Essentially, detoxification centers provide withdrawal from alcoholism under medical supervision and with minimum risk of death to the patient during the withdrawal period. They are designed to replace the hit or miss searching by concerned friends and relatives for a health facility which will accept alcoholics or the potentially dangerous "drunk tank" in jails, which may or may not provide any medical supervision, and invariably has minimal facilities for treatment of the physical symptoms of alcoholic withdrawal. Although a few detoxification centers in the United States and abroad have reported some effort at beginning rehabilitation of patients, their prime function is not long-term treatment of alcoholism. They are a way of returning the patient to a physical condition which allows him to be free from the dangers of withdrawal from acute

Half-way houses, on the other hand, are temporary residential facilities which provide a "substitute family for the person in the course of his treatment. . . transitional facility provides a peer group experience for the individual to learn how to live without the help of chemical crutches." See Appendix B for description of a model half-way house.

After a detoxification period, some patients with alcoholism find they are unable to benefit from treatment unless their environment is conducive to it. Since they may have failed to develop a sense of community orientation, or through their alcoholism may have lost this sense, they need the reassurance of an orderly

existence among congenial persons who have the same problems.

A half-way house can serve as a bridge between the disorienttaion of late-stage alcoholism, and the ability to lead a normal life characteristic of the majority of Americans. A half-way house is not usually thought of as a custodial institution. Its residents are encouraged to find work as soon as they are able to do so, and they henceforth pay for their room and board. The goal of the half-way house is to enable its residents to take their place in the community as self-respecting and self-supporting individuals, free of their disease.

Half-way houses are heartily endorsed by the National Council on Alcoholism as a means of providing help to homeless alcoholics. It should be pointed out, however, that the homeless alcoholic represents no more than 10% of the total number of alcoholics in the United States. Hence the provision of half-way houses, while eminently desirable, does not in any sense deal with the entire population

affected by alcoholism.

Detoxification centers also are endorsed without qualification by the National Council on Alcoholism. These facilities would provide emergency treatment for alcoholics in the acute stages of withdrawal from alcoholism regardless of economic status. They will do much to close the gap which exists between emergency facilities available to alcoholics and the number of alcoholics requiring such facilities. We would find it highly desirable for the legislation to specifically mention the construction, maintenance, staffing and operation of detoxification facilities under the provision of HR 15758 Title III, Part A.

ALCOHOLISM AND COMMUNITY MENTAL HEALTH CENTERS

The U.S. Department of Health, Education and Welfare, National Institute of Mental Health, has published an excellent pamphlet entitled "The Community Mental Health Center and Alcoholism Programs." It is felt that this pamphlet is so concise and well presented that an appropriate quotation will be adequate to cover this question of the Committee. There follows a section of the pamphlet which sketches the various ways that alcoholism programs may be meshed into the community mental health centers:

'Complete 'integration' of alcoholism services with other activities of the mental health center. Under such an arrangement all services of the center are open to problem drinkers with no special arrangements made for their care. This presupposes that staff are adequately trained and well motivated to work

effectively with these patients.

"Special alcoholism services or 'units' within the mental health center. Under this arrangement services for persons with drinking problems are physically located within the center's facilities and the alcoholism staff is administratively responsible to the director of the center.

"Special alcoholism services or 'units' as an administrative part of the mental health center program but not physically located in the center's facilities. Under this plan, overall program direction is the responsibility of the center's director.