No-Cost and Cost-Bending Ways to Improve Community Reentry and Reduce Recidivism

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Since August 2013 Partners for Progress has operated a prisoner reentry center near the Anchorage Correctional Complex (Partners Reentry Center or PRC in this document). DOC has increasingly referred reentrants to PRC, and our reputation as a source of assistance has spread. Currently, the PRC assists between 52 and 59 reentrants each day and this number is steadily increasing. PRC has partnered with 2,651 reentrants since opening its doors.

This experience puts the Partners for Progress PRC in a unique position of being able to identify ways to effect changes to improve the transition from prison to community that cost little or nothing - some even reducing the cost of incarceration. PRC has identified nine "no cost or cost bending" opportunities that can be implemented now, if supported by the state administration and legislature:

1. Allow applications for Medicaid, Social Security, Americans with Disability Act (ADA), State ID, etc. to be completed and submitted prior to release.

- O Challenge PRC houses reentrants who would otherwise be homeless on the day they release. Of the 2,651 reentrants who have come to PRC since it opened, 85% are eligible for Medicaid, Social Security Retirement, or Social Security Disability. It would be more cost-effective and less stressful for reentrants if they could apply for these programs prior to release, either within an institution or DOC contract halfway house. A smooth transition back to the community would be facilitated, and recidivism reduced.
- Solution PRC is currently working with DOC in an effort to obtain permission to get applications for these supportive services to reentrants at least 30 days prior to release, if not earlier. This discussion is in process. The estimated cost saving by allowing this simple step is clear. Many reentrants would receive federal Supplemental Security Income (SSI) sooner, if not immediately, after release. This simple change in DOC policy could save approximately \$60,000 \$75,000 in PRC reentry housing and supportive service funds each year, and shift more of the financial burden to the federal government.

- 2. <u>Make DOC accountable for safe-keeping of the valuable documents that some individuals have when they enter prison. Do not discard them. Return them to reentrants upon release.</u>
 - Challenge On average, of the 100 new reentrants Partners Reentry Center receives each month, 70% come to the Center without a State ID, Driver's License and/or Social Security Card. This is due to the lack of accounting for property at DOC and the halfway houses. When an individual releases without an ID and Social Security card, there is a delay in being able to obtain employment that is at least 15 20 days.
 - o Solution DOC revision of policies and procedures for prisoners' personal property while in prison or halfway houses to secure IDs and Social Security Cards, drivers licenses that are not invalidated by the crime, and similar personal items. Also, create an agreement between DOC and DMV to expedite receipt of State IDs for individuals who are released without proper ID. The anticipated savings for PRC would be \$5,000 per year if this change occurred.

3. Reinstitute sex offender treatment within correctional institutions.

- Challenge 40% of the releases from Goose Creek in the summer of 2015 were individuals who had been convicted of a sex offense. Courtapproved sex offender treatment is only available in a few locations around the State, and is totally unavailable in small communities. The primary hub for post-release sex offender treatment is Anchorage. Court, probation, and parole requirements that mandate completion of sex offender treatment have the practical effect of displacing some Alaskans for two to five years. Because of long waitlists for sex offender treatment, compounded by the lack of culturally-appropriate treatment options, many reentrants are held indefinitely in Anchorage and other communities that are not their home. PRC sees a high rate of recidivism among this population.
- Solution Using teleconferencing/skype/distance learning or even newer technology, sex offender treatment could be delivered within the institutional walls in a timely manner that is more effective and costefficient. Reentrants will have satisfied sex offender treatment before release into a community.
- 4. Allow rural Alaskans to return to their home or regional communities. Let Alaska Natives go home if they are invited back to their villages.
 - Challenge Of the 2,651 individuals served at Partners Reentry Center,
 33% are Alaska Native. Of these 874 Alaska Natives, approximately 90%

are rural Alaskans who were released into Anchorage for post-release supervision or treatment. A majority of these individuals are involuntarily displaced into Anchorage. The recidivism rate for Alaska Natives is 85%.

O Solution - Regional Native corporations need to get engaged in displaced native issues and in restorative justice. Teleconferencing is available in order to deliver treatment to rural areas. Initially, reentrants could release to rural-area hubs that have law enforcement, POs and medical services. PRC has created a Native Group that meets weekly and is reaching out to their respective native corporations, villages, and families to address issues around reunification, restoring community trust, and being invited back into their regions.

5. Reduce re-incarceration by approving behavioral contracts in lieu of returning to incarceration.

- Officers was 'trail, nail and jail' probationers who were in technical violation of the terms of their probation or parole. Though this culture is changing, it is still there, and it is costly for both the individual and the state. In the past, PRC's policy has been that individuals returned to incarceration are ineligible for a second round of PRC-funded services for at least a year. In addition to losing eligibility for PRC-funded support, the person often also loses employment and other community support. He or she is required to start over, often without a State ID or Social Security Card. Specific data as to how much this costs is not easy to calculate, but is a growing issue.
- Solution To address this issue, PRC and some probation officers have been able to develop a system of behavioral contracts for individuals who would otherwise be charged with a violation, and returned to prison. These contracts require consistent attendance at cognitive-behavioral treatment meetings, and impose other requirements fitting individual needs for successful reentry. DOC should encourage more field Probation Officers to work with PRC to substitute behavioral contracts for probation violations. There is a substantial cost savings because individuals are held accountable, remain in the community and do not use a DOC bed while they modify their behavior.

6. Develop coordinated, reasonable probation and parole requirements.

 Challenge – At PRC we often meet reentrants who are so overprogrammed with DOC probation and parole requirements that one can only say they are set up to fail. As an example, reentrants are typically required to get housed, employed, start treatment and report to their probation officer. Sometimes this reporting is on a daily basis. Few substance abuse treatment programs have groups outside the regular work day, so individuals are unable to be fully employed. Ninety percent of PRC's participants cannot drive and must get from place to place by walking or taking the bus. The reporting requirements mandated for these reentrants are not practical. The result: PRC is seeing a growing number of reentrants who choose to return to incarceration and 'flattime' their sentences, rather than attempt to comply with their probation and parole requirements. This is a waste of their lives and a significant expense to the state.

Solution – Create reasonable release plans that offer a pathway to success and reflect knowledge of the situation of the people coming out of prison without housing, transportation or community support. PRC is currently working with DOC on this process. The legislature could require treatment providers who receive state funding to offer at least one treatment option that is available outside regular work hours.

7. Transportation from institutions to housing

- Challenge PRC coordinates with Hiland Mountain Correctional Center probation officers to arrange transitional housing for women who would otherwise be homeless upon release. However, about half of these reentrants do not make it to their "first night out" transitional housing. PRC goes into Hiland twice a month, and has asked women why this is such a challenge. The answer has been, in part, because of transportation. Currently, women release into the Hiland parking lot to individuals they knew prior to incarceration. In some cases this triggers an immediate relapse. The other option is for women to take a taxi to the Anchorage Jail parking lot and be dropped off there, regardless of time of release.
- Solution Change DOC policy to allow the taxis to deliver reentrants from Hiland Mountain directly to the PRC, or to the pre-approved housing sites arranged by PRC and probation officers. PRC is only eight blocks from the Anchorage Jail so this solution has a limited cost to DOC. PRC can provide transportation from the PRC to transitional housing.

8. Medically Assisted Treatment with Vivitrol should begin prior to release.

 Challenge – People releasing from prison are often so seriously addicted to heroin, opioid pills and alcohol, that they have little chance of escaping their addiction. Serious addicts who release without effective treatment and a commitment to sobriety can be expected to relapse. Most recidivism occurs within the first two weeks of release. This pattern has a high cost to the public in terms of public safety as well as money.

Recently, Medically Assisted Treatment (MAT) incorporating Vivitrol is offering hope as a way of combating the heroin epidemic that is sweeping the nation and the state. Vivitrol is a non-addictive injectable medicine that blocks the effects of opioids and cuts cravings for alcohol. To test this program, PRC partnered with a local clinic in September to start a pilot program offering Vivitrol to seriously addicted reentrants at no cost to the state. Of the 30 individuals offered Vivitrol since the beginning of this program, the 18 who have voluntarily participated and received the injection are employed, housed and successfully moving forward. Of the 12 who declined Vivitrol upon release, 11 have relapsed and have returned to incarceration. The U.S. District Court and the Alaska Therapeutic Courts have also seen big improvements among addicts treated with Vivitrol.

Solution – With DOC's approval, this pilot program could be offered to people with a record of serious addiction up to 30 days prior to release from incarceration. PRC's partner, My Health Clinic, could administer Vivitrol shots pre-release to ensure that individuals have a good likelihood of staying sober after reentry. MAT could be continued at PRC at no cost to the State of Alaska. PRC's program combines the clinical administration of Vivitrol with cognitive-behavioral treatment groups at PRC.

9. Halfway house limitations

- Challenge Operated under contract with DOC, halfway house rules and regulations unnecessarily limit the ability of reentrants to gain employment and reintegrate into the community. As one example, medications and medical treatment are not allowed while in a halfway house. The list of outdated rules, regulations and policies are too extensive to list here, but should be the subject of a separate, more detailed discussion.
- Solution- There are multiple, identifiable ways to improve DOC/halfway house policies. PRC has been working with one of Anchorage halfway houses quite successfully to incorporate reentrant-focused solutions in their DOC rules and regulations. Reviewing and updating policies in this area is a no cost event and will lead to more successful reentry services for halfway house residents.