

MAINE STATE LEGISLATURE

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LEGISLATIVE RECORD

OF THE

*One Hundred and Sixth
Legislature*

OF THE

STATE OF MAINE

Volume II

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passed, all signed by the Speaker and sent to the Senate.

On Motion of Mr. Trask of Milo, the House reconsidered its action whereby Bill "An Act to Regulate Revolving Credit Accounts," House Paper 45, L. D. 52, was passed to be engrossed.

Thereupon, the Report was accepted and the Bill read once. Committee Amendment "A" (H-453) was read by the Clerk and adopted and the Bill assigned for second reading tomorrow.

Orders of the Day

The Chair laid before the House the first tabled and today assigned matter:

Bill "An Act Establishing the Maine State Student Incentive Grants Program" (S. P. 539) (L. D. 1758) (C. "A" S-153)

Tabled — May 25, by Mr. Jalbert of Lewiston.

Pending — Acceptance of the Committee Report "Ought to pass" as amended.

Thereupon, the Report was accepted in concurrence. Committee Amendment "A" (S-153) was read by the Clerk and adopted in concurrence and the Bill assigned for second reading tomorrow.

The Chair laid before the House the second tabled and today assigned matter:

Bill "An Act Creating the Uniform Alcoholism and Intoxication Treatment Act" (S. P. 13) (L. D. 76) (C. "A" S-150)

Tabled — May 25, by Mr. Henley of Norway.

Pending — Passage to be engrossed.

The SPEAKER: The Chair recognizes the gentleman from Norway, Mr. Henley.

Mr. HENLEY: Mr. Speaker and Ladies and Gentlemen of the House: As the sole signer of the "ought not to pass" on this bill, I would like to take just a few moments of your time to state my reasons for it. I do not know how many of you have really gone over this bill. The reasoning behind the bill I have no quarrel with. The attempt to set up various shelters and areas of rehabilitation for alcoholics throughout the state, I

have no quarrel with. I contend, as I did in the committee, at the hearing and in Executive Session, that the cart is being placed before the mule or the horse or whatever.

We are attempting to do something here which is being done now in one county, principally Cumberland and perhaps somewhat in some of the other highly settled urban counties. We are attempting to have areas where alcoholics can be taken and given an opportunity at the benefits of standard rehabilitation principles and policies, which I understand have had a certain degree of success.

What I contend is that the state at large is not ready for it. They are not prepared for it and there is no way that this bill can be implemented practically in about 90 percent of the areas and communities of the State of Maine.

I think you will note on your bill, right on the front page, section 1361, declaration of policy. "It is the policy of this state that alcoholics and intoxicated persons may not be subjected to criminal prosecution solely because of the consumption of alcoholic beverages, but rather should be afforded continuum of treatment in order that they may lead normal lives as productive members of society." That reads beautifully, and to those of you and those of us who may believe that alcoholism is merely an illness, it is a wonderful concept. I do not believe that. I never have, I never will.

I feel that the publication and the standard rejection of that belief all the way up and down the line from Washington to our most remote community is doing a disservice not only to those people who are not alcoholics — and I admit there is a term "alcoholic," it is a disservice to them because it builds a false aura of protection of those people. We can expect, if this bill completely goes through, and there are a few states that are having it, we don't know how successful it is, we can expect the average drunkard, when he is criticized in any manner, to come back with a statement, "You have no right to criticize me, I am

merely sick. It is your job to take care of me. I can drink all I want to." I think that the philosophy intended by this bill is wrong.

Again, ladies and gentlemen, I do not expect to reverse the findings of this committee and the ultimate outcome of this bill. I am just repeating what I have stated earlier in other sessions on bills of like matter before this House.

If the matter of intoxication or habitual intoxication which brings about the term alcoholism or the chronic alcoholic is an illness, what are we going to do about the other various illnesses that are so termed that bring about incapacitation? What about diabetics? What about heart problems, emphysema, other chronic illnesses, which we know are illnesses, treated by medication and by surgeons and by doctors and if not cured, at least held under control by those things? Are we going to set up special laws relative to those people? I realize we don't arrest them, but we don't have any special laws on them. Are we going to spend taxpayers' dollars to set up special treatment facilities where they are going to get free treatment? I think it is only right that we should do so. We have a lot of people that are ill with emphysema. Do they get free treatment? They don't in my area. Diabetics, they don't get free treatment, they have to pay for it. Heart patients have to pay for their treatment, I know, I am one.

If we do consider an alcoholic as an illness to be treated, why do they rate free treatment any more than any other illness? I know I have gone through this bill from front to back. We have got to have in our various areas people who will pick up and take care of drunks, but they can't arrest them. I have been contacted by practically all police in my area asking me what they are supposed to do. The only place we have up in our area, and as far as I know in the whole county, where we can take a real drunk person is to the jail where he will be safe and where he can sleep it off.

Our hospitals, as far as I know, so far are not supposed to accept

them. I don't know about some of the other areas.

Another thing that I would like to mention, you were handed sheets this morning put out by a gentleman from the other body which purports to specify all of the areas of units, groups and so on that are for this bill, various organizations, et cetera. There is one outstanding vacancy not listed. I think you might check and see if you can find any police groups that are for the bill, any whatsoever, any police chiefs, any group, any policeman, any sheriffs. They are the ones that are going to be charged with the implementation of this bill.

I have got red lines drawn all through this. I will not bore you with my objections to the various problems involved. I still insist that for about 90 percent of the communities of the State of Maine, we just are not prepared to put this bill in effect. I told them in committee and I will state now that the idea of setting up rehabilitation areas to train people to pick up our habitual drunks and to try to do something with them in theory is fine if they would only do that first. If they would get the areas built up, I will be glad to vote money to do it, et cetera.

You will note that there is an amendment amending off the cost of this program because I understand there is federal money. It still costs. Consequently, I still think they have got the cart before the horse. With all these internal objections, I haven't narrowed it down, but I stated I wouldn't take long and I am about to sit down. I am not going to make a motion. I am opposed to the bill, have been through the years and will continue to be as long as they set it up in this manner. With that, I will leave it up to your discretion.

The SPEAKER: The Chair recognizes the gentlewoman from Orrington, Mrs. Baker.

Mrs. BAKER: Mr. Speaker and Members of the House: I was the vice chairman of the subcommittee of research that studied this bill and prepared it and reported it out recommending it to the legislature.

I am not going to stand here and say that it is a perfect bill, but few are. I feel this is a start in the right direction. If you accept the belief that alcoholism is a disease, then I think you have to accept the fact that the state, being in the business of selling alcoholic beverages, has a responsibility in the rehabilitation of the alcoholic. And this, I believe, is a start in the right direction, we have to make a start somewhere. Certainly we are not going to be able to set up facilities overnight or possibly in the first biennium if this would become law. It is my belief that it is a move in the right direction and it is the responsibility of the state to try to rehabilitate these people.

We hear a great deal of criticism about the number of people on relief, the number of ADC families that we employ as a result of alcoholism, and it seems to me that we might as well face this responsibility and make a start.

The SPEAKER: The Chair recognizes the gentleman from Rumford, Mr. Theriault.

Mr. THERIAULT: Mr. Speaker and Members of the House: I have to agree with my friend Mr. Henley in reference to this bill. As a former policeman, I know the problems we have when we have a person that is intoxicated and what we are going to do with them. The bill says that we would take them to a rehabilitation center. But my town, like Norway and South Paris, has no such place. And I believe that the majority of the towns and cities have no such place. So what are you going to do with these guys or these women?

In the past we have picked them up and locked them up just as much for their own protection as for having committed any crime. In fact, just think of what would happen if this person that is intoxicated and doesn't know what he is doing and is unable to navigate very well, steps out in front of a car and this car hits him and kills him? Just think of the situation for the driver of that car. It wasn't his fault, but he still has killed a person. And if we are able to pre-

vent that by locking this guy up, well I think that is worthwhile.

The SPEAKER: The Chair recognizes the gentleman from Bangor, Mr. Kelleher.

Mr. KELLEHER: Mr. Speaker, Ladies and Gentleman of the House: It is not very often that I ever stand before this body and read a prepared speech. Generally I try to talk off the top of my head, but I have been involved in this bill in some degree and particularly with the gentleman in the other body. I think it has some very major important matters for you people to consider, and if you don't mind, I am going to take time to read a prepared statement that I had some people help me draft.

Accepting the judgment of the World Health Organization of 1951, the American Medical Association of 1956 and '72, the American Hospital Association of 1957, the American Association of Psychiatry of 1965, and the Department of Health, Education and Welfare of 1966, and the Commission on Alcoholism of 1967 concerning alcoholism, I submit that alcoholism is a disease. And the very people that Representative Theriault was talking about, and Representative Henley, and I hate to use the word the town drunk, although they are alcoholics and they do have something in common, there are a number of other individuals that I am sure they never came in contact with that have a severe problem, that work in industries, that are involved in our communities, and this is a bill that was designed to help them.

You know, in industry, American Tel & Tel for example, has an alcoholic program to help their employees. They don't try to fire their alcoholics when they discover they have them working for them. They have a program to try and help them, to rehabilitate them. And when they come to a point of after 18 months or 20 months and this particular person they have been treating has abstained from drinking, they think their program concerning this individual has been successful.

And I think the bill which Mrs. Baker has presented here this morning, through the efforts of a large number of people in this state, from all over the state, concerning the very tragic situation of alcoholism, we as leaders in our own community should accept the bill. There is a price tag on it and it costs some money, but there are a lot of other things we put in this House that cost money and we passed and certainly they deserve our support, and this bill certainly does.

Alcoholism is not only a disease of the body and the mind, it is an extremely social one and the families are involved.

I ask the House this morning to support the passage of this L. D.

The SPEAKER: The Chair recognizes the gentleman from Lewiston, Mr. Jalbert.

Mr. JALBERT: Mr. Speaker and Members of the House: I dislike very much to disagree with the gentleman from Norway, Mr. Henley and the gentleman from Rumford, Mr. Theriault for the respect that I have for them and the knowledge they have in their own respective fields.

I have stated on the floor of the House more than once in the committee rooms and elsewhere that I thought the biggest problem in my opinion, is alcoholism and was the number one disease in this state, in this country.

You would be amazed if you knew how rampant alcoholism is, with no disrespect meant, but even among the fairer sex. It is becoming a problem that we fast must face head on or else we are headed for disaster in this area.

You know, one would have no compassion at all when he meets an individual who would ask him for a drink, would ask you for a dollar or 50 cents with the purpose in mind by telling you invariably that they are hungry. When you say to them, I will take you in and buy you anything that you want to eat, invariably that type of individual says, "No, you don't have to come with me, all I need is the money. I will take care of myself."

It just saddens me because it happens to me weekly. Alcoholism is a disease, and it should be treated as such. How can anyone conceivably say that drugs must be treated, drugs is a disease, yet alcohol would not be a disease?

In my humble opinion, there have been some bad bills put into this session, no doubt even some of them by me. There have been some good bills put into this legislature, even possibly by me. I know some excellent bills have been dropped into the hopper and this is one of them. This is one that we must face head on.

Possibly some of you who live in smaller communities don't see it as much as we do in urban areas. I don't think we are any worse than you are. I spent some time in a smaller community; I have spent a great deal of my time naturally in my home City of Lewiston. I am chagrined when I see some very fine people become sick through alcoholism. Treatment is the answer.

I think we could talk about this problem forever and a day, but the answer is in 76, and I certainly hope that it has passage.

Thereupon, the Bill was passed to be engrossed as amended and sent to the Senate.

On motion of Mr. Emery of Rockland, the House reconsidered its action of earlier in the day whereby Bill "An Act to Revise the Laws relating to the Practice of Optometry," Senate Paper 632, L. D. 1964, was passed to be engrossed.

The SPEAKER: The Chair recognized the gentleman from Rockland, Mr. Emery.

Mr. EMERY: Mr. Speaker and Members of the House: When Representative Rolde offered his amendment to L. D. 1964, I intended to make some remarks, but I was working on something else at the time and the matter slipped by me.

At this point I would like to reconsider our action whereby we adopted House Amendment "A".

The SPEAKER: The Chair recognizes the gentleman from Rockland, Mr. Rolde.