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ÔVERALL ASAP PROGRESS

Moya G. Easterling

CITY OF PHOENIX ALCOHOL SAFETY ACTION PROJECT

251 West Washington Street Phoenix, Arizona 85003



JUNE 1977

FINAL REPORT Section One

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U.S. DEPARTMENT OF TRANSPORTATION NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION Office of Driver and Pedestrian Programs Washington, D.C. 20590

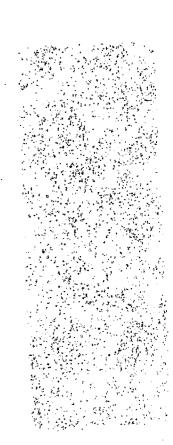
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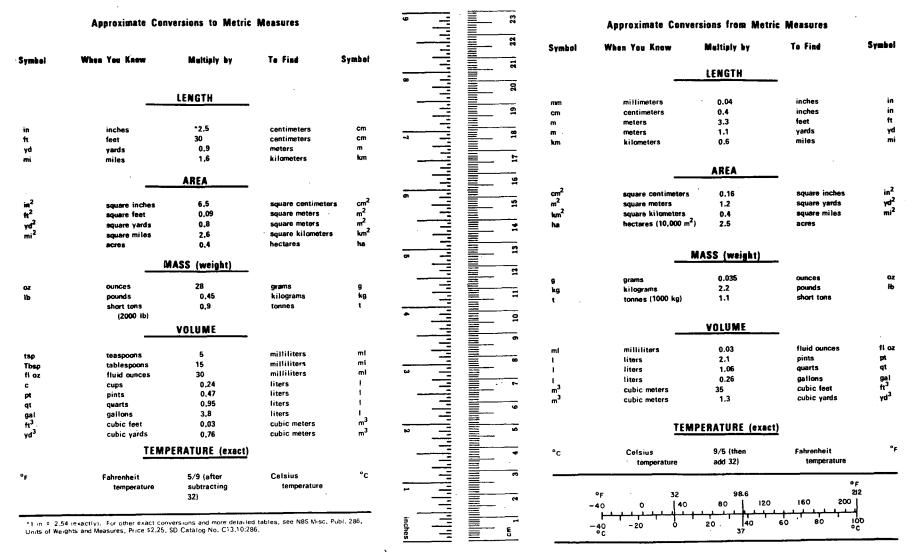
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1. ABSTRACT

This report represents an overview, from management's frame of reference, which encompasses the earliest plans for, to the continuation of, countermeasures following the demonstration phase of the Phoenix Alcohol Safety Action Project (ASAP). A Technical Summary provides the casual reader with considerable information in abbreviated form. Expansion of this preliminary discussion occurs in the following parts of the report.

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A comparatively small management staff provided liaison-coordination among various City departments and a limited number of outside subcontractors in order to develop a systems approach to the traffic safety problem of excessive drinking and driving. Overall goals were established for the project, and then objectives were developed for each component part (countermeasure). Evaluation methods devised at the outset were basically continued throughout the fiveyear operational phase and added to three years of baseline data which had been gathered. A reduced evaluation effort will continue with Federal 403 funding through May, 1979.

Key performance measures are presented in table form for most of the Phoenix ASAP countermeasures. For each component activity, there are included conclusions and recommendations which reflect subjective opinions and judgments of the project director.

Forming an important part of this Section One of the Final Report is a presentation of abstracts for the five comprehensive Analytic Studies prepared by the ASAP Evaluation Unit. These studies in their complete form represent Section Two of the Final Report and are each separately bound. Numerous references to the studies are made throughout the management text. Any serious student of the ASAP results will wish to review carefully the full studies after reading the abstracts.

Plans for continuation of ASAP activities after termination of the Project's demonstration phase are outlined. Except for a drastically diminished management staff and the public information and education countermeasure, the system will stay virtually intact in Phoenix until better methods evolve for handling this serious traffic safety problem.

An extremely interested and active citizens' advisory/group assisted project management in reviewing activities and processes from late 1973 through early 1977. Two of the letter reports to the Mayor and Council prepared by this committee are reproduced as supplemental information.

The report closes with a presentation of an index which includes all the reports submitted to the U.S. Department of Transportation to date, as well as a series of tables covering Project financial and personnel data. Appendix H tables, reporting all the Federally required information for the national data base, were submitted as Section Three of the Final Report.

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This technical summary is intended to provide an overview of the Phoenix Alcohol Safety Action Project operations and impact. It includes a brief history of how the program was implemented, changes which took place over time, and a brief description of Project activities at the close of the operational period.

Persons in the field of traffic safety, as well as individuals involved in the delivery of health care services for alcohol abusers, who are considering the implementation of similar operations within their own communities, will find this summary a helpful reference document. The reader is reminded that the results reflect five full years of Project operations. Major changes in the system occurred in the third year; and therefore more time is required before a fully adequate evaluation of Project impact may be completed. Nevertheless, important trends are clearly emerging.

Most components of the Phoenix ASAP will continue as standard operating procedures beyond Federal funding until better ways evolve for accomplishing countermeasure goals. Project management will be of lower profile, however; and the public information and education activity is being discontinued despite its evident success. Evaluation/coordination efforts using a reduced staff are continuing through May, 1979 with Federal 403 funding assistance from the U. S. Department of Transportation.

(Continue on additional pages)

"PREPARED FOR THE DEPARTMENT OF TRANSPORTATION, NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION UNDER CONTRACT NO.:DOT-HS-052-1-068 THE OPINIONS, FINDINGS, AND CONCLUSIONS EXPRESSED IN THIS PUBLICATION ARE THOSE OF THE AUTHORS AND NOT NECESSARILY THOSE OF THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION."

2. TECHNICAL SUMMARY

2.1 PROJECT GOALS

From its outset, the Phoenix Alcohol Safety Action Project (ASAP) identified two simplified primary goals:

(1) To achieve significant reduction in alcohol-related crashes resulting in fatalities, injuries and property damage.

(2) To generate public support and stimulate state and community programs.

Time has proven that several other important outcomes deserved initial goal status. Since hindsight is frequently more perceptive than foresight, a discussion of these other aspects of the system's approach to DWI (driving while under the influence of alcohol) drivers appears in a later section of this report.

2.2 IDENTIFICATION OF NEED FOR THE PROJECT

In late 1970, concerned officials of the State of Arizona and the City of Phoenix took a careful look at statistics surrounding vehicle and pedestrian accidents, seeking answers to causative factors. A statewide survey conducted by the Arizona Highway Patrol (Department of Public Safety) for the years 1964-1968 revealed that over half the fatal traffic accidents within the state each year involved drinking and driving. This corroborated findings on a national level, where the annual toll of human lives in traffic accidents had reached alarming proportions.

Meanwhile, numerous studies had convinced officials of the National Highway Traffic Safety Administration, U. S. Department of Transportation, that they needed to take corrective action against the excessive drinker who drives. (An excessive drinker is defined as anyone whose drinking is causing problems for himself, his family, employer, or community.) Request for proposals were issued for countermeasure programs, to be called "alcohol safety action projects," or ASAPs. An ASAP is designed to identify drinkers who habitually drive after drinking excessively and get them into educational/rehabilitative programs to help alleviate their problem behavior. Phoenix responded in the spring of 1971 with a proposal for such a demonstration-and-action program.

2.3 DEVELOPMENT AND IMPLEMENTATION OF THE PHOENIX ASAP

A proposal developer, one assistant, and a clerk-typist were retained on a temporary basis. The developer was asked to synthesize and coordinate ideas gathered through the combined thinking of various concerned public officials, community agency representatives, and other leading citizens.

At the request and invitation of the Mayor of Phoenix, a Community Alcohol Safety Advisory Council was convened to consider the basic alcohol safety problem, the problem sources and resources available to cope with them, and to examine the first and subsequent drafts of proposed countermeasure programs.

Following guidelines prepared by the Office of Alcohol Countermeasures (now merged into the Office of Driver and Pedestrian Programs) in Washington, D. C., the local Council provided a mix of backgrounds among its membership. For example, in Phoenix this group included: a well-known local attorney and former City Councilman who co-chaired the Council with the Governor's Highway Safety Coordinator; the assistant City Manager; and eleven other decision makers representing State and City agencies, as well as the private sector, all of whom would be directly or indirectly involved in the ASAP system.

Initiation of an ASAP operates on the "IDA" assumption: that is, solution of problems must proceed from Identification to Decision to Action. For this reason, the function of an Advisory Council in the early phases of an ASAP is crucial to the achievement of IDA goals.

Several productive meetings of the Phoenix advisory group, coupled with many long hours of staff work which was aided by specialists from Washington, resulted in development of an agreed-upon proposal. Once this proposal was accepted in Washington, Phoenix had six months in which to complete a Detailed Plan, based on management-by-objective goals for each component countermeasure. An evaluation model was devised which included key evaluation questions as well as measures of cost feasibility, effort, performance, and efficiency. Phoenix thus joined the middle group comprised of 20 such projects. These were preceded by nine pilot plans and followed by six additional programs, for a total of 35 ASAPs located throughout the United States and Puerto Rico.

Permanent Phoenix ASAP staffing positions were identified in the proposal, consisting of a project director, assistant director, public information specialist, DWI rehabilitation coordinator, evaluation analyst, secretary, and clerk-typist. It seems important to note that, as a Federally-funded demonstration project, there were heavy requirements for data-gathering, evaluation, and report writing built into the cost-reimbursable contract.

During the June through December interval in 1971, subcontracts with outside agencies for the delivery of services and memoranda of understanding with various City departments were originated and executed. Although there were no "in-kind" matching requirements in the DOT contract, the City provided numerous support

services such as personnel recruitment, payroll, purchasing, legal, accounting/internal auditing, and space in the courts for personnel and DWI School activities.

Evaluation of the Project ranked as a high priority and played a significant role throughout the planning and operational phases. Three years of baseline data were gathered for the period 1969 through 1971 for (1) total City vehicle crashes (all and alcohol-related, or A/R); (2) fatal crashes (all and A/R); and (3) injury crashes (all and A/R). A time-series projection for 1972, the first operational year, was developed, based upon the linear trend and cyclic variations over the three years 1969, 1970, and 1971. This technique was continued by evaluators during the entire Project.¹

Municipal Court arraignment and DWI case disposition data were also gathered and used by evaluators in comparing baseline and early operational years of ASAP. This information became less important when a quasi-diversionary program was initiated in mid-1974. After this time, prosecution data on case dispositions developed greater relevancy.

Phoenix DWI School records for the baseline years proved to be impractical for inclusion in the new record system. Furthermore, there was no evaluation plan during that time interval which allowed for random assignment to experimental and control or comparison groups. It was further suspected by evaluation personnel that a demographic skew may have been present among those persons referred to the DWI School, based upon a sentencing judge's impression of whether or not the DWI probationer might benefit from the experience.

Responsibility for design of the original data system and Project evaluation was vested in the Industrial Engineering Department, College of Engineering, Arizona State University, Tempe, through a subcontract with the City of Phoenix. When the Phoenix ASAP was extended for two additional operational years in late 1974, the evaluation function was moved in-house by the City. By expanding its evaluation component to include one coordinator, two analysts, and two clerical personnel, as well as adapting the University tapes to the City's computer, an extremely sophisticated data system developed. Outside consultants were retained under contract to assure objectivity in analyzing the findings.

Following the official launching of the Phoenix Alcohol Safety Action Project on January 5, 1972, a flurry of activity began. Keynoters at the first press conference were the Deputy Adminis-

¹See <u>Phoenix ASAP Evaluation Unit, Analytic Study I: An</u> <u>Analysis of Total Project Impact</u> (City of Phoenix Alcohol Safety Action Project, 1977) for a complete discussion of evaluation techniques used in crash analyses.

trator of the National Highway Traffic Safety Administration, the Governor of Arizona, and the Mayor of Phoenix. These men in their comments set the tone of urgency that dictated the adoption of new measures such as an ASAP, through which increased highway safety might be achieved.

Special training for ASAP enforcement personnel took place in January, 1972. The curriculum included orientation to the total "systems approach" of ASAP; information on reeducation and rehabilitation countermeasures, presented by persons actually working with DWIs of all kinds; training in developing courtroom testimonial skills; in-depth sessions on methods of identifying drinking drivers; familiarization with special reporting requirements for ASAP DWI and companion citations; and special training by the administrator of the Phoenix Crime Laboratory in techniques of breath testing with different kinds of equipment. Later that same year additional patrolmen were trained to provide a cadre of back-up officers from whom to draw as vacancies occurred in the ten-man ASAP motorcycle squad.

Anticipating a substantial increase in DWI arrests by using selective enforcement with the City squad, plus two Department of Public Safety vehicles on the 23 miles of freeway running through the City, ASAP bolstered the capacity of other system components. In addition to special equipment provided the Crime Laboratory, one new criminalist was funded to assist in processing cases and testifying in court trials. Extra clerical staff in the Traffic Bureau provided the capability for pre-sentence data gathering. ASAP also helped provide two additional courtrooms, along with extra judges, support personnel, prosecutors and secretaries, plus necessary furniture and equipment.

Finally, a series of countermeasures was planned in order to provide educational and rehabilitative experiences for those persons convicted of DWI. Data-collecting mechanisms were designed to provide a method of tracking persons throughout the system and to re-enter them as recidivists (DWI repeaters) in cases of subsequent arrests for the same offense.

Concurrently, a massive public information and education campaign was launched to stimulate interest and promote community support for the Project. Building upon the foundation of media materials provided nationally through Grey Advertising, the local ASAP produced numerous pieces of literature, news releases, slide show presentations, newspaper ads, a speakers bureau, a rock musical, billboard and cartoon contests, and other noteworthy activities.²

²See <u>Phoenix ASAP Evaluation Unit</u>, <u>Analytic Study VII</u>, <u>An</u> <u>Analysis of Public Information and Education Activities</u> (City of <u>Phoenix Alcohol Safety Action Project</u>, 1977) for an expanded description of numerous public information and education programs.

After the first two-and-one-half years of operations, some major changes were made in the Phoenix project, based on experience, evaluation results, and recommendations prepared by a new Citizens Alcohol Safety Advisory Committee which replaced the original Council in late 1973. It is a common practice in Phoenix to use a broad representation of citizens to serve at the pleasure of the Mayor and Council on a variety of boards, commissions, councils and committees. Therefore, when attendance of members on the original advisory body dropped off for called meetings, it was recognized that their interest was lagging because early operational problems were resolved and routine matters could be handled by subordinates.

By the spring of 1974, budget commitments would have to be made by various departments (and then approved by the Council) if several ASAP countermeasures were to be continued. Federal funding was scheduled to phase out at different times throughout that calendar year. ASAP management conferred with City officials, including the Mayor, all of whom agreed that the fresh viewpoint of citizens from several professions and backgrounds would be invaluable for reviewing the total ASAP program, weighing evaluation results to date, and making recommendations to the City Council.

As a result, certificates of appreciation were presented to all those who had initially provided the guidance for launching the Project. And a new group of lay people went to work over the span of several months to prepare specific recommendations on which to base budgetary actions by May, 1974. Their counsel helped form the basis for acting on numerous system changes. It was late spring of 1977 before these dedicated citizens completed their assignment by preparing and presenting a final report to the Mayor and City Council before disbanding.

2.4 RESULTS INDICATING CATALYTIC OR ANCILLARY EFFECT OF THE PHOENIX ASAP

A project such as the Phoenix ASAP creates a certain measure of catalytic effect by its mere existence. Through the liaison and coordination functions of the management staff, various countermeasure heads or spokesmen meet with one another regularly and exchange ideas. By gaining insight into one another's problems and successes, beneficial groundwork is laid for ongoing cooperation.

More specifically, transportation assistance techniques developed through the Phoenix ASAP-initiated Crisis Intervention Program (CIP) caught the imagination of other community groups. Those responsible for establishing the Local Alcoholism Reception Center (LARC), once public intoxication was decriminalized under Arizona Statute in 1974, saw CIP-type civilian pick-up teams as viable alternatives to the exclusive use of skilled police officers in delivering public inebriates to the Center. Furthermore, the

fact that CIP personnel were available 21 hours a day, seven days a week, also seemingly created increasing awareness among community social service groups that "people problems"--especially those involving alcohol--occur at all times of the day and night.

One ongoing, and extremely important, ancillary benefit was the interface between ASAP and Traffic Representatives of Arizona's Governor Youth Council (TRAGYC). Young people offer a great potential resource for development of a new social attitude toward the responsible use of alcohol.

Finally, the pioneering systems approach to DWI effort in Phoenix stimulated interest from many other communities in the State of Arizona. By sharing information and evaluation results from this project, others may ultimately benefit appreciably with less expenditure of dollars and manpower input than was required here. For these reasons, ASAP management responded as fully as it could to the numerous requests for information and assistance which it regularly received.

2.5 \ SUMMARY OF SIGNIFICANT PROJECT RESULTS

Five years of the operational phase of the Phoenix ASAP have been evaluated. The Phoenix motor vehicle crash data collected during the period 1972 through 1976 were compared with "baseline" or pre-operational data for the years 1969 through 1971. Following each operational year, Analytic Study I focused on analysis of motor vehicle crashes as the ultimate performance measure by which Project impact can be determined.

Analyses of overall vehicle crashes for the City of Phoenix indicate a decreasing trend in both injury and total crashes during the operational period of the Project. Total fatal crashes appear to have been relatively unaffected by the ASAP efforts and other factors during the time period considered by these analyses. It is likely that the characteristically low frequency of fatal crashes during each monthly observation interval renders this impact measure relatively insensitive to the effects of traffic safety interventions.³

The goal of encouraging public support of the ASAP concept appears to have been satisfactorily met. Results of household and telephone surveys conducted throughout the operational/demon-stration portion of the Project are reported in some depth in the-1976 Analytic Study dealing with public information and education -

³Phoenix ASAP Evaluation Unit, <u>Analytic Study I: An</u> <u>Analysis of Total Project Impact</u> (City of Phoenix Alcohol Safety Action Project, 1977).

activities.⁴ Moreover, the Citizens Alcohol Safety Advisory Committee staunchly supported the program and recommended its continuation beyond Federal 403 funding.

Probably two accomplishments which were not stated as original major goals proved to be the outstanding ASAP achievements in Phoenix. First, a true "system" for dealing with DWI offenses evolved in which multiple City departments and outside agencies cooperated in an exemplary fashion. Second, early casefinding of alcohol problems resulted in referrals to a diverse network of modalities, many of which tailored programs directly responsive to DWI defendants' needs.

Following are highlights of significant achievements by countermeasures.

Enforcement. Phoenix was unique among ASAPs in that the a. primary police squad, singled out for DWI selective enforcement activities, was a ten-man motorcycle squad. These veteran officers were initially selected from volunteers who had served for some time with the Traffic Bureau of the Phoenix Police Department. Their selective enforcement thrust was supplemented by two Arizona Department of Public Safety (DPS) officers who patrolled the 23 miles of interstate freeway which lie within the City These latter men patrolled in cars and fully cooperated limits. with the Project, although no formal agreement was negotiated between the Department and ASAP. (It should be noted that DPS had to withdraw its special enforcement activities in early 1974 because of departmental manpower shortages that had been developing over time.)

Even though the specialized work of intensive DWI enforcement developed a close <u>espirit de corps</u> among the ASAP squad, there were also very real problems encountered. Table 2.1 reveals the high DWI arrest rate achieved in the first operational year of the Project (1972), the gradual decline in arrest performance for 1973 and 1974, and the increase in 1975 and 1976. All ASAP officer court testimony was on an overtime basis, since the patrolmen worked regular schedules of 7:00 p.m. to 3:00 a.m., Tuesday through Saturday. As court backlogs skyrocketed in 1973 (see Judicial countermeasures section) and widespread plea bargaining became prevalent to reduce such caseloads, officers' morale dropped because of their unproductive, but mandatory, court waiting time. By late 1974, some major ASAP system changes reversed this situation, primarily through a quasi-diversionary Prosecutor's program.

⁴ Phoenix ASAP Evaluation Unit <u>Analytic Study VII: An</u> <u>Analysis of Public Information and Education Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977).

TABLE 2.1

PHOENIX DWI ARRESTS 1972-1976⁵

	1972	1973	1974	1975	1976
ASAP Patrol	1,973	1,492	2,236	2,476	1,783
Regular	8,769	7,473	6,059	8,774	9,946
Total	10,742	8,965	8,295	11,250	11,729

⁵ "ASAP" includes arrests made by the ten-man Phoenix police motorcycle squad; "Regular" includes arrests made by other Phoenix police and all Arizona Department of Public Safety officers (including DPS-ASAP patrolmen). The ASAP squad began operating during the last two days of January, 1972.

Source: ODPP Monthly Data forms tabulated from Phoenix Police Department and Department of Public Safety reports.

ASAP funds provided new equipment to the Phoenix Crime Laboratory, including a spectrophotometer. In another effort to speed up officer turn-around time, the Project provided gas chromatograph intoximeter (GCI) field encapsulators to the ASAP squad and to regular patrol members in cars. Several problems arose in this regard, and the limitations of such devices are, therefore, noted. Crime Laboratory personnel trained large numbers of police officers in the use of Breathalyzer and GCI equipment during the course of the Project, in addition to providing expert testimony at DWI trials.

b. Judicial. Phoenix ASAP faced a 1,700 DWI case backlog in the Municipal Court when the Project had been operational only a few months in 1972. This was true despite the fact that three years of baseline data and the first few months of operational data reflected that 70% of those persons arrested for DWI in Phoenix pled guilty at arraignment; only 30% asked for jury or non-jury trials. It was also true despite ASAP's having provided two additional courtrooms and necessary support personnel in anticipation of the effect of increased DWI enforcement efforts.

Despite every effort to streamline and expedite traditional methods for processing DWI cases, it was evident by late 1973 that the Phoenix Municipal Court and Prosecutor's Office could not absorb the impact of the extremely high arrest rate being encouraged by ASAP. Therefore, by mid-1974 a unique quasi-diversionary pilot program was undertaken by the City Prosecutor with the

cooperation of the courts. Results were so noteworthy in the program's first six months of implementation that it was continued as standard operating procedure.⁶

Finally, in reviewing judicial countermeasures, note must be made of the innovative DWI Volunteer Probation Partner Program in Phoenix. Operating within the Municipal Court's Volunteer Probation Services section, this ASAP countermeasure utilized the services of volunteers to fill various staff functions including intake interviewing, outreach casework and clerical assistance. Special emphasis was placed on matching trained volunteers to DWI probationers on a one-to-one basis. Each volunteer received a personal screening by the program supervisor and participated in six hours of training.

The basic goal of the volunteer probation partner was to establish a helping relationship with the person on probation, functioning as a friend, listener and information and referral source. Oneto-one meetings were held on a weekly basis. The most common way a defendant entered the program was by direct court referral. Defendants referred in this manner were a mixture of people-those who had never been through Prosecution Alternative to Court Trial (PACT), defendants who were PACT failures, or defendants referred through judicial discretion. Labelled "the most cost feasible ASAP countermeasure" by the Citizens Alcohol Safety Advisory Committee, this program changed lives and attracted national attention.

c. <u>Reeducation/Rehabilitation</u>. The Phoenix DWI School, a Diagnostic Review Board, and varied offerings at St. Luke's Hospital Medical Center constituted the major components of the Phoenix ASAP reeducation and rehabilitation efforts from 1972 to mid-1974. At that juncture, the School was discontinued in Phoenix and a series of workshops and other modalities were substituted, concurrent with the inception of Prosecution Alternative to Court Trial (PACT). These changes were in response to evaluation results which indicated the need for program modification.

While there is evidence that behavioral change can be effected by DWI defendants in the wake of exposure to various modalities, even the sweeping program modifications instituted in late 1974 have not proven to be overwhelming successes. Numerous cases can be documented to show major life style changes among former problem drinkers. However, there also appear to be many persons who continue their past excessive drinking/driving practices after being exposed to DWI countermeasures.

⁶ See Phoenix ASAP Evaluation Unit, <u>Analytic Study IV: An</u> <u>Analysis of Judicial System Performance</u> (City of Phoenix Alcohol Safety Action Project, 1977) for a complete description of Prosecution Alternative to Court Trial (PACT). Nevertheless, important contributions to the research in this area have resulted from Phoenix ASAP activities. A short screening questionnaire, developed after extensive testing and revision, enables Rehabilitation-Probation Center personnel to direct hundreds of DWI defendants to appropriate programs each month. A Home Study Course, initially produced as a comparative modality for evaluation purposes, proved to be sufficiently effective that new experimentation is being conducted to expand its utility. A Comprehensive Alcohol Program (CAP), developed for recidivists among whose number are many alcoholics, has shown great promise of advancing the state of the art in terms of rehabilitation.⁷

Very large numbers of people were referred to programs in Phoenix, which included interface with some 40 agencies outside the Center's offerings. Defendants paid for their own programs, in addition to Court fines, for the most part. A community work program was available for those individuals who could not pay in cash, but who wished to earn credit for the fees. Table 2.2 shows rehabilitation referral activity.

TABLE 2.2

REFERRALS TO ALCOHOL AWARENESS PROGRAMS AND THE DRB/DRI, BY YEAR OF REHABILITATION ENTRY JULY, 1974-DECEMBER, 1976 (MUTUALLY EXCLUSIVE CATEGORIES)

· · ·	1974	1975	1976	Total
Prevention Workshops PW plus DRB/DRI	1,929 141	4,363 70	4,584 62	10,876 273
Therapy Workshops TW plus DRI		1,216 276	1,643	2,859 276
Power Motivation Training PMT plus DRI		115 21	119 26	234 47
Home Study		1,216		1,216
DRB/DRI Only	859	519	765	2,143

⁷See Phoenix Evaluation Unit, <u>Analytic Study VI: An Anal-</u> <u>ysis of Drinker Diagnosis, Referral and Rehabilitation Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977) for an indepth review of modalities offered and their evaluation to date. Evaluation of rehabilitation effectiveness was addressed through a comparative analysis of DWI arrest recidivism using the technique of survival rate. Comparisons were made between randomly assigned DWI School treatment and control groups, randomly assigned Alcohol Awareness Programs and the Home Study Course, and between Alcohol Awareness Programs and their closest treatment counterpart (the DWI School four-session group). In addition, Phoenix participated with nine other sites in a Short-Term Rehabilitation field study conducted by the University of South Dakota under contract to the U. S. Department of Transportation.

One further program need seen in Phoenix at the ASAP planning stage was for a hotline to deal with alcohol-related crises and transportation assistance requests on an emergency basis. These important functions took form through the initially ASAP-sponsored Crisis Intervention Program (CIP). Staffed 21-hours-per-day, seven days per week, this people-oriented activity obviously filled a great community need.

d. <u>Public Information and Education</u>. Overall effectiveness of a massive "people program" such as ASAP is closely related to the support received in the community from leaders and decision makers, as well as the all-important man on the street. From the outset, the Phoenix project made very real efforts to maintain open communication lines.

This activity involved countermeasure meetings called regularly by ASAP management to keep dialogue alive and vital between personnel from the various system components. It involved communication between the Project and City management. And the Citizens Alcohol Safety Advisory Committee presented ASAP matters in formal reports to the Mayor and Council.

Frequent stories on newsworthy happenings were released to the various highly supportive local media. Local tags for nationally produced TV and radio spots provided expanded general audience penetration for ASAP. Information-giving brochures and leaflets were developed or adapted locally from other sources to enrich the public information and education interface with a wide variety of publics.

2.6 PLANS FOR CONTINUING THE PHOENIX ALCOHOL SAFETY ACTION PROJECT BEYOND THE DEMONSTRATION PHASE (1972 THROUGH 1976)

Because the systems approach to processing DWI defendants has proven to be a fair and efficient way of handling large numbers of cases, the prognosis for continuing an ASAP-like program in Phoenix is very good. Only the public information and education countermeasure is being discontinued for financial reasons.

With U.S. Department of Transportation funding assistance, a modified evaluation effort will continue for two more years. At the end of 1978, three baseline and seven operational years will be available for analysis, providing a truly significant longitudinal study in traffic safety.

3. FISCAL AND PERSONNEL REVIEW

Total Federal portion actual expenditures were \$32,342 less than planned in Detailed Plan Revision No. 9 which was in effect during 1976. On a cumulative basis, the overall underrun was \$37,900, or 1.2% below total planned expenditures of \$3,066,818. It should be noted this review pertains only to the Federal portion of the budget.

A cumulative underrun amount has been included in the budget for 1977, 1978, and five months of 1979. For the first six months of that (approximately) two and one-half year period, Management and the Evaluation unit will wrap up and report on the operational phase of the Project. For the remaining 23 months, a \$50,000 contract increase, underexpended operational period funds, and City funds will support a reduced evaluation staff to monitor and report selected data pertinent to operational countermeasures. Detailed Plan Revision 10, pertaining to this two and one-half year period, and noted funding sources, has been submitted for approval.

As might be anticipated, the same expenditure categories display significant underexpenditure in both calendar 1976 and cumulative. They are Labor, which was \$15,434 below plan for the year and \$16,013 under on a cumulative basis, and Other Direct Costs. The latter category was underexpended \$15,426 for 1976 and \$17,501 cumulatively.

The most significant Labor cost variances are in the Evaluation and Judicial countermeasure areas and comprise \$11,700 of this variance for 1976. In Evaluation, follow-up work in connection with the National and local Short-Term Rehabilitation studies was conducted by approximately .5 (FTE) fewer part-time and contract employees than anticipated. The Judicial underexpenditure was largely the result of vacancies during the year in the DWI Volunteer Probation and Prosecution Alternative to Court Trial (PACT) countermeasures.

Delay in staffing a clerical position in the Rehabilitation-Probation Center countermeasure contributed to an additional \$3,299 labor underrun in the Rehabilitation area.

The \$15,426 Other Direct Cost variance for 1976 was, again, largely the result of Evaluation activities (\$10,662). However, in this category, Public Information contributed \$3,772 to the underexpenditure.

Four line items in the Evaluation budget account for \$10,000 of that countermeasure's Other Direct Cost variance. First, computer services were approximately \$7,500 higher than anticipated. However this was more than offset by \$1,000 less than plan expended on consultants, \$12,500 less in connection with a contract for STR followup work, and a saving of \$4,000 for a student survey which was not

conducted. In the latter instance, satisfactory arrangements could not be effected with the local high school district.

In Public Information, three budgeted line items contribute \$3,350 of the Other Direct Cost variance attributed to that countermeasure. The similar categories of Youth and Other Special Activities were, together, \$1,350 below plan while expenditures for consultants were approximately \$2,000 under budget.

Insofar as personnel is concerned, the Financial and Personnel Table includes all countermeasures, regardless of Federal or City funding. Thus, a total of 58.6 employees were included in the Plan for 1976. Actual was 56.9.

As noted above, professional vacancies or under-utilization of parttime personnel were evident in Evaluation (-.4), DWI Volunteer Probation (-.4) and PACT (-.3). Clerical vacancies were .1 in PACT and .5 in the Rehabilitation-Probation Center.

4. ADMINISTRATIVE EVALUATION BY MAJOR COUNTERMEASURES

4.1 MANAGEMENT AND EVALUATION

One overall goal of the ASAP was to significantly reduce alcoholrelated crashes. As a result, an important performance measure of total Project impact consists of various subsets of motor vehicle crash frequencies. These data are summarized below in Table 4.1.

TABLE 4.1

KEY PERFORMANCE MEASURES FOR TOTAL PROJECT IMPACT 1969-1976

<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	1975	1976
FATAL CRASHES 96	93	84	101	110	121	116	102
Alcohol- Related Only 32	37	43	53	45	63	53	42
FATALITIES 106	100	90	109	117	131	124	111
Alcohol- Related Only 38	42	48	59	50	72	. 57	49
INJURY CRASHES 7,813	8,295	8,479	9,469	8,840	8,343	8,332	8,853
PROPERTY DAM- AGE CRASHES N/A	13,924	14,294	16,415	16,848	14,685	14,536	15,361
TOTAL CRASHES N/A	22,312	22 , 857	25,985	25,798	23,149	22,984	24,316

Source: Phoenix ASAP Evaluation Unit, <u>Analytic Study I: An Analysis</u> of Total Project Impact (City of Phoenix Alcohol Safety Action Project, 1977). Because the Phoenix ASAP represented a continuous intervention on the traffic safety system of the community, the type of effect expected (under the assumption that the Project had positive impact) should be a long-term, cumulative decrease in motor vehicle crash rates. The interrupted time series quasi-experimental design used by evaluators considered changes between baseline (pre-intervention) and operational period (post-intervention) segments of a single time series.

Overall vehicle crashes in the City of Phoenix indicated a decreasing trend in both injury and total crashes during the operational period of the Project. However, this change did not appear to coincide with the introduction of the Phoenix ASAP during calendar year 1972, but occurred from 1973-1976. Furthermore, the same trend appeared in City of Tucson data even though no ASAP system was operational there during the cited period. These phenomena have no simple explanation.

Reductions in alcohol-related and total fatal crashes seem to have been relatively unaffected by the Project and other factors during the observed time period. Those responsible for performing the evaluation function conclude:

Only fatal crash data were available in analyses of nighttime, weekend, and alcohol-related crash trends. None of these analyses produced statistically significant indications of change in crash frequency due to ASAP, or to any other influence for that matter. The results of several years of statistical evaluation of fatal crash data in the effort to assess ASAP impact seems to point rather conclusively to the premise that these low frequency crash series are not sensitive indices of traffic safety countermeasure effects.⁸

Precisely, where does this leave the Project in terms of its stated goal "to achieve significant reduction in alcohol-related crashes"? First, it indicates that this was an immeasurable goal because police officers did not regularly test each driver involved in a crash to determine whether or not alcohol is involved. Further, many other influences were at work concurrent to special enforcement activities. Thus, a series of proxy measures (such as time of day, day of week, and single vehicle crashes) must be used to judge whether progress was made in the desired direction.

Second, it means that, since alcohol-related fatal crashes and fatalities involved comparatively small numbers which were insensitive to gross measurement, another aspect of the stated overall goal could not be proved or disproved. This is most unfortunate.

⁸ Phoenix ASAP Evaluation Unit, <u>Analytic Study I: An</u> <u>Analysis of Total Project Impact</u> (City of Phoenix Alcohol Safety Action Project, 1977), p. 50.

a. <u>Management Statements</u>. ASAP management, the Citizens Alcohol Safety Advisory Committee members, the alcoholism treatment community, and many City officials agree that numerous significant spin-offs have been achieved because of the Project. It therefore seems appropriate to suggest other local accomplishments which might have been originally stated as goals had foresight been as clear as hindsight.

(1) Various City departments and many community agencies grew accustomed to working together closely during the course of the ASAP demonstration period. Thus, application of the "systems approach to DWIs," as envisioned by DOT/NHTSA/ (OAC)ODPP, made a positive impact in Phoenix. A streamlined and efficient DWI control system emerged during the five years of ASAP.

(2) Documented data, expanding previous Police Department statistics, reveals the incidence of DWI arrests at various locations in Phoenix and shows the impact of selective enforcement activities.

(3) Building upon the existing policy of the Phoenix Police Department to release on their own recognizance those cited for DWI who had an alternative way to get home (other than by their driving) and for whom no outstanding warrants for arrest were on record, ASAP founded a Crisis Intervention Program (CIP). Arresting officers could phone for transportation assistance to take a DWI home, when the individual would otherwise have to be booked and jailed. The unanticipated pay-off was that CIP personnel furnished counseling follow-up in these contacts so that such defendants were sometimes already involved in an alcoholism treatment program before their court arraignment date. Furthermore, CIP provided a hotline for all kinds of alcohol-related emergencies, including eight to ten suicide calls each month.

(4) Because of large volumes of DWI arrests in Phoenix each year, pre-trial investigations could not be undertaken in a conventional manner without incurring heavy expense. By using clerical personnel, a system was devised to accumulate previous DWI arrest/conviction information and facts concerning the present citation on each DWI defendant. The particular mix of data proved highly effective for developing screening techniques useful to prosecutors, judges, and treatment personnel.

(5) It is nearly impossible for a court system to accommodate a very large DWI arrest rate in traditional ways, i.e., providing opportunities for jury or non-jury trials to every defendant requesting such legal rights. By developing a quasi-diversionary plan, with the assistance of Project personnel, the arrest rate actually rose and yet the City system absorbed the new cases in an even application of justice. (6) In order not to risk infringing on any individual's civil rights, once PACT (Prosecution Alternative to Court Trial, the above-mentioned quasi-diversionary plan) was established in August, 1974, all DWI defendants from that time forward were offered only one chance to participate. This opportunity was extended even though the routine record check revealed previous DWI conviction(s). However, a second offer of PACT was not made when the same person returned with another DWI citation. An amazing outcome of the alcohol awareness program, to which a PACT agreement subjected these defendants initially, is the high percentage who pled guilty at arraignment on the second DWI infraction.

(7) Extensive experimental testing of DWI defendants resulted, by mid-Project, in the development of a brief questionnaire which could be template-scored by clerical personnel to screen individuals as to their present involvement with alcohol. This instrument was most useful when dealing with large numbers of people and when in-depth interviews at point of intake were not cost feasible.

(8) Considerable effort was made to translate questionnaires and agreements into Spanish because of the frequent incidence of non-English-speakers among the Phoenix DWI population. While there is unquestioned value in showing sensitivity to the needs of particular minority groups, it was observed that many Spanish-speaking persons unable to read English were also unable to read Spanish. ASAP therefore encouraged employment of bilingual personnel within the system who provided assistance to this segment of defendants in the form of oral translations and instructions.

(9) With initial ASAP planning and funding, a Rehabilitation-Probation Center opened in early 1975 and became a division of the Phoenix Municipal Court on July 1 of that year. This resource to which DWI defendants were referred provided a wide variety of in-house or community-referral capabilities designed to meet most presenting needs. This offered judges tracks on which to refer red-flag offenders who returned to court with additional DWI offenses, who were ineligible for PACT, and who pled or were found guilty, and thus needed more confrontational alcohol awareness experiences in order to curb their anti-social drinking/driving behavior.

It has taken five operational years-plus to reach a point where some real objectivity can be exercised by management in reviewing what has happened in the course of the Project. The U. S. Department of Transportation and the City of Phoenix agreed upon a contract to operate an ASAP in June, 1971. The last half of 1971 then represented the "tooling up" period, when the Detailed Plan was written by a newly recruited ASAP staff learning to interact with the equally new Evaluation Team from Arizona State University, Tempe. Memoranda of understanding between the Project and various City of Phoenix departments had to be negotiated. Subcontracts between the City and the University as well as St. Luke's Hospital Medical Center were consummated. And, during all this activity, office quarters, supplies, furniture, and equipment were gradually acquired so that ASAP^{*}management and the various countermeasures could move ahead with their specific assignments.

It seems important to note that any political subdivision contemplating the implementation of an alcohol safety action program should be forewarned of the time required to get the entire system in motion. Occasionally, ongoing components are simply being combined in a different way (e.g., police DWI enforcement, prosecutor and court functions). However, special training for enforcement personnel, changes in court scheduling and recording procedures, pre-sentence investigations, plus interface with reeducation and rehabilitation modalities all represent areas where coordination and cooperation are essential.

In Phoenix, semi-monthly countermeasure meetings were called by Project management so that a forum was available at which operational/supervisory level personnel could air problems and seek solutions. Over time these meetings were spaced at monthly and then bi-monthly intervals. This gathering also fostered the "system" feeling and allowed Project personnel to provide feedback on system changes, evaluation findings, and news of other ASAPs throughout the nation.

Further assistance came from the U. S. Department of Transporation. Specialists were made available from Organizational Development Associates, Washington, D.C., and from Indiana University's Institute for Research in Public Safety. The first group assisted in two local seminars involving operational and management-level countermeasure representatives. Through role-playing techniques, speakers, buzz groups, and general sessions, the participants crystallized their own expectations for the Project and reconciled those goals with others' views. This exercise proved invaluable in terms of building <u>esprit de corps</u>.

Indiana University provided outstanding leaders for two judicial, one prosecutor, and two probation/rehabilitation seminars in highway safety. These meetings were convened in attractive hotel settings away from the work-a-day world where participants could concentrate on the assignments at hand. Since the timing for such seminars coincided with critical points in the Project's history, resulting levels of communication and understanding were vitally important. ASAP management supplemented these larger meetings by hosting three mini-seminars (less than one-day each in duration) for judges in order to keep these important system people well posted on Project developments.

Interaction between Project management and the Citizens Alcohol Safety Advisiory Committee was also valuable. If citizens are willing to donate their limited time to review and comment on an undertaking such as ASAP, it behooves management and evaluation personnel to be open and willing to provide access to information sources for the advisory group's investigations. This kind of relationship was achieved in Phoenix. Two reports by the Committee addressed to the Mayor and City Council are reproduced in Section 7, Supplemental Information. These documents reflect the depth of thought given and understanding reached by these dedicated citizens.

Finally, special note should be made of the ASAP support system provided by the Federal government. A Program Monitor with headquarters in Washington, D.C., and a Contract Technical Manager, located in San Francisco, California, provided invaluable liaison functions between the local Project and the U. S. Department of Transportation. Original impetus to compete for the national DOT contract came from the Arizona Department of Transportation, Highway Safety Coordinator's office.

During the last year of the Phoenix ASAP demonstration program (1976), a great deal of local, state and national involvement continued on the part of management. Public information and education activities were numerous; however, this countermeasure is discussed later in the report. Examples follow of presentations made in 1976 by the project director, in addition to television and radio interviews and a great many apprearances before service clubs.

January 9	Speaker, American Legion Children and Youtn Conference, Western Region, Phoenix, Arizona
January 15	Keynote speaker, Federation of Women's Clubs, seven-state regional conference, Phoenix, Arizona
January 24	Panelist, School Administrators and PTA Leaders Conference, Phoenix, Arizona
January 28	Panelist, Prevention of Substance Abuse, Arizona Psychiatric Association, Phoenix, Arizona
February 4 and 5	Consultant, U. S. Conference of Mayors planning meeting for alcohol-related demonstration projects, Washington, D.C.
February 24	Luncheon speaker, Arizona Federated Women's Club meeting, Southern Region, Tucson, Arizona
February 26	Panelist-consultant, U. S. Conference of Mayors, St. Louis, Missouri

March 1	Speaker (along with Chairman of the Citizens Alcohol Safety Advisory Committee) before the Task Force on Responsible Decisions About Alcohol, Education Commission of the States, Buford, Georgia
March 10	Speaker, Southwest Safety Congress regional meeting for women, Phoenix, Arizona
April 19	Speaker, Seminar for Women Highway Safety Leaders, Scottsdale, Arizona
April 26	Speaker, Traffic Representatives Arizona's Governor Youth Council (TRAGYC) regional meeting, Phoenix, Arizona
May 14	Panelist, Papago Indian Tribal meeting, Sells, Arizona
May 19	Speaker, Southwest School of Alcohol Studies, Tucson, Arizona
June 5	Panelist, Seminar on Alcohol Abuse, Apache Junction (Arizona) Jaycees
October 8	Workshop Leader, State Conference, TRAGYC, Scottsdale, Arizona
October 18	Group Leader, Fall Prevention Conference, Behavioral Health Division, Arizona Depart- ment of Health Services, Phoenix, Arizona
November 15	Speaker, Commander's Call, Luke Air Force Base, Litchfield Park, Arizona

The project director also served as chairman of the State Alcoholism Advisory Council; and the assistant project director, who also served as administrator of the Court's Rehabilitation-Probation Center, was a board member of CODAMA (Community Organization for Drug Abuse, Mental Health, and Alcoholism). These affiliations proved helpful in providing delivery planning input based upon evalution of treatment needs for DWIs coming through the ASAP system.

Traditional alcoholism rehabilitation modalities are geared to severely impaired drinkers who appear for treatment "voluntarily," even through many pressures from family members, employers, friends, or their own poor health may trigger the event. DWIs referred to treatment, by contrast, are not usually aware that alcohol is causing problems in their lives of increasingly greater magnitude. Alcohol awareness programs for such individuals need to deal with hostilities triggered by the arrest/court procedures, and then provide sufficient confrontation with reality to overcome denial that there is a problem. Only then is the DWI defendant receptive to new ideas. Treatment people in the community have advised ASAP staff members that their own counseling techniques had to be altered to accommodate these differences.

In retrospect, it is probably accurate to say that the Phoenix ASAP attempted to perform too many tasks for the size of its staff. Yet, most of the undertakings were accomplished, although often at great personal cost to key employees. Enthusiasm for the systems concept and a genuine desire to evaluate what was happening as honestly and thoroughly as possible provided the incentive for performance. The Citizens Alcohol Safety Advisory Committee commented favorably in the final report on the fact that the staff maintained its sustained efforts over such a long period of time.

It is difficult to claim that the Phoenix Alcohol Safety Action Project provided a model for other Arizona cities in terms of catalytic effect, because no similar total system has been initiated in the State. However, many contacts were made by Project management in response to inquiries from various systemaffiliated individuals in the following cities: Chandler, Coolidge, Flagstaff, Kingman, Morenci, Nogales, Page, Prescott, Scottsdale, Tempe, Tucson, Wickenburg, and Yuma. Occasionally, letters and sample materials provided by ASAP personnel constituted the primary response to these inquiries, supplemented by telephone calls. More frequently, however, a much more in-depth review occurred.

In many instances, the inquirer(s) arranged to visit the Phoenix program for at least two full days. Within this time frame, it was possible for the project director to provide background information in a two- to three-hour interview; to arrange meetings with staff members involved in evaluation as well as public information and education activities; to provide access for the visitors to the Rehabilitaion-Probation Center, the Municipal Court for viewing the processing of DWI cases, the Prosecutor's office, and the Police Department's Traffic Bureau where rides with ASAP officers on duty were often arranged for the evening hours. Additionally, these guests were often permitted to attend DWI School sessions, while they were offered, and DWI Workshop sessions during the later operational years. On other occasions, the project director travelled to the locale from which the inquiry originated in order to make presentations.

A fair statement is that the Phoenix ASAP and its activities have attracted a great deal of attention within the State. Other interest has been shown from various branches of the armed services, from Indian tribes, from other states (including Hawaii), and from other countries. Often the ingredient missing in the State of Arizona is the inability of the local community to fund staff who could pull the system together and continue coordinating the functions. To date no funds for this purpose have been forthcoming from the 402 monies administered by the Arizona Highway Safety Coordinator. b. Evaluation Overview. The whole concept of strict accountability for highway safety programs in terms of performance outcomes was in its infancy when ASAPs developed their detailed plans several years ago. Management by objectives and "bottom line" review were techniques which the private business sector had used for many years to realize profits for stockholders. Governmental entities had been slower to see the implications for their own efforts, however; and it was most gratifying to Phoenix planners responsible for ASAP development that evaluation would play such a major part in the undertaking.

After reviewing other available options, the City entered into a subcontract with Arizona State University, Tempe, Industrial Engineering Department, College of Engineering, to provide an Evaluation Team for the Phoenix ASAP. Located just 11 miles from downtown Phoenix, University personnel were easily accessible for frequent problem-solving and communication-type meetings with ASAP management personnel. Responsibility for designing the input of Project data and then collecting it was delegated to the Evaluation Team. This followed naturally the initial designing of evaluation criteria prepared by the Team according to U. S. Department of Transportation guidelines. For each countermeasure (component) of the system, the Detailed Plan contained evaluation techniques which addressed measures of effort and performance, efficiency factors, and cost feasibility.

While City department heads were most cooperative in permitting University Team members to have access to DWI files, and several City positions were funded by ASAP to be certain that data were gathered on a timely basis for inclusion in reporting cycles, a number of serious problems surfaced over time. Among these were: the input design was incomplete, so that a great deal of rehabilitation information had to be manually retrieved by University personnel; inadequate editing of input data occurred to assure quality and completeness; a single, master computer tape was not maintained, despite assurances to ASAP management that such a record existed; and by accumulating ASAP data in a university computer file which was incompatible to the City's computer, the capability was lost to compare ASAP records for accuracy with, for example, the computerized Municipal Court file.

When the Federal government provided additional funding to assist the City in extending the demonstration phase of ASAP from three to five years, dissatisfaction from both parties' points of view resulted in an agreement not to extend the City-University subcontract for evaluation. Instead, an Evaluation Unit was activated in-house by creating a new position of evaluation coordinator, expanding from one to two the number of staff evaluation analysts, and assigning two clerk-typists to the Unit for support services. Objectivity was protected by retaining consultants from the Human Factors Laboratory, University of South Dakota, who reviewed the Project data and assisted or advised in its analysis. Considering the magnitude of the evaluation assignment, the above-described staff must be acknowledged as being meager in They deserve great praise for their impressive production number. of work and the high quality of their performance. Nearly two years were required to convert the University data to a master City file and then analyze on practically a case-by-case basis the data deficiencies, determine sources from which the missing information could be retrieved, provide input for computer entry, and then edit output for accuracy. These awesome assignments were in addition to designing a new and complete data-gathering system; adapting to major system changes in mid-1974; interfacing with the computer program analyst to design a format to fit DOT reporting requirements as well as local management information needs; processing approximately 10,000 new DWI cases annually; and preparing reports and analytic studies each year.

ASAP management made every effort to provide an environment which would enhance evaluation objectivity. While it might be said that such an ideal is impossible to achieve in supervisor/employee types of relationships, at least a studied attempt was made to achieve this goal. Any disadvantages to the arrangement were probably more than offset by the advantages of information accessibility to Evaluation Unit members from various City departments comprising major parts of the ASAP system.

A vast volume of ASAP DWI data has now been accumulated by the Office of Driver and Pedestrian Programs (NHTSA/DOT) in Washington, D.C. All 35 alcohol safety action projects had extensive contractual reporting obligations, and analysis of the aggregate results will be assembled by ODPP for dissemination to interested parties. Individual projects performed analytic studies which describe activities and results in great depth. Therefore, a large reservoir of research is available as the basis for establishing ASAPlike programs elsewhere. It is sincerely to be hoped that planners will avail themselves of this information before re-inventing the wheel.

During the final demonstration years of the Phoenix ASAP and for several months thereafter, the Evauation Unit supervised two important field follow-up studies designed to measure life activity changes (if any) of persons exposed to various alcohol awareness programs offered by ASAP.⁹ As many as six full- and part-time staff members were added to conduct baseline and follow-up interviews. Primary problems in conducting this research involved locating the respondents, particularly after their having completed required alcohol awareness assignments up to 18 months earlier,

⁹ For a discussion of the STR (Short-Term Rehabilitation) and STRIP (Short-Term Rehabilitation in Phoenix) research activities, see Phoenix ASAP Evaluation Unit, <u>Analytic Study VI:</u> <u>An Analysis of DWI Diagnosis, Referral and Rehabilitation</u> Activity (City of Phoenix Alcohol Safety Action Project, 1977).

in order to conduct the required interview and administer the questionnaire. A variety of approaches emerged as field staff improved their tracking skills. Personal persuasiveness played a large part in their successes, since participants were under no legal obligation to cooperate.

It seems appropriate to note as a close to this section dealing with evaluation that a major accomplishment was/is being realized in the longitudinal magnitude of the Phoenix ASAP evaluation efforts. Three years of baseline data (1969-1971) were initially collected, followed by five operational years of data (1972-1976). For two more years (1977-1978), Phoenix ASAP evaluation personnel will continue to monitor, analyze, and submit data to Washington through a contract extension. This total time frame, therefore, covers ten years of highway safety data-gathering and seven years of reeducation/rehabilitation efforts in a DWI intervention program. Indeed, the findings represent important social research.

4.2 PROJECT COUNTERMEASURES

a. <u>Enforcement</u>. Several subparts made up the enforcement countermeasure in Phoenix. While these parts of the whole did not represent equal investments of time, manpower, and money, each is discussed separately for the sake of clarity.

a.l. <u>Special DWI Training of Traffic Patrolmen</u>. Although veteran patrolmen volunteered to serve as members of the first ten-man ASAP motorcycle patrol charged with DWI selective enforcement, the decision was made to improve their existing skills by offering special training. A three-week curriculum, developed by the Police Department and the ASAP DWI rehabilitation specialist, was presented at the Phoenix Police Academy in January, 1972. Subject matter included: an overview of the ASAP program, its goals and objectives; methods of spotting DWI driving behavior; training and certification on use of Breathalyzer and gas chromatograph intoximeter equipment; improved techniques in preparing alcohol influence reports; role playing to develop skills for court testimony; new knowledge and insights into the disease, alcoholism, and its treatability.

(1) <u>Key Performance Measures</u>. No detailed evaluation of this countermeasure was undertaken. Based on input from those police officers initially trained, the same type of training for another group of officers took place six months later in order to have recruits ready as ASAP squad personnel transferred to other assignments. The second training session was shortened to a one-week period with apparent success. As a further spin-off, more training in DWI enforcement is now included in Academy basic curriculum.

(2) <u>Significant Progress in Meeting Performance Targets</u>. Beginning in January, 1976, duty assignments for DWI selective enforcement rotated among six ten-man squads in the Traffic Bureau for one-month intervals of the 7 p.m. to 3 a.m. shift. Prosecutor, rehabilitation, and ASAP evaluation personnel met with each new squad for briefings on the system. No formalized training was given the officers, although informal instruction and assistance was provided by each sergeant supervisor.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) Analysis of Efficiency (Cost) in Achieving Project Performance. Since DWI arrest rates in Phoenix were at an all-time high in 1976, it is evident that the countermeasure for special training may have served an important need when launching ASAP in 1972; but alternative and perhaps less formal and costly indoctrination is serving the Traffic Bureau's needs at this juncture. (5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. Phoenix has always had strong DWI enforcement. If that has not been the case in a community starting an ASAP program, special training should be initiated.

a.2. <u>Phoenix Police ASAP Patrol and Increased Highway Patrol,</u> <u>Arizona Department of Public Safety (DPS)</u>. The DWI emphasis patrol in the Phoenix Traffic Bureau was unique among the 35 ASAPs in that these men performed their enforcement duties on motorcycles. This fact is particularly noteworthly since the duty shift hours were 7 p.m. to 3 a.m., Tuesday through Saturday. On those occasions when observers rode with individual patrolmen, the officers of course used regular patrol cars. Their sergeant supervisor also used a car when in the field.

For evaluation purposes, the area lying within the City limits was divided into ten sectors, and the ASAP patrol was rotated among the sectors in a random pattern established by the evaluators. During the course of the Project, the patterns changed from year to year; but ODPP was informed of such changes and the rationale behind them.

For slightly over two years, the Arizona Department of Public Safety participated in the ASAP program on a voluntary basis (no money was accepted from the Project by choice of the Department). Two officers of the Highway Patrol provided night-shift DWI selective enforcement on the freeway (I-10 and I-17) within the City's boundaries. This duty was performed in two separate cars, and the citations generated are included in the "Other" category of the table appearing below. Highway Patrol citations continue to be reflected for the entire five-year operational period, despite the fact that manpower constraints necessitated restoring emphasis patrol officers to full patrol duties in April, 1974. (1) Table of Key Performance Measures.

	Annual Totals								
	1972	<u>1973</u>	<u>1974</u>	1975	<u>1976</u>				
DWI citations									
Police ASAP Other Total	1,973 <u>8,769</u> 10,742	1,492 7,473 8,965	2,236 6,059 8,295	2,476 <u>8,774</u> 11,250	1,783 <u>9,946</u> 11,729				

			Report	Year 1976	
	Last Qtr. Preceding Year 1975	lst <u>Qtr</u>	2nd <u>Qtr</u>	3rd <u>Qtr</u>	4th <u>Qtr</u>
DWI citations					
Police ASAP Other Total	492 2,282 2,774	451 <u>2,612</u> 3,063	445 2,247 2,692	556 2,290 2,846	331 2,797 3,128

Note: Actual Five-Year Total Citations: 50,981

(2) <u>Significant Progress in meeting Performance Targets</u>. The years of 1973 and 1974 clearly reflect the diversion of available enforcement time to court appearances (and the attendant waiting time). As the number of arrests clogged the judicial system, annual DWI citations declined. Once the quasi-diversionary system known as PACT (Prosecution Alternative to Court Trial) became operational, arrests rose to an all-time high.

(3) Current Program Impediments Affecting Project Activities. None.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance</u>. Heavy front-end costs were involved in this countermeasure because the Project paid for ten new motorcycles, the sergeant's car, and all attendant equipment required to meet the Police Department's specifications. Before the first three operational years were over, the City found it necessary to replace the motorcycles with new equipment. Salaries were also picked up with City general funds beginning in May of the third operational calendar year. Experimentation within the Department revealed that, when two officers were placed in one car to patrol for DWIs, their efficiency did not improve over the performance of one man on a motorcycle. Yet, the cost for the former arrangement was considerably greater. Even so, there are some parts of the City where the streets are so poor or the danger to single officers on motorcycles is so great that cars should be used.

Since all court testimony for ASAP officers represents overtime because of their night shift status, severe problems developed during the first two and one-half Project years. Not only were costs quite high, but the level of officer fatigue was of concern to ASAP management and the Police Department. Extremely long hours of waiting to present testimony only to learn that the case had been plea bargained or dismissed for other reasons also contributed to a serious drop in the morale of enforcement personnel. Sharp drops in numbers of DWI citations verify this fact for the years 1973 and 1974.¹⁰

(5) <u>Changes in Plans</u>. Beginning in January, 1977, there was no longer a squad designated "ASAP" and citations were no longer reported separately for the squad continuing on the 7 p.m. to 3 a.m. shift. However, the Phoenix Police Department plans to continue its DWI enforcement emphasis.

(6) <u>Conclusions and Recommendations</u>. The high visibility of a special DWI selective enforcement activity is well worth the effort. There is an apparent "halo" effect which encourages other officers to become more aware of DWI drivers and to increase their own arrest rates. Although the Phoenix ASAP was unable to document its effect on reducing alcoholrelated fatal accidents, there is every reason to believe that removal of drunken drivers from the City streets and freeways contributes to public safety.

The particular time frame in which DWI selective enforcement was scheduled in Phoenix also proved to be a big pay-off time for apprehending a variety of persons involved in other criminal activities. This was an unanticipated bonus to Phoenicians provided by the alert ASAP officers. Still, the assignment is grueling and imposes severe strains on the physical well-being of officers and, in many instances, their family relationships. Some provision for rotation should be built into any such undertaking.

¹⁰ For an indepth analysis of the enforcement countermeasure, see Phoenix ASAP Evaluation Unit, <u>Analytic Study III: An Analysis</u> of DWI Enforcement Activity (City of Phoenix Alcohol Safety Action Project, 1977).

a.3. <u>Chemical Testing of Blood Alcohol Concentration (BAC)</u>. Several needs were evident in the area of chemical testing of blood alcohol concentration for a system gearing up to maximize DWI selective enforcement. The City was severely in need of new breath-testing equipment, and the Police Department showed interest in experimenting with new field techniques for capturing breath samples. Many additional officers needed to be trained and certified to operate breath-testing machines, and it was anticipated that increased staff capability for the Crime Laboratory would be required to present expert testimony in DWI cases appearing in Municipal Court.

In response to these requirements, the Phoenix ASAP provided funding for new laboratory equipment, i.e., one gas chromatograph intoximeter (GCI), one spectrophotometer, and a calculator print system. These were used for analyzing breath samples, calibrating equipment, and preparing calculations for court testimony. In addition, four Breathalyzer machines and 100 gas chromatograph intoximeter field encapsulators were purchased to enhance field-testing capabilities.

A regular training goal was established by Crime Laboratory personnel to provide opportunities for numbers of officers to become certified as equipment operators. One full-time criminalist was added to the Laboratory staff through initial ASAP funding and continued beyond April, 1974 from City budget expenditures.

(1) Table of Key Performance Measures.

	Annual Totals									
	<u>1972</u>	<u>1973</u>	1974	<u>1975</u>	<u>1976</u>					
Criminalist Hours	2,337	3,069	3,382	2,723	2,438					
Total BAC Tests	9,394	7,916	6,951	9,425	9,729					
By Breathalyzer By GCI By Blood	9,231 154 9	7,385 512 19	5,571 1,358 22	8,988 421 16	9,403 317 9					
BAC Test Refusals Refusal Rate	880 9%	811 9%	733 10%	943 98	1,018 9%					
Personnel Trained	108	107	70	38	84					

	Report Year 1976						
	Last Qtr. Preceding Year 1975	lst <u>Qtr</u>	2nd <u>Qtr</u>	3rd <u>Qtr</u>	4th <u>Qtr</u>		
Criminalist Hours	835	763	594	474	607		
Total BAC Tests	2,218	2,446	2,233	2,402	2,648		
By Breathalyzer By GCI By Blood	2,105 109 4	2,361 83 2	2,166 64 3	2,346 54 2	2,530 116 2		
BAC Test Refusals Refusal Rate	237 108	266 10%	210 9१	235 9%	307 10%		
Personnel Trained	38	29	0	0	55		

Note: Breathalyzer tests were performed by police officers. Crime Laboratory personnel calibrated Breathalyzer instruments and analyzed GCI and blood samples.

(2) Significant Progress in Meeting Performance Targets. A great many outstanding examples of fine teamwork were displayed by Crime Laboratory personnel who met increasing DWI arrest rates with continuing prompt and efficient service. The number of police officers trained to operate breath-testing equipment increased considerably over the total for 1975 (84 to 38).

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(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) Analysis of Efficiency (Cost) in Achieving Project <u>Performance</u>. As fewer GCI tests were performed in the field by enforcement personnel, Crime Laboratory staff time was reduced. In the course of the Project, it was observed that decreased turnaround time on the officer's part when using GCI testing capabilities in the field was offset from a cost standpoint by much greater time demands for Laboratory staff. The elaborate chaining process required to develop documentation on a field sample in order to provide data for expert testimony in court was the source of the problem.

(5) <u>Changes in Plans</u>. None, other than diminishing use of GCI field encapsulators, which has been previously reported.

(6) <u>Conclusions and Recommendations</u>. GCI field encapsulators do not work too well on motorcycles which are used for night patrol. The electrical system cannot support the energy drain for the GCI unit, lights, and radio equipment in addition to normal ignition system requirements. It is also often dangerous for a single officer to administer the test in the field.

As mentioned above, the shorter turnaround time for the officer (who doesn't have to transport the DWI suspect to a district station in order to use Breathalyzer equipment) is offset by the increased time needed by Crime Laboratory staff to process the specimen. These considerations should be carefully weighed before making a selection of equipment. Regardless of the choice, however, it is recommended that a regular program be developed for training enforcement personnel in equipment usage. This ongoing activity in Phoenix is considered very worthwhile. b. Judicial. Several distinct and traditional activities initially comprised the judicial countermeasures in Phoenix. By this it is meant that prosecutors and judges, functioning within the familiar pre-trial disposition conference and courtroom setting, handled to the best of their abilities the large numbers of DWI citations generated within the Phoenix city limits. ASAP dollars went into funding three additional prosecutors, secretaries, two judges and support staff, costs of data collecting for evaluation purposes, plus \$42,000 of the approximately \$77,500 cost to provide two additional courtrooms.

Eventually, however, because of (1) continuing DWI selective enforcement pressures, (2) both U. S. and Arizona Supreme Court rulings affecting the lower court, and (3) changes in Arizona statutes which lowered the presumptive BAC level to .10 and made mandatory a one-day jail sentence for a first conviction for DWI, new procedures emerged for handling DWI cases. Known as PACT, Prosecution Alternative to Court Trial, this quasi-diversionary plan represented drastic modifications in the earlier system. Introduced as a six-months' pilot program in August, 1974, PACT proved to be such a positive force that the City Council later authorized continuance of its procedures until some alternative is found that proves to be preferable.

The special PACT attorney, regular assistant prosecutors, and judges acted in concert to move DWI cases through the Municipal Court and are, therefore, reported as one comprehensive countermeasure group. Other components in this section are the pretrial investigation function and the Volunteer Probation Partner program. Each of these are reviewed separately.

b.l. <u>Prosecution Alternative to Court Trial (PACT)</u>. As previously indicated, PACT encompassed the process by which the preponderance of DWI cases in Phoenix were handled. One opportunity was offered a DWI defendant (regardless of prior DWI convictions) to participate in a PACT agreement, which was a formalized plea bargain to a back-up charge. To earn the agreement, the defendant had to pay a \$110 fine to the Municipal Court, pay an alcohol awareness program fee (now \$70), enter and complete the awareness modality to which screened, refrain from receiving another DWI citation while in PACT sequence of events, and appear in court for final sentencing on the reduced charge. The purpose of the plan was to move defendants equitably and rapidly through the system into alcohol awareness experiences.¹¹

¹¹ For a complete description and evaluation of the judicial countermeasures in Phoenix, see ASAP Evaluation Unit, <u>Analytic</u> <u>Study IV: An Analysis of Judicial System Performance</u> (City of Phoenix Alcohol Safety Action Project, 1977).

(1) Table of Key Performance Measures

	<u>1973</u>	<u>1974</u>	<u>1975</u>	<u>1976</u>
Pending at End of Year Pre-Trial Disposition Conference	284	1,632	1,798	2,892
PACT Disposition	N/A	816	1,383	1,044
Jury Trial Non-Jury Trial	955 17	160 46	193 31	238 32
Appeals ¹² Active Case Subtotal	641 1,897	304 2 , 958	9 3,414	8 4,214
Bench Warrants	1,184	2,072	3,043	4,330
Sentencing	1,093	446	356	333
Total Cases	4,174	5,476	6,813	8,877

¹² Appeals, while requiring City Prosecutor attention, do not add to the Municipal Court backlog since they are heard in Superior Court.

(2) <u>Significant Progress in Meeting Performance Targets</u>. PACT continued to provide the means of handling through the judicial system the large number of DWI cases generated by heavy enforcement activities. While a number of staff vacancies in the Prosecutor's office caused periods of strain on the system, at no time did case flow break down and the problems were resolved by year's end.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance</u>. Evidence continues to mount which shows the <u>PACT</u> process to be far more efficient in handling a large DWI case load than are traditional adjudicatory measures. It also provides incentive for defendants to enter and complete alcohol awareness programs.

(5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. PACT works well for Phoenix. Critics claim that legislative intent is bypassed by the quasi-diversionary program. However, statistics in earlier Project years prove beyond doubt that the reality of a traditional judicial system allows large numbers of pleabargaining situations with not necessarily an even application of justice to all defendants, a goal more nearly approximated by PACT. Another area of complaint is that a DWI conviction does not show up on the driver's license record of a PACT participant who successfully earns a plea bargain to a back-up charge. Again, these critics are referred to the realities of a traditional system where prestige, influence, money for defense attorneys, and heavy court calendars are all allies of large numbers of defendants whose cases are dismissed with the same effect on license records. One phenomenon of the PACT system has been the very high incidence of DWI-guilty pleas at arraignment for those returning to the system a second time.

b.2. <u>Pre-Sentence Investigation</u>. This countermeasure was originally conceived as consisting of three investigators who, operating under the Court's jurisdiction and budget, would be collecting background or pre-sentence data on DWIs. It was recognized early in the data-gathering system design that most of the functions they were to perform would be a duplication of functions performed cumulatively from enforcement-through-rehabilitation countermeasures. Therefore, an entirely different tack was taken.

The alternative selected was to have two Police Department records clerks, a coding patrolman, and a clerk-typist gather and tabulate information on each DWI citation generated. Driver license information noting prior DWI convictions in Arizona outside Phoenix was secured by searching the records of the Driver License Records Service of the State Motor Vehicle Division. Prior DWI arrests and convictions within the City of Phoenix were preprinted on the data form, which over time became quite comprehensive through computer programming that searched the files for such traffic offenses. Now, because of streamlining procedures, this search work is done by one records clerk whose salary has been assumed by the Police Department. Another responsibility of this individual is to compile fatal accident and fatality data for ASAP evaluation purposes.

Other information about each DWI defendant was collected through a demographic and alcohol-screening questionnaire completed by the individual. Progress along the remainder of the system, whether on a PACT or a traditional Court track, was recorded from alcohol-awareness contact files so that a composite picture finally emerged prior to final disposition.

(1) <u>Key Performance Measures</u>. No table is presented for this activity because a record search is performed for every DWI arrest or rearrest.

(2) <u>Significant Progress in Meeting Performance Targets</u>. This method of developing adequate searches on the large volume of DWI cases has worked very well, with a resultant dependable and timely output of data.

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(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project Perform-ance.</u> As noted above, the original manpower and datagathering requirements have been reduced over the life of the Project so that only one records clerk is needed to carry on the function beyond the demonstration phase of ASAP. There is no feeling that pertinent information was lost for operational and evaluation needs by this efficient alternative to staffing investigators.

(5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. It is important to accumulate enough information to make appropriate decisions concerning DWI defendants; it is equally important not to gather more data than needed at costs that are unjustified. It would have been impossible to institute or to continue this important system function without careful analysis of cost benefits, a course of action recommended to other sites.

b.3. <u>DWI Volunteer Probation Program</u>. A coordinator, an assistant, and one clerk-typist were ultimately funded by ASAP, although this innovative program began with its coordinator only. The concept of using volunteers as probation officers was not new, but evidently using them to work with DWI probationers was originated in Phoenix. Volunteers were recruited by newspaper stories, radio and television announcements, speaking engagements and personal recommendations. Each volunteer received a personal screening by the program supervisor and participated in six hours of intensive training.

Special emphasis was placed on the matching of volunteers to probationers on a one-to-one basis. The basic role of the volunteer probation partner was to establish a helping relationship with the person on probation, functioning as a friend, listener, and information and referral resource. During the term of probation, the DWI probationer usually met weekly with a carefully matched partner. When there was a shortage of available/ appropriate partners, the probationers were often asked to attend regular Alcoholics Anonymous meetings, and/or were referred to various social service agencies in the Phoenix area (including other ASAP rehabilitation countermeasures).

During 1975, a comparatively new coordinator began working with an assistant for the first time. Each of these individuals required time to learn his job, to relate to volunteers, and then to develop skills in recruitment activities. Therefore, by 1976, they were able to undertake the design of new forms and the implementation of improved treatment and referral assignments based on knowledge acquired in earlier program years. These changes reflected in a gradual increase in DWI-partner matches to reverse an earlier decreasing trend.

1975 1976 1973 1974 1,901 791 3,025 1,892 Volunteer Hours 1,057 1,421 562 2,240 One-to-One 66 58 224 67 Group Leading 114 38 Clerical 230 316 68 213 300 133 Other Probationers in Program (at end of reporting N/A 88 124 249 period)

(1) Table of Key Performance Measures.

Cumulative survival rate (CSR) for DWI Probation by quarter of entry stated as percentage, and effective sample size (ESS).

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	7	<u>8</u>	<u>9</u>	10
		94.9 723								
	<u>11</u>	<u>12</u>	<u>13</u>	14	<u>15</u>	<u>16</u>	<u>17</u>	<u>18</u>	<u>19</u>	<u>20</u>
CSR ESS		79.2 370								

(2) <u>Significant Progress in Meeting Performance Targets</u>. For reasons cited above, this countermeasure has not met the performance levels set in 1973 during any succeeding year. It is difficult to say whether the novelty of the program diminished and therefore failed to attract as many volunteers, or if the changes in leadership and larger numbers of referred probationers caused a slowdown in processing cases for oneto-one-matches. Whatever the reasons, the table unquestionably shows changes in total impact.

There was no way of setting up a randomly assigned control group against which to measure behavorial change for probationers matched with volunteer partners. For this reason, there is no way except by reviewing subjective, anecdotal incidents--of which there are many--to reflect the many lives affected positively by this highly individualized and personalized activity. One is reminded that the state of the art in evaluation is in need of refinement with respect to measuring the benefit of an eclectic experience in the life of a human being who is trying to reduce/eliminate the pattern of alcohol abuse.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance</u>. This countermeasure was commended by the Citizens Alcohol Safety Advisory Committee for its cost effectiveness in creating an impressive multiplier effect through the use of volunteers as probation partners.

(5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. An informed citizenry working in concert with Court staff members contribute measurably when there is a need, but no available funding for probation officers. Such was the case in Phoenix. Besides serving on one-to-one matched bases with probationers, volunteers with different skills and interests performed intake services and clerical functions. They also edited and published a newsletter which built a sense of cohesiveness and attracted new recruits. Others generously shared their professional skills to train newly accepted volunteers.

It is management's considered judgment that this program was very worthwhile as it emerged in its Phoenix form. There are other possible applications worth considering. Most probation departments find their paid staff professionals heavily overburdened with cases. It appears that volunteers could augment their activities by serving as aides and assuming many routine duties.

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c. <u>Rehabilitation</u>. Until mid-1974, five general activities comprised the rehabilitation countermeasures of the Phoenix Alcohol Safety Action Project. When Arizona State University formally withdrew the Phoenix DWI School and its bilingualbicultural component effective June 30, 1974, ASAP and City management took a careful look to determine what the successor programs should be. A Citizens' Task Force on DWI Curriculum aided in the effort. Out of this intensive exercise evolved the concept of a Rehabilitation-Probation Center which ASAP helped implement in early 1975. By July 1 of that year, the Center became a division of the Phoenix Municipal Court.¹³

At the close of the ASAP operational phase in December, 1976, all rehabilitation (or alcohol awareness) countermeasures, as well as the volunteer probation partner program described under Judicial countermeasures, emanated from the Center. While several modalities were operated through a contract with an outside non-profit agency, Diversified Counseling Services, Inc., DWI defendants entered those programs via the Center.

One of the significant accomplishments during the early years of the Phoenix ASAP was development of a simplified screening instrument used in classifying DWI defendants for program referral pruposes. Readied for use in mid-1974, this helpful device, coupled with a demographic questionnaire, enabled the ASAP system to perform its processing and data-gathering tasks very efficiently. This capability proved indispensable when the impact of high DWI citation rates and PACT (Prosecution Alternative to Court Trial) challenged Center personnel with unprecedented case volumes each year thereafter.

In order that twice-each-day groups of DWI defendants appearing for PACT Orientation might receive consistent information concerning basics of the quasi-diversionary program, as well as assurances that their fundamental right to select traditional court procedures remained intact, a sync-sound slide presentation was developed. This informative ll-minute documentary depicted busy Phoenix streets and freeways, the need for transportation, and consequences of combining drinking and driving which occasioned the viewers' being arrested for DWI. Traditional punitive sanctions for DWI conviction assessable under Arizona statutes, plus the probability of insurance rate increase or cancellation, were also mentioned.

¹³ For an extensive description of the Center and its activities, see Phoenix ASAP Evaluation Unit, <u>Analytic Study VI:</u> <u>An Analysis of Drinker Diagnosis, Referral and Rehabilitation</u> <u>Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977).

By way of contrast, the PACT Agreement was outlined, along with its requirements for attendance at alcohol awareness modalities. Costs for the countermeasure to be attended, plus a Court fine, were clearly delineated. After this presentation, each defendant (and his attorney, if one was present) met with a Center representative known as a Case Coordinator for an individualized interview concerning his/her case. If the defendant showed interest in entering into a PACT Agreement, its contents were carefully reviewed as to the plea stipulated by the PACT attorney and the obligations set forth for compliance by both the defendant and the City Prosecutor's Office, before it was signed. On the other hand, if the defendant chose to plead "not guilty" and to request a jury or non-jury trial, that option was available.

Following the PACT Orientation session, each DWI defendant was scheduled for a Municipal Court appearance, at which time a disposition Court date was set following alcohol awareness program completion in the case of an acceptable, executed PACT Agreement. In instances of PACT unacceptability or ineligibility, the defendant was allowed to plead guilty to DWI or to have the date set for a jury or non-jury trial.¹⁴

The relevance of the foregoing information is that it sets the stage for entry to rehabilitation countermeasures by DWI defendants, through PACT, or by those pleading to or found guilty of DWI through the traditional Court process. A marked increase in numbers of persons entering the various rehabilitation or alcohol awareness programs occurred following the introduction of PACT. This fact had direct bearing on the total system in terms of ASAP's mission to process as many people as possible through all appropriate countermeasures in order to evaluate the efficacy of the total concept in terms of promoting highway safety.

On December 31, 1976, there were several alcohol awareness modalities in place or being readied for introduction. As a result of the DWI screening, diagnosis and referral procedures, defendants might be referred to one or more of the following programs: DWI Prevention Workshops, DWI Therapy Workshops, Power Motivation Training (PMT), Substance Abuse Group Education (SAGE), Comprehensive Alcohol Program (CAP and formerly referred to as KEY Therapy), Other Rehabilitation Treatment (community interfacing programs), Crisis Intervention Program (CIP) and Transportation Assistance (TA).

¹⁴ For a complete description of the judicial process as it evolved during the term of the Project, see Phoenix ASAP Evaluation Unit, <u>Analytic Study IV: An Analysis of Judicial System</u> <u>Performance</u> (City of Phoenix Alcohol Safety Action Project, 1977).

Overall, evaluation results for these various rehabilitation or alcohol awareness modalities have been disappointing. With reference to the evaluation model used for the two and one-half years of Phoenix DWI School, individuals convicted of DWI in the Municipal Court were randomly assigned as follows: 60% of the referral population attended a four-session, ten-hour lecture course; 20% attended a one-session, two and one-half hour presentation based on the four-session curriculum; 15% were given the same take-home literature that was distributed to the above two groups, but attended no lectures; and 5% were assigned to a control group which did not attend lectures or receive literature, but received only traditional sanctions.

Survival rates were comparable for the four-session, one-session and literature groups. Statistical analysis revealed that survival for the no-treatment control group was significantly lower than any of the treatment groups at almost every quarter following treatment entry. None of the other comparisons achieved statistical significance. Survival after five years (20 quarters) was highest for the foursession group (76.1%), followed by the one-session (75.8%), literature (73.8%) and control (69.4%) groups.

These results give a fairly clear indication that some form of DWI School exposure produced higher survival than no treatment at all. Furthermore, it would appear that a onesession group or educational literature reduced recidivism at least as much as four sessions of the DWI School.¹⁵

Alcohol awareness programs, initiated in mid-1974, were designed to provide maximum interaction among all participants and between each participant and the leader. Groups were far smaller than DWI School classes (12-15 vs. 40 or more); and, in addition to imparting and sharing information and experiences involving the drug alcohol, exercises in personal goal setting, problem-solving, coping with stress, and esteem-building formed important parts of the format. All leader/facilitators were trained alcoholism counselors; and, in the case of staff provided by Diversified Counseling Services for DWI Prevention Workshops (PW), DWI Therapy Workshops (TW) and Power Motivation Training (PMT), continuous in-service education was offered by Diversified to assure highquality performance and professional growth opportunities. Comparable in-house programs were available to Rehabilitation-Probation Center personnel, also.

¹⁵ Phoenix ASAP Evaluation Unit, <u>Analytic Study VI: An Analysis</u> of <u>Drinker Diagnosis</u>, <u>Referral and Rehabilitation Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977), pp. 67-68.

Because many DWI defendants entered the new program through a PACT agreement which provided that they <u>earn</u> a plea bargain by adhering to certain agreed-upon parameters, including paying for and attending some assigned alcohol awareness modality, no pure control group could be used in the new evaluation model. Instead, a minimal Home Study packet, based upon DWI Prevention Workshop materials, was developed to be used as a comparative modality. From April through December, 1975, individuals were first screened to an appropriate program (PW, TW, or PMT) and then 20% of each such universe were randomly assigned to the Home Study experience.

. . . Survival after two years was slightly higher for Prevention Workshops (90.1%) compared to Home Study (88.8%), but statistical testing verified that the two curves were not significantly different at any of the periods following entry. Observed differences were well within the limits of chance variation.

Cumulative survival rates for three types of Prevention Workshops were also computed, but differences were nonsignificant. . . After two years, persons <u>completing</u> Regular, Spanish or Youth groups had survival rates of 88.8%, 88.3% and 87.2% respectively.

. . . Cumulative survival rates for diagnosed problem drinkers assigned to Therapy Workshops or Home Study . . . were very similar, differing by less than 1% at most quarters following entry. After two years, Therapy Workshops had a survival rate of 84.2% compared to 83.1% for Home Study, but statistical testing confirmed that the survival rates were not significantly different at any of the periods following treatment exposure.

. . . Cumulative survival rates for diagnosed problem drinkers referred to Power Motivation Training or Home Study . . . were more variable than in the previous two comparisons because of the relatively small effective sample sizes. This produced larger standard errors, resulting in no significant differences between the modalities, despite a 3.1% greater rate of survival for Home Study after two years. It must be concluded on this basis that there are no real differences between the two curves. . . .

¹⁶ Phoenix ASAP Evaluation Unit, Analytic Study VI: An Analysis of Drinker Diagnosis, Referral and Rehabilitation Activity (City of Phoenix Alcohol Safety Action Project, 1977), p. 69.

Comprehensive Alcohol Program (CAP), which was known earlier as KEY Therapy, and DWI Probation were programs to which multiple-DWI offenders and others showing clear symptoms of alcohol abuse were assigned. Dealing with the most difficult DWI population of all in terms of predictable success for reducing recidivism and effecting behavioral change, these modalities chalked up impressive records.

. . . Cumulative survival rates for persons completing KEY Therapy, either alone or in combination with other treatment programs, are presented . . . for two years of follow-up. . . After two years, the survival rate for persons completing the KEY modality was 78.2%.

<u>DWI Probation</u> provided extended contact (up to six months) for convicted offenders, either by matching them on a one-to-one basis with a volunteer partner from the community, or by monitoring their attendance in other treatment programs. Assignments were made non-randomly. Cumulative survival rates for persons completing DWI Probation, either alone or in combination with other treatment programs, are shown . . for five years of follow-up. Data include all probationers completing treatment during the five-year span of countermeasure operations. After five years, the survival rate for DWI probationers was 77.6%.¹⁷

In comparing cumulative survival rates between the Alcohol Awareness Programs (for persons entering between April and December, 1975) and the Phoenix DWI School four-session group (for those entering between January, 1972, and June, 1974), the reported findings are:

. . . Somewhat higher survival was achieved for persons completing an Alcohol Awareness Program (88.5% vs. 85.2%, after two years), with a small but discernible trend toward a larger spread as time after entry increases. Small percentage differences attained statistical significance due to the very large effective sample size. As in earlier comparisons, restricting the analysis to treatment completions did not alter the result. Survival rates remained essentially unchanged, with the usual reduction in effective sample sizes.¹⁸

¹⁷ Phoenix ASAP Evaluation Unit, <u>Analytic Study VI: An Analysis</u> of <u>Drinker Diagnosis</u>, <u>Referral and Rehabilitation Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977), pp. 70-71.

¹⁸ Phoenix ASAP Evaluation Unit, <u>Analytic Study VI: An Analysis</u> of <u>Drinker Diagnosis</u>, <u>Referral and Rehabilitation Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977), p. 71.

c.l. <u>DWI Screening</u>, <u>Diagnosis and Referral Procedures</u>. As mentioned earlier, considerably shortened screening procedures were developed during the early years of the Project and inaugurated at the time PACT was first offered in mid-1974. The questionnaire could be template-scored and embodies, into the total score, values for the blood alcohol concentration (BAC) at time of the defendant's arrest, as well as a weighting for prior DWI convictions revealed by the initial records search by the Police records clerk. This instrument proved to be sufficiently effective as a tool for early screening of problem drinkers that alcoholism counselors leading the workshops reported that from 90 to 95% of the DWI defendants were directed to the appropriate alcohol awareness program for their level of alcohol use/abuse.

As previously reported, from April through December, 1975, a random sampling model was used in assigning defendants to alcohol awareness programs. The purpose of this complex activity was to establish various universes of DWI defendants in order to evaluate their drinking/driving behaviors following exposure to various modalities. Except for that period, however, every effort was made to refer individuals to the most appropriate program according to their presenting needs.

Persons manifesting to the Case Coordinator or to a workshop counselor other psychological, marital, financial, or vocational problems in addition to their alcohol abuse were often concurrently scheduled at the Center for an interview with a psychodiagnostician. This referral process was known as the Diagnosis and Referral Interview (DRI), and it interfaced with 35 to 40 varied community agencies. The DRI function was designed to give a semi-structured, further assessment interview, with the outcome of better determining the DWI defendant's needs, facilitating the conveyance of those needs to the agency selected, and providing follow-ups for reporting and evaluation purposes.

(1) Table of Key Performance Measures

Referrals to Alcohol Awareness Programs by Year of Rehabilitation Entry (July, 1974 - December, 1976) (Categories not mutually exclusive)

	19	74 ¹⁹	19	<u>975</u> 20	19	976	Tot	al
	N	op	N	00	N	00	N	00
Prevention Workshops (Regular) (Spanish) (Youth)	2,070	63.3 (46.4) (3.7) (13.2)	,	51.4 (41.6) (2.6) (7.3)	4,646	59.4 (52.7) (2.9) (3.8)	11,149	56.6 (46.8) (2.9) (6.9)
DRI/DRB	1,000	30.6	886	10.3	853	10.9	2,739	13.9
Therapy Workshops			1,492	17.3	1,643	21.0	3,135	15.9
Home Study			1,216	14.1			1,216	6.2
CAP (or KEY)	141	4.3	309	3.6	319	4.1	769	3.9
DWI Probation	n 59	1.8	150	1.7	218	2.8	427	2.2
PMT			136	1.6	145	1.9	281	1.4

¹⁹ During the last half of 1974, reported here, the diagnosis and referral function for problem drinkers was performed under contract by St. Luke's Hospital Medical Center by a team known as the Diagnostic Review Board (DRB).

²⁰ Home Study was a comparision group used from April through December, 1975, for evaluation purposes.

(2) <u>Significant Progress in Meeting Performance Targets</u>. During the experimental phase of the first year or more of the Phoenix project, burdensome testing procedures were inflicted upon the DWIs in the system in order to improve the screening mechanism. Out of the data collected, one of the subcontractors developed a short, easily administered and graded test which was the screening questionnaire adopted for use in mid-1974. This accomplishment contributed significantly to the system from that point forward.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) Analysis of Efficiency (Cost) in Achieving Project Performance. The selection of this process for screening, diagnosis and referral has proven to be far less costly in both time and money than anyone might have anticipated. Equally as important is the fact that the questionnaire method appears to be an unusually accurate way of assessing and responding to the needs of individuals in the system.

(5) <u>Changes in Plans</u>. None. It should be noted, however, that beginning in 1977 the name of the DRI was changed by the administrator of the Rehabilitation-Probation Center to more accurately reflect the procedures followed. It is now known as SAR, or Special Assessment and Referral.

(6) <u>Conclusions and Recommendations</u>. Through careful experimentation and evaluation, a method was devised in Phoenix for screening large numbers of DWI defendants quickly, quite accurately, and economically. It is recommended that highway safety programs in particular should endeavor to streamline the diagnostic and referral process to the greatest possible degree. A note of caution seems appropriate. Any treatment or reeducation track developed should include the capability to move an individual participant into another modality if the first selection proves unsatisfactory. In other words, built into any system of this kind should be the flexibility to respond to perceived needs.

c.2. <u>DWI Prevention Workshops (PW)</u>. This countermeasure, followed by a later companion program for problem drinkers known as DWI Therapy Workshops, began operations in July, 1974 under the aegis of Diversified Counseling Services, Inc., an Arizona non-profit corporation which contracted with the City of Phoenix to provide services to the ASAP system.

These workshops are the successors to the Phoenix DWI School, Phoenix DWI School Spanish Program, and Phoenix DWI Evaluation and Referral Program which were discontinued June 30, 1974.

Persons screened as non-problem drinkers were assigned to the DWI Prevention Workshops as a condition of their PACT Agreement, as a condition of probation if guilty of DWI at arraignment or trial, or as a condition of postponement of execution of sentence if a plea bargain was effected other than through PACT. The program utilized a semi-structured group process as an educational technique on the premise that information concerning alcohol and its various effects on driving, health and interpersonal relationships will have a greater impact on the individual when presented in an atmosphere of shared experiences, give-and-take discussion, and open-ended questions and answers. Maximum group size was 15 participants plus a counselor/leader.

The program inself consisted of four, two and one-half hour sessions. Meetings were generally held at night over a two-week period. However, weekday and Saturday sessions were also offered during daytime hours for people unable to attend at night. Weekday sessions covered a two-week time period. Saturday sessions met once a week for four weeks.

No audio-visual aids were used in this program, in marked contrast to the earlier Phoenix DWI School. It was the theory of the subcontractor, concurred in by ASAP management and members of the Task Force on DWI Curriculum, that it would be well to concentrate on personal interactions, group techniques, and self-discovery which might result in a non-didactic, non-structured (although there was a planned procedure used by leaders to achieve established goals), and non-threatening environment. Meetings were held in Spanish for those requesting them; special groups were also scheduled for young offenders. Persons failing to appear for any of the four sessions were required to reschedule with another beginning group so that the original group could continue to build rapport and confidence in their relationships.

(1) Table of Key Performance Measures.

Cumulative survival rates for Prevention Workshops vs. Home Study by quarter of entry stated in percentages.

	<u>1</u>	2	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>
PW	97.2	95.1	93.1	91.9	90.7	90.4	90.1
HS	96.1	94.3	92.4	91.1	90.4	89.5	88.8
Effective sam size	ple						
PW	3,080	3,080	3,080	3,080	3,007	2,926	2,555
HS	760	760	760	760	751	694	550

(2) <u>Significant Progress in Meeting Performance Targets</u>. All persons assigned to DWI Prevention Workshops were accommodated and seldom had to wait more than two weeks to begin a group. The subcontractor met its obligation in reporting attendance to the ASAP data system and in maintaining agreed-upon small groups.

(3) <u>Current Program Impediments Affecting Project</u> <u>Activities</u>. None other than the recurring problems occasioned by no-shows and the resulting reassignments when they do appear.

(4) Analysis of Efficiency (Cost) in Achieving Project Performance. Of the workshops provided by Diversified Counseling Services, Inc., DWI Prevention Workshops were the least costly to provide (\$23.14 per person). Since the charge to participants ranged from \$35 to \$50 over the time period being reported (mid-1974 through 1976), monies were realized by the City to offset the costs accrued but not recaptured from those who did not pay their fees.

(5) Changes in Plans. None to date.

(6) <u>Conclusions and Recommendations</u>. Serious consideration should be given to re-thinking the mix of alcohol awareness modalities offered by the Rehabilitation-Probation Center in light of evaluation findings. Because funding such programs has been a critical concern throughout the demonstration phase of the Phoenix ASAP, there is no reason to think that such will not continue to be true. Since the Home Study Course appears to have contributed nearly the same survival rate at a much smaller cost (\$5.87 per participant), it is on the face of it difficult to support continuation of DWI Prevention Workshops for social drinkers.

Probably the most consternating parts of "writing off" a program is the lingering doubt of whether or not its true worth has been thoroughly assessed. PW participants have regularly been asked to rate on a continuum scale their impressions of the workshop experience. This questionnaire is submitted anonymously at the close of the fourth and final session. Ratings have been consistently high, with comments reflecting satisfaction over a very worthwhile and insightful experience.

Municipal Court judges report that they frequently ask participants to comment on PACT and the workshops at the time of final disposition of their cases. Again, the comments are supportive and suggest that, with the newly acquired body of knowledge about alcohol and how it is used/abused in our society, they have new freedom of choice for their own drinking/driving behavior. One wonders, too, if a positive group experience at this point in time (usually the first such exposure for most participants) may stand them in good stead at some future crisis crossroads--when marriage problems or parent/child confrontations suggest the need for outside counseling assistance in seeking solutions to that dilemma.

Yet, the facts are there: similar behavioral changes result from exposure to a Home Study course vs. a PW experience. Perhaps the SAGE model, initiated in 1977 and discussed later, holds promise for a blending of techniques.

c.3. <u>DWI Therapy Workshops (TW)</u>. Misnamed from the outset, this modality was designed for problem drinkers and incorporated the opportunity to confront participants with the reality of their abuse of alcohol and to work past their denial of such truth. However, there were only two more sessions than PW, or a total of six two and one-half hour group sessions, plus a one-to-one exit interview with the alcoholism counselor who served as leader. Typically, only 12-13 participants were assigned to each group. Persons familiar with alcoholism therapy models recognize that the above-described activity can, at best, be considered an "introduction to therapy." Those individuals who reflect sufficiently severe problems in TW to warrant referral to a community program were initially referred to DRI in the Rehabilitation-Probation Center for further assessment and contact with an appropriate outside agency. Later, in an effort to increase efficiency and reduce confusion on the parts of DWI defendants, direct community interfacing was done by the counselor at the exit interview.

This practice had some inherent problems from the beginning. For example, persons who were in the system as a result of a PACT Agreement had, in their opinion, completed their obligation by completing TW. Although verbiage in the Agreement made possible the requirement for further treatment, the issue was certainly not clear to many defendants. Furthermore, their fee paid for TW did not cover any outside referral costs. Some community agencies which provide health care services on a sliding scale payment plan were able to accommodate limited numbers of indigent referrals. More frequently, however, additional costs to the client were involved.

Again, the dilemma with which alcohol awareness program planners are faced is how to react to evaluation findings. Home Study (HS) proved to be nearly as effective as TW in effecting change in recorded drinking/driving incidents. From the standpoint of cost feasibility, the choice is between HS at \$5.87 and TW at \$51.54 per defendant.

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(1) Table of Key Performance Measures.

Cumulative survival rates for Therapy Workshops vs. Home Study by quarter of entry stated in percentages.

	<u>1</u>	2	<u>3</u>	4	<u>5</u>	<u>6</u>	<u>7</u>
TW	93.3	90.3	88.0	86.3	84.8	84.2	84.2
HS	93.1	89.8	86.8	85.6	84.1	83.5	83.5
Effective sa size	mple						
TW	1,144	1,144	1,144	1,144	1,125	1,089	1,089
HS	334	334	334	334	325	308	308

(2) <u>Significant Progress in Meeting Performance Targets</u>. All persons assigned to DWI Therapy Workshops were accommodated and seldom had to wait more than two weeks to begin a group. The subcontractor met its obligation in reporting attendance, rescheduling no-shows, and maintaining agreedupon small groups. When the process was modified to enable group leaders to make community referrals at the one-to-one exit interviews, continued data input reached the ASAP system.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None. However, attention must be given to the decision as to whether or not this modality should be continued or drastically modified, based upon evaluation findings.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance</u>. This modality did not pay for itself with fees from the participants when the schedule called for \$35 and \$50 over the two-year period when TW was first offered. It is calculated that TW costs \$51.54 per defendant. Rates have since been increased to \$70, a figure which allows a reserve for non-pays.

(5) Changes in Plans. None to date.

(6) <u>Conclusions and Recommendations</u>. In comparison with the survival rates of defendants exposed to HS, it is difficult to defend the costs and the complexity of administering the required volume of rescheduling involved with TW groups. There seems to be no choice but to plan major changes in the alcohol awareness programs based on local evaluation findings and any available research on a local, State or national level which sheds light on improved methods for dealing with problem drinkers. c.4. <u>Power Motivation Training (PMT)</u>. PMT is a specialized therapy technique based on research indicating a relationship between drinking behavior and feelings of powerlessness in men. It was offered in Phoenix over a two consecutive (or 32-hour) participation assignment. A group of 15-participants and two coleaders processed and defined through a series of exercises, risk-taking behavior, goal setting, personal evaluation of weak and strong areas, and generally developed skills in handling stress or challenge.

As a means of providing some exposure to alcohol education before attending PMT, participants were given the same material first developed for use by the Home Study Course. However, in the case of PMT participants, the homework assignments did not have to be completed.

Introduction of PMT into the Phoenix therapy milieu was made possible by the U. S. Department of Transportation. In an extensive research effort to develop the state of the art in alcoholism therapy techniques, DOT entered into a contract with McBer and Company, where PMT had been developed. Participating ASAP sites were authorized to expend Federal funds for the purpose of educating trainers in PMT. Eight certified trainers were made available in Phoenix.

In a further sophisticated effort to evaluate this modality, DOT entered into a contract with the Human Factors Laboratory, University of South Dakota, to prepare a measurement instrument (termed Life Activities Inventory, or LAI) to be used with the DOT-approved Mortimer-Filkins test, to supervise an extensive field follow-up activity known as the Short Term Rehabilitation study (STR), and then to evaluate the results. Phoenix was one of ten ASAP sites selected to participate in this ambitious undertaking, the last 18-month follow-up interviews for which were completed in August, 1977.

A rather complex evaluation model was designed in each locality participating in STR. In Phoenix, 45 persons each month for eight months were selected for the study. Then, from a computergenerated random assignment table, 15 were referred to PMT, 15 to TW, and 15 to HS. Baseline interviews were conducted individually with each participant before entering the selected alcohol awareness modality. Questionnaires were also completed by each defendant. Following completion of the assigned program, these participants were followed up at six-, twelve-, and eighteen-month intervals and were interviewed, as well as being asked to complete the extensive questionnaire. Results of this study through the twelfth month follow-up in Phoenix are now available for review.²¹

²¹ See Phoenix ASAP Evaluation Unit, <u>Analytic Study VI: An</u> <u>Analysis of Drinker Diagnosis, Referral and Rehabilitation Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977).

(1) Table of Key Performance Measures

Cumulative survival rate for Power Motivation Training vs. Home Study by quarter of entry stated in percentages

	<u>1</u>	2	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>
PMT	96.1	91.2	91.2	89.2	88.1	88.1	88.1
HS	96.4	95.5	94.6	93.8	92.6	90.7	90.7
Effective sam size	nple						
PMT	102	102	102	102	100	100	100
HS	112	112	112	112	108	87	87

(2) <u>Significant Progress in Meeting Performance Targets</u>. Trained personnel to conduct PMT sessions were consistently made available by the subcontractor, Diversified Counseling Services, Inc. Sessions were held on schedule to meet the national evaluation schedule and follow-up interviews for STR were appropriately completed.

(3) Current Program Impediments Affecting Project Activities. Because of the high cost of the PMT modality, it was discontinued after December, 1976 in order to await evaluation results.

(4) Analysis of Efficiency (Cost) in Achieving Project <u>Performance</u>. PMT was the most costly modality offered within the immediate Rehabilitation-Probation Center system, with a tab of \$76.69 per defendant. When compared in cost and performance with HS (at \$5.87 per defendant), there is room for doubt as to PMT's efficiency.

(5) <u>Changes in Plans</u>. PMT is no longer offered in Phoenix. It may not be reinstituted, but a firm decision in this regard has not yet been made. Perhaps some of its features should be combined in the Comprehensive Alcohol Program for problem drinkers who are more involved in alcohol abuse than those screened for PMT.

(6) <u>Conclusions and Recommendations</u>. The theories on which PMT are based remain intellectually appealing. This modality was never intended to stand alone, however; and the resources in Phoenix were simply unavailable to provide long-range alcohol counseling programs as a follow-through after completion of PMT. This may account for the lack of superiority of this program over HS. Yet, the reality of cost feasibility remains with any program offered the general public, particularly in an early casefinding effort such as ASAP. For the above reasons, it is recommended that PMT be discontinued in the Phoenix system. Since the field follow-up study has not so far shown different results from the recidivism (or survival) measures, no clear justification for its continuance appears to be present.

c.5 <u>Substance Abuse Group Education (SAGE), Successor to the</u> <u>Home Study Course (HS)</u>. As previously noted, during 1975, more than 1,000 persons were randomly assigned to a minimum-exposure modality designated as Home Study (HS) and originated for evaluation purposes. The surprising success of HS in promoting survival rates among all types of DWI defendants assigned to this countermeasure was responsible for the emergence of a new modality in March, 1977, known as Substance Abuse Group Education (SAGE).

SAGE combines elements of former Home Study materials with a largely didactic group meeting, plus a one-to-one follow-up interview with the program coordinator. During the interview, the coordinator evaluates written materials prepared by the defendant in response to instructions contained in the Individual Study Guide and personally observes the defendant. As a result, the interview may lead to a further referral of the defendant to a more intensive Rehabilitation-Probation Center program, or to a community agency. One new group, consisting of 12-15 participants, is begun each week.

Since SAGE began after the demonstration phase of ASAP was completed, there is no evaluation data to report. However, Home Study (HS) forms the nucleus around which SAGE was developed after reviewing preliminary HS results. Comments on HS are therefore addressed in this section. (1) Table of Key Performance Measures.

Cumulative survival rates for PW/TW/PMT vs. Home Study by quarter of entry stated in percentages

	<u>1</u>	<u>2</u> ,	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>
PW/TW/PMT	96.1	93.7	91.7	90.4	89.1	88.7	88.5
HS	95.3	93.2	91.0	89.8	88.9	87.9	87.5
Effective sample siz	e						
PW/TW/PMT	4,326	4,326	4,326	4,326	4,234	4,114	3,779
HS	1,206	1,206	1,206	1,206	1,185	1,095	993

(2) <u>Significant Progress in Meeting Performance Targets</u>. HS was originally developed solely to serve as a minimal exposure modality to be used for comparison purposes in the alcohol awareness program evaluation design. Probably one of the greatest surprises to come out of the Phoenix ASAP was the emergence of HS as a heavy contender for acceptability as a deterrent to further DWI behavior.

(3) <u>Current Program Impediments Affecting Project Activities</u>. HS was reluctantly accepted by Municipal Court judges as a necessary evil for evaluation pruposes, and its use was limited to the period April through December, 1975. Certainly, the judges' position in wanting to provide the most efficacious programs for DWI defendants was admirable. Once the survival rate for those individuals exposed to HS became known, however, there was a willingness to allow the administrator of the Rehabilitation-Probation Center to proceed with development of the new SAGE modality, encompassing major elements of the original HS.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance.</u> HS was the least costly of any modality offered in the ASAP system at \$5.87 per defendant. Figures have not yet been finalized on the per defendant cost of SAGE, which will naturally rise over HS because of the involvement of a program coordinator who holds the initial group meeting and then conducts one-to-one exit interviews with all participants.

(5) <u>Changes in Plans</u>. HS has been reactivated and presented as a new modality known as SAGE.

(6) <u>Conclusions and Recommendations</u>. ASAP management has suggested to the Evaluation Unit that some serious effort be made to distinguish which DWI defendants might be most likely to benefit from either Home Study alone or from SAGE, perhaps. If a variety of cuts at the ASAP data base can isolate certain characteristics of DWIs which

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would predict acceptable outcomes from minimal intervention, the screening questionnaire could possibly be reprogrammed to select out this probably sizable universe of defendants.

Evidently, an important aspect of how adults learn has surfaced in this phenomenon of Home Study course effectiveness. Perhaps, when presented with interesting, easily read information based on educationally sound principles of programmed learning, adults are willing to relinquish previously believed myths about alcohol and substitute new knowledge. It is also obvious that such persons were at liberty to ingest such information at their own convenience (so long as they met the time constraints of their PACT Agreement). This is in contrast to being "punished" or "treated as a child" by having to appear for group sessions of PW, TW, or PMT.

The above comments are surmise on the part of the project director. That is one of the luxuries allowed in this subjective management report, whereas evaluators must be forever objective. Still, if a sound basis can be discovered for the hypothesis that some large number (perhaps 75%) of DWI defendants would profit from an inexpensive HS modality, the limited resources of the Rehabilitation-Probation Center should be reallocated so that many more problem drinkers could be diverted to CAP.

Despite the evaluators' conclusion that rehabilitation efforts in the Phoenix ASAP were none too successful, it is well to remember that industrial alcoholism programs which achieve a 75% success rate are considered stars in the alcoholism treatment field. While it is true that a highway safety program must rely heavily on recidivism to adjudge the success or failure of its intervention efforts, and graduates of DWI programs may have simply learned new routes to use when driving while intoxicated so as to avoid arrest, there is much to be said for a systems approach to the problem. Beginning with the all-important heavy selective enforcement effort and proceeding to the best available reeducation/rehabilitation efforts, significant community impact will be felt. It has been felt in Phoenix, and members of Alcoholics Anonymous often attest (anonymously, of course) to the steadily increasing numbers of people who have found sobriety and a new meaning to their lives simply because ASAP added the one more reason needed for such individuals to make a change in their relationship to and use of alcohol.

c.6 <u>Comprehensive Alcohol Program (CAP), Successor to KEY Therapy</u>. Unlike many of the ASAPs funded by DOT, the Phoenix project responded to recidivists by developing a program especially designed for serious problem drinkers and alcoholics. Beginning in July, 1973, through a subcontract then in effect with St. Luke's Hospital Medical Center, Phoenix, a "recidivism specialist" was hired to prepare a program to meet the needs of this particular group of DWI defendants.

Now CAP is an important component of the Rehabilitation-Probation Center, a division of the Municipal Court of Phoenix. Individuals who have histories of multiple contacts with the criminal justice system are strong potentials for assignment to CAP. And those persons whose records show that they have previously participated in some other less concentrated modality in the ASAP system can almost depend on receiving a CAP assignment.

Defendants/probationers are usually assigned to Educational Awareness groups at the initial interview. However, they may continue to be seen on an individual basis while concurrently being involved in the group process. Families are encouraged to attend these groups, and in-depth family counseling may be initiated in connection with these sessions.

If participants show need for medical attention or it is determined they need in-patient treatment, they are referred to appropriate community agencies. CAP personnel keep in touch during this time and usually some follow-up work is done with them. In part, such follow-up relates to the Court obligations of these and other defendants involved with Center programs.

CAP personnel also facilitate a Personal Growth group for those clients who show a need or desire for more in-depth treatment. These participants and their families may continue to be involved in counseling on an individual basis for the duration of this group. The length of involvement in CAP varies greatly, based on individual needs. Minimum involvement is approximately 60 days. Maximum involvement is rarely longer than six months. All cases are handled by the Center on an out-patient basis.

Personal Growth groups consist of a six-week series of sessions, meeting once a week for two and one-half hours. The CAP therapist is assisted in this series by an outside counselor who functions as co-therapist. The perspective and goals of these sessions are to help the participant: (1) learn communication skills, (2) build self esteem, (3) begin to accept their own humanness, and (4) learn social skills and self assertiveness without the aid of chemicals.

Whenever a CAP participant is diagnosed as being an alcoholic, CAP personnel encourage affiliation with Alcoholics Anonymous (AA) at the appropriate time. The suggestion is strengthened by a willingness to accompany the participant to several AA meetings in order to pique and sustain interest in achieving sobriety. (1) Table of Key Performance Measures.

Cumulative survival rate for Comprehensive Alcohol Program (formerly KEY Therapy) by quarter of entry stated in percentage (completions only)

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	5	<u>6</u>	<u>7</u>
	93.0	90.1	87.3	85.2	83.0	80.7	78.2
Effective sample size	581	552	513	470	401	316	223

(2) <u>Significant Progress in Meeting Performance Targets</u>. This countermeasure suffers from the fact that the presenting needs of DWI defendants/probationers referred to CAP legislate against the establishment of a control or comparison group against which to evaluate. Even so, there is good reason to feel encouraged that the mix of intervention efforts embodied in this countermeasure is outstanding.

(3) <u>Current Program Impediments Affecting Project Activities</u>. None.

(4) Analysis of Efficiency (Cost) in Achieving Project <u>Performance</u>. CAP costs \$69.37 per defendant to provide an impressive range of activities. Considering the severity of alcohol impairment manifested by most program participants, this is an extremely cost-effective countermeasure.

(5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. A CAP-like program should be offered to all problem drinkers, and it should replace TW and PMT. Because a decision to carry out this recommendation would increase considerably the present CAP case load, the possibility of modifying the present subcontract with Diversified Counseling Services, Inc. should be explored. This subcontractor has the staffing capability to offer a parallel program to that offered by the Center without requiring the City to expand further its number of full-time employees.

However the capability is achieved for offering CAP to more participants, there should be a willingness on everyone's part to evaluate the efforts. Perhaps a comparison could be made with a control group subjected to traditional punitive sanctions only. Then the program should be sufficiently flexible to modify its direction based on evaluation findings, if that course of action is indicated.

c.7 Other Rehabilitation Treatment. Since this phraseology refers to from 35 to 40 community agencies/facilities/services used as resources, no attempt is made to apply an analysis of their individual contributions to the ASAP system. ASAP management would be quite remiss, however, if this opportunity were not taken to acknowledge with extreme gratitude the assistance received from these programs. Before referrals were made by Center personnel to any outside resource, the program was investigated by personal visits and discussions with those responsible for delivering services. The results were gratifying, and DWI defendants in Phoenix benefitted directly from a wide range of caring community service deliverers.

c.8 <u>Crisis Intervention Program (CIP) and Transportation</u> <u>Assistance (TA)</u>. In developing countermeasures for the original Phoenix ASAP proposal, it became evident that social service providers often limited their availability to eight hours a day, five days a week. Yet, "people problems" have a way of occurring at all times of the day and night, and very frequently on weekends. An unmet community need for an alcohol crisis program was certainly evident.

ASAP staff members attended a number of meetings with representatives from information-and-referral services, as well as from several telephone "hot line" programs, specializing in drug crises (other than alcohol) and suicide calls, among others. A sincere effort was made to get one or more of these existing programs to expand its hours of service and to incorporate alcohol abuse outreach and telephone counseling services. The attempts were unsuccessful.

Another observed need was for transportation assistance. In the case of DWIs, a way home could mean the option of not being booked and jailed for many poor people who were otherwise eligible through Police Department policy for release on their own recognizance. More affluent citizens cited for DWI could usually call a friend or family member for a ride home, or they had sufficient funds to hire a taxi.

So, while not directly related to the ASAP rehabilitation system flow, CIP and TA were funded with seed money from the Project and later supported entirely by the City's antipoverty program (LEAP), through which department's management and facilities CIP was supervised and housed. Ultimately, the hours of 8:00 a.m. to 5:00 a.m. were selected for staffing these activities, or 21 hours each day, seven days per week. (1) Table of Key Performance Measures.²²

	1973	1974	<u>1975</u>	1976	Total
Total Requests Transportation	7,952	7,507	9,566	11,602	36,627
Calls Miles Travelled	2,977 29,717	3,308 34,419	3,654 41,960	3,682 43,338	13,621 149,434

²² This program did not become operational until mid-year in 1972.

(2) <u>Significant Progress in Meeting Performance Targets</u>. The demand for this program far exceeded any initial estimates for performance.

(3) <u>Current Program Impediments Affecting Project Activities</u>. Vehicles used by this countermeasure are often laid up for repairs, thus impacting the program's full efficiency. Overload conditions in the City's vehicle maintenance center appear to be responsible for such delays.

(4) Analysis of Efficiency (Cost) in Achieving Project <u>Performance</u>. While this countermeasure does not generate any revenue to help sustain it, there is no doubt that it performs an important community service. Public service employees (PSE) have been used upon occasion, and CIP has provided a good training ground for upward career movement. Excellent training is provided staff members, who are expecially skilled in crisis counseling via the telephone.

(5) Changes in Plans. None.

(6) <u>Conclusions and Recommendations</u>. CIP and its TA element are now highly respected community services. They serve as examples of some of the highly innovative concepts fostered by ASAPs which contributed in ways not originally envisioned. Although this report did not attempt to provide a breakdown of all the calls handled by CIP, it is worth noting that at least 8-10 alcoholrelated suicide calls are received each month. CIP staff members know precisely how to counsel the distraught callers and to provide follow-up, positive options to such drastic measures.

c.9 <u>Family Alcoholism Information Meetings (FAIM)</u>. Although not listed as a countermeasure in the Phoenix ASAP rehabilitation system, no final report of activities would be complete without reference to FAIM. Originated in response to a need expressed by ASAP Management for some kind of introduction to Alcoholics Anonymous, a local alcoholism counselor implemented the FAIM. And, it is important to note, this program is not part of AA. (Perhaps it will be some day because it has proven to be so popular in Phoenix.)

A full cycle of FAIM lasts four weeks, with one meeting scheduled each week. Husband and wife are encouraged to attend together, or any combination of alcohol abuser and significant other(s). Entry can occur at any meeting, but participants are urged to stay through four consecutive weekly meetings. Led by an AA member and spouse, subject matter covers the AA twelve steps (first and third sessions) and Alanon/Alateens (second and fourth sessions). There is no question, after seeing the happy participants, that FAIM is a success. d. <u>Public Information and Education</u>. Beginning in December, 1971, the public information and education effort within the Phoenix ASAP started an intensive campaign to channel information about ASAP countermeasures to the public. This was accomplished through a multi-media effort including newspapers, radio and television, posters, broadcast interviews, news releases, and speakers bureau presentations. Extensive back-up materials were provided throughout the demonstration phase of the Project by the U. S. Department of Transportation and its subcontractor, Grey Advertising.

This countermeasure was conducted by a professional public information and education specialist on the ASAP management staff. This individual reported directly to the project director and assumed prime responsibility for seeing that all facets of the strategy plan were properly implemented. During the first three operational years, this plan was developed in-house on a yearly basis in order that it might respond to the findings of the household surveys being conducted to provide an evaluation of information needs in the community. However, for the two-year extension granted the Phoenix ASAP, an overall continuation strategy was mapped out in concert with DOT; and all efforts were directed toward accomplishing the goals set forth in that document.²³

Efforts of the staff specialist were augmented by two contracts with outside public relations agencies in the five years of demonstration activities. It would have been impossible to undertake such an array of assignments without the input and "extra hands" available through these agencies during their respective contract terms. It would also have been impossible to achieve such substantial media support had it not been for the excellence of materials provided through DOT.

No funds were allocated to the Legislative and Regulatory countermeasure suggested by DOT during the planning stages of the Phoenix ASAP. This activity was therefore carried in the Detailed Plan as a separate entity originally, but was later combined with the Public Information and Education component. The City of Phoenix, on behalf of ASAP, did not engage in any official legislative activity during the life of the Project. It did tacitly support in 1972 the reduction of the presumptive limit for intoxication to .10 from .15 BAC (blood alcohol concentration). No stand was taken one way or the other during that same year when a new law was passed establishing a one-day mandatory jail sentence for

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²³ For the content of the final two years' communication plan and a helpful description of many successful local activities, see Phoenix ASAP Evaluation Unit, <u>Analytic Study VII: An Analysis</u> of <u>Public Information and Education Activity</u> (City of Phoenix Alcohol Safety Action Project, 1977).

those convicted of DWI, even on the first offense. Again, there was no offical position on the matter of reducing the legal age for consumption of alcoholic beverages to 19, which was also enacted in 1972.

On two different occasions, at seminars for Municipal Court judges sponsored by ASAP, those in attendance were asked to review the possibility of supporting "illegal per se" legislation, as well as changing the wording on the BAC testing statute which would make possible a pre-test which the officer could administer before taking the official test which would be admissible for court evidence. In neither instance was any support shown. However, one chief presiding judge in the course of the Project was instrumental in securing a change in the law which allowed the Municipal Court to become a court of record in DWI trials. This action had the effect of eliminating the trial <u>de novo</u> feature for Superior Court appeals of DWI cases which had been so perplexing in the early years of ASAP.

Evaluation of public information and education efforts was accomplished by four household surveys and two telephone polls conducted over a span of time from the Fall, 1971 through Spring, 1976. In addition, a high school student survey was conducted in 1973 and a holiday promotion survey in 1975-76.

(1) Table of Key Performance Measures

	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>	<u>1976</u>
Brochures Distributed	N/A	N/A	N/A	26,600	32,900
Radio/TV Announcements	4,046	3,900	3,600	4,900	5,075
Radio/TV Features	76	117	67	36	58
Newspaper Items	181	139	83	78	139
Speakers Bureau Appearances	95	74	61	103	103
Information Requests	N/A	N/A	N/A	74	115

Source: ASAP Form 7514, completed by ASAP Public Information Specialist.

(2) <u>Significant Progress in Meeting Performance Targets</u>. Despite the fact that this countermeasure typically planned to accomplish more than was realistically possible, the progress in meeting performance targets was consistently outstanding. (3) <u>Current Program Impediments Affecting Project Activities</u>. Because of severe budget constraints, the City of Phoenix was unable to continue this countermeasure longer than six months beyond Federal 403 funding. The Citizens Alcohol Safety Advisory Committee strongly recommended that the City or perhaps the Maricopa Association of Governments (representing 18 cities/towns and County government) continue this activity. This has not been done.

(4) <u>Analysis of Efficiency (Cost) in Achieving Project</u> <u>Performance</u>. By supplementing the work capacity of the staff public information and education specialist with the wide range of skills/tools available to a public relations agency, the ASAP dollar return was leveraged considerably. There was the additional advantage of not building a larger City staff which might need to be absorbed at the end of the demonstration phase of the project.

(5) <u>Changes in Plans</u>. Countermeasure was discontinued on June 30, 1977.

(6) <u>Conclusions and Recommendations</u>. The Phoenix ASAP would have been far less effective than it proved to be had it not included a public information and education countermeasure. It is management's considered opinion that all aspects of the program were extremely well served by this activity and that some steps toward prevention were accomplished in the area of reducing potential drinking/driving incidents. Probably the whole concept of ASAP will only succeed in the long run when public opinion no longer tolerates drunkenness.

5. INDEX AND ABSTRACTS OF ANALYTIC STUDIES

Section Two of this <u>Final</u> <u>Report</u> consists of five separately bound research studies produced by the ASAP Evaluation Unit. Analytic Study I considers total Project impact through an analysis of motor vehicle crash rates. Study III documents the substantially increased DWI arrest rate achieved by the Phoenix police and Arizona Department of Public Safety. Study IV examines the Court and Prosecutor's Office, while Study VI evaluates the effectiveness of rehabilitation activities. Study VII reports on public information and education activity aimed at the drinking/driving public.

Abstracts appear on the following pages; copies of the complete reports are available upon request. Titles are listed below by number. Note that studies have been combined in two instances: II with I and V with VI.

- I An Analysis of Total Project Impact
- III An Analysis of DWI Enforcement Activity
- IV An Analysis of Judicial System Performance
- VI An Analysis of Drinker Diagnosis, Referral and Rehabilitation Activity
- VII An Analysis of Public Information and Education Activity

1. Report No.	2. Government Acces	sion No. 3	Recipient's Catalog	No.				
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7. Author's) Thomas R. Clay and Ve 9. Performing Organization Name and Addres		ingstad	Performing Organizat					
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Washington, D.C. 20590 ¹⁵ Supplementary Notes This report is one of Section Two of the Fig	five separa	ately bound wo	rks constitu	uting				
Section Two of the Final Report. Others are numbered III, IV, VI and VII. 16. Abservet The focus of this study is on analysis of motor vehicle crash rates as the ultimate criterion of ASAP impact. Change between baseline (1969- 1971) and operational (1972-1976) periods is approached within the con- text of an interrupted time series quasi-experimental design. Results indicated a decreasing trend in both injury and total crashes. Fatal crashes were relatively unchanged, but their characteristically low monthly frequency limited usefulness of this measure. Crash subsets known to be closely associated with alcohol involvement (such as single vehicle and nighttime injury) provided additional evidence for a down- ward trend. Unfortunately, positive effects were not felt until the second year of Project activity (1973) and were similar to trends observed in the comparison city of Tucson, Arizona. For these reasons, it cannot be concluded that the ASAP achieved its crash reduction objectives. Crash data, however, are probably too insensitive to detect improvement. Secondary indicators, examined in the other analy- tic studies, may provide a fairer test of Project effectiveness. The report also describes countermeasure elements and charts the ASAP system process from arrest through final DWI case disposition. Pro- files of fatal crashes, drivers and pedestrians are also presented,								
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and VII.		•••••				
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ment of DWI offenders i	nto treatmen	nt following th	neir arraig	nment. No
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7. Author(s) Paul R. Swenson and Th				
9. Performing Organization Name and Address			Work Unit No. (TRAI	5)
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6. PLAN FOR ACTIVITIES AFTER TERMINATION OF THE PROJECT

6.1 PLANS FOR THE PROJECT AREA

Built into the original proposal for the Phoenix Alcohol Safety Action Project were plans for possible continuance of effective countermeasures by the City. It was recognized that the first \$2,2 million of Federal 403 funding could not cover all the system components for the full three-year demonstration phase contemplated (later extended to five years with additional Federal and City commitments). Therefore, a series of phase-out dates for Federal assistance was scheduled for the third year, allowing budget adjustments to be planned on an incremental basis in response to evaluation results.

The invaluable assistance of the Citizens Alcohol Safety Advisory Committee should not be underestimated in this regard. By becoming quite familiar with the Project and providing objectivity to the viewing of operations analyses, these individuals formed consensus views to share with the Mayor and City Council. In the end, only one of this advisory group's recommendations--that of continuing the public information and education effort--was not accepted by City officials. Budget constraints caused this decision to be made, despite the obvious success of the countermeasure.

Evaluation activities, on a modified scale, are continuing with Federal dollars through 1978, with wind-up reports due in the Spring of 1979. Liaison and coordination responsibilities for system integrity have been transferred from the City Manager's office to the Management and Budget Department. Plans are underway to review carefully the reeducation and rehabilitation offerings in the Phoenix system based on current analytic findings. And, finally, the innovative PACT program will be closely monitored to determine its effectiveness over time as more people become ineligible for diversion because of repeat DWI offenses.

6.2 PLANS FOR OTHER AREAS IN THE STATE

No plans have yet surfaced as to whether any widespread ASAP catalytic effect will be felt in other areas of Arizona. Many communities expressed interest in the program during the demonstration phase, and all inquiries were given prompt attention. There are indications that one or more countermeasures have been implemented in scattered locales, but no full-fledged DWI systems approach has been emulated.

6.3 PLANS FOR EVALUATION DATA FILES

Because the Project is in effect being continued, except for the public information and education component, the evaluation data

files are intact and are being used for Federal reporting purposes through May 31, 1979. Arrangements in due time will be made by the continuing evaluation coordinator to forward the required computer data files to Washington, D.C.

6.4 PLANS FOR GOVERNMENT-OWNED EQUIPMENT PURCHASED BY THE PROJECT

All equipment purchased by the Project has been signed over by the Federal government to the City of Phoenix. It is being used almost entirely in the continuing countermeasures and by evaluation personnel. The exceptions, of course, are the police vehicles which reached obsolescence and were freed by the Contract Officer at an earlier date so that the City could use them to trade in on new, replacement equipment.

7. SUPPLEMENTAL INFORMATION: REPORTS FROM THE CITIZENS ALCOHOL SAFETY ADVISORY COMMITTEE

July 15, 1976

Honorable Margaret Hance, Mayor Members of the Phoenix City Council 251 West Washington Street Phoenix, Arizona 85003

Dear Mayor Hance and Council Members:

This is a report of the Citizens Alcohol Safety Advisory Committee which is charged with the responsibility of reviewing the operations of the City of Phoenix Alcohol Safety Action Project (ASAP) and related City programs. Since our last report dated September 9, 1975, the Committee has reviewed some aspects of the ASAP activities in greater depth than was previously allowed by the time commitments of the Committee. It also, through a series of meetings with key personnel involved in the Prosecution Alternative to Court Trial (PACT) program, considered and prepared recommendations with a view to enhancing the effectiveness of that program.

During the course of the Committee meetings, a prominently featured newspaper article critical of the PACT program appeared. In response to allegations contained in the article the Committee interviewed one of the police officers whose complaints formed the basis of the article, as well as the chief prosecuting attorney in the City Attorney's office and the chief presiding judge of the City court. These interviews disclosed the existence of somewhat divergent views and expectations with regard to the handling of alcoholrelated traffic offenses and the purposes of the PACT program, and certain of the Committee's recommendations are in response to this situation.

Circumstances which the Committee feels should be noted by the City Council and the Committee's recommendations with regard to those matters follow:

 Since our last report, the Phoenix Police Department has abandoned the concept of a permanently assigned ASAP motorcycle patrol squad and is now assigning this reponsibility on a rotating basis among all motorcycle patrolmen. The Committee recognizes certain advantages in this procedure, including a broadening of the base of traffic officers who are familiar with and conscious of ASAP procedures. However, apparently officers who are only temporarily assigned are not given the same level of training as the officers who were formerly on permanent assignment. Because of some apparent misunderstandings as to the systems approach to the drinking driver problem and to the disease alcoholism, the Committee recommends that an effort be made to implement more informative briefing sessions for police officers assigned to traffic bureau duties generally, as well as those specifically assigned to the ASAP squad. Such sessions should include discussion of the role of the prosecutor and of the City judges, as well as the rehabilitative programs, in an overall systems approach to handling fairly and efficiently a high volume of alcohol-related traffic offenses.

2. From the vantage point of a year and a half to two years of operations, it is very tempting to ask the question, "Is PACT working?" The question really must be divided "Is PACT fairly and efficiently into two parts. First: handling, without an undue burden on the City budget, the high volume of alcohol-related traffic offenses which occur within the City?" Second, "Is PACT having a positive effect in reducing recidivism in DWI offenders?" To the first of these questions, the Committee considers the answer clear. PACT is an innovative approach which has received national attention. It efficiently handles the high volume of DWI arrests and, perhaps because of these efficiencies, the number of arrests is proportionately increasing, thereby impacting a higher proportion of real offenders than were impacted under previous programs. Without PACT, if arrest rates continue at the increased pace which accompanied the implementation of PACT, the prosecutor's office and the City court system would become overloaded and cease to function efficiently. Moreover, PACT is an essentially self-sustaining program with the burden of costs being borne by those who participate in the program rather than by the community at large.

As to the second question, a clear-cut answer was not yet available to the Committee. Statistical information capable of providing this evaluative information has become available only within the last few days. In the meantime, preliminary data from the prosecutor's office seems to indicate a lower recidivism rate among PACT participants than was previously experienced. Persons close to the PACT program in the prosecutor's office and City courts feel that an improvement has been made; and rehabilitation personnel have had many positive experiences indicating changed attitudes and conduct not only relating to the use of alcohol and driving, but in relation to the changing of life styles to eliminate or reduce alcohol abuse. What remains lacking is evidence of long-term adherence to such changes in attitudes and life style and evidence which would allow comparison of these effects of PACT with the effects of other possible means of handling such offenders.

- As PACT continues, attention has been focused on the 3. manner of handling the PACT participant who is cited for a second DWI offense before completion of his initial program. The PACT agreement form indicates that if a PACT participant receives a second DWI charge while in the program, he would not be allowed to complete the program but both offenses would be set for However, this procedure has never been followed. trial. Initially, the charges were consolidated and both handled as one PACT offense. Now, the participant is allowed to complete his initial PACT program but the second charge is set for trial unless a plea of guilty is entered. After extensive discussion and interviews with the chief prosecutor and the chief presiding judge, the Committee felt the current policy should be followed but that the PACT agreement form should be amended to clearly indicate the policy that is being followed. Although there was some sentiment that a second DWI offense while involved in PACT programs is probably indicative that the modality utilized for that individual is inappropriate and a reassessment should be made, the majority of the Committee felt that this was not invariably the case and that the original PACT program should be completed. More intensive measures, if indicated, could be taken after conviction on the second offense when the treatment modality would have the additional force of probation sanctions. The high proportion of post-PACT DWI offenders who plead guilty to the second charge rather than requiring a trial setting, was deemed significant, by the Committee, in making this recommendation.
- Suggestions were made by the chief presiding judge that 4. greater access be provided for City judges to the information regarding a DWI defendant's prior traffic and DWI offenses in other communities of the State. This information is apparently available, in the records of the Motor Vehicle Department. Extracts of this information relating solely to out-of-jurisdiction DWI offenses are provided to prosecutors but are not always made available by them to the judges. In previous years, a permanently assigned liaison officer of the Driver License Section was unavailable in the Municipal Court building and was utilized as a source of such information. The Committee recommends that consideration be given to a means of supplying such relevant information as may be available to City judges as an aid in sentencing.

- 5. With reference to the level of staffing of the component agencies of the Alcohol Safety Action Project and the PACT/ Rehabilitation-Probation Center program, the Committee desires to reinforce its earlier observation that the Volunteer Probation Partner program is one of the most highly cost-effective components of the system. This results from the fact that the efforts of paid administrative personnel are leveraged and amplified many times through the services of the volunteer probation partners. The Committee therefore recommends that staffing of this program be maintained or increased if necessary to effectively utilize all available volunteer probation partners. With regard to other staffing questions, the Committee feels that the fact that these programs are self-sustaining on a cost basis should be a guiding principle and staffing should be maintained at levels determined to be necessary for efficient operations.
- 6. The Committee recommends continued support of the Crisis Intervention Program, basing this recommendation, insofar as the ASAP system is concerned, upon the continuing policy of the City not to book most DWI defendants into detention facilities but rather to release them on their own recognizance following completion of testing and charging procedures. In many cases, the services of the Crisis Intervention Program are needed to assure that a DWI defendant is safely returned home without hazard to himself or others.
- 7. The chief presiding judge indicated that City judges feel a need for greater flexibility in dealing with alcoholrelated traffic offenses. At the present time, there are available only A.R.S. 13-003, a criminal statute, and the non-criminal traffic offense section under which most DWI charges are filed. There was some feeling among judicial officers and enforcement personnel that legislation defining and establishing penalties for lesser degrees of impairment than is presently required for sustaining a driving while intoxicated charge would be desirable to provide flexibility in dealing with the wide range of circumstances involved in these types of offenses. This would result in fairer treatment of "border-line" cases where impairment may have been demonstrated and the need for education or rehabilitation exists, but, for example, blood alcohol levels necessary to establish statutory presumptions of intoxication were not involved. The Committee recommends that the City Attorney's staff and legislative counsel give due consideration to these matters with a view toward obtaining introduction of appropriate legislative measures.

very truly yours Mamin Raido

Marriner P. Cardon, Chairman Citizens Alcohol Safety Advisory Committee

May 25, 1977

The Honorable Margaret Hance, Mayor, and Members of the City Council City of Phoenix 251 West Washington Street Phoenix, Arizona 85003

Re: Final Report of the Citizens Alcohol Safety Advisory Committee - ASAP Program

Dear Mayor and Council Members:

As you are aware, the current federal funding for the Phoenix Alcohol Safety Action Project (ASAP) in its present form will expire on June 30, 1977. A contract extension made up of "underrun funds" and an additional allocation of \$50,000 by the U. S. Department of Transportation has been made to the City of Phoenix to continue the evaluation function for an additional twenty-three months. However, because of the loss of federal funding for operational activities, significant changes are already scheduled to be made in the organizational structure of the ASAP program. Since ASAP will not continue to exist as a separate entity, the Citizens Alcohol Safety Advisory Committee considers its function completed with this report.

ASAP Objectives and History

It is appropriate at this time to review the original objectives for the ASAP program and to evaluate the performance of the Phoenix ASAP in the light of both of these original objectives and other objectives which developed within the program during the course of its existence. Originally, ASAPs were established in many areas of the United States as federal programs designed to effect a reduction in the crash rates of accidents related to the use of alcohol. Each project was allowed to design its own programs and methodologies. More or less uniform evaluation standards were established so that the federal sponsoring agency would be able to determine the effectiveness of the various programs and methodologies adopted.

In Phoenix, the program consisted of a special emphasis on interception of DWI offenders through use of an "ASAP Squad" of Mayor Hance and Council Members Page 2 May 25, 1977

the Phoenix Police Department--a motorcycle squad specially designated, trained and assigned to focus on DWI offenders during the peak hours of DWI offenses. This was augmented by a special patrol car of the Arizona Department of Public Safety on the Black Canyon Freeway. Prior to ASAP, Phoenix had a judicially sponsored DWI school, and this was continued under ASAP sponsorship for the first two and one-half years of the Project. Various of the municipal judges had developed working relationships with treatment and rehabilitation organizations then active in the area which were utilized on a case by case basis, and the Phoenix ASAP began to further develop these lines of access to rehabilitative programs on a coordinated basis.

Early in the ASAP experience, it became apparent that a high degree of effort to intercept the DWI offender was causing an overload and, to some extent, a breakdown in the Court system's ability to handle this increased caseload. At the same time, two judicial developments--rulings that offenders in cases, such as DWI, where jail sentence might result were entitled to public defenders if unable to afford their own attorney; and that such offenders were also entitled to speedy trials--aggravated the already confused situation in the Municipal Court. It soon became apparent that the only possible way of handling the high volume of cases would be to utilize plea bargaining on a large scale. The Prosecutor's office could not possibly prepare for trials of all the offenders apprehended; so, in theory, they picked the most egregious cases for prosecution and allowed the defendants in borderline cases to plead guilty to lesser offenses.

In fact, however, the system didn't work that way. Defense attorneys were often able to delay or continue trials until police officer witnesses were not available and then obtain dismissals for lack of prosecution evidence. When a conviction was obtained in Municipal Court, the defendant frequently moved for a trial <u>de novo</u> in the Superior Court where the case had to be reheard, often with more satisfactory results from the defendant's standpoint. Individual judges took different approaches to the problems and inconsistency prevailed throughout the system. Most of the offenders whose cases were either dismissed or plea bargained on lesser offenses did not receive any type of treatment or rehabilitative guidance.

It therefore became an objective of the Phoenix ASAP to bring some measure of order and consistency of treatment into this confused situation. The method selected came to be called "PACT", an acronym for Prosecution Alternative to Court Trial. This was a systematized method for handling high volumes of DWI offenders by an opportunity to plea bargain for a lesser offense. PACT is a privilege which the offender earns by successful completion of some guidance or rehabilitative treatment program assigned as the result of a screening process which separates the social drinkers who overindulge from the problem drinkers. Mayor Hance and Council Members Page 3 May 25, 1977

The Phoenix Project, particularly after the introduction of the PACT program, attracted national attention among the various ASAPs and other national groups working on alcohol-related accident prevention. It was one of ten of the original 35 ASAPs funded for an additional period of two years. It received special scrutiny from the Task Force on Adjudication of the presidentially appointed National Highway Safety Advisory Committee and the Task Force on Responsible Decisions About Alcohol of the Education Commission of the States. Some of its innovative efforts are commented on at length in the August 1976 report of the U. S. Department of Transportation on the ASAP projects. Unquestionably, the Phoenix Project was considered to be one of the more successful of the ASAPs.

Phoenix can also benefit from the varying experiences, whether successful or not, of other ASAPs around the country as reported by the Department of Transportation. Some approaches to the problems which were different from those of Phoenix will be considered in greater detail in the section of this report entitled "Alternatives".

It is now appropriate to evaluate the success of the Phoenix ASAP in the light of both the national goals and the local goals addressed by the Project. It is necessary to consider critically the cost justification of continuing all or portions of the ASAP program in view of the current mandate to cut the fat out of all City department budgets. Even more fundamental questions such as whether the City should be in the business, at all, of delivering the kinds of services involved in ASAP, should be resolved at this point.

Before suggesting answers to these questions, however, a brief summary of the results of the Phoenix ASAP will be helpful.

Results

During the initial phases of the ASAP program in Phoenix, the various individuals both on the ASAP staff and in interrelated departments began to work together in seeking solutions to then pressing local problems in a pioneering and innovating fashion. In fact, as their proposed program for solution began to take form, they developed a marked dedication for making it work. Such enthusiasm is difficult to maintain over sustained periods of time; but it certainly led to the prominence of Phoenix among the various ASAPs and resulted, in the opinion of the Citizens Committee, in a high return per dollar spent for the design and structuring of this systems approach to handling a high volume of DWI offenders.

These efforts are very "offender oriented". In fact, the orientation is so strongly in favor of rehabilitation and changing undesirable conduct that the offenders are known as "clients" among the staff and the rehabilitative agencies. The efforts were successful in providing an impact of guidance or rehabilitative processes on a high volume of DWI offenders. The underlying theory is that a DWI offense is the equivalent of a call for help to which the City Mayor Hance and Council Members Page 4 May 25, 1977

should respond with guidance or rehabilitation measures.

From a cost accounting standpoint the programs are essentially self-sustaining except for the federally provided administrative funds, in that each of the clients is charged a fee which substantially defrays the costs of the treatment that the client receives. In a larger sense, however (and in a sense which City officials and administrators sometimes do not desire to think), the program more than paid its own way. After the introduction of PACT, as many as 7,400 offenders per year pleaded guilty to lesser offenses and paid fines averaging \$110.00 into the City general funds, in addition to the fees for the rehabilitative and guidance programs. Under the previous practice, a much smaller portion of DWI cases resulted in fines being paid by offenders. This generation of revenues has been ignored in the budgeting process for ASAP activities, but it must be recognized that adoption of or reversion to either of the other ASAP alternatives discussed below would result in a substantial reduction of general revenue from this source.

There is one other area of philosophical concern where evaluators of the ASAP results may disagree. That is the area of compliance with State policy. The legislature has mandated a one day in jail minimum sentence for convicted DWI offenders. The diversionary aspects of the PACT program have been criticized as inconsistent with that policy. When one compares, however, the results under PACT with previously prevailing conditions, one realizes that it is impossible to structure a system where every person apprehended with a blood alcohol level in excess of .10 is processed through the courts and into penal facilities for the mandatory day in jail, particularly if current levels of arrest activity are maintained.

While PACT offers the first-time offender a plea bargain alternative, it has, as a standardized and fairly uniformly applied policy, resulted in higher conviction rates for repeat offenders who are not offered a plea bargain on repeat offenses. Therefore, it in fact may be a more successful implementation of the State policy than the prior practice where plea bargains were utilized in order to expedite the case load no matter how many prior offenses had occurred.

Before examining alternatives that may be available to the current ASAP-developed PACT program, some other features and highlights of the ASAP experience should be noted:

(a) The federally funded ASAP staff included a public information specialist. During the Project years, a number of innovative and highly visible programs were initiated by this specialist. These included Holiday Safe Driving Campaigns, educational poster contests in high schools and utilization of the "public service announcement" facilities of the various media in slogan campaigns. While the public information and education Mayor Hance and Council Members Page 5 May 25, 1977

> efforts are less susceptible of tangible cost-benefit justification, the Committee feels that this sustained campaign was beneficial. In the overall budgeting and charges to DWI users of the system, provision should be made for continuation of these functions.

(b) The Committee feels the PACT program developed in a very successful way out of the coordinated efforts of individuals in a number of City departments. It is very unlikely that such a program would have developed without the coordinating impetus of the ASAP staff. Since this program "fits" and "works" as it is presently structured, there may not be a continued need for the full ASAP staff; but the Committee is greatly concerned that abandonment of a coordinated systems approach with high level coordination would result in the erosion and disintegration of the present structure.

(c) A system for continued evaluation of the various programs (enforcement/apprehension; prosecutor/judicial processing; and probation/rehabilitation services) has been established and integrated into the City's data processing system. Partial funding for evaluation costs under the federal ASAP contract has been provided for a twenty-three month period following June 30, 1977. The information produced by the evaluation team is and will be a valuable tool for refining the programs and assessing their effect and worthiness of continuation. As the federal program phases out, evaluation data should be reassessed in terms of City needs and a streamlined, fine-tuned evaluation program continued for the benefit of City management and the Council.

(d) One of the big surprises of the evaluation report was the fact that a home study course originally conceived simply as a control for evaluation purposes was as effective, at least so far as social drinkers were concerned, as more time consuming and involving workshop sessions. This may mean that when people are forced to read material in sufficient detail to answer the required questionnaires, they learn as much as they do in a classroom setting. Or, it may reflect the fact that most social drinkers who experience a DWI arrest are so chagrined by that arrest alone that they resolve not to take the chance that it may occur again. Whatever the basis, this finding suggests a very inexpensive alternative to court prosecution may be effective in a large number of cases, thus allowing the City's resources to be focused on those who are truly problem drinkers.

(e) While sociological studies indicate that a day in jail probably has little lasting effect on a problem drinker, current Phoenix reporting procedures are not able to Mayor Hance and Council Members Page 6 May 25, 1977

> produce information on recidivism rates for persons who do serve the mandatory day in jail. The Committee felt it would be very informative and provide better guidance to the Council if information on those persons could be integrated into the evaluation system so that a comparison of recidivism rates for those who receive that penalty with those who receive rehabilitative treatment would be possible.

It is now appropriate to consider some of the alternatives to continuing the PACT and other ASAP-type programs (specifically the increased emphasis on apprehension of DWI offenders and continued experimentation in development of more effective rehabilitation procedures). Four alternatives are suggested:

- Encouraging substitution of county-wide services for City services;
- 2. Lighter levels of enforcement;
- 3. A shift from rehabilitative toward criminally oriented judicial sanctions;
- 4. Abandonment of coordinated direction and seeing what happens.

Available Alternatives

1. Expansion of Program to County-Wide Coordination.

Since the problem of DWI offenders affects all of the cities in the metropolitan area and since many of the rehabilitative agencies are utilized by several municipalities, there are good reasons why at least some of the coordinative efforts previously centered in the Phoenix ASAP might be extended to the entire area served by the Maricopa Association of Governments (MAG). However, both the enforcement (offender apprehension) and judicial (prosecution and trial) phases of activity would, because of jurisdictional limitation, be retained by the various cities. The Citizens Committee feels that it would be worthwhile for the City staff to study further the possibilities of effecting economies of coordination and supplying of rehabilitative and guidance services by joining with other MAG municipalities in a combined program.

2. Lighter Levels of Enforcement (The Boston Approach).

Boston is a city with a density population close to that of Phoenix but compacted within 33 square miles. Its metropolitan area encompasses 2.3 million people. The average number of DWI arrests in Boston during 1969 to 1971 was 555 per year, which increased under the impetus of the Boston ASAP to 1,741 arrests in 1974. This compares with 8,295 in Phoenix in the same year and a current rate of 11,700 arrests per year. Perhaps the use of mass transportation rather than the automobile within the Boston city limits Mayor Hance and Council Members Page 7 May 25, 1977

accounts for this much lower level of arrests, but it would seem that the figures also reflect a very different attitude toward apprehension. Boston employs a diversionary program somewhat similar to the PACT program and now approximately 90% of arrested offenders enter some type of rehabilitation or educational program. These programs are self-sustaining in that the costs are charged to the offenders, as is essentially true in Phoenix.

<u>Comment</u>: Election of this alternative would mean that Phoenix would simply continue its present PACT program at a much lower level of activity (by relaxing the standards for apprehension of DWI offenders). While some economy of administrative costs might result, as indicated previously, a substantial diminution of general funds would also result. Likewise, if one accepts the philosophy that a DWI offense is a call for assistance, the majority of such calls would go unheeded until more serious consequences resulted.

3. A Stricter Type of Judicial System (The Cincinnati Approach).

While the in-city population of Cincinnati is approximately three-quarters of the Phoenix population, the metropolitan area has a higher population. The 1976 DOT Report contrasts the approaches of Phoenix and Cincinnati, indicating that in 1974 the conviction rate for DWI offenders in Cincinnati was 91% and that most judges routinely sentenced offenders to jail, even if the time was served after completing rehabilitation. However, DWI arrests in Cincinnati are again at a much lower level than Phoenix, with 3,742 in 1974 (the highest year) dropping to 2,483 in 1976. As in Phoenix, DWI offenders are diverted into education/ rehabilitation programs based upon a social drinker/problem drinker classification. The Cincinnati program is not entirely selfsustaining and receives support from city and state general funds.

<u>Comment</u>: Adoption of the stricter judicial concept would require substantial reeducation of the thinking of both Municipal and Superior Court judges, a substantially greater commitment to finance court and trial costs, or a substantial reduction in the level of enforcement with the same side effects mentioned earlier.

4. Allowing the Present Program to Wind Down.

The Citizens Committee feels that, unless a level of coordination is maintained among all departments involved in handling DWI offenders at a level of sufficient authority to implement programwide policies within each of the departments, and unless the person having such coordinating responsibility also is in charge of continuing development and refinement of procedures and selection of rehabilitation and educational methods, the present Phoenix program will gradually wind down as each department, seeing only its own problems, begins to supplant existing policies with Mayor Hance and Council Members Page 8 May 25, 1977

policies which may be inconsistent with the overall goals. Gradually, without coordinating discipline, the program would revert to much the same conditions that prevailed in 1973-74 prior to the introduction of PACT.

<u>Comment</u>: Obviously, the Committee feels that this is undesirable and it likewise is of the opinion that this would be uneconomic and result in inefficient utilization of prosecution staff, the Municipal Court and eventually, loss of general funds revenue.

Recommendations of the Citizens Committee

Based on the foregoing report and history of ASAP and PACT as they developed in Phoenix during the past several years, it is the recommendation of the Citizens Committee specifically that:

- 1. The City maintain the high level of enforcement already established. An ASAP Squad in its present form should be allowed to continue in enforcement procedures established initially. Based on the type of mobile society in which Phoenicians live, it is apparent that to cut back on the number of arrests would be to ignore people with serious drinking problems and could result in more serious consequences as discussed above. Accordingly, the Citizens Committee suggests that, whether there be a specific ASAP Squad or a rotating squad, said squad should concentrate its effort on DWI arrests. Additionally, a special educational training program for these police officers should be continued so that they can be aware of the types of behavior associated with a DWI offender as well as information regarding the overall program in Phoenix and how it works.
- 2. As noted above, the Citizens Committee further feels that, based on Phoenix ASAP and PACT's total effectiveness, the project should be extended to serve the entire metropolitan area (i.e., MAG), if possible.
- 3. The Citizens Committee recommends that Phoenix maintain the PACT program in its present form with emphasis on rehabilitation as opposed to requiring the one day in jail for first offenders. As noted above, adoption of the stricter judicial concept will require substantial reeducation of both the Municipal and Superior Court judges in Phoenix, a substantially greater commitment to finance court and trial costs, and a substantial increase in the numbers of cases prosecuted by the City Prosecutor's office, thereby increasing its already over-burdened case load. Accordingly, for first offenders with social drinking problems, the Citizens Committee recommends that the Home Study Course originally conceived simply as a control for the evaluation purposes be maintained and continue to be evaluated as to results.

Mayor Hance and Council Members Page 9 May 25, 1977

> Additionally, it is recommended that the other modalities of rehabilitation be retained for those people who fit into the categories of problem drinkers.

- As indicated above, the Citizens Committee feels that, 4. unless a level of coordination is maintained among all the departments involved in handling DWI offenders at a level of sufficient authority to implement program-wide policies within each of the departments, and unless a person having such coordinating responsibility also is in charge of continuing development and refinement of procedures and selection of rehabilitation educational methods, the present Phoenix program will gradually wind down. Accordingly, the Citizens Committee recommends that this type of coordination be maintained in the above discussed In this way, there can be cooperation fostered manner. between the different agencies who all need to work together to make the program successful.
- 5. As mentioned above, the Citizens Committee recommends the continuance of a public information specialist.
- 6. Although the evaluation period will continue twenty-three months following June 30, 1977, as the Federal program phases out, evaluation data should be re-assessed continually in terms of the City's needs. As part of the evaluation, it would be beneficial and therefore the Committee recommends that data regarding the person spending the day in jail and its effects on rehabilitation and recidivism rates be compared to those who receive only rehabilitative treatment.

This, then, concludes the work of the Citizens Alcohol Safety Advisory Committee. This has been a hard working committee which I feel has become unusually well-informed on the intricacies of an extremely involved City activity. I believe that I speak for the entire group in saying that this has been a most challenging and gratifying experience because the nature of the DWI problem is so complex.

Very_truly yours, Marine Haude

Marriner P. Cardon, Chairman Citizens Alcohol Safety Advisory Committee

.8. INDEX OF PROJECT REPORTS

8.1 OVERVIEW

Listed below are all reports submitted by the Project to the Department of Transportation from 1971 to 1977, inclusive. Reports are included in one of four categories (quarterly, annual, survey, miscellaneous). Within categories, reports are listed in approximate chronological order, based on date of submission.

8.2 QUARTERLY REPORTS

First Quarterly Report	October 14, 1971
Third Quarterly Report (January through March, 1972)	April 15, 1972
Data Supplement to the First Quarterly Report	May 1, 1972
Quarterly Report, April through June, 1972	July 15, 1972
Quarterly Report, July through September, 1972	October 30, 1972
Report on Evaluation of the Phoenix Alcohol Safety Action Project for Third Quarter, 1972	January 25, 1973
Quarterly Report, October through December, 1972	January 31, 1973
Report on Evaluation of the Phoenix Alcohol Safety Action Project Fourth Quarter, 1972	April 30, 1973
Quarterly Report, January through March, 1973	April 30, 1973
Quarterly Report, April through June, 1973	July 30, 1973
Quarterly Report, July through September, 1973	October 30, 1973
Quarterly Report, October through December, 1973	January 31, 1974

Quarterly Report, January through March, 1974 Quarterly Report, April through June, 1974 Quarterly Report, July through September, 1974 Quarterly Report, October through December, 1974 Quarterly Report, January through March, 1975 Quarterly Report, April through June, 1975 Quarterly Report, July through September, 1975 Quarterly Report, October through December, 1975 Quarterly Report, January through March, 1976 Quarterly Report, April through June, 1976 Quarterly Report, July through

8.3 ANNUAL REPORTS

September, 1976

Annual Report 1972 (Includes Appendix "H" Data Tables) Apri

- 1972 Analytic Study I: An Analysis of Ultimate Performance Measures to Determine Total Project Impact
- 1972 Analytic Study II: An Analysis of BAL Data for Drivers Fatally Injured
- 1972 Analytic Study III: An Analysis of ASAP Patrol Activity
- 1972 Analytic Study IV: An Analysis of the Judicial Disposition of Alcohol Related Traffic Arrests

April 30, 1974

July 30, 1974

October 30, 1974

February 28, 1975

April 30, 1975

July 30, 1975

November 14, 1975

January 30, 1976

April 30, 1976

June 30, 1976

October 31, 1976

April 30, 1973

April 30, 1973

April 30, 1973

May 30, 1973

May 30, 1973

1972 Analytic Study V: An Analysis of Problem Drinker Diagnosis and Referral Activity	July 30, 1973
1972 Analytic Study VI: An Analysis of Alcohol Safety Schools (Phoenix Driving- While-Intoxicated Course)	July 30, 1973
Annual Report 1973, Section I: Overall ASAP Progress	September 30, 1974
1973 Analytic Study I: An Analysis of Ultimate Performance Measures to Determine Total Project Impact	May 30, 1974
1973 Analytic Study III: An Analysis of ASAP Patrol Activity	May 30, 1974
1973 Analytic Study IV: An Analysis of Judicial Operations	May 30, 1974
1973 Analytic Study V: An Analysis of Drinker Diagnosis and Referral Activity	May 30, 1974
1973 Analytic Study VI: An Analysis of Alcohol Rehabilitation Efforts	October 31, 1974
1973 In-Depth Countermeasure Report on Selected Countermeasures Not Covered Separately in Analytic Studies	July 15, 1974
Appendix "H" Evaluation Data Tables for 1973, By Quarter	April 30, 1974 Revised July, 1974
Annual Report 1974, Section I Overall ASAP Progress	December 15, 1975
Annual Report 1974, Section II Analytic Study I: An Analysis of Total Project Impact	July 30, 1975
Annual Report 1974, Section II Analytic Study III: An Analysis of ASAP Patrol Activity	August 30, 1975
Annual Report 1974, Section II Analytic Study IV: An Analysis of Judicial System Performance	November 28, 1975
Annual Report 1974, Section II Analytic Studies V and VI: Analyses of Drinker Diagnosis and Referral Activity and Alcohol Rehabilitation Efforts	October 31, 1975

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Annual Report 1974, Section III Appendix "H" Data Tables August 15, 1975 Annual Report 1975, Section I Overall ASAP Progress November 30, 1976 Annual Report 1975 Technical Summary November 30, 1976 Annual Report 1975, Section II Analytic Study I: An Analysis of Total Project Impact August 20, 1976 Annual Report 1975, Section II Analytic Study III: An Analysis of ASAP Patrol Activity September 30, 1976 Annual Report 1975, Section II Analytic Study IV: An Analysis of Judicial System Performance November 15, 1976 Annual Report 1975, Section II Analytic Study VI: Analyses of Drinker Diagnosis and Referral Activity and Alcohol Rehabilitation Efforts August 13, 1976 (Preliminary Submission) Annual Report 1975, Section II Analytic Study VI: Analyses of Drinker Diagnosis and Referral Activity and Alcohol Rehabilitation Efforts (Final Submission) November 30, 1976 Annual Report 1975, Section III Appendix "H" Data Tables April 30, 1976 Final Report, Section I June, 1977 Overall ASAP Progress (Submitted October, 1977) Final Report, Section II Analytic Study I: An Analysis of Total Project Impact June, 1977 Final Report, Section II Analytic Study III: An Analysis of DWI Enforcement Activity. June, 1977 Final Report, Section II Analytic Study IV: An Analysis of June, 1977 Judicial System Performance (Submitted August, 1977) Final Report, Section II Analytic Study VI: An Analysis of Drinker Diagnosis, Referral and June, 1977 Rehabilitation Activity (Submitted August, 1977)

Final Bonort Contion II	
Final Report, Section II Analytic Study VII: An Analysis of Public Information and Education Activity	June, 1977
Final Report, Section III Appendix "H" Data Tables	April, 197,
8.4 SURVEY REPORTS	
A Survey of Attitudes in Phoenix Relating to Problems Involving Alcohol and Drinking Drivers (First Household Survey)	December, 1971
A Knowledge and Opinion Survey of Phoenix High School Students About Drinking and Driving	April, 1973
A Survey of Attitudes in Phoenix Relating to Problems Involving Alcohol and Drinking Drivers (Second Household Survey)	June, 1973
A Survey of Attitudes in Phoenix Relating to Problems Involving Alcohol and Drinking Drivers (Third Household Survey)	June, 1974
A Survey of Attitudes in Phoenix Relating to Problems Involving Alcohol and Drinking Drivers (Fourth Household Survey)	July, 1975
Final Report, City of Phoenix Alcohol Safety Action Project Telephone Survey (#1)	June 30, 1975
Impact of the Alcohol Safety Action Project Holiday Campaign: "Friends Don't Let Friends Drive Drunk"	February, 1976
Final Report, City of Phoenix Alcohol Safety Action Project Telephone Survey (#2)	July 31, 1976
8.5 MISCELLANEOUS REPORTS	
Baseline Tables, Phoenix Alcohol Safety Action Project	February 20, 1973
Revised Appendix "H" Evaluation Data Tables 3A-3H, 4 and 5, 1969-1974	May 30, 1975
A Description and Analysis of DWI School Counselor Activities	June 30, 1974

9. STATISTICAL DATA

A. Annual Table of Project Financial and Personnel Data

Year EndingDecember 31, 1976

Project Phoenix

					Expenditures incurred							
		Personnel		Federal		Ci	City		deral	City		
	Reporting Year		Reporting Year		Report	ing Year	Cumulat	ive Total	Cumulat	ive Total		
Countermeasures	Profes Planned	ssional Actual	Cle Planned	rical Actual	Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual
PROJECT TOTAL	39.3	38.2	19.3	18.7	495,937	463,595	822,756	794,978	3,066,818	3,028,918	1,908,983	1,881,785
Direct Labor					374,817	359,383	530,025	527,109	2,286,594	2,270,581	1,306,809	1,304.420
Direct Material	T	\geq			20,380	19,401	10,318	7,350	119,763	116,044	24,814	21,393
Telephone					2,750	2,389	5,732	5,943	18,834	18,472	11,193	11,404
Equipment					0	113	750	872	108,041	108,040	13,216	13,338
Travel	1	/	\sim		6,144	5,889	266	485	42,245	41,941	547	766
Other Direct Costs					91,846	76,420	275,665	253,219	491,341	473,840	552,404	530,464
MANAGEMENT	1.5	1.5	1.0	1.0	58,653	56,070	6,000	6,000	416,155	413,464	10,250	10,250
Direct Labor					49,417	49,292	0	0	340,317	340,099	. 0	0
Direct Material	T	$\overline{}$			2,270	1,512	0	0	11,779	11,034	0	0
Telephone	1				2,750	2,389	0	0.	11,305	10,943	0	0
Equipment	1		$\overline{}$		0	0	0	0	2,524	2,525	, o	0
Travel					1,800	762	0	0	14,076	13,037	0	· 0
Other Direct Costs		·			2,416	2,115	6,000	6,000	·36,154	35,826	10,250	10,250
EVALUATION	6.3	5.9	2.0	2.0	186,289	171,293	266	265	584,121	568,387	5,803	5,802
Direct Labor					108,640	103,602	0	0	331,412	325,963	5,258	5,258
Direct Material					5,385	3,986	0	0	11,103	9,682	0	0
Telephone					0	0	0	0	0	0	0	0
Equipment					0	113	0	0	3,878	3.876	0	0
Travel					2,234	4,224	266	265	6,539	8,492	545	. 544
Other Direct Costs					70,030	59,368	0	0	231,189	220,374	0	0
ENFORCEMENT	12.0	12.0	0	0	0	0	253,547	253,547	520,256	520,256	660,539	660,539
Direct Labor	\sim	_			0	0	213,745	213,745	375,327	375,327	562,860	562,860
Direct Material					0	0	0	0	28,168	28,168	0	0
Telephone			$\overline{}$		0	0	0	0	0	0	0	0
Equipment					0	0	0	0	89,411	89,411	0	. 0
Travel		/			0	0	0	0	1,970	1,970	0	0 /
Other Direct Costs	\sim	/			0 .	0	39,802	39,802	25,380	25,380	97,679	97,679
JUDICIAL	12.0	11.3	12.0	11.9	147,258	140,146	241,419	241,419	887,698	880,531	582,258	582,258
Direct Labor					145,404	138,715	237,696	237,696	821,403	· 814,663	560,219	560,219
Direct Material	``				380	731	568	568	4,694	5,042	4,811	4,811
Telephone	1	$\overline{}$	$\overline{}$		0	0	2,232	2,232	5,476	. 5,476	6,359	6,359
Equipment]		$\overline{}$		0	0	0	0	9,396	9,396	8,246	· 8,246
Travel	<u> </u>	/	$\overline{}$		360	125	0	0	1,948	1,712	2	2
Other Direct Costs			`		1,114	575	923	923	44,781	44,242	2,621	2,621

										_
REHABILITATION	6.5 6.5	4.3 3.8	56,479	52,456	321,524	293,747	446,156	441,843	650,133	622,936
Direct Labor	+		54,298	50,999	78,584	75,668	345,909	342,587	178,472	176,083
Direct Material			0	0	9,.750	6,782	3,323	3,323	20,003	16,582
Telephone			0	0	3,500	3,711	2,053	2,053	4,834	5,045
Equipment			0	0	750	872	572	572	4,970	5,092
Travel			1,000	428	0	220	12,934	12,353	0	220
Other Direct Costs			1,181	1,029	228,940	206,494	81,365	80,955	441,854	419,914
PUBLIC INFORMATION	1.0 1.0	0 0	47,258	43,630	0	0	212,432	204,437	0	0
Direct Labor			17,058	16,775	0	0	72,226	71,942	0	0
_Direct Material			12,345	13,172	0	· 0	60,696	58,795	0	0
	-+		0	0	0	0	0	0	0	0
Telephone			0	0	0	0	2,260	2,260	0	0
Equipment			750	350	0	0.	4,778	4,377	0	0
.Travel			17,105	13,333	0	0	72,472	67,063	· · · · · · · · · · · · · · · · · · ·	0
Other Direct Costs			17,105	13,333	·	· · · · ·	ļ	L	• • • • • • •	• • • • • • • • • • • • • • • • • • • •

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Note: Plan is Detailed Plan Revision 9.

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9. STATISTICAL DATA

A. Annual Table of Project Financial and Personnel Data

Project<u>Phoenix</u> Year Ending<u>December 31, 1977</u>

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	Personnel	Federal		City		Federal		City	
Countermeasures	Reporting Year - Professional Clerical	Reporti	ing Year	Report	ing Year	Cumulat	ive Total	Cumulati	ve Total
countermeasures	Professional Clerical Planned Actual Planned Actual	Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual
PROJECT TOTAL	4.9 NA 2.1 NA	145,466	NA	23,622	NA	3,174,567	NA	1,905.407	NA
Direct Labor		97,016	NA	12,082	NA	2,367,599	NA	1,316,502	NA
Direct Material		6,980	NA	250	NA	123,200	. NA	21,643	NA
Telephone		1,595	NA	220	NA	20,067	NA	11,624	NA
Equipment		· 0	NA	0	NA	108,040	NA	13,338	NA
Travel		4,020	NA	20	NA	45,962	NA	786	NA
Other Direct Costs		35,855	NA	11,050	NÅ	509,699	NA	541,514	NA
MANAGEMENT	.8 NA .5 NA	29,877	NA	3,000	NA	443,341	NA	13,250	NA
Direct Labor		25,872	NA	. 0	NA .	365,971	NA	0.	NA
Direct Material		1,550	NA	o	NA	12,584	NA	0	NA
Telephone		1,375	NA	0	NA	12,318	NA	0	NA
Equipment		0	NA	0	NA	2,525	NA	.0	NA
Travel		600	NA	0	NA	13,637	NA	0	. NA
Other Direct Costs		480	NA	3,000	NA	36,306	NA	13,250	NA
VALUATION	4.1 NA 1.6 NA	113,689	NA	20,622	NA	682,076	NA	26,424	NA
Direct Labor		69,244	NA	12,082	NA	395,207	NA	17,340	' NA
Direct Material		5,430	NA	250	NA	15,112	NA	250	NA
Telephone		220	NA	220	NA	220	NA		NA
Equipment		0	NA	0	NA	3,876	NA	0	NA
Travel		3,420	NA	20	NA	11,912	NA	564	NA
Other Direct Costs		35,375	NA	8,050	NA	255,749	NA	8,050	NA
IFORCEMENT	<u> </u>	0	0	· 0	0	520,256	520,256	660,539	660,5
Direct Labor		0	0	0	0	375,327	375,327	562,860	562.8
Direct Material		0	0	0	0	28,168	28,168	· 0	
Telephone		0	0	0	0	0	. 0	0	
Squipment		0	0	0	. 0	89,411	89,411	0	
fravel		0	0	0	0	1,970	1,970	0	
ther Direct Costs		0	0	0	0	25,380	25,380	97,679	97,6
DICIAL	0 0 .2 NA	1,900	NA	· 0	. 0	882,435	NA	582,258	582,2
irect Labor		1,900	NA	0	0	816,565	NA	560,219	560,2
irect Material		0	0	0	0	5,044	5,042	4,811	4,8
elephone		0	0	0	0	5,476	. 5, 476	6,359	6,3
quipment		0	0	0	0	9,396	9,396	8,246	8,2
ravel		0	0	0	0	1,712	1,712	2	
ther Direct Costs		. 0	0	0	0	44,242	44,242	2,621	2,62

REHABILITATION	0 0 0 0	0	0	0	o	441,843	441,843	622,936	622,936
Direct Labor		0	0	0	0	342,587	342,587	176,083	176,083
Direct Material		0	0	0	0	3,323	3, 323	16,582	16,582
Telephone		0	0	0	0	2,053	2,053	5,045	5,045
Equipment		0	0	0	0	• 572	57.2	5,092	5,092
Travel		0	0	0	0	12,353	12,353	220	220
Other Direct Costs		0	0	0	0	80,955	80,955	419,914	419,914
PUBLIC INFORMATION	0 0 0 0	0	0	0	0	204,616	204,437	0	0
Direct Labor		0	0	0	0	71,942	71,942	0	0
Direct Material		0	0	0	0	58,969	58,795	0	0
Telephone		0	0	0	0	0	0	0	0
Equipment		0	0	0	0	2,260	2,260	0	0
Travel		0	0	0	0	4,378 [.]	4,377	0	0
Other Direct Costs		0	0	0	0	67,067	67,063	0	0

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- Note: Plan is Detailed Plan Revision 10.
 (a) Personnel based on 12 months Management is 1.5 Professional and 1.0 Clerical for six months ending June 30, 1977 Evaluation is 5.8 Professional and 2.0 Clerical for six months ending June 30, 1977; 3.5 Professional and 1.0 Clerical during July and August, 1977; 2.0 Professional and 1.0 Clerical thereafter.
 (b) Calendar 1977 represents one clerical employee in Prosecutor's office funded at 80% during January, February, March, 1977 to provide 1976 concluded case information for evaluation use.
 NA: Not applicable.

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9. STATISTICAL DATA

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Project<u>Phoenix</u> Year Ending December 31, 1978

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A. Annual Table of Project Financial and Personnel Data

					<u> </u>			Expenditu	res incurred	······································		
	1	Pers	onnel	Fede	eral	Ci	City		Federal		City	
	Reporting Year				Reporting Year		Reporting Year		Cumulative Total		Cumulative Total	
Countermeasures	Profe Planned	ssional Actual	Cle: Planned	ical Actual	Planned	Actual	Planned	Actual	Planned	Actual	Planned	<u>Actual</u>
PROJECT TOTAL	2.0	NA	1.0	NA	42,946	NA	40,783	NA	3,217,513	. NA	1,946,190	NA
Direct Labor		L			28,721	NA	25,558	NA	2,396,320	NA	1,342,060	NA
Direct Material					1,000	NA	450	NA	124,200	NA	22,093	NA
Telephone					450	NA	450	NA	20,517	NA	12,074	NA-
Equipment					0	NA	0	NA	108,040	NA	13,338	NA
Travel					50	NA	50	NA	46,012	NA	836	NA
Other Direct Costs				\searrow	12,725	NA .	14,275	NA	522,424	NA	555,789	NA
MANAGEMENT	0	0	0	0	0	0	0	.0	443,341	NA	13,250	NA
Direct Labor					Ö	0	-0	0	365,971	NA	0	NA
Direct Material					0	0	0	0 [°]	12,584	NA	0	NA
Telephone					0	0	0	· 0	12,318	NA	0	NA
Equipment					0	0	0	0	2,525	NA	.0	NA
Travel					. 0	0	0	0	13,637	NA	0	NA
Other Direct Costs					0	0	0	0	36,306	NA	13,250	NA
EVALUATION	2.0	NA	1.0	NZA	42,946	NA.	40,783	•NA	725,022	NA	67,207	NA
					28,721	NA -	25,558	NA	423,928	· NA	42,898	NA
Direct Material					1,000	NA	450	NA	16,112	NA	700	NA
Telephone					450	NA	450	NA	670	· NA	670	NA
Equipment					0	NA	0	NA	3,876	NA	· 0	NA
Travel					. 50	NA	50	NA	. 11,962	NA	614	NA
Other Direct Costs				$\overline{\nabla}$	12,725	NA	14,275	NA	268,474	NA	22,325	NA
ENFORCEMENT	0	0	0	0	0	0	0	0	520,256	520,256	660,539	660,539
Direct Labor					0	0	0	0	375,327	375,327	562,860	562,860
	1				. 0	0	0	0	28,168	28,168	0	. 0
<u>Direct Material</u>					0	0	0	0	0	0	ő	0
Telephone					0	0	. 0	0	89,411	89,411	0.	0
Equipment	- <u>+</u>			1	0	0	0	0	1,970	1,970	0	0
<u>Travel</u>	+ - >	r		\sim	0	0	0	0	25,380	25,380	97,679	97,679
Other Direct Costs	0	0	0		0	- 0	0	0	882,435	NA	582,258	582,258
· · · · · · · · · · · · · · · · · · ·			1		0	0	0	0	816,565	NA	560,219	560,219
<u>Direct Labor</u> Direct Material	1				0	0	0	0	5,044	5,042	4,811	4,811
	1.				. 0	ò ·	0	0	5,476	5,476	6,359	6,359
Equipment	1				0	0	0	0	9,396	9,396	8,246	8,246
Travel				1	. 0	0	0	0	1,712	1,712	2	2
Other Direct Costs	\top		1	\wedge		0	· 0	0	44,242	44,242	2,621	2,621
Uther Direct Costs		· · · · · ·			- -	V						

REHABILITATION	0	o.	0	0	0	0	0	0	441,843	441,843	622,936	622,936
Direct Labor					0	0	0	0	342,587	342,587	176,083	176,083
Direct Material					0	0	0	0	3,323	3,323	16,582	16,582
Telephone		$ \rightarrow $	<		0	0	0	0	2,053	2,053	5,045	5,045
Equipment					0	0	0	0	572	572	5,092	5,092
Travel					0	0	0	0 .	12,353	12,353	220	220
Other Direct Costs				\searrow	0	0	0	0	80,955	80,955	419,914	419,914
PUBLIC INFORMATION	· 0	0 -	0	0	0	0	0	· 0	204,616	204,437	0	0
Direct Labor		L			0	0	0	0	71,942	71,942	0	. 0
Direct Material					0	0	0	0	58,969	58,795	0	0
Telephone					0	0	0	0	0	0	0	0
Equipment	_				0	.0	0	0	2,260	2,260	0	0
Travel /			/		0	0	0	0	4,378	4,377	0	0
Other Direct Costs				\sim	0	0	0	0	67,067	67,063	0	0

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9. STATISTICAL DATA

Project<u>Phoenix</u> Year Ending<u>May</u> 31, 1979

A. Annual Table of Project Financial and Personnel Data

		<u></u>			Expenditu	res incurred			
	Personnel	Fede	eral	C	ity	Fe	deral	Cit	У
	Reporting Year	Reporti	ing Year	Report	ing Year	Cumulat	ive Total	Cumulati	ve Total
Countermeasures	Professional Clerical Planned Actual Planned Actual	Planned	Actual	Planned	Actual	Planned	<u>Actual</u>	Planned	Actual
PROJECT TOTAL	.8 NA .4 NA	17,961	NA	18,462	NA	3,235,474	NA	1,964,652	
Direct Labor		12,816	NA	11.542	NA	2,409,136	NA	1,353,602	
Direct Material		840	NA	240	NA	125,040	NA	22,333	NA
Telephone		200	NA	200	NA	20,717	NA	12.274	NA
Equipment		0	NA	0	NA	108,040	NA	13.338	NA
Travel		15	NA	15	NA	46,027	NA	851	NA
Other Direct Costs		4,090	NA	6,465	NA	526,514	NA	562.254	NA
MANAGEMENT	0 0 0 0	0	0	0	0	443,341	NA	13.250	NA
Direct Labor		0	0	0	0	365,971	NA	0	NA
Direct Material		. 0	0	. 0	0	12,584	NA	0	NA
Telephone		0	0	0	0	12,318	NA	0	NA
Equipment		0	0	0	0	2,525	NA	0	NA
_Travel		0	0	0	0	13,637	NA	0	NA
Other Direct Costs		0	0	0	o	36,306	NA	13,250	NA
EVALUATION	.8 (a) NA .4 (a) NA	17,961	NA	18,462	NA	742,983	NA	85,669	NA
Direct Labor		12,816	NA	11,542	NA .	436,744	NA	54,440	NA
Direct Material		840	NA	240	NA	16,952	NA	940	NA
Telephone		200	NA	200	NA	870	NA	870	NA
Equipment			NA	0	NA	3,876	NA	0	NA
Travel		15 .	NA	15	NA	11,977	NA	629	NA
Other Direct Costs		4,090	NA	6,465	NA	272,564	NA	28,790	NA
ENFORCEMENT	0 0 0		0	0	0	520,256	520,256	660,539	660,539
Direct Labor		0	0	0	0	375,327	375,327	562,860	562,860
Direct Material		0	0	0	0	28,168	28,168	0	0
Telephone		0	0	0	0	0	0	· 0	. 0
Equipment		0	0	0	0	89,411	89,411	0	0
Travel		0	0	0	0	1,970	1,970	0	0
Other Direct Costs		0	0	0	0	25,380	25,380	97,679	97,679
JUDICIAL	0 0 0 0	0	0	. 0	0	882,435	NA	582,258	582,258
Direct Labor		0	0	0	0	816,565	NA	560,219	560,219
Direct Material		. 0	0	0	0	5,044	5,042	4,811	4,811
Telephone		0	0	0	0	5,476	5,476	6,359	6,359
Equipment		0	0	0	0	9,396	9,396	8,246	8,246
Travel		0	0	0	o'	1,712	1,712	2	2
Other Direct Costs		0	0	0	0	44,242	44,242	2,621	. 2,621

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REHABILITATION		0	0	0	0	441,843	441,843	622,936	622,936
Direct Labor		0	0	0	0	342,587	342,587	176,083	176,083
Direct Material		0	0	0	0	3,323	3,323	16,582	16,582
Telephone		0	· 0	0	0	2,053	2,053	5,045	5,045
Equipment		0	0	0	0	572	572	5,092	5,092
Travel		0	0	0	0	12,353	12,353	220	220
Other Direct Costs		0	0	0	0	80,955	80,955	419,914	419,914
PUBLIC INFORMATION	· 0 0 0 0	0	o	0	0	204,616	204,437	0	0.
Direct Labor		0	0	0	0	71,942	71,942	0	0
Direct Material		0	0	0	0	58,969	58,7 9 5	0	0
Telephone		0	0	0	0	0	0	0	0
Equipment		0	0	0	0	2,260	2,260	0	0
Travel		0	0	0	0	4,378	4,377	0	0
Other Direct Costs		0	0	0	0	67,067	67,063	0	0

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Note: (a) Personnel based on 12 months. Plan is for 2.0 Professional and 1.0 Clerical for five months.

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Appendix Glossary of Abbreviations

AA	Alcoholics Anonymous					
A/R	Alcohol-Related					
ARS	Arizona Revised Statutes					
ASAP	Alcohol Safety Action Project					
BAC	Blood Alcohol Concentration					
CIP	Crisis Intervention Program					
CORAZON	Culture Oriented Recovery Association of Arizona					
СТМ	Contract Technical Manager (NHTSA Region IX, San Francisco)					
DCI	Data Collection I					
DCII	Data Collection II					
DOT	United States Department of Transportation					
DPS	Arizona Department of Public Safety (Highway Patrol)					
DRB	Diagnostic Review Board					
DRI	Diagnosis and Referral Interview (Name changed to Special Assessment Referral, SAR, in 1977)					
DWI	Driving while under the Influence of Alcohol					
FAIM	Family Alcohol Information Meetings					
GCI	Gas Chromatograph Intoximeter					
HS	Home Study Course					
КЕҮ	"Keep the Emphasis on You" therapy for recidivists (Name changed to Comprehensive Alcohol Program, CAP, in 1977)					
LARC	Local Alcoholism Reception Center					

- LEAP Leadership and Education for the Advancement of Phoenix (City's anti-poverty agency)
- MIS Management Information Systems (City's computer center)
- NHTSA National Highway Traffic Safety Administration (DOT)
- NIAAA National Institute on Alcohol Abuse and Alcoholism
- ODPP Office of Driver and Pedestrian Programs (NHTSA)
- PAC Phoenix Alcoholism Consortium
- PACT Prosecution Alternative to Court Trial
- PCS PACT Court Session
- PDC Pre-trial Disposition Conference
- PI&E Public Information and Education
- PM Program Monitor (from ODPP, Washington, D.C.)
- PMT Power Motivation Training
- PSA Public Service Announcement
- PSI Pre-Sentence Investigation
- PW DWI Prevention Workshops
- R-P Rehabilitation-Probation Center
- SPSS Statistical Package for the Social Sciences
- STR Short-Term Rehabilitation study
- STRIP Short-Term Rehabilitation in Phoenix study
- TRAGYC Traffic Representatives of Arizona's Governor Youth Council
- TW DWI Therapy Workshops

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