a cosmetic approach and did not deal with needs
and issues of the human condition. He urged the creation of
a transition center for individuals coming in from the bush
and needing a cultural orientation. He also stated that evi-
dence points out that those individuals brought in under
involuntary commitment or against their will do just as well
in treatment outcome as individuals who enter voluntarily.
He said that the treatment must be comprehensive, must have a
tangible benefit for the client.
Ken Hume  
Downtown Community Council

Mr. Hume, a downtown merchant for ten years, noted that there will always be a skid row. He felt that we should treat these people differently than criminals but neither should we treat them as health patients. He felt that they should be arrested but they should be given treatment instead of jail. He felt that the Pt. Woronzof facility was a good place to treat these people because it was far from 4th Avenue area. He felt that the treatment capacity at Woronzof should be expanded so that they could accept people who required treatment subsequent to their arrest. Mr. Hume noted that the walking policeman has been helpful and suggested that billy clubs be used to break bottles in inebriates pockets. He also noted that education should also be an important part of the Health Department's effort.

Bob Spindee  
Division of Corrections

Mr. Spindee noted that the jails are full and the situation is getting worse. The cost of a bed in a secure institution was prohibitive and that the 4th Avenue problem should be solved in a manner other than sending these people to jail, and was therefore opposed to recriminalization.

Maureen McDonald  
Anchorage Association for Stranded Rural Alaskans

Ms. McDonald, a social worker at the Alaska Native Medical Center, noted that many people become stranded in Anchorage because they pay their own way to Anchorage for medical services and ANS Hospital policy prohibits sending someone back who has paid their way there. She noted that often these people get robbed or lose their money and they are not used to urban ways. Mr. Smith asked if the old blue ticket policy of paying a person's way back would be helpful. Ms. McDonald replied that she felt it would.

Cliff Kompkoff  
Alaska Native Commission on Alcohol and Drug Abuse

Mr. Kompkoff, with the Native Outreach Ministries, felt that Anchorage is, from a rural persons point of view, a big city and its easy to get stranded here. When this happens, they tend to go to 4th Avenue where they start drinking. After they start drinking, they begin not to care. He noted that young people tend to go to the Avenue for excitement and they also become stranded. He felt that we need social activities for these people.
Gilbert Hendrickson
Anchorage Association for Stranded Rural Alaskans

Mr. Hendrickson felt that it was most important to provide transportation back to the villages for the people who become stranded in Anchorage. He suggested that a transportation fund be started. If a person used this fund for transportation, he should pay it back. If he pays the fund back, then if the need arises again, he could again use that money. But if he did not pay back the money, he shouldn't be able to use the revolving loan fund again.

John Purcell
Alaska Native Commission on Alcohol and Drug Abuse

Mr. Purcell made a series of suggestions. They were: 1) there must be a prevention effort for the 4th Avenue problem aimed at stopping the flow of people to this region, 2) the efforts to work on 4th Avenue's problems must be coordinated so that we don't just move the people from the core area of 4th Avenue to its peripheres, 3) if the downtown area was the subject of urban renewal, 4) if there was such a renewal, peripheral areas also needed to have residential units, 5) combating the 4th Avenue problem, 6) the use of peer group programs will help, 7) the public must understand that it cannot drastically change behavior through legislation but rather this behavior can be changed over the long run through the changing of attitudes.

Barbara Lewis
Resident of Southeast Alaska

Ms. Lewis noted that she was heartened by the prospect that action will be taken. She noted that she disliked the stereotyping of the 4th Avenue problem as a Native problem. She feels that there are numerous services available and they are being under utilized. She suggested that the Municipality look at funding interpreters. She felt that the blue ticket concept prevents due process as people would not understand what was happening and this should only be for criminals. She supported the school education programs.

Elliott Robinson
New Start Center, Division of Corrections

Mr. Robinson provided some statistics and antidotal information regarding his experiences with the 4th Avenue population. He noted that many of these people have been in jail or have frequent contacts with institutions. He recommended that these people be put to work through a public works program and he noted that employment has shown to have a very beneficial effect. He also pointed out that Alaska is one of only four
states in the country that does not provide money to prisoners when they are released from jail. He supported decreasing bar hours and was concerned that there were too many government regulations restricting the ability of public agencies to help clients.

Howard Scammon  
Alaska Council on Prevention of Alcohol and Drug Abuse

Mr. Scammon noted that the people who are on skid row are not all alcoholics but those that cause trouble usually are. He also noted that the police have a problem with the parasites that prey upon these people. He noted that the people of the State of Alaska consume large amounts of alcohol and that there were 2½ times the liquor stores per capita than the lower 48 and 4½ times the bars per capita than the lower 48. He had written a series of recommendations.

Pat Sharrock  
Alcohol Beverage Control Board

Mr. Sharrock clarified some of the statements made earlier. He noted that there was a high degree of cooperation at the State and local level. He also noted that the change of hours in Juneau was helpful to the South Franklin Street situation, similar to our 4th Avenue.

Fred Morgan  
Public Citizen

Among Mr. Morgan's suggestions was setting up a hospitality house and combining the Community Service Patrol and Senior Citizen Bus Systems.

Pat Hiebert  
Public Citizen

Ms. Hiebert suggested that skid row be moved to a better area. She noted that she was a detox nurse in 1976 and knew most of the public inebriates then. She noticed that many of them now are different people which indicates to her that some of the people inhabiting 4th Avenue are newcomers to the scene. Among the programs that she felt we needed was a lodge type program and supported a long-term treatment program in the Matanuska Valley. She felt that we should have alternatives to drinking programs. felt the Municipality should condemn the property and have the businessmen locate elsewhere. She noted that drunk gfirls were prey for rapists.
William Kalfas  
Cabaret Hotel and Restaurant Association

Mr. Kalfas is the President of CHAR. He noted that the liquor industry would be glad to join forces with other elements in the community and that their concerns were also CHAR's concerns. He stated that he remembered prohibition and knows very few people that feel this idea could again work. He felt there should be a place close by for 4th Avenue people to go and use and suggest that we go and do something that will help. He felt that closing the bars at 2:00 a.m. will not help, but will create more bootleggers.

Maxine Whaley  
Anchorage Resident

Mrs. Whaley urged the Health Department to close down the bars for health reasons. She claimed that children are allowed in bars. She was opposed to the government "double talk" that allowed the problem to continue and supported the destruction of the bars with a hand axe.
ATTACHMENT D

SCHEDULE

BEYOND 4TH AVENUE: ALTERNATIVES TO MISERY, PHASE II
JANUARY 9, 1981

8:30 a.m. Committee reconvened by Bert Hall
- Review of changes
- Format of recommendations
  - Positive assertions
  - Propositions
  - Policy statements
- Review of proposed schedule

8:45 a.m. Summary of Testimony, Dr. Leonard Blumberg
- Additional factual data
- Clarification of skid row versus alcoholism issue
- Summary of testimony and interviews
- Questions from Committee

10:15 a.m. Break

10:25 a.m. Committee reconvened by Bert Hall

10:30 a.m. Small Groups
- Committee divides into three groups
- Each group develops a list of issues to be addressed
- Dr. Blumberg circulates among groups as resource person
- Behavioral Health Division staff serve as recorders

11:00 a.m. Committee meets as whole
- Three small group lists combined
11:45 a.m.  Lunch

1:30 p.m.  Committee reconvened by Bert Hall

1:35 p.m.  Small Groups
- Each of these groups reviews a portion of the issues list
- Responses to each issue prepared
- Dr. Blumberg circulates among groups as resource person
- Behavioral health Division staff serve as recorders

3:00 p.m.  Break

3:15 p.m.  Group Reports
- Small groups present conclusion
- Committee reviews findings
- Committee develops final recommendations

4:30 p.m.  Comments by Dr. Blumberg

5:00 p.m.  Committee Discharged
I do want to thank and acknowledge Bert Hall and Ray Fedje and the staff in the office, who couldn't be nicer in the way they have treated me and helpful and of course, Ray Dexter, who was kind enough to call me before so that I could become familiar with Anchorage. Since you asked me if I liked Anchorage, the answer is yes. My wife and I really enjoy looking out at the Chugach Mountains, it really turns us on.

Before I begin, there is one thing I want to say with respect to the radio program last night and I was asked for recommendations and it happens that I was in the middle of writing up recommendations when I had to stop and go to this interview and then I finished the recommendations when I got back, my personal recommendations but it was inappropriate for me to air these and inappropriate to short circuit your process so it became necessary to play the fool and so I am charging you with the moral responsibility in the future when my name comes up that I'm not the fool and that I was defending you. Anything less than that is really inappropriate and I lay it on you and if you don't take it, that's your problem.

I do believe that man is moral man and I operate in that context. I can't really spend as much time as I would like with alot of background material but I did select two additional pieces of data which may be helpful. One of these pieces is a little out of date but still is meaningful. In the principal way we figure alcoholism rest ultimately on statistics on cirrhosis of the liver. These statistics then get adjusted statistically but I didn't want to go through that game so I will give you some raw figures and you can accept them as kind of a rough estimate of what alcoholism
prevails and then I will give you some other estimates which are a little older.

In the death rate for cirrhosis of liver, the latest I could find, which would probably be 1976 or 1977. For Alaska it was 10.1 per hundred thousand and you can take that as a rough index of the prevalence of alcoholism. This compares in the United States for the country as a whole to 14.3. So what's being said is that from that raw statistic, Alaska has a lower alcoholism rate than the country at large. Now there are some funny problems with these data because to a large extent they have in them the problem of the age of the population and since this is a young population, its a little off. But the fact of the matter is you can take it as a rough, that the alcoholism "problem in Alaska is not as great as the alcoholism problem in the whole of the United States." As I say, this is in part a function of age, the relatively young age of the population. That doesn't mean that there aren't individuals who have alcoholism problems but we are simply dealing with the total population.

The other statistic which also speaks to this is the estimated rate per hundred thousand alcoholism by sex and these are 1970 data so they are not quite up to date. For Alaska, 3,110 per hundred thousand and for the United States 4,200 per hundred thousand. Again, what we are saying is, compared to the country as a whole alcoholism is not as prevalent in Alaska as it is in the rest of the country. Alaska ranks 29th in the United States in 1950. I say these things so that we can see these things in perspective. Now what I would like to do is to go through very quickly some sort of general frame of reference so we have some sort of common notions I think we need in our discussion.

First of all, and we must emphasize it from the very beginning, there is no magic bullet either for alcoholism or skid row.
There is no magical solution, there are no ready made answers, we as a people have to develop answers and since I have studied this question, not only in this day but back for well over a hundred years, let me assure you that in the 19th Century they hadn't developed any answers either.

We are not using a medical model in these games, that is, I not only don't prescribe, I'm not prescribing for Anchorage and not telling Anchorage what to do. I'm sharing what I know, I'll give recommendations if asked but it really is up to Anchorage and its citizenry to work out some proposed solutions and I can give you some suggestions what I think but its really your problem and I don't intend whatever may be said as a critique of present alcoholism services programs not that I'm afraid to make such comments but I think it is inappropriate under the present circumstances--thats not what I'm here for. Furthermore, there is a need for a time perspective, that is when we think "what to do 4th Avenue" what we need to do is think in perspective--what was 4th Avenue like before the Earthquake. You can't expect success for programs that are adopted, whatever the program is, unless its an extremely radical one. You might, but other than that, you can't expect success in the first year. You need to think I believe in terms of five, ten, fifteen years, you got to think down the pike and I know that the citizenry of Anchorage are pretty upset about the 4th Avenue area and I can well understand it and I don't think we should be casual but I do think in long range as well as short range perspective.

Next, I would like to make the distinction which is important for me at least, between skid row and alcoholism. This is a distinction which is more than academic. It is relevant. Its the charge of this panel as I understand it to talk essentially about what to do about the 4th Avenue area, in other words talk about the skid row area and in fact what inevitably happens.
We intend to talk not only about skid row but we intend to also talk about alcoholism as though they were the same and they're not really. They interlock, they intermesh, but they really are conceptually and in reality somewhat two different phenomena.

Alcoholism then is a chronic excessive use of alcohol which has serious organic psychological and social consequences. You notice that I don't necessarily use the disease concept. I don't want to get into a big debate on whether alcoholism is a disease or not here but what I tell people you don't need to introduce the concept of disease in order to discuss the phenomenon, its quite irrelevant. Alcoholism is a lifestyle in which alcohol is the central focus of the way people live. So you can have somebody who is only, and I'll make an extreme statement which is ridiculous but simply to make the point. You can have somebody who has had half a dozen drinks but who thereafter; that person's life focuses upon alcohol and how to get it, and how to use it and I would be inclined in a ridiculous and extreme way obviously, this person is an alcoholic.

I'm not talking about the notion of organic addiction, what we are talking about is the fact that people who use alcohol and for whom it becomes the focus for their lives, they are alcoholics. That's the critical thing and obviously what it means when you put it into treatment terms is what we need to push alcohol to the side of their lives so that other things become central, other things which are "more normal." You could have a variety of things but as long as alcohol is the central focus of one's life, then there is a problem that they need to confront or we believe they need to confront. They have an alcohol problem and I prefer to talk about people having an alcohol problem rather than labeling them as alcoholics. I'm not really quite sure what an alcoholic is but I do have some idea when people have a problem with alcohol.
Most of those with alcohol problems in Anchorage don't live in the 4th Avenue area or use its facilities so one has to understand as I say that these are two different things.

And now skid row—its an area of high concentration of extremely poor people living outside the socially approved family context. These people live outside the family, they live in cheap and usually poor quality housing, the jargon is flop houses. Usually there are a number and not always, but usually, there are a number of specialized institutions in the area or nearby; cheap eating places, temporary employment agencies, and blood banks. Incidentally, when I'm talking to somebody I slip into the jargon, a temporary cheap employment agency in the jargon and in the rest of the 48 its called a slave market so if I happen to talk about slave market you will know what I'm talking about--talking about people up on the block, thats the term you use. And cheap residential places are of course called flop houses. Blood banks, pawn shops, which are characteristic of working men areas and not really skid row but these tend to come together. These people are transients, they are residually unstable, we call them homeless as skid row is their home area and these areas normally occur adjacent to the downtown central business area. So when Anchorage says "Wow", there is a skid row down on the edge of downtown I don't minimize that, but what I want to say is that as a sociologist, that's normal. That's where they usually happen and this is the reason why all over the country for the last twenty years there have been skid row projects. Its because the downtown area goes through a variety of urban processes, there's this skid row area which has to be confronted and something has to be done about it.

Skid row is a human condition as well as an area. Indeed, I see it as a human condition more than an area. Human condition means to me that you find skid row-like people in the poor sec-
tions of the urban area. You all know Anchorage much better than I do. If you think of the poorest sections of Anchorage, I dare say, if you look around those areas you are going to find people who are living a lifestyle which is not much different than is being lived on 4th Avenue. The only difference is we don't stereotype it because it doesn't occur in the area which we have stereotyped to skid row. So skid row as I see it from my research and experience is a human condition as much or really more than simply an area.

Now the present concern as I see it has to be in terms of questions like: what should we do about this 4th Avenue area? And one of the questions that begins to emerge from this—who will benefit from doing something about it? And let's be blunt, if we can't be honest with each other, then you better send me back home on some other plane than the red eye special, and that is clearly that the downtown business people stand to benefit by doing something. Now I'm not saying that's wrong, don't mistake me, all I'm saying is they stand to benefit and we must understand that as part of what goes into our mix. Now that's what I call the major benefit and then there are what I call the distributed benefits. Its less easier to pin them down but its obvious that they are and that is the general users of the area. The lady who calls the police and reported the rapes on the Greenwood Hotel—the lady that I talked the other day down at the Post Office who said it's a terrible area, I hate to come down here. They are the users and when we say who will benefit, they are the distributed beneficiary and they are not unimportant here.

For the question, who will benefit? There are a lot of people benefiting to various degrees. The second is that we do not deny, I certainly don't deny that while businessmen will benefit and the general public will benefit, there are humanistic humanitarian considerations as well. I do not deny, I don't
suggest that when downtown business people benefit that they are less human and less concerned with human beings. There is a tendency to say they are making money out of it so therefore they have no human concern and I reject that I think they are human beings and think whatever they may think in terms of the solution. They don't deny their own humanity in the process. So I don't want us to be caught in the trap of denying their humanity. Now I'm not trying to be an ethical lecturer but what I'm trying to do is essentially say is it's a complex problem which does involve ethics and if we don't recognize that ethics are part of the problem and it's not merely economics, I think we have failed in what we are doing. You may reject what I say obviously.

All right, these are my opening comments. As I understand it my job at this point is to summarize and I'm not delivering a lecture. What my job is is to try to summarize what I saw as the issues which Anchorage said to Anchorage. I'm not going to say this person said this and that person said that. What I'm going to do is to highlight the issues as I saw them drawing all across the board. I'm likely to leave a few minor things out but I think I caught the highlights.

I would like to start with what's minor but with what is very important was the little lady who said at the end, "What we need are water fountains." That was not really what her message was; what her message was "I fought against the repeal of prohibition, you people wanted the repeal, it's your responsibility." That's what she was really saying. So she laid us on the charge, "we want to drink and I'm no prohibitionist." Let's not get confused here. I don't drink heavily but I drink and I enjoy it, so I am not a prohibitionist and I make a distinction between moderation and prohibition. This comes in part because I have done a considerable review of the literature of the 19th Century. In any
case, water fountains—given that then the first major issue was the question of long-term institutionalization. There was no support that I could detect for recriminalization but there was an advocacy and discussion of incarceration which was justified in terms of involuntary treatment. Using a medical model, you are sick and you should go to the hospital and if you don't go to a hospital, we may have to send you to the hospital. This is the medical involuntary medical treatment model. Sometimes this was referred to as protective custody or there was a demand that they, meaning the people we're talking about, the 4th Avenue people, being required, and of course the key word is "required" to change their way of life or stay in custody. At one point the Prosecuting Attorney, Mr. Bailey used the term "secured detox" which struck me as a detox center with bars on it. I'm not sure what secured means otherwise in that context. Some chose to advocate voluntary commitment, there was also in my discussions some discussion of the legality of the involuntary concept. This was challenged on a number of points. First of all, the Law will act differentially against Native Alaskans and therefore this is a basis for coming to Court. Secondly, that on First Amendment grounds and the argument as I understand it was that unless you do something harmful to others you cannot be locked up. The State must have clear standards before confinement and the State must pick the least restrictive grounds for confinement. I throw this out so that you understand that there are legal questions we touched on those yesterday but they really still have to be addressed, maybe not here but elsewhere. Thirdly, individual commitment under civil proceedings deprives a person of due process rights such as a hearing and impartial trial. Civil proceedings denies the penal aspect when in fact we are dealing with involuntary confinement for behavior. Lastly, it was suggested that if such involuntary commitments do take place, a suit will be entered under Section 1983 of the U.S. Code for damages for intentional violation of civil rights. I'm only
your repertoire here I'm not threatening you. What I am saying is that all of this discussion of commitment, you want to clearly consider the legalities of this. Judge Moody did when he said there will be court challenges but if you keep beating away at it the courts will eventually understand that the community wants this and the courts will back off. I simply say that's another point of view towards the law and how it can be used. First there was involuntary commitment.

And secondly, there were actions or discussions of actions with respect to the sale of dispensing of alcoholic beverages.

There was the advocacy of keeping hours of service as they now are as well as advocacy of limiting the hours, there was disagreement on whether this would be effective and secondly there was advocacy of penalizing those who sell alcoholic beverages to intoxicated persons versus opposition to special liabilities, I believe was the phrase Mr. Johnson used. And related argument that most heavy 4th Avenue drinking is not from the bars but from the liquor stores consumed in bottle gangs, not in the bars. Bottle gangs is the jargon for a group of people getting together with a bottle around back where they are relatively inconspicuous and there is a whole social ritual which is involved in bottle gang behavior. The question of revoking licenses for liquor violations was raised, the Alcohol Control Board maintaining that the law says that all that is required is to maintain an orderly business establishment. It was discussed or mentioned to reduce the high concentration of bars through the licensing and zoning and lastly someone suggested to me that maybe we should use the Iceland, Greenland coupon system to restrain available liquor consumption. So here we get a variety of suggestions all focused around this question of the availability and the consumption of alcoholic beverages. Thirdly, there was the question of what to do about the area. There were a number of points there. First of all, condemn through the right of eminent domain, clear the area and
permit another such area to develop elsewhere in a less objectionable area.

One suggestion was closer to where the Alaskan Natives would rather be and I'll come back to the Alaskan Natives later.

Secondly, there was a reminder that after all, 4th Avenue is old Anchorage. I'm not quite sure what old Anchorage means here. I have a historical account from 1950 which suggested that when they laid out the town they also made provisions for what they called "bohunks" which I gather foreign laborers and they also made provision for a "red light" district. And if somebody can tell me where that "red light" district was which was provided for it might give me some insight that I don't have into the urban process of Anchorage but nobody in the literature has revealed that. Apparently, it existed but its not discussed.

In any case, there was a statement that 4th Avenue is old Anchorage and what happened to the question that then begins to emerge, is what happened to those who used the other side of the street when it was redeveloped. I've seen pictures on the saloon across the street which are just absolutely fascinating and I would love to have a collection of pictures of Anchorage over the years. But this picture, the one that I was looking at, showed a crowded street, both sides of the street crowded and it was clear that almost all of the people on the street were Caucasians and not Natives, from their dress. And since half the street dropped down on the bank, what I would like to know is, what happened to these people? Does this tell us something about the natural process that might happen to 4th Avenue even if we did nothing. I don't know but I raise this question.

Thirdly in this same area we're dealing with about what to do about the area--what about other areas in the city that are
skid row like? Is this an evidence of prejudice and discrimination? This question was raised to me, specifically and I pumped very hard but only once have I been able to get the name of a place otherwise I just get generalities. Somebody mentioned Chilkoot Charlies and apparently the people who use that facility are pretty skid row-like. If that is the case, then the question is, while I understand there is a great deal of beating and knifing and violence in that area and a good deal of drunkenness around that facility and now if that is so and I don't know whether its so. I'm simply reporting what I have been told then we are dealing with an area which is skid row like. You can make up your mind yourself but I'm telling you what I have been told. I'm not into a debate on this.

Secondly, there were suggestions made that there were some bars in Muldoon--nobody gave me the names of those places so I can't give them to you.

Fourthly, the suggestion was made that and its one which is observed by sociologist all over the place so its really unique - not any of these but it was observed that 4th Avenue is a recreational area. People come down there to have fun. It may not be the kind of fun we want but they come down there for fun, among other things. There are a number of populations who use the area so at any one time, the population of users is larger than those who are more or less permanent. First of all, there were people who were called parasites which I judged was meant by this people who jackroll all the drunks—jackrolling is stealing their jack or their money when they are drunk and sometimes it means beating them up first but not necessarily. I walked down streets in a number of cities and you see a man stretched out and his pockets are ripped out and the answer is he has been jackrolled. Or prostitutes, these are what is meant by the parasites.
Secondly, people from other parts of Anchorage who come down to have a good time, drink heavily and sometimes don't quite make it home. They are really sort of visitors—they are not part of the area although as we see them, we see them as part of the scenery.

Thirdly, people who come down for a weekend and down for a vacation, transients from out of town who come in for a moral holiday, as sociologists used to call it. You don't want to be seen back in (I won't name the town because I really can't name the names intelligently) but they come in from out of town and come down there and nobody is going to question whatever they do. It's a moral holiday—relief from community pressure toward conformity.

Right now, the fifth point in this summary that there were recommendations for alternations and social services and there were quite a few of those. And one of the critical points that has to be made at the very beginning of this kind of discussion is that the people who live on 4th Avenue are citizens who have the same rights to public services as the rest of the citizenry. That was made in several different of my conversations as a point which needs to be made early.

Now under that there were a variety of recommendations:

1. First, "Alaska's alcoholism programs are at a critical point" was suggested to me. Within the next five years, the alcohol programs of Anchorage and of the State must show results to the Legislation. That is, there must be developed a network of competent people in a coordinated and cooperative network of agencies operating with a minimum of bureaucratic influence. If that's not the case then what develops is a fractionated incompetent, ineffective set of services. This is going to generate a legislative vote of
no confidence. So we are really not dealing, if I understand my informant with what should be done about 4th Avenue, implicit is a whole variety of other challenges which have to be met someway and within the next five years down the pike or relatively sooner.

2. Secondly, it was suggested to get paralegals on 4th Avenue to help obviously to protect civil rights of those who live there.

3. Thirdly, it was suggested that the residents and users be deported. The term that was used was "green ticketing" elsewhere to the State. And also another person asked me how I would respond to giving somebody a ticket to some place in the lower 48 with enough minimal subsistence money so they could make it for a little while, then they would be on their own. This is deportation, although, its not called that but that's what it is. If it happened to anybody else that's what we would call it. Back to the village is sending them back home, this seemed for Native Alaskans rather than rural Alaskans. Again, I'm not editorializing this--I'm not into a debate. I'm trying to tell you what I heard.

Create and support a core of social agencies to handle all cases of dependent adults. Seeing the people who live in this skid row area as one category of dependent adults including the mentally ill, the mentally deficient, I presume children who need help—a whole variety. The community under this kind of notion was conceived as a guardian using parental model "in local parentus" which would be the technical way to put it, but this is the model that the community in effect becomes a parental model. No matter what we do, it was observed, the community will need to accept the responsibility for some people. This
was also referred to in terms of those who may or may not drink heavily but are unable to care for themselves.

Next, there was the development of educational or prevention programs about alcohol and its abuse. And notice how we have shifted from a discussion of skid row to a discussion of alcohol and alcoholism, almost insensibly. In spite of the fact that we lay it out as 4th Avenue as a skid row area, these things tend to get confused as we talk because they are intermixed and so it becomes hard to keep them separate even if we do it conceptionally. A development then of educational programs: (1) the indoctrination of children at an early age and continuing up into maturity; (2) alcohol education should be fully Federal funded; (3) examine the significance of alcohol in the lifestyle of the people of Anchorage and of Alaska and educate for moderation and abstinence under certain conditions, like drinking while driving (people made comments to me that it was not uncommon to see drivers going down the highways pulling at their can or bottle of beer as they went down the highway and this is not necessary to say that they were driving while intoxicated but the informant told me that this was common in Alaska) and this required some education because it was inappropriate behavior and dangerous behavior.

4. A promise from the liquor industry of cooperation in those programs of a long-term nature. The attitude expressed was one of "look if we can work out programs that are going to be useful and helpful, we're for it" and the liquor industry did not come in here and testify as enemies but as parts of the community.

Next, there was a discussion of police in the jail perceived as social agencies. There was the advocacy of stricter
enforcement and recriminalization was mentioned but it was a dominant thing but the statement that the police can't afford personnel time and the jails are already crowded. So if you recriminalize you simply set the change for a whole series of new kinds of things. Build more jails which are frightfully expensive. The problems related to jail keeping and releasing people. Better policing of the Green Leaf Hotel--this is certainly one of the implications of the rape scene that we heard about. The need for continuing close cooperation of the police with alcohol programs.

Next, relocate services nearer the skid row area or expand existing facilities and services. Specifically, relocate the detox facilities. Expand the Pt. Woronzof program facilities to provide sleep-off facilities, expand long-term facilities. There was the suggestion that we need "gate money" so that people coming out of jail are less likely to drift on the Avenue because they got some money to go somewhere else. It was suggested that we need several hospitality houses by which I gather this was meant that people coming in for the first time to Anchorage had a place to stay other than to simply move into the 4th Avenue skid row area.

Expand the transport system, presumably so that incoming persons (presumably Natives, but not necessarily) might live elsewhere rather than drift to the 4th Avenue area. Use separate facilities for transients, those who need alcohol counseling and for transient families. Different kinds of people needing different facilities, even if they are similar in what's in them, these people don't mix terribly well. Develop peer group programs among the resident population itself. That really wasn't spelled out very well and don't ask me what he meant because I'm not sure, but it was mentioned. Teach minimum job skills through employment within the area.
6. Alright now, the sixth major topic. The relationship of Natives to Euro Alaskans, I use the Euro Alaskans rather than white people because I don't want to put it in racial terms but in cultural terms. There are two different views of 4th Avenue and we ought to be very aware of this. Much of the above recommendations were from a Euro Alaskan point of view. If you asked the Native people, it's really a mixed and somewhat to me confusing picture that I get. First of all then is, the Euro Alaskans make a good deal of the reminiscence of frontier.

See, the health and welfare problems didn't exist in precontact times. They say they are a proud people that have been cast down and that tradition is being drowned on 4th Avenue. In effect, what they are saying is that 4th Avenue is not a Native problem but either a Euro Alaskan problem or its a community in general problem. It's not a Native problem. The Natives that I talked to do understand the problems of Natives but they don't have any mysterious formula for treating alcoholism. They need help and advice in developing their own programs. Thus, there is a need for a development of programs to assist families impacted by alcohol. In addition to talking about the guy who is drunk all the time, there is the need, I'm told, for programs to work with the families because the families are pretty traumatized too. The Native Social Welfare Corporations I'm told don't have the funds that Euro Alaskans think they have. They need grants and contracts as well as technical assistance for more intensive social services so that incoming Natives will be guided away from 4th Avenue. Temporary housing, transport, instruction in how to make it in the city, assistance in adjustment to cultural differences. The Natives should be included also (I'm simply reporting) in existing publicly funded programs, not only because the Natives use those programs but because the skills and

- 49 -
knowledge developed there can then be used in the context among their own people. Natives come to Anchorage some times without the consent of the, I think I got the institu- tion right, the Alaska Native Hospital and then they have no way of getting home. They need transport home, otherwise they drift onto 4th Avenue when they become stranded. There is the need for recreation alternatives to 4th Avenue.

7. Alcohol and Youth. We get into all kinds of things and that's not for me to screen out what was talked about. Some of the things that got mentioned were alcohol and youth. Somebody told me something needs to be done about the young people going to the parks (and I presume they aren't talking about the parks in the city but elsewhere) nearby with kegs of beer and getting drunk on weekends. There was a concern expressed about drugs being sold in the smaller cities and towns of the State as a substitute for booze and this is apparently both in the Native villages and the Euro Alaskan population.

Okay, this represents my summary of what I heard Anchorage people telling me and this is what I see.
RECOMMENDATIONS OF DR. LEONARD BLUMBERG

The Committee on the Downtown Public Inebriate asked Dr. Blumberg, a consultant to the Municipal Department of Health and Environmental Protection on the 4th Avenue problem, to present his recommendations on how to solve the Anchorage skid row problem.

Dr. Blumberg introduced his remarks by saying that he had prepared a separate set of recommendations which, in some cases, were similar to those developed by the Committee, but in some cases were radically different. He reminded the Committee that the recommendations were his own personal opinions.

1. There should not be recriminalization of being drunk in public. This is not a wise social policy.

2. Dr. Blumberg is personally opposed to compulsory institutionalization. If you compel people to go to a treatment center, you are in fact, sending them to jail. This might be considered a legalistic slight of hand. Compulsory institutionalization is like "giving someone a life sentence on the installment plan."

3. He is very much in favor of voluntary long-term institutionalization care or treatment. We need to be very gentle in depriving people of their freedom of liberty.

4. He emphatically supports cleaning up 4th Avenue. The area could be cleared through the right of eminent domain, among
other alternatives. The government must assure a fair appraisal of property value.

5. The police should vigorously enforce existing laws on alcohol use in public, on sales in liquor stores to intoxicated people, up to the limit of the law. An extreme proposal is to put breathalyzer tests at the entrance to an institution. This doesn't catch the bartender, but the person as he's going in.

6. The health codes should be enforced stringently. The health code should be a tight, strong code and should be enforced.

7. Housing quality codes should be stringently enforced.

8. Licensing should be changed to make it more difficult to secure or renew a license for retail sale or dispensing of alcoholic beverages, to make it clear that the liquor industry has a stake in making sure things go right.

9. Reasonable closing hours should be imposed. This must be equitably applied: the rights of the poor and those of the well-to-do be equal.

10. Allow the economic processes of the urban centers to prevail. Construct Project 80's and locate some of the facilities adjacent to the skid row area. Clear 4th Avenue between B and C Streets. Those facilities, between the Project 80 facilities, will upgrade their establishments to attract the different clientele or obtain their capital gain through increased property values.

11. Develop a series of laws or codes which makes the resumption of skid row activity more difficult, perhaps through selective land use ordinances.
12. Develop new Native-owned and managed housing and drinking facilities elsewhere as substitutes to facilities currently on the skid row area. Financing may involve some subsidies.

13. Native corporations could be interested in buying out some of the 4th Avenue buildings and convert them to centers for selling Native crafts, museums and other positive uses.

14. There should be a social service network with good pre-planned evaluation.

15. Put pressure on skid row-like establishments elsewhere in Anchorage to clean up with the assistance of CHAR.

16. Develop Native institutions off skid row: housing, employment, etc.

17. Develop educational programs oriented toward village elders or comparable people in matriarchial Alaskan cultures. A strong alliance between Natives and government is essential.

18. More intensive work with runaways. Runaways have a high probability of ending up on skid row in the future.

19. Look into using or testing a new alcohol treatment theory developed by Dr. Shipley.

20. Develop industry and employment, with an eye toward stable jobs.

21. Develop alternative recreation for unskilled men and women to provide something other than drinking.

22. Stringent enforcement on drunk driving laws.

23. Develop neighborhood based social service case work.
ATTACHMENT G

PRESS CLIPPINGS

The following press clippings regarding the Conference were published in the Anchorage Daily News and the Anchorage Times. An announcement sent to all local radio and television stations for use as a Public Service Announcement or a news story is also attached.
Fourth Avenue needs solutions

The Fourth Avenue dilemma has cropped up again. Same song, next verse. Which means the problem is still with us, only it keeps getting worse. Drunks fighting in the streets, drunks sleeping in alleys, drunks panhandling shoppers.

The problem haunts merchants who see their trade suffering, and it upsets tourists whose hotels are within walking distance. Unfortunately, attempts to cure the situation have never worked.

The hard-core public Inebriates on Fourth Avenue have been allotted much money and attention. Street sweeps by Anchorage police have failed, they only crowd the jails and provide no incentive for positive change.

Likewise, social programs have met with little success. Service organizations have tried valiantly, and expensively, to motivate these inebriates into a different lifestyle. But many bounce back to the street in a short time.

So it seems reasonable to look somewhere else for a magic solution.

Several years ago, a perceptive report was done for the municipality showing that Fourth Avenue was a happy home for most of these people. The street gave them friends and an identity. There was very little need to change their behavior patterns:

If the drunks can't be changed, perhaps the municipality could alter their hang-outs? That is what annoys downtown business the most anyway.

One way could be making liquor less accessible, for instance, by cutting the hours of liquor sales. Few communities have such liberal rules on bar openings. Drinks can be dispensed here for 21 hours a day.

Maybe sale of liquor to drunks in package stores could be more strictly regulated, and serving drinks to the already slushed could be more tightly controlled.

There might be an economic pinch — but who knows? If liquor business slows down maybe the problem would move elsewhere.

If such solutions don't seem reasonable, maybe other cities could suggest some answers. It is worth looking for a new approach anyway, since we haven't been able to lick the problem so far.
CHAR develops alternate proposal to Skid Row issue

An organization representing local bar owners is drawing up its own proposal on how to combat Skid Row alcoholism and is hopeful of drawing support for the program from the Anchorage Assembly.

The proposal includes a "streamlining of the involuntary commitment process," a spokesman for the group said.

Robert Johnson, of the local chapter of the Cabaret, Hotel and Restaurant Association (CHAR), said an unveiling of the program before the assembly is scheduled for the panel's Tuesday meeting.

"It's a (public relations) effort — that's definite. But, it's more than that," Johnson said. "The (bar owners) recognize that something has to be done. We don't have a crisis situation here yet but it's safe to say it could become a crisis."

A Blue Ribbon Committee that last week studied Anchorage's Skid Row problem recommended a reduction in the number of hours each day that alcoholic beverages can be sold. Johnson, who sat on the 16-member committee, was the only dissenter on the issue.

Johnson said CHAR has not finished studying legal problems that may be associated with the proposal, which involves taking the problem of repeated public drunkenness away from the courts and making it "completely a health matter."

CHAR's proposal involves setting up a committee, made up of both experts on alcoholism and citizens, which would screen individuals picked up for the third time on a public drunkenness charge.

"And they could at that time hold him for up to 15 days, which is what I'm sure you recognize is a thorough drying-out period," Johnson said. "For a fourth offense a person could be held for up to six months, under CHAR's proposal."

Offenders would be sent to "protective care centers." Johnson said, much like an "honor farm" that used to exist here.

"To be honest with you, we don't know if it's legal yet," Johnson said. "The preliminary (discussion) with attorneys indicates that if you have the courts as an appellate process, you might be able to get it as an administrative proceeding and the commitment as an administrative action."

CHAR also has recommendations on a public education program regarding alcoholism, Johnson said.

"And we hope, frankly, to get help from the assembly. They're going to lobby in Juneau and if they could help by getting amendments to the law that would help us," Johnson said.

CHAR has about 270 members statewide and 60 locally, which represents about one-half of Anchorage's bars.

Work began on the proposal about six months ago, Johnson said.

"I think there's a much faster way to take care of the early closing and that is simply to buy out the seven bars downtown. There's no reason to penalize another 119 bar owners."
Panel wants bar hours limited

A committee struggling to solve the "Fourth Avenue problem" agreed Friday to recommend limiting the hours bars and liquor stores are open as one way to eliminate Anchorage's skid row.

A Committee on the Downtown Public Inebriate wound up a two-day meeting Friday at the Holiday Inn on Fourth Avenue and C Street with this and six other recommendations for Mayor George M. Sullivan.

Across the street, as the mayor's 15-member committee broke for lunch, four men lounged at noon around a bottle in front of the Montana Club.

The committee backed off recommending specific hours for bars and liquor stores. It noted that the city of Juneau required its bars and liquor stores to close at 2 a.m. Mondays through Thursdays, police calls fell 31 percent, ambulance calls went down 38 percent and street patrol calls fell 22 percent.

The recommendation to limit bar and liquor store hours was opposed by Robert Johnson of the Cabaret Hotel and Restaurant Workers Association. It was the only recommendation which did not pass unanimously.

Other recommendations:
- Clean up — "change" — the three-block skid row area from A Street to D streets on Fourth Avenue by, perhaps, "reducing the concentration" of liquor establishments.
- "Quickly" work toward amending existing legislation to give courts the ability to provide treatment after due process.
- Reject the idea that being drunk in public is a crime.
- Support the notion of providing services to the denizens of Fourth Avenue. This would include organizations such as the Association for Stranded Rural Alaskans, a private body of primarily Native Alaskans set up to help visiting rural Alaskans stranded in Anchorage.
- Have more "visible" — not necessarily more "stringent" — law enforcement.
- Keep working on the problem.

The committee recommended meeting again in six months with its consultant, nationally recognized expert on skid row problems, Dr. Leonard Blumberg, a sociology professor and author from Temple University in Philadelphia.

The committee was appointed by the mayor and includes doctors, (See DRINKING, page A-3)

Drinking ...

(Continued from page A-1)

... businessmen and state legislators.

At hearings before the committee earlier in the week, Johnson proposed creating a five-member screening panel to sift through cases involving downtown drunks. Under his plan, the panel could order involuntary commitment of any person involved in four incidents in one year.

In other testimony, Superior Court Judge Ralph Moody recalled that in the mid-1940s, people with alcohol problems similar to those of Fourth Avenue drunks were placed in an "honor farm" for up to 30 days.

He suggested that the solution to the problem today lies, in part, in passing laws that would force drunks to participate in rehabilitation programs and advocated streamlining involuntary commitment procedures.

Elliott Robinson of the state corrections division New Start Center told committee members that employment has helped straighten out many Fourth Avenue drinkers.

Maxine Whaley, an Anchorage resident, urged the state Health Department to closed down skid row bars for health reasons.

Maureen Blewett
Close the bars and liquor stores early, preach prevention as much as detention and maybe start another honor farm: that's what a parade of counselors, community leaders and citizens Wednesday advocated as solutions to the downtown drunk problem before a committee called together by municipal officials to work on the problem.

Everyone seemed to have a different approach to the problem. But the common ground was that something needs to be done to help those who spend their lives drinking in the alleyways and bars along Fourth Avenue.

Mayor George Sullivan kicked off the all-day meeting with a speech on the problem Anchorage residents face with their Fourth Avenue skid row.

"You all know that the skid row in Anchorage is not more than 100 yards from where we sit right now," Sullivan told the gathering at the Holiday Inn. "The 90 to 100 hard core public inebriates on Fourth Avenue have cost this city millions and millions of dollars.

"Cost of providing social services to the downtown drunks -- including medical and emergency care -- has been estimated at $1.7 million or about $20,000 per inebriate, the mayor said.

"But he added, past efforts have not been enough. "They appear to be piecemeal and oftentimes not as effective as they should be."

Sullivan said he expects the committee, after listening to testimony by the experts and the public, to come up with a set of recommendations to guide the municipality in its efforts to overcome the problem.

One common recommendation was to close the bars and liquor stores earlier than 5 a.m. An early closure would cut down on the availability of alcohol and perhaps take some of the people off the streets late at night.

"Others, like Bob Johnson, of CHAR -- a hotel, bar and restaurant organization -- were against earlier closures but advocated more education and prevention programs. Johnson proposed a 5-member panel to review involuntary commitments and place people in rehabilitation centers if the panel thought it necessary.

"Ralph Amouak, of the Cook Inlet Native Association, suggested rezoning some downtown areas and keeping a closer watch on the operations of bars and liquor stores.

The head of one alcohol rehabilitation center, Leonard Nugent, told the committee his organization already has plans to open a long-range treatment facility in March, one that will provide chronic alcoholics with a place to stay and learn not to drink for longer than just a few days.

Superior Court judge Ralph Moody turned the committee's attention to the "honor farm" system, once used to deal with problem drinkers. Moody suggested reviewing the involuntary commitment laws and trying a few of them out in the court system. Although they might be challenged on a constitutional basis, the judge said, public sentiment may be strong enough to support them.

Others testified about the increasing violence on Fourth Avenue and the number of times police are called to the area.

Two Fourth Avenue regulars told the committee they live on the avenue because they don't know where else to go. "They have been forced to drink just to get in with the rest of the crowd the last couple of years."

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Committee to seek ‘skid row’ solutions

Mayor George Sullivan is putting the pressure on elected officials, local business people and health experts to help solve the problem of public drunks in the downtown business district.

Wednesday morning Sullivan will charge a committee of representatives of those groups with the job of making recommendations for dealing with public inebriates.

Wednesday afternoon the committee will hear testimony on public drunkeness from experts, the drunks themselves and members of the public. Thursday they will meet in a closed work session to review the testimony, and on Friday Sullivan wants them to make recommendations.

The three-day conference, sponsored by the municipal health department, is a follow-up to the session held in Anchorage in October 1979 with Dr. Leonard Blumberg of Philadelphia, a national authority on skid row populations.

Blumberg will be on hand during this second three-day conference to help local leaders arrive at recommendations.

Municipal health director Bert Hall told committee members, "The future of the central business district depends, in part, on how Anchorage decides to approach the public inebriate problem."

Health officials have listed 10 policy questions the committee will need to answer in order to address the problem.

Some of the questions: Would the closing of downtown bars between 2 a.m. and 10 a.m. have any positive effect on the problem? Should public drunkeness be considered a crime? Should alcohol control laws restricting the sale of alcohol to intoxicated people be more strictly enforced?

Other questions the committee will be asked to address are: Should the area attractive to street drunks be moved to another part of town? How will public drunks affect Project 80s facilities? What is the possibility of a drunk park where public inebriates can go out of the public view?

In a background paper prepared for committee members, the municipality findings show Anchorage's "skid row" population to be younger than most similar groups in other cities and made up of more females. The report says 57 percent of the group is estimated to be native and other minorities, with 40 percent Caucasian.

The conference begins at 8:30 a.m. Wednesday at the Holiday Inn. Public testimony will be taken Wednesday afternoon.
Experts study 'public inebriate' problem

A second conference on what municipal health officials call "the Anchorage downtown public inebriate problem" convenes here Wednesday morning.

A committee including representatives from the alcohol treatment system, the social service system, the courts, police, local legislators and business leaders will brainstorm the issue.

Public testimony will be taken Wednesday afternoon, following scheduled presentations by "expert witnesses."

The experts include representatives from the Salvation Army community service patrol, Cook Inlet Native Association, the Downtown Merchants Association, the state, a "cop-on-the-beat," the state court system, the owner of a Fourth Avenue bar, Bean's Cafe, and the liquor industry.

Dr. Leonard Blumberg, "a nationally respected expert on urban skidrow problems from Philadelphia," will assist the committee in weighing the testimony and brainstorming possible solutions, the municipality says in a prepared statement.

In a background paper provided to committee members, the municipality reports findings that Anchorage's "skidrow" population is "relatively younger" than similar groups in other cities, with an average age range from 25 years to 55 years.

The Anchorage population also includes more females, the city says, adding that 57 percent of the group is estimated to be Native and other minorities, 40 percent Caucasian.

A 29 percent alcoholics, 29 percent drug addicts, and 7 percent mentally ill are among the "typical questions" members should be prepared to confront.

Among them:
- "How are individual rights weighed? Is it more important to allow the public inebriate to fall into the street or to protect the rights of the downtown shopper who doesn't like tripping over a fallen public inebriate?"
- "Should existing alcohol control laws regarding the sale of intoxicating beverages to intoxicated persons be more strongly enforced?"
- "Should additional funds be spent on services to public inebriates?"
- "Is there any validity to the suggestion that chronic public drunkeness be recriminalized?"
- "Should skidrow population be moved to another part of town, and if so, to what location?"
- "What would be the estimated impact of the public inebriate problem on the proposed Project 180 downtown facilities? Will the public inebriate keep conventioners and theatergoers away from the central business district?"
- "What is the possibility of a 'drunk park,' a place where public inebriates can go that they consider their own and would be out of the public way?"
- "Would closing of the downtown bars between 2 a.m. and 10 a.m. have any positive effect on the problem?"
- "Are downtown merchants partially responsible for seeking active solution to the problem, or is it solely a governmental responsibility?"
Fresh approach to Skid Row issue urged

By JOHN LINDBACK

Anchorage Daily News reporter

Anchorage should take a renewed look at battling problems associated with its Fourth Avenue Skid Row, a special Blue Ribbon Committee was told Wednesday by a group of witnesses that included Mayor George Sullivan.

"Our Skid Row population is estimated to be between 600 and 700 people," Sullivan said. "This small group over the years has created more visible social and economic problems than any other group of its size in this community."

The committee—which includes representatives from the alcohol treatment system, the social service system, the courts, police, local legislators and business leaders—was appointed recently for a second time. Sullivan said, "Last year we spent a record amount for the provision of all alcoholism services. The public inebriate, the most visible part of our alcoholic population, has been visibly impacted, but not enough positive change has occurred."

While most speakers Wednesday agreed that the war against alcoholism needs to be stepped up, viewpoints on what ammunition should be used were widespread.

Some speakers favored a beefing up of public drunkenness laws and a cutback in bar hours, while others argued for comprehensive social programs aimed at alcoholism throughout the community.

The witnesses testifying included two proclaimed "Fourth Avenue residents" and two administrative directors of local alcoholism programs that told the group they had been former Skid Row drunks.

"I drink just to pass time. I don't have anything else to do," one of the Fourth Avenue residents told the group. Neither of the men, one Native and one Caucasian, was identified.

"You literally live in the clothes you wear," the other Fourth Avenue resident said. "You smell like you come out of the jungle somewhere."

The man was against court-ordered rehabilitation programs.

"After you get through (with the programs), you have no place to go but back down to Fourth Avenue."

Leonard Blumberg, a Philadelphia who is a nationally known expert on urban Skid Row problems, told the panel: "The 90 to 100 hard-core public inebriates on Fourth Avenue cost this city millions and millions of dollars."

Sullivan said, "Downtown merchants complain of revenues lost by people not shopping in downtown stores because they don't like to see or in some cases be accosted by those downtown drunks."

"In 1976, it is estimated that the city and the state spent approximately $1.7 million dollars on this group, or almost $20,000 for each public inebriate on the street," he added.

"This sum includes the provision of medical and social services and the cost of the police personnel," Sullivan said. "Last year we spent a record amount for the provision of all alcoholism services. The public inebriate, the most visible part of our alcoholic population, has been visibly impacted, but not enough positive change has occurred."

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Cut liquor sale hours, panel says

By JOHN LINDBACK

Daily News reporter

The number of hours local residents can purchase alcoholic beverages each day should be reduced, a Blue Ribbon Committee studying Anchorage’s Skid Row problems urged Friday.

That recommendation and six others — including a “cleanup of Fourth Avenue” and “more visible law enforcement,” in the area — will be sent to Mayor George Sullivan for his consideration.

The mayor asked the 16-member committee earlier this week to arrive at a list of recommendations during a two-day meeting at the Anchorage Holiday Inn.

The committee’s only dissent on the bar hours issue — though he was very vocal — was Robert Johnson, a local public relations man representing the Cabaret, Hotel and Restaurant Association (CHAR). He argued following the Friday meeting that shortening hours would adversely affect bars and restaurants and bars throughout Anchorage because of serious Skid Row problems in only one area of town.

“To me, what they’re doing is they’ve got an ace in their finger, so they’re doing a frontal lobotomy,” Johnson said.

“When you cut hours you are naturally affecting those businesses,” he added, claiming “there have been many, many studies that say the hours have no relation to alcohol abuse.”

Some committee members, however, were encouraged by reports from Juneau that a cutback in bar hours there resulted in fewer Skid Row problems for public agencies.

Through the hours differ in Anchorage from bar to bar, all establishments serving liquor must be closed between the hours of 5 a.m. and 8 a.m.

A Philadelphia expert has recommended that the city clear parts of Anchorage’s Fourth Avenue Skid Row.

Discussion by committee members indicated support for requiring those businesses to be closed between 2 a.m. and 10 a.m.

“Anchorage is rather unique to have the hours that we do,” said William Orfitelli, a committee member representing the Municipal Health Commission.

Johnson said that requiring bars to close between 3 a.m. and 10 a.m. would cost the Sheraton Hotel, for example, some $86,000 in lost revenue during December. Such a regulation would affect banquets and parties and would have a ripple effect on restaurants that cater to late-night partiers.

“It would probably cost about 250 jobs, right off the bat,” Johnson said. “The industry told me $130,000. I have cut it in half just to make sure a fair figure is used.”

- The committee’s recommendations, generalized purposely to leave the mayor and Anchorage Assembly latitude in determining specific policies, were:

  - A “cleanup” of Fourth Avenue. The panel suggested that “reducing the concentration” of establishments serving liquor be considered.
  - Criminalization of public drunkenness: The panel urged that recriminalization of public drunkenness should not be considered “at this time.”
  - Social services: A “comprehensive” group of services should be provided for rehabilitating Skid Row drunks. Such services could include employment agencies and a credit union, along with traditional detoxification programs.
  - Law enforcement: Law enforcement in the downtown area should be “more visible” and comprehensive. Officers could use such powers as “going to come in under eminent domain and force landowners to sell property at reasonable prices.”

- The committee’s recommendations include “vigorous enforcement of laws regarding public consumption of alcohol and sale of liquor to the intoxicated,” strict enforcement of health codes and establishment of “reasonable” drinking hours.

- The committee sought recommendations from Dr. Leonard Blumberg, a professor at Temple University in Philadelphia heralded as an expert on Skid Row problems.

- Dr. Blumberg’s other recommendations included “some form of treatment” for alcoholics and “from other treatment centers, you have to pay a lot of money for it,” he said.

- Blumberg, a professor at Temple University in Philadelphia, said he recommended that at last part of Fourth Avenue, probably the block between B and C Streets, be “cleared.”

- He said several times during the conference that cities successful in dealing with Skid Row problems have used a combination of urban renewal and comprehensive social services.

- “One way to do it is under the right of eminent domain,” he said, which is legal action whereby the city could go to court to force landowners to sell property at reasonable prices.

- “It means that if you’re going to come in under eminent domain, you better be prepared to pay a lot of money for it,” he said.

- Blumberg argued against criminalization of public drunkenness and compelling Skid Row alcoholics to take part in social service programs.

- “If you compel people to go to a treatment center, you are in fact putting them in jail,” he said. Blumberg expressed support for a voluntary, long-term approach to institutional treatment.

- “We need to be very gentle about depriving people of their freedom or their liberty,” he said.

- Blumberg’s other recommendations included “vigorous enforcement of laws regarding public consumption of alcohol and sale of liquor to the intoxicated,” strict enforcement of health codes and establishment of “reasonable” drinking hours.
TO:

PUBLICATION: Tuesday, January 6, 1980

FROM: Robert A. (Bert) Hall, Director
       Department of Health and Environmental Protection

SUBJECT: ANNOUNCEMENT OF CONFERENCE ON THE ANCHORAGE
         DOWNTOWN PUBLIC INEBRIATE PROBLEM

CONTACT PERSON: Brian Saylor (264-4758)

The Municipality of Anchorage, Department of Health and Environmental Protection is sponsoring a follow-up conference on the Downtown Public Inebriate problem. The conference, entitled "Beyond 4th Avenue: Alternatives to Misery, Phase II" will be held at the Holiday Inn at "C" Street and 4th Avenue in the Fairbanks Room on Wednesday, January 7, 1981 beginning at 8:30 a.m.

A select Committee including representatives from the alcohol treatment system, the social service system, the courts, police, local legislators, and business leaders has been assembled to hear testimony from expert witnesses and the public. The public is invited to present brief statements on Wednesday afternoon following the scheduled presentations. At the end of the public hearing phase, the Committee will review all the testimony with the assistance of Dr. Leonard Blumberg, a nationally respected expert on urban skidrow problems from Philadelphia. As a result of those discussions, the Committee has been charged to develop a series of policy recommendations for consideration by the Mayor and the Assembly.