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Pittman & Gordon: Revolving Door. A Study of the Chronic Police Case Inebriate

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The enforcement and administration of criminal law is often portrayed as a momentous battle in which forces of law and order are pitched against crafty and ruthless underworld figures. Police are trained as "gang busters" who, with tight lipped efficiency, construct "dragnets" through which even the most artful underworld fish cannot slip. These are the police shown in movies, television, the popular press. Real life station-house activities are less dramatic. Most bookings are for violation of the motor vehicle laws. Next come arrests for public intoxication or drunkenness. According to this useful study of the "Chronic Police Case Inebriate," arrests for public intoxication or so-called "disorderly conduct" in 1955 totaled over 100,000 in Los Angeles, over 50,000 in Chicago, and around 40,000 in the District of Columbia.1 Furthermore, public intoxication is not only a frequent arrest category, it is also a frequent conviction category, one which provides county or short-term penal institutions with a large number of incarcerated offenders. In the institution studied by the authors, the Monroe County State Penitentiary, which receives offenders from thirteen western New York counties, seventy per cent of the 1,919 inmates who entered in 1954 were charged with public intoxication.2 That report comes from apple-growing country. Further south and east, in wealthy Westchester County, the local state penitentiary reports a lower but still impressively high figure. Of its total of 1,559 commitments in 1954, forty-four per cent were for public intoxication.3 This latter report does not, however, include offenses closely associated with excessive drinking, such as disorderly conduct, vagrancy, or aggravated assault, to say nothing of offenses like sodomy which may be accompanied, if not precipitated, by drinking. The chronic police-case inebriate is a national phenomenon, a problem for the wealthiest counties as well as for the poorest, for the urban (and urbane) as well as for the rural.

Pittman and Gordon set themselves the task of describing this phenomenon, socially, behaviorally, developmentally, interactionally.

Socially, they find that the chronic police-case inebriate is middle-aged or older, probably Irish or Negro, as likely to be from a rural as an urban background, currently unattached to a female (although fifty-nine per cent had been married), a worker, usually unskilled, equally likely to be Catholic or Protestant (if affiliated with any religion), and in most cases of a lower social class. His criminal history reveals previous arrests either for public intoxication, or for additional charges ordinarily related to the use of beverage alcohol, or for serious criminal violations. The frequency of serious violations (for those with such a history) sloughs off after age thirty-five or forty, the offender

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1. P. 2.
2. Ibid.
3. Ibid.
generally settling down to a steady pattern of arrests for public intoxication. His propensities toward drinking apparently operate as a rather odd but nevertheless effective social control on aggressive criminal behavior.  

Two interesting behavioral findings distinguish these men from the middle-class alcoholic, the kind with whom the Alcoholics Anonymous approach works effectively. Eighty per cent have had some experience living in institutions, a finding which supports the psychoanalytic theory of dependency to explain alcoholism, and which also suggests that a man who gets himself arrested sixty or seventy times has found a home in the jailhouse—reeking and vermin-infested perhaps, but nevertheless a home. No courtroom harangue is going to starch the moral fibre of this character and put him on the sober path to loneliness and rejection. The unconscious motives of the chronic police-case inebriate are more powerful than the conscious homilies of judicial straightener-outers.  

The second finding springs from the first. A chronic police-case inebriate does his drinking in groups, as contrasted with the middle-class alcoholic, the A.A. candidate, who drinks alone. Contrary to popular supposition, Alcoholics Anonymous is relatively ineffective with police-case inebriates or, more to the point, lower-social-class inebriates. Talk to a prison administrator who runs an A.A. program, and if he is forthright he will inform you (usually with a look of bemused exasperation) that A.A. is largely ineffectual in rehabilitating his alcoholics, although they attend meetings because attendance looks good to the parole board. Police drunks find emotional support and reinforcement in the “bottle gang,” the drinking group, not in the sober confessional of the middle-class A.A. world (an exercise which probably appears to the “mission-stiff” as a replica of Salvation Army evangelism—in his eyes a ritualized exchange of pretended spiritual redemption for institutional bed and board).  

A self-respecting, lower-class, skid-row type is not likely to fall for the “power-greater-than-yourself” tenet of Alcoholics Anonymous. He’s heard it all or something akin to it at “Sally” (Salvation Army) revivals, and there, at least, he was among his own friends. The middle-class alcoholic, on the other hand, even when on Skid Row, doesn’t “connect” emotionally with the others. Consequently he is able to benefit by redemption or by rehabilitation into the inviting structure of middle-class ideology. The police drunk does not relate to the middle-class identifications, demands and expectations built into the A.A. formula. He is not willing, nor even able, to defer gratifications for a good job and dry Saturday night bridge games followed by doughnuts and coffee. He cannot be rehabilitated because he was not “habilitated” in the first place. As the authors make clear in describing his development, he is “undersocialized.”

7. For a particularly incisive discussion of “skid row” subculture and its effects, see Rubington, The Chronic Drunkenness Offender, 315 ANNALS 65 (1958).
By this term they mean to indicate that, as regards social development, chronic police-case inebriates have not experienced the quality of family and community relationships that anybody reading this review has (and that most A.A.'s have as well). Their childhood history is marked by parental death, separation, divorce or desertion. They lack social skills in dealing with others, skills that are learned in the family and other close primary-group associations. These skills, these perceptions of how to deal with other persons, of how to handle personal feelings, to channel, enlarge and turn them to socially acceptable creativity, these exemplify the meaning of socialization, and these are what the police inebriate has not learned. He cannot be rehabilitated. He has to be newly socialized in middle-class, everyday, you-and-me terms if he is to function in middle-class society; a big if, indeed, and one beyond the scope of the present discussion.

Because he hasn't learned these social skills, the police inebriate is an interactional failure: he cannot adequately perform what the authors call "secondary task roles." In other words, since he hasn't been brought up in a family, he doesn't know how properly to act like a husband. Since his schooling has been fragmentary, he doesn't know how to approach and solve even the circumscribed intellectual problems that factory workers soon learn to handle.

But there are a lot of things he does know, and these the authors fail to enlarge upon sufficiently. He knows the rules of sharing a bottle. He knows which "Sally" mission serves the best food. He knows which town has the cleanest jails. He knows how to size up a touch. He is able to perceive guilt, superiority, revulsion, distaste, aversion, fear, shyness, humor, and, possibly, even interest and affection.

What should be "done" about the chronic police-case inebriate? This book is a good beginning toward doing something about him. It presents organized information that, although not entirely lacking, had previously been scattered and incomplete even on the relatively simple descriptive level that typifies most of the pages of this volume. It is by no means a definitive book, but by and large, it is a craftsmenlike job that should be on the shelf of every city judge and lawyer who is interested in criminal administration. After all, its subject-matter is presumably their best customer; and, although this customer is probably always wrong, it is a good idea to know what he is like.

10. Rubington, supra note 7.
11. I must modify that craftsmenlike description, because of a quirk trained into me by a group of technically demanding professionals who insisted that numerical data be presented clearly. It is conventional to avoid reporting percentages where the total number of cases is much less than one hundred. In Table 15 (p. 44) a total number of nineteen cases is reported; consequently one case is reported as 5.3 per cent (in the category 10-19 arrests) of the total of men under thirty-five. I am reminded of the report that emerged from Johns Hopkins University some decades ago. The school had recently permitted women to enter and announced that thirty-three per cent of its women students had married faculty members. This report indicated an extraordinary intimacy of student-
The book does more than present results, however. While scarcely scratch-
ing the potential research surface, it makes suggestions, well worth consider-
ing, for further research and for dealing with these men. Unfortunately, it
contains only a short paragraph attacking the status quo:

Given the failure of the present system to cope with the problem of the
chronic police case inebriate, a new system or philosophy should be en-
visioned built on the concept of treatment and rehabilitation instead of pun-
ishment and custodial care. The present system hardly does more than
allow the inmate to build up his physical resources for a new drinking
bout upon his release and then to lapse back into the hands of the police.22

And this is the whole discussion. Although the raw sociological facts revealed
in the book provide a convincing indictment, some further elucidation might
have been given to the financial waste that goes through the revolving door.
No automobile dealer in his right mind would try to repair a car by using the
same ineffectual method eighty times running. Yet the state arrests and re-
arrests, convicts and reconvicts, confines and reconfines, releases and rereleases
over and over again. The money outlay alone must be staggering, to say noth-
ing of human considerations. Clearly aware of the financial problem, the
authors nonetheless present no concrete dollar figures, such figures being a pre-
requisite to moving the hard (and often thick-) headed “realists” into action
on pressing social issues. The customary means of acquiring funds has been
to appeal to a sense of justice. Cost accountants and economists could possibly
deliver a more effective approach, for (to swipe an epigram) the dwindling
dollar is mightier than the bursting exhortation.

But, to return to the central problem of how to do it—instead of how to get
somebody, thing, agency or foundation to support its doing—the authors,
referring to Pinel unshackling the mentally ill in the prisons, suggest a treat-
ment center for receiving the chronic public inebriate. They suggest trying
systematic treatment of physical ailments, psychological rehabilitation (“psy-
chotics should be sent to their proper place in the mental hospitals”)13 and
social restoration. They further advise a parole-type release procedure and a
“halfway house” or temporary institutional home for alcoholics who have ex-
hibited a pattern of dependence upon institutional living. Similarly, they sug-
gest varying the treatment program in accordance with characteristics such as
race, age, and psychological makeup. And finally, they make the usual sug-
gestion for a continuing program of research.14

These suggestions are broad in scope, brief in substance, and altogether too
lightly considered. What kind of “treatment center” the authors have in mind

12. P. 141.
13. P. 142.
is difficult to determine. Transforming a jailing system into any sort of treat-
ment program raises difficult legal problems, particularly if civil commitment
is substituted for criminal proceedings. As matters stand, an arrested drunkard
is entitled to the full protection of the criminal law. He has, at least in theory,
a right to private counsel (if he can afford a lawyer), a right to appeal, and
a right to a statutorily fixed sentence. True, an overwhelming majority of ar-
rested drunkards appear for trial without counsel, probably are not advised
of their rights to counsel, and usually make no formal waiver. Moreover,
many offenders who stand trial may not be legally competent to do so. These
are no high-flown civil-liberties concerns, at least not to the gent who does
extra time in the jailhouse. He must accept the sentence regardless of whether,
with the advice of an attorney, he could have been tried on another charge,
“copped” a lesser plea, or presented a defense creating a reasonable doubt in
the mind of the judge. But even if his right to counsel is imperfectly safe-
guarded at present, he is, in principle, as entitled to the full protection of the
criminal law as any other defendant.

To the chronic offender, the most important right is that to a determinate
sentence. Under a civil commitment procedure, which the authors seem to
be advocating, the chronic police offender would be regarded as a “sick”
person, which he is, and, once in a treatment center, might be exposed to skills
and understanding unavailable in jail. But he might never get out. What will
be the standards for release from a treatment center? What are to be the
criteria of a successful treatment? Suppose, after a man is released on “parole,”
he becomes drunk. What is his status? Is he to be returned for further treat-
ment? Suppose he once again gets drunk? And again, and again? Is he to be
given a life sentence for drunkenness after a specified number of violations?
Is the state to proceed from a criminal multiple felony law to a civil multiple
hangover enactment? These questions are not merely rhetorical, but raise
serious issues which the authors fail to discuss in their well-meaning but nar-
rowly conceived demand for treatment.

Voluntary treatment appears preferable to commitment, and can be made
available within the bounds of the current system. In fact, voluntary-treat-

16. Evidently, no study examining the extent to which procedural safeguards are
followed in trials of drunken offenders has been completed. There is probably no con-
stitutional right to court-appointed counsel since these are mostly misdemeanor cases.
Rarely is there any statutory right to court-appointed counsel.

17. In the State of Connecticut, for example, a third criminal conviction as a common
Nevertheless, after three such convictions any justice of the peace having criminal juris-
diction (as well as higher judicial tribunals) may commit the offender to the State Com-
mission on Alcoholism “for a period of not less than four months, nor more than three
years.” Conn. Gen. Stat. § 2733 (1949). Under a civil commitment proceeding, the
chronic drunkenness offender, therefore, could in effect be sentenced to three years at the
time of his fourth arrest. In practice, § 2733 has never been invoked, except by one
municipal court judge who repeatedly committed offenders for four-month periods to
ment programs currently exist in some states, such as Connecticut, and any lack of pronounced success is attributable not to the nature of the legal sanction but to the relatively insignificant gains that have been made in scientific research.\textsuperscript{18}

The research issue—having to do both with quantity and quality—is two-sided. No one can quarrel with the authors’ demands for more research initiative, funds and facilities, but their conceptual discussion is not altogether satisfactory. Having pointed out quite correctly, for example, that different types of police offenders will require different kinds of treatment, the authors then classify offenders into three types: the Negro, the older offender, and the mentally disturbed.\textsuperscript{19} One of these classifications, the Negro, is examined below to illustrate the shortcomings of this analysis.

Admittedly, the Negro subculture has distinctive characteristics, but the same is true of every other ethnic subculture, whether Irish, Old American, German, Scandinavian. The authors set apart a separate Negro classification because eighteen per cent of the penitentiary sample consists of Negros, as compared with the two per cent that Negroes compose in the residential population. But this finding in itself should not dictate a special Negro category. Other research has demonstrated that a high Negro arrest rate can be explained as a reflection of a high lower-class arrest rate.\textsuperscript{20} Negroes may constitute eighteen per cent of the penitentiary sample only because they constitute at least eighteen per cent of the arrest-prone, lower-class population from which the penitentiary sample was drawn. Thus, despite their apparently high arrest rate, lower-class Negroes may be arrested for drunkenness proportionately less often than lower-class members of other ethnic groups (e.g., Old American) who form only a relatively small part of the total lower-class population.

The authors try to explain the high Negro incarceration rate as a function of disproportionate susceptibility to arrest.\textsuperscript{21} According to their theory, policemen in western New York State are more likely to arrest Negroes than whites for a given offense. Actually, no data are presented to support this theory other than those already noted. It is equally possible to maintain that Negroes are less susceptible to arrest than whites. Negroes conceivably constitute more than eighteen per cent, perhaps as much as fifty per cent, of the population in

\begin{itemize}
\item Blue Hills Hospital, the only in-patient institution operated by the State Commission on Alcoholism. Blue Hills Hospital was intelligently designed as a noncustodial institution and wisely follows the policy, whenever possible, of admitting patients only on a voluntary basis.
\item 18. There are presently at least thirty-one halfway houses operating in seventeen states, the District of Columbia and one Canadian province, according to an unpublished 1958 survey made for the purpose of proposing legislation to establish two halfway houses in Boston. The survey was made by the Office of the Massachusetts Commissioner on Alcoholism. A copy of the report is on file in Yale Law Library.
\item 19. Pp. 143-44.
\item 20. Skolnick, \textit{A Study of the Relation of Ethnic Background to Arrests for Inebriety}, \textit{Q.J. Studies on Alcohol} 622 (1954).
\end{itemize}
neighborhoods where these arrests are common. If so, Negroes in those areas are less susceptible to arrest than their white neighbors—assuming unlawful activity is uniform between both groups. Of course, if Negroes are less unlawful than whites, their susceptibility to arrest is so much the greater. But if they are in fact more unlawful than whites, their susceptibility to arrest is comparatively low.

Negro offenders differ from whites in several respects. The Negro population is younger—sixty-six per cent of Negroes as compared to thirty per cent of whites are under age forty-five. Negroes have fewer repeated arrests. And they are moving from rural south to urban north. All of these are useful facts; so is the fact that an offender is a Negro. But not all Negroes present equivalent sets of social characteristics. There are some elderly, meek, urban Negro alcoholics as well as young, aggressive, newly-launched, recently-rural Negro alcoholics. Hence, in using “Negro” as a diagnostic and therapeutic concept, as, if you will, a scientific term, the authors err in mistaking conspicuousness for conceptual precision.

The concepts “the mentally disturbed” and “psychological rehabilitation,” are too commonplace to be useful. If they refer to nothing more than conventional distinctions, they needn’t have been set out as evidencing original knowledge. If, on the other hand, they contain new insights on the relationships between particular syndromes and chronic alcoholism, such content is unrevealed.

Instead of merely ticking off conventional distinctions, the authors should have spent more time exploring the three important dynamic factors that distinguish chronic police offenders from other alcoholics: that chronic police offenders drink in groups and evidently have a subculture of their own; that these groups provide the individual not only with alcohol but also with emotional identification, with the satisfaction of demands for valued objects and feelings, and with expectations of future indulgence or deprivation of these demands; and, finally, that chronic offenders often subordinate their demands for drink to values encompassed in the group perspective.

The real challenge of research is to make something of this knowledge, to build it into the whole system of therapy, from initial fact gathering to overt group manipulation and direction. At present, the right questions are not being asked at the right time. Nothing is known about what an offender believes when he goes to jail or a “halfway house”; consequently, it is not possible to measure the effects of either negative sanction or positive treatment upon the values held by the offender. To meet the matter systematically, knowledge is needed on, for example, whether, at the time sentence is imposed, an offender feels rather hostile to the authorities, or fairly friendly; anxious and fearful, or relaxed and unafraid; lowly and inconsequential, or held in respect by his peer group; guilty and self-punitive, or unconcerned with his moral worth—perhaps martyred. Likewise unknown are whether he is at that time ill-informed, or

knowledgeable and clear as to expectations; disorganized, or skillful in meeting the situation; without barter for exchange, or fairly resourceful; weak and apathetic, or interested and able to make decisions. Data is entirely lacking on if and how his feelings change through time, and on the expectations underlying his feelings, whatever his feelings may be. The extent of his demands—either those he makes upon himself or those he makes upon others—also invite investigation.

Concepts like age, race, or psychological make-up are treated by the authors as independent variables, that is to say, as factors in an offender's background which "cause" him to behave as he does. Negative legal sanctions and any kind of treatment, whether or not so intended, are independent variables also. They "cause" or shape dependent variables, that is, the behavior and the so-called attitudes of an individual. Most studies conceptualize these dependent variables with little refinement. Crime, for example, is a very rough behavioral concept, and the legal classification of "criminal" is hopelessly crude as a dependent variable—as crude as using the concept of "property" in predicting who wins a restrictive-covenant case. When the authors stress classification in terms of race, age and so forth, they are putting the cart way before the horse. They are focusing, wrongly, upon independent rather than dependent variables, upon descriptive characteristics rather than upon behavior and feelings. Until the latter are properly conceptualized and measured, there is no way of calculating the effect of the criminal sanction or of civil treatment upon the individual offender. Without such knowledge, community intervention is apt to be futile, save for the custodial service it currently performs.

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23. This brief exposition of a systematic value analysis is based upon the numerous writings of Lasswell, McDougal and their associates. Two examples, most comprehensive and detailed, are Lasswell & Kaplan, Power and Society (1950), and Lasswell & McDougal, The Jurisprudence of a Free Society: Studies in Law, Science and Policy (mimeographed materials, Yale Law School 1954).

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