

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
OF FLORIDA IN AND FOR THE COUNTY OF DADE

SPRING TERM A.D. 1986

FINAL REPORT OF THE GRAND JURY

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GRAND JURY REPORT ON ALCOHOL AND DRUG ABUSE

I. INTRODUCTION

America's increasing dependency on alcohol and drugs is the number one threat facing Florida and the Nation. Although the abuse of alcohol and drugs has been a developing crisis, the advent of smoking cocaine has escalated this threat. The crime rate is up 14 percent throughout Florida for the first six months of this year and most law enforcement officials attribute this increase to "crack" cocaine. Sixty-four percent of Florida's homicides are drug or alcohol related. Sixty percent of high school seniors in Florida have tried an illicit drug. In Dade County, between May 1 and September 15, 1986, twenty-five percent of all deaths due to other than natural causes were caused by or associated with cocaine. Ninety percent of a recent sample of arrestees in Dade County had drugs other than alcohol in their system at the time of arrest.

Drugs and alcohol are causing death, serious injury, crime, loss of employment and the disintegration of families at every level of our society. Government's response to this crisis has been totally inadequate. Based on all that we have seen and heard, this Grand Jury states as strongly and emphatically as possible that every level of government must take immediate, forceful and well-planned action to meet this crisis. The private sector, including every profession, must do the same.

Our attention focused on drugs and alcohol in May of this year as we began to hear testimony on first degree murder cases. Fifty-six percent of the first degree murder cases we heard were drug-related and of those seventy-seven percent involved cocaine. We further discovered that these murders were not limited to drug dealers killing one another. Family members killed one another over drugs; a nephew killed his aunt for a television set to trade for cocaine; a step-grandson killed his step-grandfather

for cash to purchase "crack". We also learned that the burglary victim in the Prentice Rasheed case had cocaine and alcohol in his system at the time he died.

Accompanied by police we went as a group into the community and observed firsthand over 129 arrests for involvement in street drug sales. We noted the extensive police manpower effort required to make these arrests. We visited crack and free-base houses in various apartment buildings and saw the degradation and decay cocaine breeds.

The task before us became clear early in our term. We felt it incumbent upon ourselves to address drug and alcohol abuse as the most overriding affliction plaguing our community. We worked with the Dade County Medical Examiner to analyze and determine the extent that cocaine causes deaths in this county. We also conducted a voluntary urinalysis study with the Dade County Department of Corrections to determine the extent of drugs utilized by those arrested. We heard testimony of children stealing money, jewelry, and appliances for drugs, and of those who threatened parents with weapons. We heard from addicts who repeatedly robbed and burglarized to finance their drug habits. We heard from women who prostituted themselves for drugs. Mothers told of how they sold their food stamps, sold their food and abandoned their starving children in a search for drugs.

Politicians and the media are focusing today on "crack" cocaine. "Crack" is regarded by the experts as the purest, most addictive, most accessible, most affordable and most lethal commodity on our streets. But crack cocaine is simply cocaine which can be less expensively and more safely created than earlier forms of free-base cocaine. Even if we solve the cocaine problem, new "designer drugs" even more lethal in nature will appear tomorrow. Eventually other drugs will take their

place in years to come, unless America and this community in particular, come to grips with the growing dependency on alcohol and drugs and its causes.

II. THE EXTENT OF THE PROBLEM

The Editor-In-Chief of Newsweek Magazine painted a vivid picture when he wrote:

"An epidemic is abroad in America, as pervasive and as dangerous in its way as the plagues of medieval times. Its source is the large and growing traffic in illegal drugs. A whole pharmacopoeia of poisons hiding behind street names as innocent as grass, snow, speed, horse and angel dust. It has taken lives, wrecked careers, broken homes, invaded schools, incited crimes, tainted business, toppled heroes, corrupted policemen and politicians, bled billions from the economy and in some measure infected every corner of our public and private lives. ... Today, little white packets are being dropped on this country, and nobody seems to give a damn."

We considered national studies describing the magnitude of the substance abuse problem. The National Institute of Drug Abuse reported in October of 1986 that 37 million Americans have used an illegal drug and that over 25 million Americans have used cocaine within the last year. The U.S. Department of Education reported this year that of senior high school students surveyed nationally; 91 percent have used alcohol; 61 percent have used drugs; 41 percent have used marijuana, 17 percent have used cocaine and 57 percent reported purchasing their drugs in school.

In June 1986, two studies conducted under the auspices of the National Institute of Justice (NIJ) were released. During

a one year period of time 90 percent of those arrested in Washington, D.C., and Manhattan, N.Y., voluntarily submitted urine samples. Fifty-six percent of all persons tested within twenty-four hours of their arrest were found to have been using one or more illegal drugs (excluding alcohol and marijuana). Further, those with positive drug urine had a greater number of rearrests than those who tested drug free. Those inmates with more than one drug in their urine had the greatest number of rearrests of all groupings of inmates tested.

To understand firsthand the magnitude of the problem in this community we referred to surveys and studies conducted in Florida and Dade County. The problem is of crisis proportions right here in Dade County based on our own studies conducted in conjunction with the Dade County Medical Examiner, Dade County Department of Corrections and other studies by public and private agencies.

Law enforcement indicates that more cocaine than ever is available in our community. Additionally, the purity level of cocaine has increased to approximately ninety percent. Since cocaine has become so accessible, the street price has dropped enabling one to buy ten-dollar and fifteen-dollar amounts of crack. We received testimony that a successful crack house can sell between \$9,000 to \$20,000 per week in \$10.00 and \$15.00 amounts of crack.

The results have been staggering. Our study, performed in conjunction with the Dade County Medical Examiner, reviewed autopsy reports for an 18-week period of time. It revealed that the deaths of 124 persons were caused by or associated with cocaine. The majority of these persons were white males, who accounted for 43.7 percent of the deaths. The next largest category of individuals were black males, who accounted for 21.9

percent of the deaths. The average ages of individuals in both groups ranged from 30-39.

Reported cocaine-related medical emergencies in Dade County rose from 559 in 1983 to 1,000 in 1985. In August of 1986, Jackson Memorial Hospital noted that 40 percent of the emergency drug overdoses were related to cocaine. In 1983, the same hospital reported only two percent of its emergency overdose responses were cocaine-related.

In June of 1986 alone there were 3,500 calls for help to a local cocaine hotline. The combined "waiting list" for treatment in publically assisted programs is estimated to be over 500. Close to 85 percent of these programs' clientele are receiving treatment for cocaine abuse and addiction. Costly hospital-type treatment facilities are springing up in the community. Due to a lack of affordable treatment, only 7.35 percent of the 5,000 referrals for treatment assessment from the adult and juvenile courts were actually placed in residential treatment in 1986.

In terms of crime, the Metro-Dade and City of Miami Police Departments reported that within their jurisdictions, a total in excess of 9,000 drug-related arrests were conducted between January 1, 1986, and October 31, 1986. Metro-Dade estimates that over 80 percent of these arrests were for cocaine. Approximately 64 percent of all juveniles arrested in Florida are involved in drug or alcohol abuse, according to the Governor's Commission on Drugs and Alcohol. Reports indicate many new crack cocaine addicts are adolescents. The Miami News recently reported the number of juveniles charged with possession of cocaine had doubled since 1985.

In Dade County it is reported that during the first five months of 1986, there was a 23 percent increase in motor vehicle theft, a 19 percent increase in robbery and 12 percent increase

in burglary over the same period in 1985. Experts attribute these increases to crack cocaine. The extreme compulsive nature of crack cocaine drives its users to commit crimes to finance their habits.

In order to determine the extent of drug usage by those arrested in Dade County, we initiated a voluntary urinalysis study on 450 recent arrestees in conjunction with the Dade Department of Corrections. Between October 2, 1986 and November 17, 1986 voluntary and anonymous urine samples were taken. The findings were surprisingly higher than those determined by the New York and D.C. studies. At the time of their arrest, 90 percent had one or more drugs, other than alcohol, in their system. The study showed that nearly 70 percent had cocaine; 62 percent had marijuana; and 42 percent had both these drugs.

The Florida Department of Law Enforcement conducted a state-wide survey in July 1986 of all Florida Sheriffs and Police Chiefs to ascertain the impact of cocaine, particularly crack cocaine, on their respective jurisdictions. The findings indicated:

- 1) 24 percent increase in robberies and 46 percent increase in burglaries from last year in prevalent crack areas.
- 2) 55 percent perceived crack as a problem in their area and 66 percent of those considered it a severe problem.
- 3) 60 percent of the agencies had made crack seizures within the last twelve months.
- 4) Approximately 1,351,983 units of crack and rock were seized; that is the equivalent of 282 pounds.
- 5) 45 percent of the crack-related arrests had weapons involved.
- 6) 79 percent of the subjects involved in crack were only 25 years old; 22 percent were under 18 years of age.

A survey of inmates conducted in 1985 by the Florida State Department of Corrections revealed that: 78 percent admitted having used illicit drugs just prior to their arrest; 85 percent admitted regular use of alcohol or drugs; 56 percent of the inmate population specifically admitted narcotics use.

Florida has over one million children in the fourth through twelfth grades. According to the Governor's Commission on Drugs and Alcohol 1986 Report, a survey of Florida high school students indicated that; 93 percent have tried alcohol; 60 percent have tried an illicit drug; 17 percent had tried cocaine and 46 percent see cocaine as readily available.

The results of this widespread use of drugs and alcohol have been dramatic. Faced with these grim statistics we then looked to see what had been done by the public and private sectors to combat this epidemic of drug and alcohol abuse. Government and private sectors have not adequately responded to the crisis, particularly in the areas of education, prevention, identification, treatment and the criminal justice system as a whole.

A. INCREASED NEED FOR PREVENTION AND EDUCATION

Educational and preventative efforts offer the best way to fight this drug epidemic by reaching people before they start using drugs. Treatment for abuse and addiction is costly. The processing and housing of criminal drug abusers is also costly. Prevention is logically the most cost effective method of addressing the growing dependency on drugs and alcohol. Yet, there exists a major void in the development and dissemination of accurate, credible information regarding the consequences of substance abuse. Although advocacy groups for prevention, such as Informed Parents and Informed Families, have proven very

successful in mobilizing citizen involvement, government has not developed a statewide coordinated plan for prevention and education. Such a plan requires the participation of citizens, the media, parents, community and religious groups, educators, law enforcement, government, and the prevention and treatment community.

Schools are the largest single place where young people come together on a regular basis. Frequently, schools are where young people are first recruited to the illegal use of drugs and alcohol. The dozen or so addicts who testified claimed that their introduction to drugs began in school. These addicts became disruptive, truant, eventually dropped out of school and ultimately committed crimes to support their habits.

The state school system has not developed a comprehensive substance abuse prototype curriculum that could be adopted as a model by local school districts. The State Department of Education has not encouraged or developed programs to identify early signs of substance abuse in children and intervene to prevent further abuse. Instead, a piecemeal implementation of such programs has occurred around the state.

We heard from representatives of the Dade County Public School system. Although our school system has not yet fully developed a comprehensive substance abuse program, it is taking strides in this direction. For instance, it has developed substance abuse curriculum for the kindergarten through twelfth grades and also plans to include information on cocaine in this curriculum. Recently, a three-day workshop in substance abuse was conducted for some school administrators and other personnel. Last month 12 new counselors were specifically hired for 12 junior high schools. These counselors will receive training in the area of substance abuse.

Dade's school system has also instituted such programs as Project HELP and the Alpha Program which provide intensive substance abuse education and counseling to at-risk students and their parents. Additionally, the school system has placed five full-time teachers in the Here's Help treatment facilities. Thus, students in these programs can obtain the counseling they need while continuing their education.

Because of our limited time constraints, we were unable to consult with local and national experts in substance abuse programming for schools. Nonetheless, it appears to us that our school system's program is somewhat incomplete and fragmented in its approach. For instance, the Alpha and Project Help Programs are limited to only a few number of students. We are concerned that there is a lack of adequate training in substance abuse for all school administrators, teachers, counselors and other personnel. All school personnel should be trained to detect drug-related behavior, as well as help children develop the coping skills necessary to resist drugs. The ten-day and one week curriculum units presently used appear limited and lack adequate information about cocaine. Additionally, school administrators, teachers and other personnel are not sufficiently informed as to existing intervention and treatment programs. They generally do not know where to turn when a student or parent needs referral. The drug treatment community indicates that few, if any, referrals for treatment come from the public school system.

The low counselor-to-student ratio of 438 to one for junior and senior high school students appears inadequate, especially during a time when drugs are so prevalent. Twelve substance abuse counselors in only 12 of the 47 junior high schools hardly seems adequate. While data suggests that the prevalence of alcohol and drugs is greatest in high schools, there are no specifically trained substance abuse counselors for these students.

Stricter policing concerning the use, sale and possession of drugs needs to be initiated. Schools are reluctant to identify students as drug users and dealers. Last year, for instance, there were only 500 reported incidents involving drugs in Dade's public schools. This data suggests that only 2/10 of one percent of the 250,000 children in Dade's public schools were known to have been involved with drugs within the schools. A public school official expressed his concern that one major high school in a drug-prevalent area reported no drug-related incidents. The U.S. Department of Education recommends identifying the extent of drug usage in a school system as a primary and necessary step in overall planning of substance abuse programs. Our school system should send a clear message that drugs in schools will not be tolerated.

The Superintendent of Dade's Public Schools testified that providing an effective substance abuse program within our schools is a priority of the school system. There have been numerous recommendations statewide and locally to mandate comprehensive K-12 substance abuse education in all public schools. We hope that both the local system and the Florida Department of Education consult national and local experts to develop a state of the art substance abuse program.

B. INCREASED NEED FOR CENTRALIZED INTAKE, EVALUATION
REFERRAL AND OVERALL ACCOUNTABILITY

The recent trend toward smoking cocaine combined with the use of other drugs, particularly alcohol, has inundated local hotlines, intake, treatment and hospital facilities. This community severely lacks a centralized identification, evaluation and referral resource that is available 24 hours a day, 365 days per year providing adequate detoxification and overnight facilities. The result is a public which is lost when drug abuse strikes. Drug abusers and family members are referred from one telephone number to another.

In some instances the failure to provide adequate intervention has lead abusers to commit crimes. The various drug and crisis hotlines that do exist are neither coordinated nor equipped to fully evaluate individual needs and refer callers for appropriate placement. It is critical that parents, spouses, teachers, employers, police and courts have an adequate and readily available contact source for evaluation and referral.

When federal funding was greater, county government was the overseer of substance abuse services in this community. In 1981, the Florida Department of Health and Rehabilitative Services (HRS) became the licensing body and primary government funding source for these services. However, as drug abuse evolved to its present crisis level, HRS has become less effective in providing and assuring adequate services. The result is a lack of adequate evaluation and affordable treatment in this community. Our state, county government and the private sector need to unite behind the establishment of a statewide authority assuming full responsibility for meeting the needs of the growing dependency on alcohol and drugs. The County, as a participant in the authority, should create a consolidated center providing intake, evaluation and treatment referral assistance.

C. INCREASED NEED FOR AFFORDABLE TREATMENT

The unique compulsive nature of smoking cocaine is overwhelming the treatment community. Because this type of addiction is so severe, residential or inpatient treatment is usually required. The intense need for residential treatment has resulted in a critical shortage of affordable treatment. Those who cannot afford treatment are placed on a "waiting list" and advised that treatment will not be available for up to three months. However, those 124 people who died as a result of their cocaine usage could not wait. The Jackson Memorial Hospital

cocaine overdose cases could not wait. Those who committed crimes to finance their habits could not wait.

The Alcohol and Drug Abuse Program (ADAP), a county program, is the primary evaluation and treatment referral agency for the adult and juvenile courts. For 1986 in excess of 5,000 referrals from these courts were made to ADAP. Yet, ADAP could place less than ten percent of these referrals in a residential treatment program despite estimates that over 50 percent of the adults and over 90 percent of the juveniles required such treatment. ADAP attributes this to the low availability of affordable treatment.

The Legislature and the Department of Health and Rehabilitative Services (HRS) have failed to ensure the availability of affordable treatment at a time when the need is so great. The Legislature does not adequately fund this need and HRS does not efficiently utilize the existing funding.

HRS licenses and primarily funds the six major community-based treatment programs existing in Dade County. Over 50 percent of the operating budgets for these programs are funded with state and federal monies. A condition of receiving these monies is that no individual may be refused treatment solely due to an inability to pay for it. Although these programs receive between \$500,000 to one million dollars annually, HRS cannot verify today that these programs are actually treating indigent or non-paying clients and, if so, how many.

Although we believe the treatment community that receives public monies has lost sight of its obligation to service the community, we blame HRS for not holding them accountable. The treatment programs believe that they need more public funding. In their opinion HRS only funds approximately 50 percent of their cost of treatment for the non-paying client. However, their estimate is based on the total amount of public monies

they receive, regardless of whether a slot is utilized by a non-paying client or by a fee-paying client. HRS admits that their funding formula makes no sense. The overwhelming need for affordable treatment will continue at a crisis level until the Legislature funds additional slots and ensures effective fiscal administration by HRS.

Because there is such a demand for residential treatment, only those who have personal or family funds or health insurance coverage for substance abuse treatment receive help. Private residential treatment programs in hospitals cost \$8,000 or more per month. Payment for residential treatment in community based programs receiving public subsidy monies range between \$100 to \$3,000 per month. Until recently, the insurance industry has discriminated against the treatment of the alcohol and drug abuser. Insurance companies did not consider substance abuse a disease and therefore did not cover its treatment. Although more available today, health insurance coverage for substance abuse is not mandatory and it is limited in its coverage. The industry has failed to recognize that treatment for substance abuse is potentially a long-term process. Coverage lasting for 28 to 45 days is totally inadequate to effectuate a recovery in many cases. The result is that too many people who have not recovered are terminated from their treatment once their insurance coverage expires.

(i) Adolescent Population

Adolescents in this community suffer the greatest lack of treatment. Virtually no affordable residential treatment exists in Dade County for adolescents. In many cases, juveniles are shipped to a Broward County program for residential treatment. The juvenile court system presents one clear example of the need. Over 20,000 juveniles pass through our juvenile courts every year. The court system refers to ADAP those

juveniles who indicate a need for drug or alcohol evaluation for treatment and placement. These types of referrals for treatment evaluation increased by 62 percent in 1984-85 over the previous year statewide. In Dade County, approximately 134 juveniles were placed in residential treatment for 1986. This represents less than two percent of the total population of adolescents going through the juvenile court. The reason for the low placement rate is directly related to the existing shortage of affordable treatment, as well as reluctance by the community based treatment programs to accept adolescents.

In 1984, a law was enacted commonly referred to as the "fingerprint bill" which to some extent compounded the problem. This law prohibits ex-felons from working with individuals under the age of 18 years. Unlike the more costly private programs, publicly-assisted programs have large numbers of ex-felon, recovered addicts as staff counselors. Many of these recovered addicts committed felonies as part of their previous addiction. Frequently, these counselors have graduated from within the program or have been hired from other similar programs. The bill in its current form forces these programs to either reorganize or fire many of their valued staff counselors in order to continue treating adolescents.

Rather than fire staff and reorganize, the programs, with few exceptions, have closed their doors to the adolescent population. Consequently, there is a greater shortage of affordable treatment slots for adolescents. So parents will either have to somehow pay for more costly private treatment, or pray for an opening in one of the few public treatment programs available. Here's Help, Inc., which is nearly exclusively serving this population, indicates it too may close its doors to the adolescent.

We seriously question the purpose of this law as it pertains to the drug treatment community. We believe that all qualificat:

being equal, an ex-felon, ex-addict may be most effective as a counselor. Many recognized successful groups, such as Alcoholics and Narcotics Anonymous and Overeaters Anonymous, are based on peer support. These ex-addict, ex-felons who have become successful working members of the society are positive role models for adolescent addicts.

We believe the Legislature acted too hastily. Other measures exist that could achieve its goals without increasing the existing shortage of treatment for adolescents. Although HRS has proposed a funding request for 30 additional slots for the adolescent population, this figure does not begin to address the need. Furthermore, it appears to be meaningless if no publicly assisted programs will treat them.

(ii) Criminal Justice Population

Clearly, increasing numbers of substance abusers cannot get treatment and eventually commit crimes. The evidence both locally and nationally conclusively demonstrates the link between drugs and crimes. Therefore, as NIJ states, "Targeting enforcement and treatment efforts against the serious, heavy narcotics abusers is likely to give us the greatest payoff in terms of crime reduction."

In order to gauge our government's response to the substance abuse offender, we tracked through the system two populations including the 129 individuals arrested in the STING operation we observed. We also followed one half of the 450 arrestees who participated in our voluntary urinalysis study. We learned that Dade County's screening process is totally inadequate. We further discovered that the present capability of screening is so inadequate that driving under the influence and misdemeanor populations are for the most part, ignored. Additionally, we learned that despite our study which indicates that as high as 90 percent of arrestees use drugs and 68 percent

had previous arrests, 32 percent of which were drug related, few offenders, if any, received treatment.

In Dade County, approximately 100,000 arrestees are processed through the Dade County Jail annually. Yet, for 1986 it appears approximately 4,000 arrestees were referred for substance abuse evaluations to ADAP. This figure represents approximately four percent of the total arrest population. For instance, of the 129 individuals arrested from the STING operation, only 19 were evaluated and of those only nine were referred to drug treatment programs. Thirty-three percent had previous drug-related convictions and 54 had other previous criminal convictions. Yet within 24 hours, over 100 of these arrestees were released back into the community without an initial screening and intervention assessment.

We then tracked 50 percent of 450 arrestees who provided urine samples. Although 90 percent of them had drugs in their system, only 32 (or 14 percent) were evaluated and only six (or one percent) were referred for residential treatment. Yet, over 68 percent of the total sample had previous arrests and of those, 30 percent had previous drug-related arrests.

Dade County's evaluation process of those arrested relies primarily on admissions of drug use by offenders and their willingness to submit to treatment. The NIJ studies make evident that the self-reporting method is alone not effective. In Washington, D.C. only one-half of those whose urine tested positive admitted using drugs. The Manhattan study concludes, "The results demonstrates that accurate detection of drug use by self-reporting is infeasible in an arrest population."

Although urinalysis can be an effective assessment tool, there is great controversy regarding its use upon arrest.

Proponents argue that it is one conclusive means available to government to ascertain the extent of drug usage within the community. Washington, D.C. has implemented urine drug screening as part of its booking process because it provides the first appearance judge with greater options in releasing the offender.

Opponents of urinalysis testing say it is costly, cumbersome and unconstitutional. Additionally, they argue that there is insufficient treatment available for those presently identified through the self-reporting method. Therefore, greater identification is meaningless if no treatment is available. Presently, the county is only able to place less than ten percent of those identified, because there is no affordable treatment available in the community.

There is also virtually no treatment available for those offenders who are sentenced to serve time in our jail and prisons. The State and County Departments of Corrections do not require nor encourage drug treatment within their facilities. There is no substance abuse treatment or education available in the Dade County Jail (DCJ). If an offender is sentenced to 364 days or less of incarceration he will be incarcerated in a Dade County facility. A primarily voluntary treatment program is available in a county facility for approximately seventy inmates. However, this figure only represents 14-17 percent of the 400-500 offenders that have been convicted and sentenced to serve county time.

If an offender is sentenced to more than 364 days of incarceration, he will be housed within one of the State Department of Correction facilities. Presently, there are approximately 31,000 inmates incarcerated within the prison system. Within this prison system the only identifiable substance abuse treatment program is at the Lantana Correctional

facility. Yet, the Lantana facility can only accommodate approximately two hundred male inmates. This represents less than one percent of the population sentenced within the prison system and criteria for admission is restrictive. Based on a follow-up study, the facility claims that approximately 82 percent of inmates paroled directly from this institution since 1977 were adjusting satisfactorily. Despite the claimed success of the Lantana facility, such additional facilities have not been developed.

Once an inmate has served a required portion of his sentence, he may be eligible for release to a community-based residential treatment program. However, due to the voluntary nature of the program, few prisoners choose to be released to residential treatment facilities. Rather, inmates choose work release over treatment, because it is easier and it provides them with money.

Thus, the majority of offenders return to the community and as the data suggests they are likely to return to drug abuse and the commission of crimes. Providing jail space should be a government priority. Due to insufficient jail space too many violators are being released back into the community. Nonetheless, the identification, evaluation and provision of treatment for the offender population must also be a government priority if we are ever to win the war on drugs and crime.

III. INCREASED DEMANDS ON THE CRIMINAL JUSTICE SYSTEM

Crime and the fear of crime continue to diminish the quality of life for citizens and visitors to Dade County. With the emergence of cocaine, drug-related crimes escalated requiring greater initiatives by law enforcement and the criminal justice system as a whole.

A. Law Enforcement Efforts

Local police departments have been forced to conduct elaborate and costly operations commonly known as STINGS and reverse STINGS as a response to the epidemic. These operations entail police acting as street purchasers and street dealers. STING operations are also conducted out of known crack and drug houses. Within a few hours a STING operation may net between 100-200 arrests for sale and possession of drugs. But as soon as a STING operation ends, the crack business resumes at the same place, next door or across the street.

In 1986, this community witnessed the extensive and blatant use of crack and drug houses. Aside from arresting, convicting and incarcerating individuals engaged in operating these places, other means must be utilized to combat this problem. It appears that an effective method is to close and seal such places to eliminate them from such use. The State, County and local governments need to explore and expand legal and expeditious means to close crack and drug houses.

We were shocked by the open and blatant sale of drugs on our streets. The STING operation we observed was well planned and masterfully executed. We applaud these efforts, but still more needs to be done by law enforcement as a whole against suppliers. Representatives from the local police departments have indicated a need for greater coordination amongst all local law enforcement agencies to combat the illegal distribution system of drugs existing in this community.

It also appears that an extensive effort amongst local police departments to create a unified system matching fingerprints to crimes is needed. We learned in the Prentice Rasheed case that the victim, Odell Hicks, had burglarized Mr. Rasheed's

business four times within two weeks, prior to his death. Mr. Hick's fingerprints were found for each of the four burglaries at Mr. Rasheed's business by the City of Miami Police Department. Because the City of Miami had not previously arrested Mr. Hicks, it did not have his name on record to which his fingerprints could have been matched and an arrest effectuated. Only the previous arresting agency, Metro-Dade Police Department, had both his fingerprints and his name on file.

However, the City of Miami is not computer linked to Metro-Dade's records and therefore both departments lack the capability to directly exchange fingerprint information. We understand that other municipalities also suffer the same informational limitation. The County, the City and other municipalities need to establish a uniform verification system that provides direct access to the fingerprint records of each police department.

B. Probation/Parole

Probation is the most common sentence in our criminal courts. Many inmates released from incarceration back into the community are placed on probation or parole. As jails and prisons become more crowded, more offenders are released on probation or parole. Probationers require intensive supervision and surveillance. For instance, a recent NIJ study conducted of California felons on probation found that 2/3 were rearrested. In Dade County, the present caseload of probationers per probation officer is approximately 85-100. This burdensome caseload must necessarily make effective supervision virtually impossible.

Ideally, those who have been identified as substance abusers should be ordered to successfully complete treatment and remain drug free as a condition of probation or parole.

But until affordable treatment becomes available, treatment may not be a realistic condition. However, remaining drug free is a realistic and logical condition if we are ever going to decrease the cycle of drugs and crime. The role of probation or parole officers is a critical one. These officers are not trained in the detection of alcohol or drug abuse. Therefore, urinalysis can be an effective tool in the supervision of probationers and parolees. Urinalysis of this population is not presently required but it appears that government's utilization of this surveillance technique should be seriously considered.

C. Jail and Prison Space

A critical problem facing the criminal justice system today is the lack of jail and prison space. Police, prosecutors, judges and correction personnel are crippled by government's failure to provide adequate jail space. Citizens and law enforcement alike are frustrated by the early release of offenders back into the community. Elaborate pre-trial release programs and other programs have been designed to reduce the overcrowding problem. We were informed that even non-bondable offenders are being released into the community. Clearly, offenders with identifiable drug problems are being released into the community with virtually no intervention.

We understand that there are plans for future expansion of the Dade County Jail and the Stockade. This community cannot wait. Late in our term, a proposal for additional jail space at the Stockade was tabled by the County Commission. County government must recognize the immediate need for additional jail space. All the efforts of law enforcement, law makers, courts and the community to overcome the crime and drug-related crisis are reduced in their effectiveness if prisoners cannot be adequately screened, evaluated and housed.

We were informed that the County has designated areas where a minimum/medium security or halfway house facility could be established. The County should explore placing an offender population, such as non-violent substance abusers in such a facility. If such a facility were made available to substance abusers, improved assessment and intense treatment could be provided. Removing such a population from the traditional secure facility would provide additional jail space for more serious or chronic repeat offenders.

The Legislature allows the prison system to utilize automatic gain time and good time to relieve its overcrowding problem. Under the present system an offender can expect to serve only half of a court-ordered sentence of incarceration. Given the present crisis of drug-related crimes being committed statewide, the use of automatic gain time should be eliminated for identified drug-related offenders. For instance, those who are convicted for the sale of cocaine, those who are convicted for the sale of drugs to minors or for distributing drugs near schools should not have their sentences reduced by 50 percent. We do not believe that these offenders should benefit an automatic 50 percent reduction in their sentence due to insufficient prison space. We recognize that reducing the utilization of automatic gain time will increase the existing need for additional prison space. Therefore, the Legislature needs to build more prisons as well as reduce the utilization of automatic gain time.

The Joint Executive-Legislative Task Force on Drug Abuse and Prevention has recommended increasing penalties and imposing mandatory minimum sentences for cocaine-related offenses. Additionally, the State Attorney for this Circuit has enacted a policy of requesting the courts to impose jail sentences for all those convicted of sale of cocaine, regardless of the amount.

The general consensus of those we interviewed agreed with these positions. We also agree. But, without an increase in prison space, controls over the utilization of automatic gain time and the enactment of stiffer penalties are rendered meaningless.

IV. RECOMMENDATIONS

1. The Legislature should establish a statewide central authority to be responsible for identifying specific needs and trends of substance abuse; to plan, coordinate, and budget for all efforts involved with substance abuse prevention, education and treatment. This authority should coordinate and supervise all citizen and community-based efforts, as well as all government agencies, and be accountable for performance.

2. The County should create a community based, consolidated center for intake, evaluation and treatment referral. This center must be available 24 hours a day, 365 days a year. A marketing campaign needs to be implemented informing the public, schools, police, community-based programs and advocacy groups of the center's existence.

3. Prevention and Education:

- a) The Legislature and the County need to develop and fund accurate and informative anti-drug campaigns including the use of prime-time television and radio.
- b) The Legislature should require the State Department of Education to develop a state of the art, comprehensive substance abuse curriculum and program prototype to be offered to all local school districts for implementation.

- c) The Legislature should research the benefits of mandating comprehensive K-12 substance abuse education in all public schools. The Legislature should encourage and provide funding to local school districts for in-service substance abuse training for all school administrators, teachers, counselors and other personnel.
- d) The Dade County School system needs to improve its overall approach to substance abuse identification, intervention, education and treatment referral. More specifically:
 - 1) Assess and evaluate the extent of a drug usage in its schools.
 - 2) Enforce accurate reporting by school administrators of drug-related incidents.
 - 3) Conduct research and consult with recognized experts to ensure the development of an effective and comprehensive substance abuse program for all grades in public schools.
 - 4) Implement in-service substance abuse training for all school administrators, teachers, counselors and other school personnel.
 - 5) Expand the number of substance abuse counselors available to all schools but particularly in junior and senior high schools.
 - 6) Determine the need to expand and provide to more students the services offered by the Alpha and Project HELP programs.

4. Treatment:

The Florida Legislature and the Florida Department of Health and Rehabilitative Services (HRS) must ensure and assist all citizens in obtaining affordable treatment. More specifically:

- a) The Legislature needs to provide additional funding to increase the availability of affordable treatment statewide and equip HRS with the necessary resources to fulfill its role as overseer of treatment programs.
- b) Fully fund identifiable numbers of residential treatment slots within each community program for non-fee paying clients. In addition, fully fund identifiable numbers of residential treatment slots specifically for adolescent non-fee paying clients.
- c) A contractual commitment from all programs which receive public monies must be established, enforced and monitored to ensure that no one is refused treatment based on an inability to pay for it.
- d) The present funding formula of subsidizing community-based programs needs to be re-structured. Standard accounting procedures need to be established and enforced. The quality and structure of treatment should be standardized and monitored.
- e) Treatment programs should be required to provide intake 24 hours, 365 days a year.
- f) The Legislature should review the recently enacted fingerprint law, and reconsider exemption by an appellate process for those who counsel adolescents in substance abuse programs.

- g) The Legislature should examine the feasibility of enacting legislation mandating comprehensive health insurance coverage for alcohol and drug abuse treatment.
- h) Both the Dade County and the State of Florida Departments of Corrections need to expand and improve the existing evaluation process and increase the provision of treatment for the offender population. Expanding programs similar to the ADAP Stockade and Lantana programs should become a program and funding priority.

5. Criminal Justice System:

- a) The Legislature needs to authorize and fund the construction of additional prison facilities.
- b) The County Commission needs to authorize the construction of additional jail slots immediately. The County Commission should also move forward in providing a minimum security facility or halfway house for non-violent substance abusers.
- c) Mandatory substance abuse education and treatment should be ordered as a condition of probation and parole if the offender has been identified as a substance abuser. The implementation of urinalysis surveillance for probationers and parolees should be studied and explored. Probation officers should receive in-service training in substance abuse.
- d) The STING and reverse STING operations need to be supported and enhanced in order to direct greater focus on suppliers of drugs.

- e) State, County and local governments need to coordinate and develop legal and expeditious means to eliminate crack and drug houses.
- f) The Legislature should enact stiffer criminal penalties for those convicted of the sale of cocaine, especially for those who utilize minors in sales.
- g) The Legislature needs to eliminate the utilization of automatic gain time for those convicted of sale of cocaine and build more jails.

Finally, because of the demands of our other business, an area which we were unable to fully explore was the abuse of alcohol. The abuse of alcohol continues to be America's most pervasive drug problem. While we urge subsequent Grand Juries to monitor the implementation of these recommendations, we also suggest a study on alcohol related problems.