

International Encyclopedia of Rehabilitation

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Community Living for Inmates

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Introduction

The concept of community living is an important element to the re-entry of any institutionalized population—including individuals who have been incarcerated for committing a crime. Institutionalization of any population leads to isolation, segregation and detachment from the elements of society which define basic citizenship. While often individuals re-entering community have primary emphasis placed on the actual location where they will reside, their long-term success in the community is likely more contingent on the valued social roles that individual will play, extent to which they will be engaged in community, and extent to which they have been prepared for those ends while institutionalized or incarcerated.

Implications of Policy and Practice on Community Re-Entry

The United States (US) is currently facing the reality that approximately two-thirds of the people leaving prisons will be re-incarcerated within three years of release, (Wodahl, 2006; Re-entry Policy Council, 2003). There are several factors that contribute to ineffective transition of inmates from prison back into productive community living and full participation. A primary factor is the limited capacity of the current corrections system to effectively deal with the increase in the rising number of people who are arrested and incarcerated each year. Mandatory sentencing policies designed to reduce crime such as the Rockefeller Drug Law; the Secondary Offender Law and the Violent Felony Offender Law as well as the increased imprisonment of non violent offenders have in fact become a primary cause of an exponential growth in the prison population in New York State and in other states across the nation (Reich, 1994). Truth-in-sentencing laws and the elimination of discretionary release in many of the states in the US have compounded the problem by creating unprecedented expansion in the prison population.

Prisoners in America are poorer and considerably less likely to be employed prior to arrest than the rest of the population. Prevalence of disability in the US is undeniably linked with poverty, (Russell and Stewart, 2001). Overcrowding has led to a shift in priorities, placing the spotlight on security and safety rather than a focus on rehabilitation programming efforts. In 1996, 94% of the 22 billion dollars spent on prisons went to the construction and maintenance of the facility itself. The 6% balance was used for in-prison rehabilitation programs (Boulard, 2002). Additionally, programming for an inmate is often based on what is available within the prison rather than designed to meet the individual needs of the inmate from a current focus and future orientation approach. As a result, prisoners are less prepared for reintegration and less connected to supportive community-based social structures that may be helpful in keeping people out of trouble (Travis and Petersilia, 2001). Consequently many people with mental disabilities are caught in a vicious cycle of arrest, incarceration and release without treatment. In 1985, the Correctional Association of New York conducted a comprehensive study to explore the prevalent issues in the service delivery system for inmates who were mentally ill, mentally retarded and/or learning disabled (Reich, 1994). The results of the study were issued in a 1987 report and were instrumental in leading to the opening of a special needs unit for fifty-two male inmates who were reported to be mentally retarded at the Wende Correctional Facility located in western New York State. Later, two additional special needs units were opened; Sullivan Correctional Facility in Fallsburg, New York and the Arthur Kill Correctional Facility on Staten Island, New York. To some extent these reforms have improved conditions for inmates who are mentally disabled by expanding mental health and other specialized programs to which the inmate has access during his incarceration, but these improvements only begin to scratch the surface of making the necessary connections between prison life and life outside of the walls of the institution.

Driving the evolution of the correctional system toward meeting the individual needs represented by inmates with disabilities was a growing trend since the de-institutionalization movement of the mid-1960s. The US, like many other countries, is still struggling with how best to coordinate policies and programs to support people with disabilities in achieving employment and community living and participation outcomes commensurate with their non-disabled peers (Golden, Zeitzer & Bruyère, forthcoming) including those individuals with disabilities who are incarcerated. While the 20th century emphasis was on a medical approach to disability and rehabilitation, primarily designed to fix what is wrong with the individual, trends over the past three decades have moved toward a functional supports approach that recognizes the unique characteristics, skills, abilities and support needs of an individual. This trend has not only impacted community-based service disability systems but also the correctional service system as well. This capacity-based focus recognizes that in order to validate social roles that individuals can play in their communities we must first understand the individual and build on their strengths while individually managing and supporting their needs for assistance and support (Wolfensberger, 1998). The movement in policy and practice was further supported by the Rehabilitation Act of 1973 which expanded the rights of people with disabilities to live, work and spend leisure time in regular community settings (Fleisher and Zames, 2001). Building on this momentum in the disability arena, the field of person-centered planning began to emerge in the late 1970s, establishing both a

philosophy and a set of systematic methods developed for the expressed purpose of learning how people who have disabilities can become contributing members within the natural community, beyond the real and artificial barriers of the disability service system (O'Brien and O'Brien, 2002). While these trends in both the correctional and disability fields provide important policy considerations for inmate community re-entry, translation to practice and enhanced community living outcomes have yet to reach their potential.

Re-Entry Challenges and Issues

Nationally, there is a major divide between the adult service delivery system and the correctional service process. While some community-based organizations provide some specialized residential, vocational, clinical and other services to inmates upon discharge, they are few and far between. This means that the scant number of programs that do exist become overwhelmed with requests to provide services and can not meet the needs and demands of returning prisoners. Communities that lack any services at all leave people with significant support needs to return home to the same conditions from which they left. Linkages between correctional facilities and community agencies must be forged with the intention of improving the integration of inmates being released back into our communities. Currently in the US, emphasis on re-entry into communities has become a primary area of focus for both the prison and parole systems, most recently bolstered by the authorization of the Second Chance Act, making rehabilitation a central goal of the federal justice system (Eckholm, 2008).

To date little rigorous research has been conducted to study the impact that in-prison services have had on the successful re-entry of ex-offenders into community living. However, there is an emerging body of knowledge that points toward the need for integrating prison services with post-incarceration services as a critical emerging best practice for improving community reintegration outcomes (Bloom, 2006).

The probability of parole violation and re-arrest is seven times higher for ex-offenders in New York City who are released to homeless shelters than that of people who are released to stable residential placements, (Nelson, Deess, and Allen, 1999). Low levels of educational achievement and limited job skills are precipitating factors that show up on inmate profiles and contribute to the likelihood of recidivism. The successful re-entry of former inmates into civilian communities relies on realizing better outcomes for people being released from prison across several key domains, including but not limited to: housing; employment, family and community connection; drug/alcohol programming; education, and public safety. A 1987 report issued by the Correctional Association of New York concurs that it is the combination of literacy training, job skills training/placement, drug/alcohol counseling, and access to suitable housing that create better opportunities for success as inmates leave prisons (Reich, 1994). The Re-Entry Council (2003) emphasized the need for in-prison programs to emphasize enhancing and building education and vocational skills; addressing drug and alcohol issue; offer and provide culturally competent mental health counseling, and that facilitate community and family connections long before it is time for discharge planning.

The Role of Planning in Supporting Inmate Re-Entry

Perhaps the simplest way to approach the issue of re-entry and community living for inmates is to start working toward successful re-integration on the day that the person becomes incarcerated. This approach, which starts with the end (release) in mind assumes that the inmate, like approximately 97 percent of all inmates incarcerated in the US, will indeed return one day to civilian life (Re-Entry Council, 2003). Toward this end, work must be undertaken to discover and nurture the potential the individual might have for a successful return to community life. This requires seeing the inmate (and helping inmates to see themselves) in productive and meaningful roles outside of the prison even though they are inside of it at the moment. Assessment refers to the process by which the inmate is evaluated so that appropriate programs and services can be identified to address specific needs and concerns. It establishes the framework for life within prison walls. The assessment is generally conducted at the point of intake, within the first few days of entering into a correctional facility. It is important that the assessment include methods through which the primary needs, strengths, interests and health and social history of the person are considered in the development of the inmate's program and rehabilitation plan. The tools used in screening and assessment must address acute as well as chronic, static as well as dynamic factors unique to each person. Learning style and preference and the inmate's personality characteristics should also be included in the comprehensive assessment. When the strengths, interests, talents and experience of the person becomes part of the assessment process, a foundation has been set that can be leveraged and built upon throughout the individual's incarceration. Program Planning is the result of the assessment process. It is the process through which specific and general programs and services are provided during incarceration to equip the inmate with the knowledge, skill and experience to address existing problems (drug addiction, for example); to enhance or build strength-based competencies (i.e. interpersonal skills); and to attend to skill acquisition (i.e. employment skills). Good program planning uses the prevalent standards from community to establish goals with the inmate that build on the interests, strengths and abilities and needs identified in the assessment and, are designed to teach functional, educational, social and vocational competencies that will improve the likelihood of leaving prison better equipped to live in the community. Formulating ideas about living in the community, re-uniting with the family and holding a job outside of the prison help direct the design and implementation of an individualized program plan.

The planning process should be designed to invite and to facilitate the involvement of family and significant others at any time throughout the period of incarceration and re-entry. Families, too, are impacted by the crime committed by their loved one. In-prison programs, addressing parenting and other family-related relationships are crucial for inmates who may benefit from them. A study conducted by the Urban Institute on Families and Reentry (Returning Home, 2007) indicated, among other things that most prisoners believe that family support was an important factor in helping to avoid returning to prison once released. The report further indicated that closer family relationships were more likely to lead to becoming gainfully employed after release.

Planning that provides inmates with opportunities to participate in employment skills training programs may increase the likelihood of finding a job once released from prison. Findings from the Opportunity to Succeed impact evaluation report (2003) revealed that participation in work and work release jobs in prison increased the likelihood of being fully employed after prison. Higher levels of participation in outpatient substance abuse treatment programs were associated with increases in full-time jobs and an increase in employment was a predictor of reductions in drug dealing, violent crimes and property crimes (The Urban Institute, 2007).

The work that is done in prison is, however, only half of the equation. No one institution or organization can, on its own, provide every aspect of what is needed to create the conditions that promote positive and successful post-incarceration outcomes. A concentrated effort for post-release programming through comprehensive discharge or transition planning, including access to stable, suitable housing and continuity of care during the period immediately following release is vitally and equally important. The transition plan should, in fact, be an extension of the program plan. The results of poor transition planning, in addition to presenting a compromise to public safety, return people to the middle of the same set of circumstances that created the conditions for committing an offense in the first place.

Factors to consider in the development of a transition plan would include where a person will live, how they might interact with their community, especially through paid employment, and what type of supervision and support will be most effective in assisting the inmate in not only staying out of prison but in becoming a productive and contributing member of society. Early identification and pre-release involvement of community-based programs, including housing, that is available to address the needs and interests of the inmate upon release is important. Making connections to health care, treatment and service providers prior to release provides a continuity of care that may improve outcomes for returning inmates. Helping to find appropriate and safe housing options for those that need them has proven to be an important factor in keeping individuals out of prison, (The Urban Institute, 2007). This building of “seamless services” to bridge in-prison programs with community programs closes a significant gap that currently exists between these systems and may further serve to increase the trust and investment of both entities as well as to reduce the inmate’s anxiety or hesitation to attending community programs and treatment upon release. Good transition planning requires the engagement of a multi-stakeholder group who is committed to functioning as a transition planning team that is invested in designing a comprehensive re-entry plan for support. Prison staff including facility parole officers, community members, including representation from community corrections, law enforcement personnel and community-based service and work-force development organizations all play a role to collaborate efforts that close service gaps and improve successful community living outcomes for inmates returning home.

While there are relatively few outcome studies that identify evidence-based prison discharge/transition planning processes, promising practices that embrace a philosophy of

comprehensive, strength-based program and transition planning are emerging on the re-entry horizon.

Promising Re-Entry Practices

Project Return (<http://www.projectreturn.com/>) concentrates its efforts on those at highest risk for returning to prison. The program seeks to break the cycles of criminal and violent behavior through a process that assists convicted felons in making a successful transition from prison to the community and into employment. Participants engage in a combination of programs and interventions geared toward addressing the prevalent issues faced by returning inmates. Each week participants spend approximately 12 hours in GED/academic coursework, eight and a half hours in addictions education, six and a half hours in hands-on computer training, four and a half hours in employability skills training, four hours in communication skills, and two hours in community building. A stipend of five dollars per hour is paid to each participant during the sixty to ninety days the inmate is in the program prior to job placement. Project Return was developed in 1989 by Dr. Robert E. Roberts as the direct result of a three-year in-prison research study that demonstrated the efficacy of a community-building intervention technique in the improvement of reading scores of inmates and as a method for reducing major and minor disciplinary infractions within the institution. The study also revealed that a major contributing factor to the soaring rates of crime and recidivism in Louisiana was the inability of former convicted offenders to get their lives restarted upon release. Inmate participants had an average sixth-grade reading level and nearly one-third were illiterate. In addition to their addictions remaining untreated, many former offenders upon release could not find gainful employment and could not re-establish a functional family environment. Dependence on welfare systems, relapse into substance abuse, and a return to criminal activities were common results. Old patterns were easily re-established. The services provided to the program participants enabled them to make a more successful transition from prison to the community, compared with similar ex-offenders who did not participate in, or complete, the program. Project Return also appeared successful in reducing recidivism rates when compared with those for ex-offender populations nationwide. As noted, the recidivism rates, in those studies reviewed, ranged from 24% to 48% one year after release, compared with 10.7% for Project Return.

Another model, called the Assess, Plan, Identify and Coordinate Model (APIC) (Osher, Steadman, Barr, 2002), describes elements of re-entry associated with the successful community integration of inmates with co-occurring disorders. The model is based upon the premise that there must be a collaborative partnership between the correctional system and the cadre of community service supports. Initial responsibility for transition planning begins in the correctional facility through the screening and assessment process. “A”ssess the inmate’s clinical and social needs and the risks to public safety. Next, a “p”lan for the treatment and services required to address the inmate’s needs is developed and implemented. Transition planning subsequently follows with correctional facility personnel taking initial responsibility for establishing linkages between the prison and community services—“i”dentifying required community and correctional programs responsible for post-release services. Finally, “c”oordinate the transition plan to ensure implementation and avoid gaps in care with community services. Studies are currently

underway to measure the efficacy of this project on successful re-entry of this special population of inmates.

EYA ReEntry Services (<http://www.eckerd.org/programs/reentry.html>) is a Florida based re-entry program for youth that was established to help keep young people on course with their academic, vocational and social skills by providing ongoing support through a network of community resources. A Community-Based Support Program, EYA ReEntry Services is unique in its balance of supervision with service. For example, youth meet with their aftercare case manager before release from residential treatment. It is common for ReEntry counselors to take a youth to a first job interview or to re-enroll in school. They are with the youth for virtually every step of the re-entry process.

The Inmate to Citizen Project in New York State (<http://www.ilr.cornell.edu/edi/p-inmate.cfm>) is a five year research demonstration designed to determine the impact of integrating a person-centered approach into the assessment, treatment and release planning for inmates with developmental disabilities who are incarcerated within special needs units. The model for the project is based on a person-centered planning process, A Framework for Planning (Blessing and Ferrell, 2004) that establishes a positive profile of the inmate during the assessment process. The positive profile serves as the basis for subsequent individualized strength-based program planning, implementation and release planning. At the core of the planning process is the articulation of post-incarceration community membership roles and the identification of community networks of support. The correctional facility is not in the position to provide outreach services. Clearly the comprehensive approach to re-entry that is begun during incarceration using this process relies heavily on a solid connection from the community to the facility in order to improve the likelihood of successful transition. The project developed an instrument based on the World Health Organization (WHO) International Classification of Functioning, Disability and Health (ICF) to assess the support needs and individual goals of inmates with developmental disabilities in Special Needs Units in Upstate New York prisons.

As part of the intervention introducing a person-centered planning tool to help SNU staff to gather information to support the effective treatment and discharge planning for inmates with developmental disabilities, the ICF instrument was given to prison employees (correction officers, teacher, counselor, mental health personal and other employees) to rate capability and support needs of inmates with mental disabilities before and after the training intervention. The instrument allows rating of inmates' support needs and assessing the importance of activity limitations and participation restrictions for a successful community reintegration. As a consequence of the training, participants across all SNU units and professional groups showed improvements on major dimensions of person-centeredness like seeing the inmate as a person, increased understanding and consideration of the inmate's perceptions and needs, conveying personal professional confidence and encouraging new initiatives, openness for innovative rehabilitation approaches, and developing relations based on trust.

This adds to evidence of the impact of integrating a person-centered approach into the assessment, treatment and release planning for inmates with developmental disabilities derived from anecdotal data where inmates offer their opinion on the relevance and satisfaction of the Framework for Planning work book and mapping process. Finally as the Inmate to Citizen project completes the last phase these results need to be confirmed by comparing inmates' preparedness and knowledge before and after their exposure to person-centered processes using indicators that assess inmates' (1) knowledge of and preparedness regarding community reintegration activities; (2) measures of their confidence that their knowledge in this area will not result in them returning to prison; and (3) ratings of the extent to which they have thought about and planned in this area.

Conclusion

Approximately 97 percent of the over two million people incarcerated in the United States today will one day be returning back to our communities, at a rate of about 600,000 per year (McKinney, 2008). The past four decades have shown that a judicial system built on punishment as a means of reducing crime has led to exponential growth in the number of people who are incarcerated each year, and people are leaving prison ill-equipped for a successful return to citizenship. The current concept of rehabilitation within prison facilities and into community service programs needs careful re-examination.

The thinking of and planning for community living for inmates must start at the point of incarceration rather than a few months before releasing a person from prison. Treatment plans that are developed based on conducting comprehensive assessments that surface positive profiles with a focus on strengths, needs and abilities and that provide skill-based training and program support on post-incarceration outcomes (such as employment and housing) offer promise for emerging best practices. There is growing national recognition that no one entity can or should be solely responsible for ensuring successful community re-entry for inmates. This is a social issue that must be addressed across all levels of the systems that are impacted by incarcerated people. Most crucial is the need to establish cross-agency and cross-community partnerships designed to facilitate the successful transition from incarceration as an inmate to making productive contributions to as a community citizen.

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