

THE EDINBURGH ALCOHOL PROBLEM COURT©

Sheriff Frank Crowe*

This pilot project commenced at Edinburgh Sheriff Court in February 2016 with the aim of tackling petty persistent offenders who were suffering from chronic alcoholism.

BACKGROUND

In 2014, the Lothian and Borders Criminal Justice Board applied to the Scottish Government for funding to run a community-based scheme dealing with persistent offenders. It was recognised that such individuals were responsible for significant levels of crime and took up disproportionate court time in dealing with their cases in a piecemeal fashion.

Unfortunately, this application was unsuccessful and funding was given to the Grampian area that has been running a scheme in Aberdeen. This was principally directed at female offenders who are at high risk working in the sex industry to fund a drug habit.

Around this time, I attended a Judicial Institute Training Course on Problem Solving Courts. This was where I heard a talk by a judge from the United States of America, who had founded a no cost/low cost problem-solving court designed to reduce offending and recidivism by tackling the offenders' problems.

I tried to formulate such a scheme but realised I would require the assistance of the Scottish Courts and Tribunal Service, Social Work Department and NHS Lothian. My original plan to obtain drugs/alcohol/mental health counselling for

certain repeat offenders was designed to tackle the court's problems, as much as those of the individuals accused.

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Gradually over various e-mail exchanges and meetings, we drew up the pilot project. This was initially for 20 male offenders resident in the Edinburgh area that were regularly appearing in court on summary complaint, charged with offences of dishonesty or public order which seemed to be linked to a chronic alcohol problem.

My colleagues advised that such an initiative was in keeping with Scottish Government policies to tackle alcoholism and improve health. Around this time, the Edinburgh Council Social Work Department signed an agreement whereby the charity Lifeline would deliver local support and advice from hub offices in the city located at Muirhouse, Leith, Craigmillar and Wester Hailes. The pilot has initially been restricted to male offenders living in Edinburgh as it was hoped that most would progress from one-to-one counselling to group sessions which are all male.

During the course of the pilot, one or two female offenders emerged, who would otherwise fit the profile but were diverted to the women-only Willow Project, which is best placed to tackling their specific needs.

Those offenders who came to the court's attention had to be suffering from a long-term alcohol problem rather than binge drinking. My shrieval colleagues in Edinburgh agreed to refer possible candidates to me who could then be assessed. Where appropriate, they would be placed on a Community Payback

Order (CPO) of 12 to 18 months' duration with a condition to attend for alcohol counselling and regular reviews by me at court at roughly 6-week intervals.

Those involved in domestic abuse incidents are not normally considered suitable for an alcohol assessment as we do not wish for alcoholism to be used as an excuse for this type of behaviour. However, in certain cases where an offender is determined to be unsuitable for undertaking a domestic abuse CPO due to alcohol problems, they may be taken on as a first step towards later domestic abuse work.

Much of this methodology has been borrowed from the approach adopted in drug treatment and testing orders. Experience has shown for best outcomes the assessment should be done in 7 days so that treatment can be offered quickly before further offences are committed. I myself have conducted the reviews to provide continuity for the offender and see how progress is being made in contrast to other similar cases. Social work provides detailed 2 page updates informing whether attendance at the local hub has taken place. These also served to highlight the quality of the contact, and provide an indication of the progress being made.

THE COHORT

The offenders tend to be in the 30-60 age bracket. Most are unemployed and some are in poor health as a result of substance abuse. Two of the men placed on orders have since died, one suddenly after a heart attack not long after a first review at which he had been making good progress, the other was found dead at home between reviews. I have received no further details in either case but assume the deaths were linked in some way to their alcohol problems. In another case, the accused has been given a terminal diagnosis due to his

drinking problem and one or two others present poorly as alcohol abuse has caught up with their health in their 50s and 60s.

Two of the men have been sectioned during the course of orders due to mental health problems relating to their substance abuse and, in one case, the order had to be terminated as the individual is now a compulsory patient.

In other cases, repeat offending led to orders being revoked due to imprisonment for other matters. In one case, the accused's order was suspended as he has been remanded for willful fire raising. In total, 5 orders have had to be revoked but good progress is being made in the other 13 places.

THE OFFENDERS' MIND-SET

It is perhaps too small a sample to be drawing conclusions at this early stage but it is clear that, in most cases, where alcoholics appear in court, they express a wish to free themselves from their addiction. Many will try to manage the problem by seeking a prison sentence, which often is a short one of a few months duration or they will accept a period of remand in custody before pleading guilty. These interruptions in the routine of drinking do lead, in many cases, to an immediate improvement in health and perhaps a chance to take stock but often give brief respite to the continuing problem. Others with the same problem will seek admission to the Ritson Clinic, part of the Royal Edinburgh Hospital where alcoholics are admitted as in-patients for a period of a week to 10 days in order that they can have a controlled alcohol detox before being put on an Antabuse prescription, which will make them feel sick if they resume drinking. NHS Lothian run the LEAP Project for recovering drug and alcohol addicts based at the Astley Ainslie Hospital with supported accommodation provided nearby. This is a very successful scheme but is only

open to those who are stable and no longer drinking or abusing drugs on a daily basis.

These initiatives have long waiting lists and it is to be hoped that offenders on an Alcohol Court order making good progress will be given some priority at the appropriate time to attend the Ritson Clinic or LEAP when meeting their criteria.

For chronic alcoholics, health problems will begin to surface after a period of abuse, perhaps a decade or two. Such ailments include hepatitis C, stomach ulcers, delirium and Korsakov's syndrome to name but a few. In some instances, the offender has also been deemed unsuitable for the order due to advanced mental health problems, which make regular attendance at meetings unlikely and/or problematic.

CONCLUSIONS

One must be wary with such a small sample over a short period but it is refreshing to see that, in most cases, the orders are progressing well with good attendance, abstinence or significantly reduced drinking and re-offending. While the drug treatment and testing order appointments/support/review model has proved to be useful, the problems thrown up by alcoholics differ from drug abusers. Many lead fairly solitary lives having been abandoned by friends and relatives, and it is to be hoped that improvement on the order will enable them to re-establish links with friends and families. I detect that compared to drug addicts where the nature of the problem necessitates regular contact with other addicts, some of these alcoholics have gone past the stage of being drinking companions and drink alone having underlying social and psychological inadequacies.

The project will be reviewed early next year, and consideration can be given to see whether it should be expanded to the rest of the Edinburgh Sheriff Court area in Midlothian and East Lothian where MELD, the locally based addiction hub operates.

It remains a small scheme with on average 4 to 5 cases calling a week either as potential assessments or progress reviews. These cases are fitted into my normal day's court. I do consider the scheme has provided a sustainable way to tackle certain repeat offenders' drinking problems so as to reduce or stop their offending and help them back to normal health and a more fulfilling life. I am pleased that, in one case, an offender has used the support of the order to resume working in a skilled occupation and remain drink free.