Offender Programs Report

Social and Behavioral Rehabilitation in Prisons, Jails and the Community

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Rethinking Prisoner Reentry

by Reuben Jonathan Miller, Desmond Patton, and Ed-Dee Williams

Jail and prison populations in the United States have increased fivefold between 1975 and 2001, exceeding 2.4 million by their peak year in 2007 (West & Sabol, 2008). Even after modest annual declines in recent years (Bureau of Justice Statistics, 2013), there are still over 2.2 million prisoners in the United States, which has the distinction of incarcerating more of its residents than any other nation in the history of the modern world (Clear & Frost, 2013).

The populations of prisons and jails are disproportionately composed of poor racial and ethnic minorities. We know, for example, that Blacks and Latinos represent 30% of the U.S. population, but 59% of all U.S. prisoners (Carson, 2014). Further complicating matters, prisoners suffer from long-term illnesses and communicable diseases, are chronically unemployed, and face serious barriers to community reintegration, including addiction, chronic poverty, housing instability, mental health issues, and exclusion from full social, civic, and economic participation (Burch, 2013; Clear & Frost, 2013; Dumont et al., 2012; James & Glaze, 2006; Petersilia, 2003; Street, 2003).

The Pretrial Justice Working Group: Collaborating to Bring About Justice

by John Clark

In 2011, the Office of Justice Programs of the U.S. Department of Justice (DOJ), along with the Pretrial Justice Institute (PJI), convened a National Symposium on Pretrial Justice to draw attention to a deeply flawed pretrial justice system in which a defendant's access to money, rather than the risks posed by the defendant, most often determined whether the defendant would remain in jail pending trial or be released to the community. The symposium was composed of representatives of key national stakeholder associations, including judges, prosecutors, defenders, law enforcement, jail administrators, county elected officials, pretrial services, community corrections, and many others.

In his remarks addressing the symposium, Attorney General Eric Holder said of the many low-risk defendants who remain in jail pending trial on bonds that they cannot afford:

> Almost all of these individuals could be released and supervised in their communities—and allowed to pursue and maintain employment and participate in educational opportunities and their normal family lives—without risk of endangering their fellow citizens or fleeing from justice. Studies have clearly shown that almost all of them could reap greater benefits from appropriate pretrial treatment or rehabilitation programs than from time in jail—and might, as a result, be less likely to end up serving long prison sentences.

Conversely, recent research by the Arnold Foundation has shown a disturbing percentage—nearly half—of defendants classified as high risk for rearrest or failure to appear in court are routinely released under traditional bail systems.

Symposium participants produced dozens of recommendations for enhancing pretrial justice to address these issues. Among the recommendations was that jurisdictions across the country move toward developing a system of pretrial justice that contained the following elements:

- Expanding the use of citation releases by law enforcement;

- Designating experienced prosecutors to review new arrests before the initial appearance in court for bail-setting;

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It is therefore unsurprising that almost all former prisoners recidivate—and that they do so in short order. A recent study found that among 400,000 prisoners released across 30 states, nearly 80% were rearrested within five years for a new crime—half recidivated within 12 months and a third within just six months (Durose et al., 2014). More strikingly, the sample averaged 4.9 prior convictions and 10 average arrests!

Taken together, these garish statistics demonstrate the pervasive and cyclical nature of arrest, incarceration, and successive rounds of reentry for the poor, and especially poor racial and ethnic minorities.

Prisoner Reentry: Promise and Peril

The bulk of research on crime and punishment focuses on the arrest and incarceration side of the carceral equation. This

trated within the "inner city." For example, in Illinois, where there are over 48,000 prisoners, there is a 1:1 ratio of prisoners arrested and released each year (Peck & Theodore, 2009). Over half (54%) return to just six of 77 Chicago community areas (La Vigne et al., 2003). Following national trends, these prisoners are largely arrested from these same disadvantaged neighborhoods. Given this population's size, concentration, vulnerability, and likelihood to be rearrested, prisoner reentry has become a national policy priority (Travis, 2009).

The extant literature on prisoner reentry tends to focus on technical questions about the efficacy of reentry services or on the barriers that prisoners face during the reentry process. These studies are important, helping to equip policy makers and program planners with evidence on which kinds of programs work to reduce recidivism and under what circumstances they can be applied. Like other criminal justice

communities. Since 1991, rehabilitative services—education and vocational training, for example—have declined precipitously in the net share of prisoners whom they serve, from 64% to just 34% by 2004 (Phelps, 2011). At the same time, reentry programs, which stress the development of soft skills, such as employment readiness, conflict resolution, and various forms of cognitive behavioral therapy, have increased rapidly. Miller (2014) finds that the number of IRS-registered community-based prisoner reentry programs tripled between 1996 and 2008.

Few studies examine the *work* that prisoner reentry programs do in the urban landscape, the broader implications of prisoner reentry's emergence and ascendance, or the ways in which these processes articulate with larger social policy initiatives.

To better address the needs of former prisoners, academics, policy makers, and program planners must reconceptualize their approach to and understanding of prisoner reentry, incorporating the ways in which former prisoners experience community reintegration and interact with their families, community networks, criminal justice actors, and attendant institutions during the reentry process.

A recent study found that among 400,000 prisoners released across 30 states, nearly 80% were rearrested within five years for a new crime.

work is important. A compelling case can be made, however, that community, not *just* the prison, is "where the action is"—to borrow the phrase from Erving Goffman. Keeping pace with the growth of prison and jail populations, the number for formerly incarcerated people living in disadvantaged "inner-city" neighborhoods has increased precipitously.

In 1975, roughly 1.5 million people were on probation or parole. That number reached 5 million just 25 years later. Today, 4.8 million people are on community supervision, and 600,000 prisoners are annually discharged. They join 11.8 million people annually processed through county jails and the 6 million more processed through misdemeanor and specialized diversion courts, most of whom will never see the inside of a prison cell (Minton & Golinelli, 2014; Kohler-Hausmann, 2013). Even these figures are dwarfed by the 19.8 million people estimated to have a felony conviction, barring them from full social, civic, and economic participation (Burch, 2013; Clear, 2007; Shannon et al., 2010; Travis, 2009).

Further complicating matters, criminal justice interventions of all kinds are concen-

interventions, the universe of human service agencies tasked with addressing former prisoners' needs—"prisoner reentry organizations," in criminal justice parlance—are overwhelmingly concentrated in these same disadvantaged spaces (Miller, 2014). Reentry organizations, by their sheer presence, occupy an important, if under-examined, role in the urban landscape and within criminal justice administration, policy, and practice. This emergent social arrangement requires critical scrutiny.

The Rise of Prisoner Reentry as the Rehabilitative Strategy of Choice

In the wake of public disaffection with the rehabilitative ideal, and two decades of reforms in social welfare policy, rehabilitative programming for prisoners has been moved from within prison walls into the church basements and community centers of the post-industrial city (Miller, 2013, 2014). Subsequently, prisoner reentry programs have emerged as the rehabilitative strategy of choice (Western, 2008). Some evidence of this statement can be found in the number of formal rehabilitative services offered inside prisons and the number of reentry programs operating in prisoners'

Examining the Place of Prisoner Reentry

Prisoner reentry programs have altered the social landscape of the "inner city" and transformed the life-worlds of the urban poor. A full two-thirds of all registered reentry organizations operating in Chicago were located within just four of 77 Chicago community areas, spread across three disadvantaged zip codes (Miller, 2014). These communities have poverty, crime, and unemployment rates more than triple the national average, with Black and Hispanic Americans representing a full 90% of each neighborhood's demographic profile. As a result, prisoners are arrested from, returned to, and rehabilitated within the very neighborhoods that they call home. This situation has important implications for the life chances of former prisoners participating in these services.

One can imagine how difficult it must be to participate in an abstinence-based drug treatment program in a neighborhood with an open-air drug market. Or, conversely, how easy it would be to engage in criminal activity when one's reentry program is in a high-crime district. The location of services

may therefore impede the service's mission. This conclusion corresponds with research findings in urban organizational studies and social service provision (Kissane, 2010). Unfortunately, this work has not yet made its way into the criminological canon or policy discussions about how best to address the needs of released prisoners and the challenges that they present.

Conversely, one could argue that siting reentry programs in areas of high need is appropriate, given that these spaces provide the lion's share of prisoners to a given state and receive the bulk of people released from prison each year. However, the rise of reentry poses important questions about the containment of former prisoners to disadvantaged spaces, the constrained mobility of former prisoners and members of their family and community networks, and the ethics and practice of care for vulnerable and stigmatized populations.

Prisoner Reentry and the Concentration of Social Disadvantage

Criminal records bar former prisoners from full engagement in the labor market, as well as in civic and social life. In some neighborhoods, no fewer than 70% of the men have felony records. What must this do to the job prospects, tax base, and incomes of families in those communities? In addition, a decade of public health research has shown that prisoners face excessive health disparities. For example:

1. A recent study shows that prisoners are up to 147 times more likely to die of a drug overdose, and 11 times more likely to die from any other cause within the first two weeks of their release than are members of the general population (Dumont et al., 2012);

2. Using data from New York State, sociologist Evelyn Patterson (2013) finds that for every year that a prisoner spends incarcerated, he loses two years of life expectancy; and

3. Finally, up to half of all prisoners have an identified mental health issue, and one-fifth have a serious mental illness (James & Glaze, 2006).

How might this arrangement contribute to enduring health disparities?

Given what we know about this population, we must think carefully about ways to leverage the presence of reentry programs in poor neighborhoods to improve the overall health and well-being of these communities. This is especially the case because the return of large numbers of prisoners to these spaces may add to community members' economic and medical disadvantage (Wacquant, 2009).

Prisoner Reentry, Care Networks, and the Responsibility of Reintegration

There are nowhere near enough programmatic resources to address prisoners' complex and varied needs. Making matters more complicated, former prisoners' partners, children, and members of their home communities share in their social, medical, economic, and other forms of disadvantage due to the loss of wages, family disruption, and increased risk of behavioral and mental health problems associated with the imprisonment of a loved one (Wakefield &

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Wildeman, 2011, 2014; Wildeman, 2014; Comfort, 2007).

We know that criminal records often exclude prisoners from the employment market, affordable housing, and many essential social service supports, such as access to food stamps or grants for secondary education (Heck, 2014). Naser and La Vigne (2006) show that family members often become prisoners' resource of first, and often only, resort. Miller (2013, 2014) thus interprets the rise of reentry in its current form as the state's off-loading its responsibility to rehabilitate and reintegrate prisoners onto the people least able to handle it: prisoners' family, friends, and the cash-strapped community-based organizations.

To address prisoners' needs for family support, reentry organizations have incorporated family reunification services and parenting and anger management classes into their program models. This work is important and is no doubt helpful to families struggling to support their formerly incarcerated loved ones. Families often need substantive and ongoing support to take on the new and complicated responsibilities associated with caring for the formerly incarcerated, and reentry services rarely include family members in the interventions themselves. Reentry program planners and policy makers must think of new ways to incorporate the family into the reentry process and to support family members' work with released prisoners.

Prisoner Reentry and the Transformation of the Urban Landscape

Prisoners do not "reintegrate" into the community alone. They work through their reentry process with others, ranging from family and friends, employers, and landlords, to the police, courts, and reentry service providers. There are considerable restrictions on where prisoners can live and work and with whom they can interact. In addition, having a criminal record alters how prisoners navigate the social landscape post-release. Thus, the reentry process, almost by necessity, alters the ways in which prisoners interact with members of their personal and community networks. The careful analyst of the post-prison experience must attend to the programmatic, familial, and ethical dilemmas that prisoner reentry presents. To this end, there are three key questions that reentry researchers, policy makers, and program planners must ask themselves when they design, implement, and evaluate reentry interventions:

1. How might an *ethical* reentry practice look, given the overwhelming concentration of disadvantage into which prisoners are released and to which they contribute?

2. How might we leverage prisoner reentry organizations in ways that contribute to the overall health and well-being of the communities that they serve?

3. How might rehabilitative interventions incorporate, rather than overly

rely upon, families and friendship networks during the reentry process?

To address the needs of prisoners returning home, to stem the tide of almost inevitable recidivism over the long term, and to address the myriad forms of disadvantage that have emerged in the wake of mass imprisonment, policy makers must reimagine what reentry is, what it does, how it is done and what they hope to accomplish with it.

We do not write this essay to suggest that reentry programs are ineffective, immoral, or unnecessary. Fifteen years of evidence-based research speak to the contrary. In fact,

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it is our position that more reentry programs are needed. In crafting them, however, we must think through tough questions. Policy makers must look beyond the evidence base to think carefully, but creatively, about the work they are attempting to do, where they propose to do the work, how that work is administered, and who bears the brunt of responsibility for the success of that work.

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