

Reentry Readiness and the Revolving Prison Door

People leave prison every day. They frequently leave with a multitude of mental illnesses, addiction disorders, trauma histories, and chronic health problems, as well as with deficits in interpersonal, vocational, financial, and social resources. There is nothing new about this. For decades, state prison systems have released thousands of people annually, most of whom were unprepared for community living and its related challenges.

That these same people return to jail and prison on parole violations or new convictions within days, months, or years post-release also is not new. It is well-known that there is a revolving door on the nation's prisons. A revolving door that in many ways is akin to that on psychiatric hospitals in the 1970s and 1980s. This similarity is hardly surprising given that both institutions release people who have become institutionalized after years of confinement. Both types of institutions also have relied on family resources to support community integration, even though family and community networks are often strained, disrupted, or destroyed by the interval of time the person is away. In many ways, the revolving door exists because this population is unprepared for reentry into communities that are equally unprepared to receive them.

What is new is that policy makers are concerned about the revolving door. They are concerned for reasons of public safety and economics. The public's safety is put at risk if people leave prison and commit new crimes to survive. Sending legions of people into communities, particularly distressed urban communities, with chronic health and behavioral health problems and few marketable skills or rehabilitative resources creates desperation, and desperation causes crime and harm. As recidivism rates increase, a vicious cycle is reinforced and perpetuated.

Locking people up again and again for crimes instigated by desperation, however, is a less palatable solution under the new fiscal strains and constraints facing state governments. States are learning that they can no longer afford their "corrections habit." According to a recent Vera Institute report,¹ corrections expenditures are the second fastest growing general fund expenditure, second only to Medicaid. Forced by mounting deficits, roughly half of the 50 states have recently reduced funding for corrections. Relatedly, governors in four states (Delaware, Kentucky, North Carolina, and South Dakota), recognizing the cost-deficit dilemma, have established statewide reentry task forces to explore problems and solutions associated with releasing thousands of people from prison to the community. In order to be effective, these task forces must have accurate information about soon-to-be-released persons, including the skills they have, the resources they need, and the challenges they face.

Now for some good news: federal funding for reentry has been increasing. Congress approved funding to support reentry initiatives in 2008 under the Second Chances Act. Companion legislation is now moving through the Congress to fund reentry activities under the Second Chance Act and Workforce Investment Act. This bill provides targeted funding for reentry-related employment initiatives, mental health services programs, and substance abuse prevention and treatment programs.

While reentry-related funding is flowing into states, its target efficiency and ultimate effectiveness depend on whether it goes to the right people in the right ways. Here is where knowing the population — its needs, strengths, and resources — is critical. Equally critical is awareness of the infrastructure of the institutions that serve as 'home' for this population for years and in many cases decades. The Center recently completed a Reentry Readiness Survey of the population of soon-to-be-released men and women from New Jersey prisons. Data from the survey will be used to describe the general state of readiness of soon-to-be-released people to resume successful living in the community and will focus attention on how the needs, strengths, and resources of men and women with behavioral health problems differ from those without these problems. This survey will serve as both a needs/risk assessment tool and a blueprint for intervention. Ultimately, the survey will inform and assist policy makers responsible for reentry initiatives.

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About the Policy Brief

The policy brief series is produced monthly and highlights a policy issue under study at the Center. Policy topics include reentry, diversion, sentencing, recidivism, employment, treatment, and recovery. For more information, see the News page on the Center's website.

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We need a “human upgrade” before we are released.

—A Soon-to-be-Released Inmate

The Reentry Readiness Survey

The Center, with cooperation from the New Jersey Department of Corrections (NJDOC), conducted a computerized survey of reentry readiness from June 5 to August 7, 2009 at 11 adult correctional facilities operated by the NJDOC. People eligible for the survey were within 24 months or less of their expected release date. Excluded from the survey were people within 24 months of release but who were either held in long-term residential treatment units or administrative segregation for disciplinary problems. Of the 7000 or so eligible inmates, approximately 4200 completed the hour-long survey.

The survey included questions about medical and behavioral health problems, program participation while incarcerated, beliefs, values, and attitudes related to reentry, employment and living skills, social support, financial resources and debts, and concerns about the future. This information will be used to describe the skills and deficits of the soon-to-be-released

people from New Jersey prisons, the people they rely upon for assistance inside and outside the prison, their attitudes and values, the health-related problems they take with them to the community, and what they need to “make it” upon release. These data will also be used to explore whether and how people with chronic health and/or behavioral health problems might be at greater risk for desperation in terms of marketable skills, rehabilitative resources, and medical needs upon release. Information from this survey will enhance the continuum of care model for this population and will hopefully facilitate seamless and successful reentry.

This is the first large-scale, population-based survey of reentry readiness of people to be released from a state prison system. It will provide the details necessary to effectively and efficiently target those in greatest need of reentry assistance and the areas within the correctional population that are in greatest need of investment prior to release.

Table 1. Demographic Characteristics of the Soon-to-be-Released Sample

The men and women to be released from prison in New Jersey within the next 24 months range in age from 18 to 79 with a mean age in the early to mid 30s (see Table 1). Most are African American or Hispanic, have completed high school or a GED, are single, have children under the age of 18, and have some form of social support. Males, compared to their female counterparts, were significantly more likely to be African American. A small minority of soon-to-be-released inmates reported being veterans.

Demographic Characteristics	Men (n=3986)	Women (n=218)
Age, mean	33.3*	36.5
African American, %	51.4*	38.3
Hispanic, %	25.3	21.2
White, %	15.3*	29.5
Education, % HS/GED or above	61.4	61.3
Marital Status, % married	12.5*	18.9
Children, % with children <18	57.0	55.8
Social Support, % without family/friends	16.8	17.9
Veteran, %	6.6	3.7

*Statistically significant results comparing men to women based on t-test or Chi-square test, $p < 0.05$. All percentages are based on valid numbers.

Table 2. Criminal Profile of the Soon-to-be-Released Sample

Criminal convictions impact access to social services as well as employment opportunities. The civil consequences are especially severe for people with drug possession and distribution convictions.² Depending on the state and nature of the drug conviction, people with drug convictions can be denied access to public housing, cash assistance, and federal aid for higher education, as well as have their driver's licenses suspended for up to 24 months. Well over half of the soon-to-be-released men and women reported a drug-related conviction and, on average, had been incarcerated for nearly three (women) to four (men) years (see Table 2).

Criminal History Characteristics	Men (n=3986)	Women (n=218)
Years incarcerated since age 18, mean	7.7*	5.3
Years incarcerated on current conviction, mean	3.8*	2.7
Returned on parole violation, %	14.3	12.9
Type of conviction, %		
Drug possession	32.5	30.0
Drug distribution	34.1*	22.6
Property offense	19.4*	25.4
Fraud/identity theft	2.5*	10.6
Violent	24.3*	18.4
Sexual offense	5.2	3.7

*Statistically significant results comparing men to women based on t-test or Chi-square test, $p < 0.05$. All percentages are based on valid numbers.

Table 3. Health Status of the Soon-to-be-Released Sample

People leaving prison have a wide array of health and behavioral health problems that will require treatment in the community (see Table 3). Most men and women are leaving prison overweight and report gaining weight while in prison. A significant minority reported fair or poor health, being treated for chronic health and behavioral health problems while incarcerated, and having chronic pain. Once they return to the community, nearly a half or more of returning women reported that they will need treatment for medical and addiction-related problems, with over a third who reported that they will need mental health treatment. A sizable but smaller proportion of the returning men reported that they will need community-based treatment for medical and behavioral health problems.

Health Status Characteristics	Men (n=3986) %	Women (n=218) %
Weight Problems		
Overweight	47.9*	32.9
Obese	29.6*	41.7
Self-rated Health		
Fair or Poor	16.2*	24.4
Taking medications for		
Chronic medical problems	21.5*	40.6
Emotional/mental problems	5.6*	19.8
Other Limitations		
Disabilities limiting work	10.3	11.5
Chronic pain	20.6*	33.2
Community Treatment for		
Medical problems	40.8*	60.1
Mental health problems	17.2*	37.6
Alcohol/drug problems	25.5*	49.5

*Statistically significant results comparing men to women based on Chi-square test, $p < 0.05$. All percentages are based on valid numbers.

Table 4. Employment Profile of the Soon-to-be-Released Sample

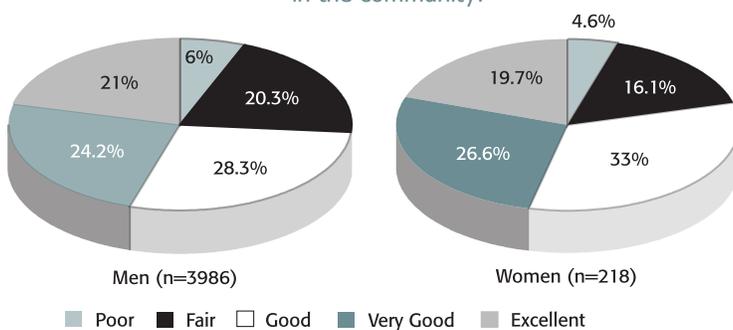
The employment experiences of the soon-to-be-released men and women were remarkably conventional (see Table 4). Most of the men and women reported that they had held a job for at least a year during their adult life and more than half reported that their last job prior to incarceration was a legal job for which they received a paycheck. Less than half of these individuals, however, were working full-time prior to their arrest, although men compared to women were more likely to be employed full-time at the time of their arrest. Full-time employment prior to arrest was more typical for males than their female counterparts.

Employment Characteristics	Men (n=3986) %	Women (n=218) %
Worked full-time prior to arrest	43.2*	33.6
Held job for at least one year	78.3	78.8
Last job prior to incarceration		
Legal job, received paycheck	57.5	58.1
Legal job, paid under the table	13.6	8.8
Illegal job, paid cash	16.4	19.4
Other type of job for pay	5.0	6.0
Not working, legal or illegal job	7.6	7.8
Job paid enough to pay the bills	72.4	67.3

*Statistically significant results comparing men to women based on t-test or Chi-square test, $p < 0.05$. All percentages are based on valid numbers.

Self-Assessed Readiness to Live in the Community

How would you rate your readiness to live independently in the community?



When asked about their readiness to live independently in the community, roughly one in five women and one in four men reported their readiness as poor or fair. In addition, roughly half of soon-to-be-released men and women indicated that they did not think or did not know if they would be able to support themselves in the community. Most of the respondents, however, reported being hopeful about “making it” in the community. The sources of their hopefulness were concentrated in domains of self-efficacy and prison-related growth, enhanced by support received or promised by family (see Table 5).

What gives you hope about your readiness?	Table 5. Percent Reporting											
	Nothing	Support Received or Promised by				Prison-related Growth			Self-Efficacy			
		People Inside Prison	Family	Friends	Community Programs	Work Done on Self	Ability to Survive Prison	Programs Completed	Job Skills	Commitment to Succeed	Inner Strength	Faith in God
Men (n=3986)	1.5	10.9*	54.0*	17.1	9.7*	41.8*	23.0*	24.8*	48.2	57.2*	55.5*	54.2*
Women (n=218)	0.5	20.6	63.8	20.2	22.0	62.4	39.9	46.3	47.3	71.1	72.0	74.8

*Statistically significant results comparing men to women based on Chi-square test, p < 0.05. All percentages are based on valid numbers.

Practice and Policy Implications

The vast majority (95% or more) of incarcerated people eventually return to the community. Preparing them and the communities to which they will return for their return is vital if the revolving prison door is to be stopped. This survey attempted to better understand the strengths, needs, and resources of those leaving prison, and the programs and resources that are available inside prison to prepare people for their return to the community. In other words, this survey was designed to help determine what is needed to better prepare people to “make it” on the outside. Results from this survey will be used to inform policy makers and receiving communities about what is needed and by whom to get the most out of the reentry dollars flowing into the state. Over the next year, Center staff will be analyzing the survey data to provide a more evidence-based profile of the soon-to-be-released men and women from New Jersey prisons. These results have the potential to strengthen and make more cost-effective the reentry policies and practices within the New Jersey Department of Corrections and the reentry policies established by the state legislature. Everyone gains when reentry initiatives and dollars are strategically targeted to help people leaving prison gain the skills, abilities, and support to succeed once released.

More Information on Reentry Readiness and Related Topics

See our website www.cbhs-cjr.rutgers.edu to find more publications and materials on reentry and to learn more about the Center’s practice and research activities.

The Center’s Practice-Related Activities Informed by Research

Community Centers – The Center is sponsoring two peer-operated Community Centers at Edna Mahan Correctional Facility for Women. The Community Centers have computers and printers for preparing resumes, cover letters, and other correspondence related to reentry; county-specific resource binders with validated information on housing, employment, educational opportunities, and social support resources; and a self-help book and video library with books and DVDs on reentry and other related topics. The Community Centers serve over 200 women per month. The paraprofessionals working in the Centers have completed a 14-week Community 101 program developed and taught by Dr. Wolff. The program’s philosophy of “each one, teach one” is facilitated by the Community Centers and the tuition payment for Community 101, which is 25 hours of community service. Resources for the Community Centers are funded in part by private charitable donations to the Center’s Books Behind Bars account with Rutgers Foundation.

The Bridge Newsletter – Every month the paraprofessionals of the Community Centers write a reentry newsletter that is distributed to the inmate population. Topics of the newsletter have included employment, parole, health, personal boundaries, stress, and forgiveness. *The Bridge* newsletter can be found under the **News menu** on the Center’s website.

Reentry Survival Manuals – Using qualitative data from interviews with 200 male and female inmates located in 12 prisons in six states, the Center developed *Reentry Survival Manuals* that are being used by inmates in the federal prison system and the state prison systems in Maryland and New Jersey. These manuals can be downloaded from the Center’s website (click on **Technical Assistance**).

References

¹ Scott-Hayward, C.S. (July, 2009). *The Fiscal Crisis in Corrections: Rethinking Policies and Practices*, Vera Institute of Justice. Retrieved August 31, 2009, from http://www.vera.org/files/The-fiscal-crisis-in-corrections_July-2009.pdf.

² Pogorzelski, W., Wolff, N., Pan, K., & Blitz, C. (2005). Are second chances possible? The reality of public policy on reentry for ex-offenders with behavioral health problems. *American Journal of Public Health*, 95(10), 1718-1724.