Testimony of the
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Good afternoon. Chairman Mollohan, Ranking Member Wolf, and distinguished Members of the Subcommittee, it is an honor to be here to discuss one of the most pressing challenges facing our Nation, prisoner reentry. As a judge for nearly 30 years, I have not only seen first hand how the current system of justice has failed to reduce the ever growing rates of incarceration and recidivism but, more importantly, I have learned that if we make basic changes to our existing sentencing policies and parole and probation practices, utilizing an effective reentry court system with responsibility returned to the courts, and judges, we can and do produce better outcomes.

The Prisoner-Reentry Population is Expanding Rapidly in the U.S.

Over 650,000 inmates are released from U.S. prisons back into the community each year, and the number of released inmates has been growing steadily over the past few decades.[1] Approximately 93% of all inmates are eventually released from prison and approximately 45% of state prison inmates are expected to be released within a given year.[2] Currently, the ratio of new prison admissions to prison releases is approaching 1:1; that is, for every new inmate sentenced to prison, another inmate is released.[3] In part, this is the result of prison population caps that have been imposed in many jurisdictions, which require the total inmate head-count to remain steady or decrease in designated institutions. Absent the availability of new funds to build new facilities, some inmates must be released in order to make way for new entrants.

Traditional Parole Supervision Has Been Unsuccessful

Unfortunately, success on parole has been the exception rather than the rule. Less than one-half of parolees satisfy their conditions of parole supervision, including remaining abstinent from drugs or alcohol.[4] Within 3 years of their release from prison, approximately two-thirds of inmates are charged with a new crime and over one-half are re-incarcerated either for a new crime or for a technical parole violation.[5] Over 85% of drug-abusing offenders return to drug abuse within the first year after their release from prison and over 95% return to drug abuse within 3 years.[6]

Outcomes are even worse for inmates who "max out" on their sentences and are released without parole supervision. Unconditional releases are approximately 10% more likely to be rearrested for a new criminal offense than inmates released under parole supervision.[7]

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[1] E.g., McCaskill, C. (2008). Next steps in breaking the cycle of reoffending: A call for reentry courts. *Federal Sentencing Rptr, 20*, 308-309.

[2] Petersilia, J. (2003). *When prisoners come home: Parole and prisoner reentry.* Oxford Univ. Press.

[3] Id.

[4] Solomon et al. (2005). *Does parole work? Analyzing the impact of post-prison supervision on rearrest outcomes.* Washington, DC: Urban Institute

[5] Langan & Levin (2002). *Recidivism of prisoners released in 1994.* Washington, DC: Bureau of Justice Statistics, U.S. Department of Justice. Spohn & Holleran (2002). The effect of imprisonment on recidivism rates of felony offenders: A focus on drug offenders. *Criminology, 40*, 329-357.

[6] Hanlon et al. (1998). The response of drug abuser parolees to a combination of treatment and intensive supervision. *Prison Journal, 78*, 31-44. Martin et al. (1999). Three-year outcomes of therapeutic community treatment for drug-involved offenders in Delaware. *Prison Journal, 79*, 294-320. Nurco et al. (1991). Recent research on the relationship between illicit drug use and crime. *Behavioral Sciences & the Law, 9*, 221-249.

[7] Solomon et al., *supra.*

Reasons for Poor Outcomes on Parole

How do we explain these abysmal outcomes? My observation is that the problem stems primarily from the absence of the continuing authority of the courts over reentry cases. Virtually all offender-reentry programs transition individuals from prison or jail back into the community under the supervision of parole, or probation as in the case of split-sentencing jurisdictions. Although the intent is to place the offenders in treatment and other programs that meet their needs for successful reintegration, there are several major problems with this approach:

1. *Responsibility for supervising the offenders is fragmented and distributed across multiple criminal justice agencies.* The truth is that we do not have a "criminal justice system" in this country; rather, we have multiple systems—perhaps better characterized as fiefdoms—that take turns supervising offenders. After sentencing, the courts are often no longer involved with the case until there is a petition for a violation of probation (v.o.p.) or the offender has been charged with a new crime. (Even then, the case will often be brought before a different judge than the one who originally sentenced the offender, with no familiarity with the offender or the originating case). In many instances, after sentencing the court hands over authority for the offender to another agency. The offender may be sentenced to probation, which depending on the jurisdiction may be administratively housed within or outside the judicial branch, within a separate executive agency, or sometimes within the department of corrections (DOC). If the offender is sentenced to jail, prison or an intermediate sanction, such as boot camp or a community-correctional center, authority over the case is typically transferred to DOC, which is independent of the courts.

   This fragmented process virtually guarantees that there will be a lack of continuity in treatment and supervision of offenders. If a careful assessment of the offender was used to craft the original sentencing plan, the assessment results are often not communicated down the line to probation, parole or DOC, and do not necessarily control or influence subsequent decisions made about the offender. As a result, whatever care was taken by one agency to provide the appropriate disposition may be ignored or undermined by another agency within a few days, weeks, or months. What we need is a seamless transition of supervision plans, starting from the point of arrest or sentencing, and continuing uninterrupted through community reentry.

2. *Probation and parole officers often lack the requisite power and authority to control their cases in the community.* It is unacceptably naïve to believe that offenders are ordinarily motivated to receive treatment and other services, and to take responsibility for their rehabilitation. Even those offenders who are motivated to change their behavior often lack confidence that they are capable of doing so. As a result, they may be expected to exhibit poor compliance with treatment and other supervisory conditions. Left to their own devices without close monitoring and meaningful consequences for their non-compliance in treatment, approximately 75% of probationers and parolees drop out of treatment prematurely or attend treatment irregularly.[8]

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[8] See, e.g., Marlowe, *Effective strategies for intervening with drug-abusing offenders*, 47 VILL. L. REV. 989 (2002).

Unfortunately, probation and parole officers often lack appreciable power to intervene in this process. Apart from relatively low-magnitude sanctions at their disposal, they are typically required to file a v.o.p. petition with a court or hearing officer. The adjudicative process is often lengthy and there is no guarantee the judge or hearing officer will be familiar with the case or will back up the probation or parole officer's recommendations. Often, the judge or hearing officer may unintentionally undermine the parole officer's efforts. What we need are dedicated court calendars that routinely hear v.o.p. petitions, are staffed by judges who are familiar with the cases and with parole conditions, and are prepared to back up parole officers' decisions with judicial "teeth."

3. *Probation and parole agencies have had considerable difficulty bringing the treatment community to the table.* Although approximately 80% of offenders are substance abusers[9] and nearly one-half are clinically addicted to drugs or alcohol,[10] a recent national survey found that relatively few parolees receive adequate substance abuse treatment to meet their clinical needs. Only about one-half of parole programs offer low-intensity educational services, and less than one-quarter offer an adequate dosage of evidence-based treatment services.[11] Parole agencies are even less likely to offer services for problems other than substance abuse, such as mental illness, medical illness, family dysfunction, or domestic violence. Less than 20% of parole programs offer services addressing these critically important issues.[12]

   Many parole agencies have no incentive to even consider local treatment and services because they are never in the position to begin the engagement process with the offender. A recent study in California found that in 2005, fully two-thirds of more then 120,000 California parolees only saw their parole agents once every six weeks.[13]

   In my experience, most probation and parole officers direct offenders to find a place to live, get a job, report regularly, enter treatment, drug test, and stay out of trouble. The obligation is put nearly 100% on the offender and if he or she fails to follow directions, the answer is often more punishment. Armed with quasi-police powers of arrest and detainment, the result is often repeated v.o.p.'s for technical violations, resulting in an expensive, revolving-door process of release, followed by re-incarceration, followed by release. Relatively sparse efforts are made to apply treatment-oriented consequences or to administer lower-magnitude sanctions that can maintain the offender in the community while simultaneously protecting public safety.

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[9] Belenko & Peugh (1998). *Behind bars: Substance abuse and America's prison population.* New York: Center on Addiction & Substance Abuse at Columbia University.

[10] Karberg & James (2005). *Substance dependence, abuse, and treatment of jail inmates, 2002.* Washington, DC: Bureau of Justice Statistics, U.S. Dept. of Justice. Fazel et al. (2006). Substance abuse and dependence in prisoners: A systematic review. *Addiction, 101*, 181-191.

[11] Taxman et al. (2007). Drug treatment services for adult offenders: The state of the state. Journal of Substance Abuse Treatment, 32, 239-254.

[12] Id.

[13] California Department of Corrections and Rehabilitation, Expert Panel on Adult Offender and Recidivism Reduction Programming, Report to the Legislature (2007), *A Roadmap for Effective Offender Programming in California.*

This process was clearly exemplified in our experiences with intensive supervised probation and parole (ISP) programs that were implemented in the 1980s. These programs were created to provide closer surveillance of offenders in the community. The parole officers carried lower caseloads and were specially trained to identify and intervene with psychosocial problems faced by the offenders. Unfortunately, in practice many of the programs simply watched the offenders more closely, and were more likely to catch them in the act of committing infractions. As a result, the offenders were more likely to receive technical violations and to be returned to custody, rather than receiving augmented treatment services to help them remain successfully in the community.[14]

Importantly, however, research did find that those ISP programs that actually provided evidence-based treatment services to the offenders were associated with reductions in crime averaging 10% to 20%.[15] Virtually all of the reductions in recidivism were attributable to the parolees' contact with treatment. The more treatment they received, the lower the likelihood of recidivism. What we need is a problem-solving approach that brings parole officers, treatment providers and the courts together as a team to provide the most effective and cost-effective solutions for recalcitrant offenders.

California's Experience

There is no clearer evidence in my mind of these problems than California's experience with a relatively recent sentencing initiative called "Proposition 36". Simply put, Proposition 36 changed sentencing policy in the State related to nonviolent offenders who use and/or possess drugs (whether they are on parole or newly sentenced). It requires the courts and parole to order the offenders to enter treatment and prohibits incarceration if they attend and complete treatment.

The results over nearly 8 years have been clear. Those offenders on parole have been the least likely to enter treatment and complete it, although they have the most to lose in terms of incarceration. The lion's share of the parolees either failed to show up for treatment or dropped out of treatment prematurely, recidivism rates actually *increased* in our state, and roughly 60% of the parolees ultimately had their parole revoked.[16] In contrast, probationers who were sentenced by the courts and continuously supervised by a judge in a Drug Court-like model were the most likely to succeed and remain safely in the community.

Applying the Reentry Drug Court Model

These undisputed problems with parole call out for the application of the Drug Court Model to offenders reentering our communities. In many ways, our current problems with parole directly parallel those previously faced by probation agencies supervising offenders sentenced to community

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[14] *E.g.*, Gendreau et al., *Intensive Rehabilitation Supervision: The Next Generation in Community Corrections?*, 58 FED. PROBATION 72 (1994).

[15] Gendreau et al., *The Effects of Community Sanctions and Incarceration on Recidivism*, 12 CORRECTIONS RES. 10 (2000). Aos et al. (2006). *Evidence-Based Adult Corrections Programs: What Works and What Does Not* (2006). Washington State Institute of Public Policy.

[16] University of California, Los Angeles. (2005). *Evaluation of the Substance Abuse and Crime Prevention Act, 2005 Report.* Los Angeles: UCLA Integrated Substance Abuse Programs;

supervision in lieu of incarceration. Poor treatment compliance and high revocation rates among probationers led the courts to create the Drug Court Model as a community sentencing alternative.

Drug Courts bring the power and influence of the judiciary to bear on the management of drug-involved offenders. Participants are required to appear in court regularly for status hearings, during which the judge may apply gradually escalating sanctions for infractions and rewards for attending treatment, remaining abstinent and meeting other treatment-plan goals, such as finding a job or completing an education. A team-model is followed, in which the judge, probation, treatment agencies and police work together to manage the case and enhance improvements in offenders' functioning. The various agencies do not sacrifice their traditional functions, but rather exercise their functions in a problem-solving manner that enhances their own effectiveness in fulfilling their professional roles.

Drug Courts began as a pre-adjudication program designed to divert nonviolent offenders from incarceration into community-based supervision and treatment. Based on their documented success in enhancing offenders' compliance with treatment and reducing substance abuse and crime, Drug Courts have now expanded to become a viable post-conviction sentencing option, an alternative to revocation for repeat probation violators, and a reentry mechanism for prisoners returning to the community.[17] Reentry Drug Courts are being increasingly developed at the federal, state and local levels. Currently, there are 20 Federal Reentry Drug Courts (although they do not always go by that name) serving either as a condition of supervised release from the U.S. Bureau of Prisons, or as a last-ditch effort to avoid revocation for federal offenders who violate their terms of supervised release.[18]

One might ask what is the value of applying the Reentry Drug Court Model as a successful reentry strategy for offenders? The answer is that it effectively and efficiently resolves the barriers I previously identified. The reentry plan is developed from the outset at the point of sentencing, and is consistently applied throughout the offenders' involvement with the criminal justice system. Authority over the case is not transferred between different agencies, but rather is coordinated by the various actors within a unified system. This ensures continuity of treatment and supervision services over time, avoids duplication of efforts, and prevents agencies from acting at cross-purposes. Moreover, the authority of the court can be called upon at all times to back-up the authority of parole and corrections officers. Knowing that the judge will put "teeth" behind their efforts, parole officers may be more willing to alter the conditions of community supervision and apply lesser-magnitude sanctions, rather than feeling that they have little recourse but to revoke release. Finally, judges, through the advent of Drug Courts, have demonstrated their ability to bring the treatment community into the process, and to engage their efforts in an integrated manner toward improving offender outcomes. Put simply, when a judge invites treatment providers to a meeting or to a hearing, they usually show up and contribute. This level of cooperation has not been as easy to accomplish or as consistently applied when it has been attempted by correctional officers.

Targeting Reentry Plans According to Offenders' Risks and Needs

I am not suggesting that all released inmates need to attend a fully constituted Reentry Drug Court program, with all of the services that are ordinarily attendant to this model. Evidence from Drug

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[17] Huddleston et al. (2008), *Painting the Current Picture: A National Report Card on Drug Courts and Other Problem-Solving Court Programs in the United States*. National Drug Court Institute.

[18] Id.

Courts reveals that a substantial proportion of defendants and probationers can be managed on alternative "tracks" that may require fewer court hearings, less frequent treatment sessions, or lesser schedules of sanctions and rewards.[19] For example, substantial research in Drug Courts indicates that "low risk" offenders who have less severe drug problems, less complicated criminal histories, and better prognoses in standard treatment may not need to be managed on a regular status calendar in court.[20] Instead, they can be effectively supervised by probation officers and brought before the court only if there is a serious problem with their compliance in treatment.

In the probation context, this approach has been successfully applied in a program called Project H.O.P.E. (Hawaii Opportunity Probation with Enforcement). In H.O.P.E., offenders are primarily supervised by probation officers, undergo random weekly urine drug testing, and receive gradually escalating sanctions from the court for infractions. The sanctions may include brief jail stays of up to several days or a few weeks. Evidence suggests that H.O.P.E. significantly reduces probation revocations and new arrests for a substantial number of drug offenders.[21] What is important to recognize, however, is that H.O.P.E. is a court-supervised intervention. A special court calendar is created by the judge to hear v.o.p. petitions in a timely manner, and the judge applies previously agreed-upon sanctions that are clearly explained to the offenders. In this way, probation officers are assured that the judge "has their backs" and will be available daily to respond quickly and meaningfully to transgressions. This enables the probation officers to enforce the conditions of supervision more effectively and do their jobs better.

In the diversion context, I understand from my colleagues in New York, that they are having success with alternatives like the Drug Treatment Alternative to Prison Program (DTAP) which is authorized in the Second Chance Act. However, once again, it has been demonstrated that the program works most effectively when there is appropriate screening and assessment and direct judicial monitoring.

Based on the experiences in California, Hawaii, New York, and consistent with the Second Chance Act, I am calling for is the development of a Reentry Court System that would involve, first, the court assuming full responsibility for managing offender outcomes, and next, assigning offenders to separate calendars or tracks called by a group of judges who conserve resources and at the same time keep offenders in rehabilitation and treatment through to completion. If appropriately structured and applied, such a model should be capable of monitoring and supervising large numbers of offenders in each jurisdiction through different levels of structured court intervention.

Once we have eliminated from consideration those offenders who pose a true threat to public safety, and thus who should be retained under correctional control, we can fashion a broad spectrum of treatment, rehabilitation and supervision tracks that can be clearly defined and efficiently

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[19] Marlowe (2006). Judicial supervision of drug-abusing offenders. *Journal of Psychoactive Drugs, SARC Suppl. 3*, 323-331.

[20] Marlowe et al. (2007). Adapting judicial supervision to the risk level of drug offenders: Discharge and six-month outcomes from a prospective matching study. *Drug & Alcohol Dependence, 88S*, 4-13.

[21] Hawken & Kleiman, *H.O.P.E. for Reform,* THE AMERICAN PROSPECT (2007), at http://www.prospect.org/cs/articles?article=hope_for_reform.

implemented. Some of these tracks may, for example, focus on mentally ill offenders, others may focus on offenders who have a generally good prognosis for standard treatment, and others may focus on offenders with the worst prognoses, who need to be kept on a short rein with frequent status hearings and intensive treatment services. In terms of day-to-day practice, some of the tracks might be managed primarily by treatment providers within their own clinical programs, others might be supervised by parole officers using a graduated schedule of sanctions similar to H.O.P.E, and the most serious offenders would be supervised closely by the judge in collaboration with parole officers and treatment providers.

Regardless of whatever track an offender is initially placed in, the court would retain continuing jurisdiction over the case and could intervene quickly and meaningfully if there were problems with the offender's performance. This would include ongoing authority to alter the conditions of supervision, place the offender on a different track, or revoke parole.

My Experiences with a Reentry Drug Court System in California

I have practical experience presiding over a Probation and Parolee Reentry Drug and Mental Health Court in Santa Clara County, CA. In this court, which supervises probationers on leaving jail and parolees on release after commission of a new offense, I see on a daily basis the disadvantages of simply placing offenders under the supervision of a parole agent or probation officer. Our parole system, not unlike those in other states, is driven by rules. In California, an offender who is on parole and commits a technical violation of parole (e.g., fails to report on schedule) or commits a new low-level offense is first incarcerated by the parole agent with a "parole hold" placed, which keeps the offender in custody. This is followed by the filing of procedural paperwork that is driven by a rigid set of rules that cannot be ignored or avoided. The process often leads to the offender waiving his or her rights to a formal hearing and going back to prison, or to a formal hearing often with the same end result. Punishment has been accomplished (and frequently more severe punishment than a judge would normally have imposed), and with no change to the offender's behavior. The result is that nearly 70% of parolees in California are returned to prison within one year. At the same time, treatment beds, job training slots, and psychiatric appointments are not utilized effectively because few offenders take advantage of them.

In my court, the goal is to keep parolees out of prison and to make sure that they keep appointments, stay in treatment, and report regularly to the court. The parole agents are part of a local team that gathers in the courtroom and works together. The orientation of the court is to push the offender to follow his or her rehabilitation plan, which is driven by a personal risk and needs assessment. Housing that did not exist is found and paid for, treatment slots that were empty are now full, offenders are surrounded by so many coercive individuals that they have little choice but to make an effort to succeed. Once they find the beginning of success, they gain confidence. If they slip, the remedy is not necessarily incarceration, but reengagement; and if they need a sanction, they receive one as quickly as they receive praise. Their goals change over time from "getting off parole" to "making my life a success." The advantages of this approach lie in the fact that the most intensive judicial, parole, probation, case management, and treatment services are concentrated on those offenders who have the greatest needs for the treatment and are at the greatest risk to drop out of treatment or fail to enter it.

Because the Parole Division as well as the independent Board of Parole Hearings has agreed to allow a local judge to have the power to supervise parolees, parole-holds can be lifted at my request within a day, and the team (which includes the parole agents, treatment providers and attorneys) work out a treatment plan and decide on an appropriate response to misconduct, which might include a short jail sanction, other accountability requirement or no sanction at all, and move the offender directly into or back into community treatment and services.

This approach to supervising one of the most difficult and expensive cohorts of offenders (specifically, offenders on probation and parole who are seriously mentally ill as well as ongoing substance abusers) has been independently evaluated through a MacArthur Foundation grant. The preliminary findings indicate that arrests in the 18-month follow-up period are significantly reduced, the time between release from jail on the target arrest and time to re-arrest is longer, and clients experience a significant reduction in the number and length of incarceration stays compared with offenders in the control group.[22]

California is now moving in the direction of the Reentry Drug Court Model for the entire state. Senator Denise Moreno Ducheny, who is the Chair of the State Senate Budget Committee, has introduced legislation in the present session that would require the Judicial Council to establish a pilot program for the operation of up to 10 Reentry Court programs for parolees who would benefit from community drug treatment or mental health treatment. The programs will include the key components used by Drug Courts, applying a highly structured model, including monitoring by a judicial officer, dedicated calendars, nonadversarial proceedings, frequent drug and alcohol testing, and close collaboration between the respective agencies involved, including parole, to improve offender outcomes.

In my view, the essential elements in this legislation are (1) the return of jurisdiction over parolees to the courts, and (2) the conditioning of any continued funding on evidence of actual improvements in offender outcomes.

What I have learned in the Reentry Court process is that if you group offenders into tracks based on a valid assessment of their risks and needs, one judge can manage a very large program. I personally supervise over 1,600 offenders in my Reentry Court, and many of these offenders are seriously mentally ill as well as addicted to drugs or alcohol. The offenders are scheduled on different days and times of the week based on the amount of court supervision and review that is anticipated to be needed, with the important rule that a parole agent, probation officer or treatment provider (or the offender individually) may come to court on any day of the week for immediate intervention.

In California, the independent Legislative Analyst's Office found that leaving aside new sentences to prison, the two factors that have driven the increase in the prison population to its present untenable level over 20 years are (1) parole violators with new felony convictions returned by the courts and (2) parole violators returned by the Board of Parole Hearings, accounting for over 60,000 offenders.[23]

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[22] Steadman and Callahan, MacArthur Mental Health Court Study (2008), *Preliminary Findings*.

[23] California Legislative Analyst's Office (2009) *2009-10 Budget Analysis Series, Judicial and Criminal Justice.*

A basic reason to rethink and redesign our strategy in supervising offenders' reentry can be found in the fact that the reason we are locked into overcrowded prisons does not lie only in a failed parole system. We also have a failed court system and probation system in the supervision of reentry. The lesson to be learned is that our traditional practices in sentencing and processing of probation and parole violations has remained for many years driven by a fixation on punishment as the only response. Simply put, the offender is punished when sent to jail or prison, and then punished further once released into the community.

What Drug Courts have demonstrated is that we need a reentry response and an alternative to incarceration to reach the result of meaningful behavior change and meaningful reintegration back into the community. We are now ready to take that concept one step further and apply it through a Reentry Court Systems Model based on Drug Court principles to many thousands of offenders, rather than only a select few.

We have been following a very traditional model of sentencing in most states, and in my many years as a judge I have seen little change in that model until the advent of Drug Courts. As judges, we either punish or we don't punish. What we never do is look beyond the day of sentencing to the reality that nearly every offender will return to our community or remain in it, and we as judges should play a more active role in accepting responsibility for outcomes and viewing the courts as having an opportunity to play a central role in obtaining better outcomes for offenders than our traditional punishment model.

Recommendations

In conclusion, accomplishing this paradigm shift in community-reentry requires several practical changes to our sentencing policies and parole and probation practices. All of these changes have clear precedent and evidence for success in various state measures, and can be instituted successfully with reasonable effort and expense.

1. The courts must be given continuing authority to supervise offenders following their release from custody. Some models already exist incorporating this concept to a limited extent. For example, some states have split-sentencing provisions which authorize judges to sentence offenders to a period of custody followed by an additional period of probation under the continued jurisdiction of the sentencing court. Others have MOUs between the courts and parole department, which allow judges to supervise cases alongside parole officers. Still others have quasi-judicial officers that are housed within DOC but have court-like authority to issue subpoenas, revoke parole and impose other legally authorized sanctions. What is needed is a clear commitment to place the responsibility directly with the courts to oversee reentry.

2. Between the time an offender is booked into jail and the time of plea negotiations and sentencing negotiations, an assessment should take place as to every felon in terms of (a) the risk that he or she poses now and in the future to public safety; (b) the risk that the offender will not benefit from standard treatment or other available interventions in the community without intensive judicial scrutiny; and (c) the treatment-related needs the offender has in terms of such problems as addiction, mental illness, housing, employment, education and other factors critical to successful reentry.

3. Judges should be required to consider the above risk and needs factors when rendering sentences, and should be required to craft a reentry care plan that takes these factors into account when rendering the ultimate disposition. Although judges should retain discretion to render verdicts and dispositions according the unique issues presented by each case, they should be required to include issues of risk and needs in their calculus of judicial decision-making.

4. Reentry Court Systems should be developed that include a range of alternative tracks suitable to the types of risk-and-needs profiles presented by various offenders. Continued funding of these programs should be made explicitly contingent upon their improving offender outcomes, protecting community safety, and doing so in an efficient and cost-effective manner.

Thank you for the opportunity to share my experience and recommendations in this area. I realize that I am suggesting a new approach that I believe will produce better outcomes in terms of successful community reentry for offenders, and I look forward to a continued discussion with the Subcommittee. I will be happy to answer any questions at this time.