

**CONNECTICUT'S SUPPORT SERVICE FOR RELEASED INMATES:
A NEEDS ASSESSMENT**

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The Needs Assessment and Five Year Projected Budget for Department of Correction community-related services represents a three month project funded by the National Institute of Corrections, and prepared by Dr. Andrew Fisher, Consultant to the Criminal Justice Education Center, Inc., and community corrections administrators and line staff personnel.

The PREP Council wishes to thank all those both within and outside of the corrections field who responded to the questionnaire or were interviewed to share their perspectives on the future role of community corrections services.

Sherry Haller
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Executive Summary
Connecticut's Support Services for Released Inmates:
A Needs Assessment

Study after study, both in and out-of-state, has shown that community corrections programs can reduce recidivism rates in a highly cost-effective way. Because these studies control for selection factors and because the cost of imprisonment is known to be so much higher than the cost of community corrections (i.e., well over \$20,000 per year/per prisoner vs. [for example] an average of \$195 per PREP* client served), community corrections programs can prove that their ability to reduce recidivism saves taxpayer dollars. This report aims to encourage even greater cost-effectiveness by identifying ways to improve these programs.

DESCRIPTION OF COMMUNITY CORRECTIONS NETWORK

Prep Agencies

Over 4000 criminal justice clients were assisted by the community corrections network in 1984. PREP agencies operate outpatient programs in Hartford, New Britain, Torrington, Southeast Connecticut, Danbury, Manchester, Norwalk/Stamford, Danvers, and Bridgeport. All of the agencies provide support so that their clients have the opportunity to become responsible, independent and productive citizens. This support can be individual, group, family counseling, vocational workshops, job development, housing assistance, referrals and advocacy.

The P/PREP network (Public/Private Resource Expansion Project) is a state and privately-supported network of over thirty, non-profit social services agencies providing a range of support services to ex-offender clients and their families throughout Connecticut.

Multi Service Centers

The Multi Service Centers operate programs in the major urban areas of Hartford, New Haven and Bridgeport. Their purpose is to coordinate all social services for ex-offenders within their agency's regions. Support offered can be: individual; group and family counseling; support group; job and housing assistance; workshops; drug and alcohol referral; legal assistance; workshops; drug and alcohol referral; legal assistance; vocational training; education.

Volunteer Service Agency

Operate statewide programming both in the community and the correctional facilities. The agencies serve the needs of both inmates and their families to help preserve the family relationship so that when inmates are released, the family and inmate experience a realistic community re-entry.

Halfway Houses

Halfway houses provide inpatient services in locations throughout the state. An average length of stay in these programs is 3 to 6 months. In addition to re-entry services, such as employment and housing assistance, some halfway houses also serve as drug and alcohol treatment facilities.

All of the community based agencies under contract with the Department conduct vigorous community education programs in order to keep the public informed and active in community corrections. In addition, each coordinate its service delivery with other member agencies within the community network to provide clients with a full range of opportunities and to avoid duplication of service.

COMMUNITY CORRECTIONS PROFILE

Client and Cost Savings Figures - 1983¹

The cost of serving a PREP client for an average of two months is \$195. PREP clients released from Community Correctional Centers have lower recidivism rates than offenders who do not receive PREP services. For the over 4000 PREP clients released from CCC's annually, this difference in recidivism results in a reduction of over 250 in average daily population. Net operating costs savings would amount to approximately \$1.8 million. The capital cost of 250 additional capacity would be over \$14 million.

The per capita annual cost to the Department of Correction for housing community released offenders in the Halfway House program (\$7,029) is lower than the per capita cost in State facilities (FY 82-83 estimate: \$10,269 for all Connecticut facilities). The reduction in recidivism for Halfway House clients results in fewer readmissions to Connecticut facilities and lower operating costs.

Public Safety - 1983²

PREP clients have a lower proportion committing crimes resulting in rearrest and readmission to Connecticut correctional facilities. The rate for PREP clients was 55.9% as compared to 65.1% for the matched group.

For the Halfway House clients traced in the recidivism study, 15.6% were returned to Department of Correction facilities as rearrests as compared to 35.1% for the comparison group. Halfway House clients, according to this data, committed half as many crimes resulting in rearrest and readmission to the Department of Correction.

Volunteer Services

Volunteer Services provides an average of 1200 volunteers working with 2000 clients per quarter in 42 different capacities. They provide 175,000 service hours based on the human service value per volunteer of \$7.40 per hour. Correctional volunteers have been valued at over 1.3 million making volunteer services for the fourth year in a row over one million cost effective.

¹² Taken from MetaMetrics Inc., Technical Report MMI 543-14, Evaluation of Connecticut's Community Programs, February, 1983.

This report provides a brief overview of services now offered in Connecticut - and those that criminal justice professionals say are needed. It summarizes information contained in almost twenty in-depth responses (questionnaire or interview) from various community corrections service providers, halfway houses, and Department of Correction offices. In keeping with the purpose of outlining broad trends, the information solicited and provided is mostly qualitative: a snapshot of current opinion as to where the support network now is - and where it ought to be going.

Findings Regarding Nine Major Needs

1. Employment

- PREP agencies need to expand resources to provide fundamental job counseling (life skills - designed to modify attitudes and behavior) as well as immediately practical job counseling to all of their clients. Because (complete) job counseling may be the most important single service the agencies offer, extra expenditures on it, for staff expansion and training, would be cost-beneficial.
- At release, ex-offenders should receive vouchers through an emergency release fund for clothing, etc. They are now hard-pressed before they receive their first paycheck. Ex-offenders applying to the fund would sign a contract outlining the terms of re-payment of the voucher to the fund. (The money for the stipend might come from the hiring companies since, in many cases, they will receive a tax credit for doing such hiring).

2. Housing

- Availability of housing for ex-offenders particularly, female offenders and their children and single males and family of offenders while the offender is incarcerated) is extremely limited in Connecticut. To increase availability, more resources are needed (1) to add beds to the halfway house system and (2) to provide relatively inexpensive, yet safe, shelter-type housing for ex-offenders and

their families in the first weeks of release.

- Separate (intensive) residential program are needed to treat certain "special needs" offenders (e.g., mentally disturbed).
- Additional pre-release work by community corrections counselors is needed so that halfway house counseling can be directed toward problems of readjustment in the community.

3. substance Abuse

- Studies of long-term success rates are needed. While success in overcoming a habit can best be measured over five or more years, virtually all existing studies have been short-term.
- FIRE, the Department of Correction's community substance abuse program, must now serve too many clients. Unless more staff can be hired, some clients should be assigned to other agencies.
- To ensure compliance, all substance abuse programs should take frequent, unscheduled urine samples.
- A better means of matching clients with service organizations should be developed (i.e., one that explicitly identifies needs of clients and refers clients to the agencies must able to address those needs).
- Families of ex-offenders who have substance abuse problems need to be considered as it relates to reintegration of that family into the family unit.

4. Mental Health Services

- The number of competency referrals to the Courts Diagnostic Clinic has doubled from 1976 to 1983 and the percentage found to be incompetent rose 16%.
- 10% to 25% of all individuals entering the system suffer from primary conditions that interfere with daily living. (psychosis or conditions near psychosis)
- outpatient treatment centers and mental health centers are either reluctant or refuse to treat persons in the criminal justice system.
- community corrections, given present caseloads, cannot provide long-term counseling for the mentally-disturbed ex-offender.
- A pilot outpatient treatment program to provide services to psychologically disturbed accused and convicted persons should be developed to provide needed outpatient services.
- A residential/inpatient mental health treatment program should be developed for the psychologically disturbed corrections client in need of continuing care.
- An inpatient treatment program for persons convicted of sexual offenses should be developed. Present outpatient services should be expanded statewide.

5. Women and Families

- For the female offenders who are mothers of minor children and for the families of male ex-offenders, it is extremely difficult to find affordable housing, to pay for food and other necessities, and to re-integrate successfully with the ex-offenders.

- Special training in serving the needs of female and male offenders provided to Department of Correction's officials as it relates to family reintegration.
- At least one parole officer be assigned to every regional parole office who has training in family reintegration.
- institutional day care, family life education, family visiting programs, expanded visitation rights for children and Community-based child care for families and offenders be increased.

6. On-going Research & Evaluation

- The extent to which employment impacts recidivism rates has been well-documented, however the overall effectiveness of certain community corrections programs versus others has not been well-documented.
- On-going detailed research on specific program effectiveness is necessary to provide "feedback" to service providers and much-needed information to the legislature for correctional policy/appropriations decisions.
- An independent evaluation program (joint public/private sector initiative) should be established to study program effectiveness and their relationship to key variables - i.e., type of offender served, precise services offered, etc.

7. Pre-Release Planning

- Planned preparation (discharge planning) is critically important to the offender in increasing h/her chances to remain crime-free in the community.

- Counseling stations must be re-established for community corrections workers to meet regularly with inmates a minimum of two months prior to their scheduled release.
- Pre-release counseling staffs should be increased particularly in the urban correctional centers to accommodate the larger number of persons being released under supervision (parole, supervised home release, intensive probation).
- Training should be offered to pre-release counselors to increase the confidence building skills for offenders before and after release. And should, in particular be provided by trained family case workers.

8. Training

- To improve the quality of direct services delivered to offenders and their families.
- To enhance management skills and improve coordination and referral mechanisms among public and private sector service providers.

9. Community Punishment Sanctions

- Day Treatment Center*
- Supervised Home Release*

What is most remarkable about these and other needs is the extent to which they influence each other. If high quality support services are to be provided, each need must at some point be addressed. For the present, effort should be directed toward the needs areas listed above, and especially to those specific services (e.g., comprehensive employment counseling, mental health services) that are known to be of special cost and safety benefit.

*To be developed in conjunction with the Department of Correction

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I. Introduction

This needs assessment provides a brief overview of services now offered in Connecticut and those that criminal justice professionals say are needed. It summarizes information contained in almost twenty in-depth responses (questionnaire or interview) from various community corrections service provider agencies, and Department of Correction offices. The information solicited and provided is mostly qualitative: a snapshot of current opinion as to where the support network is now and where it ought to be going. While this report draws on previous quantitative studies, its emphasis compliments rather than duplicates theirs.

In assessing what follows, readers should bear in mind two facts:

1. Offenders who complete Connecticut's relatively inexpensive community corrections programs (i.e., halfway houses and the non-profit social services agencies of the PREP network*) return to crime - and prison - less often than those who do not.
2. Crime is costly to the taxpayer as well as to the victim. In 1985, for example, it will cost Connecticut residents an average of at least \$15,000 to keep an inmate in prison for one year, exclusive of allocated construction and financing costs. Increasing concern over prison and jail overcrowding has led to proposals to build more facilities, and construction costs per cell are conservatively estimated to range from \$60,000 to \$80,000.¹

PREP clients have a lower proportion committing crimes resulting in rearrest and readmission to Connecticut correctional facilities. The rate for PREP clients was 55.9% as compared to 65.1% for the matched group.

For the Halfway House clients traced in the recidivism study, 15.6% were returned to Department of Correction facilities as rearrests as compared to 35.1% for the comparison Halfway House clients, according to this data, committed half as many crimes resulting in rearrest and readmission to the Department of Correction.²

*The P/PREP network (Public/Private Resource Expansion Project) is a state and privately supported state-wide alliance of over thirty non-profit social service agencies providing a wide array of supported services to ex-offender clients and their families and encouraging both citizens and policymakers to seek solutions to the day-to-day problems of crime.

Taken together, these facts suggest that, whether or not ultimately practical, serious suggestions for improving Connecticut's community corrections programs are worth serious consideration.

Description of Community Corrections Network

PREP Agencies

Over 4000 criminal justice clients were assisted by the community corrections network in 1984. PREP agencies operate outpatient programs in Hartford, New Britain, Torrington, Southeast Connecticut, Danbury, Manchester, Norwalk/Stamford, Danielson, and Bridgeport. The agencies primarily assist ex-offenders to return successfully to the community. In some cases, services are also provided to probationers and to people in pre-trial status. All of the agencies provide support so that their clients have the opportunity to become responsible, independent and productive citizens. This support can be individual, group, family counseling, vocational workshops, job development, housing assistance, referrals and advocacy.

Multi Service Centers

The Multi Services Centers operate programs in the major urban areas of Hartford, New Haven and Bridgeport. Their purpose is to coordinate all social services for ex-offenders within their agency's regions. While the majority of ex-offenders are released to urban areas, Multi Service Centers also coordinate and provide support services to ex-offenders in suburban and rural areas surrounding their regions. Support offered can be: individual; group and family counseling; support group; job and housing assistance; workshops; drug and alcohol referral; legal assistance; vocational training; education.

Volunteer Service Agency

Operate statewide programming both in the community and the correctional facilities. The agencies serve the needs of both inmates and their families to help preserve the family relationship so that when inmates are released, the family and inmate experience a realistic community re-entry. They become sensitized to changing family needs and circumstances and are better able to cope with them. Some of the volunteer programs provide useful ways for the inmate to spend h/her time in the facility.

Halfway Houses

Halfway houses provide inpatient services in over 12 locations throughout the state, for example, Hartford, Middletown, Brooklyn, Willimantic, Waterbury, Stamford, Bridgeport, New Haven, New London and Norwalk. An average length of stay in these programs is 3 to 6 months. In addition to re-entry services, such as employment and housing assistance, some halfway houses also serve as treatment facilities.

All of the community based agencies under contract with the Department conduct vigorous community education programs in order to keep the public informed and active in community corrections. In addition, each coordinates its service delivery with other member agencies within the community network to provide clients with a full range of opportunities and to avoid duplication of service.

II. Areas of Need: An Overview

Service in nine major areas of need is especially vital to the reintegration of ex-offenders in the community. These are: employment, housing, substance abuse, mental health services, family counseling and support, research and evaluation, pre-release planning, training and community punishment sanctions.

Before these are discussed, however, the full range of service needs in the community corrections network are important to mention. For brevity, this will be done simply by listing the needs lying either within the community corrections network or outside (or on the borders of) the network.

1. Needs within the network.

- general staffing levels
- filling in gaps in regional coverage
- communication with institutional counselors
- prevention and early intervention for first-time offenders
- transportation for clients
- systems approach
- training correctional staff in family intervention

2. Needs outside (or on the borders of) the network.

- assistance from mental health agencies
- affordable treatment for certain serious diseases
- relief of prison overcrowding
- pre-release job training programs
- public education

Each of the broad areas of need is discussed in the Appendix Section of this report.

What is most important to understand about this list is the extent to which each need is influenced by other needs. For example, community counselors cannot provide timely and appropriate services unless corrections officials provide complete and accurate information about (1) the criminal and psychological history of the inmates to be

released and (2) the time and manner of the release; corrections officials cannot provide such information if many releases are forced by prison overcrowding; prison overcrowding is in part a function of sentencing patterns; and sentencing patterns significantly reflect community attitudes (and the limited knowledge underlying these). If high quality support services are to be provided, each problem must at some point be addressed.

But, not all problem are equally important and - most emphatically - not all have equally expensive solutions. Meeting some very important needs (e.g., public education) might only be moderately expensive; meeting others (e.g., streamlining pre-release referrals, developing or expanding alternative (community-based) programs for non-violent offenders) might ultimately reduce costs.

The section that follows, in discussing the nine most important service needs in the network, gives support to some of these distinctions of importance and cost.

III. Nine Key Needs

Employment

Finding work for ex-offenders is less difficult than helping them stay at work. Many ex-offenders find work relatively quickly (an average search lasts one to four weeks). While some do quite well, many are unhappy with the jobs they find and soon leave them. One reason is that most must accept menial employment at minimum wage. Among the jobs commonly found are: dishwasher, manual laborer, employee in a bottle return plant, custodial worker, housekeeper. Some do find skilled or semi-skilled work as auto mechanics, painters, entry-level clerical workers, etc., but most must accept unskilled work that offers either modest opportunity for advancement or none at all.

Another reason is the offender's lack of familiarity with the work world and difficulty in accepting its rules. Reporting to work on time and working a long day require discipline and presuppose habits of self-reliance. Even those most likely to accept work-imposed constraints can be thrown off by a family problem (e.g., being abandoned by a spouse) or by the resurgence of an old drug or alcohol habit.

PREP professionals normally provide employment counseling to a client for approximately three months. They must deal first with the problem of finding work and only second, and as time permits, with the patterns of attitude and behavior that will influence long-term success on the job.

PREP agencies typically offer pre-job counseling, assistance in scanning want ads and accompaniment on job searches. Some of the agencies also prepare clients in more fundamental ways by helping offenders to set goals, develop habits that are in keeping with society's, referring them to appropriate training programs and assisting employers in their supervision and support.

Although the ultimate goal of employment counseling is to prepare the client to shape his/her own successful career, present resources do not support much more than comprehensive placement services. The conclusion that substantially more resources should be provided for employment counseling is based on the following:

- PREP agencies need to expand resources to provide job preparation counseling (designed to modify attitudes and behavior) as well as immediately practical job counseling to all clients. These clients should include families of offenders.
- Employment and skills training assistance is one of the most important services provided and the one for which marginally greater expenditures would be most beneficial.
- One of the reasons why most ex-offenders may find marginal work relatively quickly is that Connecticut's economic recovery has been one of the very strongest in the nation. When the economy slows, offenders looking for work may be among the last to be hired. In this context, it should be noted that national unemployment rates for ex-offenders are currently three times those for non-offenders.³
- Keeping a job is particularly difficult for the many ex-offenders who suffer from a combination of problems (e.g., substance abuse and lack of education and training, psychological and family problems).

Upon release, offenders should receive vouchers for immediate necessities (clothing, food, medical, etc.). (The funds for this might be solicited from the hiring companies. Businesses receive a \$3,000 tax credit for each ex-offender hired - if he or she stays for a year or more, many may be willing to lend a fraction of this amount to each ex-offender at the outset of employment.⁴). An emergency release fund should be established. Ex-offenders applying to the fund would sign a contract outlining the terms of re-payment. Without vouchers or other means of immediate temporary assistance, offenders are faced with extraordinarily difficult situations before their first paycheck.

Housing

The availability of housing (supervised and unsupervised) is severely limited. The low availability of unsupervised housing reflects:

- Connecticut's exceptionally low vacancy rate (well below the five percent generally viewed as healthy).⁵
- The unwillingness of many landlords to accept ex-offenders, or families of offenders especially if they are minors or women with children.
- The very limited amounts that many ex-offenders or families of offenders can afford to pay for rent, especially when deposit requirements are considered.
- The very limited availability of beds in shelters, and the unsuitability of many shelters, because they house many emotionally unstable individuals.

The shortage of supervised housing (halfway houses) is caused, in part, by prison and jail overcrowding. Since there are only 227 beds in the halfway house system versus over 5,000 in correctional facilities, houses cannot function both as prison extensions and as service centers designed to help offenders re-enter the community.

The availability of unsupervised housing cannot easily be increased. Some obvious measures (e.g., community education, closer cooperation with neighborhood groups - including landlords) would help only in the long-run. The receipt of emergency vouchers at release would help initially and then only if much else fell into place simultaneously. Providing subsidized housing for any length of time, even if not prohibitively expensive, would be politically difficult.

However, a very limited kind of housing support is one practical solution. Providing simple shelter-type housing for ex-offenders during the first weeks after release would answer a serious need at a lower cost than other alternatives. It would serve the needs of the group that, on the one hand, do not need most halfway house services and, on the other, cannot find safe and affordable housing immediately after release.

Regarding halfway houses themselves, more beds are still needed. Going beyond the present effects of prison overcrowding, halfway house treatment is cost-effective and becomes more so in proportion to the length of time a client stays.⁶ For example, a client who stays what is now an average of time (three months) will not receive much more than practical help (e.g., employment counseling, assistance in establishing a line of credit, assistance in re-establishing contact with family). But a client who stays longer is able to receive intensive and fundamental counseling, such as substance abuse counseling. In addition, separate, intensive residential programs are needed to treat certain kinds of special needs offenders (e.g., arsonists, sex offenders).

Implementing these recommendations would, of course, be costly. But, without implementation, halfway houses will continue to consist more in crisis intervention than in psychological intervention, directed toward lasting personal growth.

substance Abuse

Substance abuse continues to be a serious problem throughout Connecticut's criminal justice network. In a recent survey of 645 inmates at seven Connecticut institutions, 60% said they were drug abusers, 47% said they were alcohol abusers, and more than one in eight (13.8%) admitted that they were under the influence of drugs or alcohol at the time they committed the crime for which they were imprisoned. Approximately 73% abused at least one substance. Only about a third of each substance abuse group was being treated.⁷

The Department of Correction's many activities in the substance abuse area are coordinated by the Addiction Services Division. Project FIRE is the community component of the Addiction Services Division and its services for the substance abuse client compliment the community correction network's programs. when an ex-offender is faced with a multitude of problems , including a substance abuse history, PREP professionals and Project FIRE staff attempt to coordinate their treatment approaches. However, limitations in staffing (both within Addiction Services and the community corrections network) make long-term assistance difficult.

Keeping in mind that success in overcaning a habit is best measured in the long term (five years or more), service delivery can be improved in several ways:

- FIRE now must serve too many clients. Monies for more staff should be hired or purchase of service contracts made available to utilize other drug/alcohol service deliverers.
- Ensure offender compliance through the taking of frequent urine samples within all substance abuse programs.
- More closely match client needs with specialized service organizations (recovery is replete with growth and

setbacks and abusers require very different supports depending on where they are in the recovery cycle).

- Families inter-twined in this cycle need to be involved in the treatment.
- Place as many substance abusers in community-based treatment programs as possible. (Abusers often require years to reverse their addiction. The more of the recovery period spent in the community (residential or non-residential) enhances an abuser's chances for success.)

While the nature of the problem is a very difficult one, several specific improvements in services are possible. And, measured by the standards of statewide programs, none of these appears to be very costly.

Mental Health Services

It is estimated that 10% to 25% of all individuals entering the system suffer from primary conditions that interfere with daily living (psychosis or conditions near to psychosis). Many more, while technically found to be mentally competent, are really disturbed individuals who, over the short-term and within prescribed conditions, are capable of behaving sanely.¹²

Needs are growing. From 1976-77 to 1982-83, the number of competency referral to the Courts Diagnostic Clinic* more than doubled (from 153 to 318); and, of those examined, the percentage found to be incompetent rose from 24% to 40%¹³. The question of diversion from a correctional setting notwithstanding, a significant percentage of offenders need in-depth psychological treatment upon release. Many community corrections professionals are not licensed psychologists/psychiatrists nor, given present caseload levels, can they provide long-term counseling for the mentally-disturbed a-offender.

For a variety of reasons, already existing counseling agencies, outpatient treatment centers and mental health centers are either reluctant, hesitant, or refuse to treat persons who remain entangled in the criminal justice web. Among the reasons frequently cited for this reluctance are:

- the misconception that the treating agency needs special expertise in order to deal with or treat the criminal offender
- built-in prejudices against working with "criminals"

*The Clinic evaluates accused and convicted persons for clinical evaluations, and operates within the administrative structure of the Department of Mental Health.

- a continuing prevalent misperception that to be criminal is to be sociopathic or psychopathic and therefore not treatable
- confusion and conflict over serving both the patient and the court, particularly when there is a court order that the defendant obtain treatment

Therefore, ways must be found to finance a short/long term treatment program that can contribute to developing what a recent report called a "comprehensive system for psychologically disturbed homeless persons."¹⁴ In so doing, it would simultaneously be providing needed out-patient service and enabling the community corrections network to devote more energy to the direct supportive services it provides well.

A workable approach toward this pilot treatment program is the development of a demonstration effort calculated to assess the efficacy of providing treatment services to accused and convicted persons.

Referrals to the program would be accepted from the court (judges, public defenders, or probation officers) and the community corrections network (halfway houses, PREP). No more than 40 patients would be on the caseload at any given time. Clients would be divided evenly (pre and post conviction) so that differences, if any, based on that criteria alone could be evaluated. (This effort may have implications for the problem of overcrowding in correctional institutions, as some defendants might be allowed to remain at liberty and not be incarcerated provided they were receiving adequate treatment.)

In order to assess the effectiveness of this pilot program, a list of criteria to be evaluated should include:

- percentages of clients who adhere to treatment contract
- percent of appointments kept
- incidents of recidivism
- employability or continuing employment
- adherence to special conditions of probation
- medication compliance
- percent who complete treatment contract

Bridging the gap in services for mentally disturbed offenders is integral to reducing the changes of recidivism for an increasing number of convicted persons. Pilot treatment programs of this kind is a critical step toward building a community foundation of support for these needy individuals.

The need is apparent for a residential/inpatient mental health treatment program. This program would address the needs of the psychologically disturbed corrections client discharged to the community and in need of residential/inpatient treatment.

Outpatient services for this clientele would not effectively meet their needs and would only be appropriate for these people after a time in a residential treatment setting.

The need is also apparent for sexual offender programming. The numbers of persons being convicted for these offenses has increased significantly. And, sexual offenses vary. Rape involves the extreme mismanagement of anger and aggression, most frequently directed at woman. Child sexual abuse involves the misuse of authority over a child for the purposes of gaining self-esteem while achieving a sense of adequacy not available in peer relationships.

Sexual abuse is a chronic behavior that necessitates inpatient and outpatient treatment. The goals of treatment are:

- having the offender acknowledge the behavior;
- understanding the impact of their offense;
- learning ways to control their behavior in the future.

An inpatient facility would provide a controlled environment which would facilitate a client's re-entry into the community. This would allow for intensive, individualized, group and family treatment during this difficult period of adjustment.

Also needed is an outpatient treatment program for those individuals who have completed the residential program or are being released from custody and are willing and capable of benefiting from this level of treatment. Treatment modalities would be determined by length and level of treatment and clients would be phased from intensive to less intensive treatment based on progress and need.

Women and Families

Crime is closely tied with problems occurring in the family-violence, sexual abuse, and neglect.⁸ Community corrections professionals repeatedly stress the importance of a variety of family support programs. These include frequent visitation in the correctional facilities and structured family issues groups, in which offenders, spouses, and/or parents learn to cope with the impact incarceration has on the family as well as prepare for the eventual return of the offender to the family structure.

In a paper delivered at the Third Annual Women's Congress in the Fall of 1984,⁹ the many problems facing female ex-offenders were described within the context of the family:

- For the 75% who are mothers of minor children, and for the families of male ex-offenders, affordable and decent housing is "virtually non-existent." Most shelters will not accept children, and even family and friends may be unwilling or unable to provide beds.
- Food stamps are usually not received sooner than month after the application is submitted. Though female ex-offenders usually have lower savings (and potential earnings) than their male counterparts, they must find a way to feed their children almost immediately after release.
- Reintegration with the family is hindered because of the greater stigma society attaches to female than male offenders. In fact, the majority of crimes committed by women are non-violent (e.g., shoplifting, prostitution, fraud and bad checks).
- Reintegration is hindered because female offenders are more isolated than males during imprisonment. Among the reasons are the physical isolation of the women's institution in Niantic and lack of transportation for families to the facility.

In addition to providing more specifically targeted, community-based services, it is important that:

- Special training in serving the needs of female offenders is provided to Department of Correction officials (especially upper management) as well as community corrections service providers.
- At least one parole officer be assigned to every regional parole office who has training in family re-integration.
- Pre and post release counseling, aimed particularly at increasing the self-confidence of female offenders, must be expanded by Department of Correction and community corrections staff.¹⁰
- Institutional day care, family life education, family visiting program, expanded visitation rights for children and community-based child care for families and offenders be increased.¹¹

The psychological costs of separation, during a mother's imprisonment, are great enough to the children. If, after returning from substitute homes, children cannot re-establish ties with their mothers, they risk permanent damage. So that this does not occur, and another cycle of crime ensues, it is crucial that female offenders and their families receive the special services they need.

Families of Male Offenders

Crime is closely tied with problems occurring in the family violence, sexual abuse, and neglect. Community corrections professionals repeatedly stress the importance of a variety of family support programs. These include frequent visitation in the correctional facilities and structured family issues groups, in which offenders, spouses, and/or parents learn to cope with the impact incarceration has on the family as well as prepare for the eventual return of the offender to the family structure.

- For the wives and girlfriends of ex-offenders, affordable and decent housing is "virtually non-existent." Most shelters will not accept children, and even family and friends may be unwilling or unable to provide beds.
- Food stamps are usually not received sooner than a month after the application is submitted. Though female family members usually have lower savings (and potential earnings) than their male counterparts, they must find a way to feed their children as soon as the husband or boyfriend is incarcerated.
- Reintegration with the family is hindered because of the greater stigma society attaches to a family having a loved one incarcerated.
- Reintegration is hindered because of the societal stigmas and isolation of the family during the incarceration period.

In addition to providing more specifically targeted community based services, it is important that:

- Special training in serving the needs of offenders is provided to Department of Correction officials (especially upper management) and line staff as well as community corrections service providers.
- A minimum of one parole officer with family reintegration training is assigned to every regional parole office.
- Pre and post release counseling, aimed particularly at increasing the self-confidence of offenders, must be expanded by the Department of Correction and community corrections staff. Also, special attention to family counseling needs for Hispanic inmates and their families.
- Institutional day care, family life education, family visiting programs, expanded visitation rights for children and community-based child care for families and offenders be increased.

- Trained community volunteers offer short-term crisis intervention counseling during pre-trial , initial incarceration and post-release phases. Community volunteers provide public education activities on issues related to impact of incarceration on families.

The psychological costs of separation, during a loved ones imprisonment, are great enough to the children. If children cannot re-establish ties with their fathers, they risk permanent damage. So that this does not occur, and another cycle of crime ensues, it is crucial that offenders and their families receive the special services they need.

Research and Evaluation

A good deal is known about comparative recidivism rates and employment rates for various ex-offender populations. But identifying which programs have worked best is difficult. Variables cannot be held constant, and whole systemic patterns change over time. Moreover, almost nothing is known about the effectiveness of certain kinds of programs. In some instances, programs (treatment programs for sex offenders is a good example) have existed for three years or less and studies of long-term effectiveness can now only begin.¹⁵ In other program areas, like substance abuse, studies have been limited (either with respect to time or scope) to yield conclusive results.

The criminal justice community corrections network needs ongoing detailed research as to the effectiveness of specific programs. Researchers should attempt to determine not just aggregate success rates, but approximate relationships among many key variables (i.e., degree of success in completing a specific program, the precise kind of service(s) offered, the history of the offender, etc.). If combined with the collection of more complete data on the progress of ex-offenders during re-entry into the community, such detailed studies would identify the most and least effective programs. Interpreted in context, with full consideration given to sample characteristics and comparative success rates in other states, these conclusions would give needed "feedback" to service providers and arm the legislature with data crucial to appropriations decisions. They would also aid corrections professionals in deciding what services to offer specific clients, based on the likelihood of success in overcoming each problem.

Research good enough - and frequent enough - to provide such aid is expensive. But, it much more than pays for itself if it contributes even modestly to the efficiency of Connecticut's cost-effective community corrections programs.

Pre-Release Planning

Although the Department of Correction has established a release process, the present overcrowding crisis and population caps on its correctional facilities has hampered efforts to develop community plans.

There is a strong need for improved pre-release programs. PREP counselors need to begin to work with offenders a minimum of two months prior to their release if time could be devoted in the correctional facility, daily practical matters such as housing, financial, medical, etc., then problems directly related to community readjustment could be given attention upon the offender's release.

Training

In recent years, the network's caseload has shifted dramatically from a mixture of non-serious, short and long-term offenders to one consisting primarily of the longer-term, more violent client. This shift in caseload corresponds with the significant increase in the correctional populations statewide and the Department's efforts to place the less serious offenders in various structured community programs which do not heavily rely on the community corrections network (ex., intensive probation, approved community residence).

Presently, community correction staffs are not trained or experienced in working with the more serious, violent offender. A series of intensive skill-building seminars designed to met the needs of this changing offender population must be developed for community correction agencies. In order to provide advanced training opportunities to the line and managerial staffs of the community corrections network in Connecticut, a series will be designed to:

- Improve the quality of direct services delivered to offenders and their families through the coordination of seven training sessions over a 10-month period.

- Enhance management skills and improve coordination and referral mechanisms among public and private sector service providers through the coordination of one or two one-half to full-day sessions with community corrections and Department of Correction administrators and line staff.

Community Punishment Sanctions

Day treatment*

*To be developed in conjunction with the Department of Correction

APPENDIX

A. Major Areas of Need: An Overview of Total Responses to the Questionnaires and Interviews:

1. Staffing

a. More professionals to provide individual and family counseling (needed because the ex-offender typically faces many serious problems - not just one or two). Each agency should be able to provide comprehensive help for most clients - and refer only clients with very serious problems. So each agency should have the resources:

- to employ its own psychologists, MSW's, etc.
- to retain its best people (there must also be opportunities for advancement).

b. More professionals specially trained to handle serious offenders (e.g., violent or sexual).

c. Core resources to recruit and retain volunteers.

2. Filling gaps in Regional Coverage

PREP agencies should be established for the areas now lacking an agency: Meriden/Wallingford, Bristol/Southington, Ansonia/Derby. In Bridgeport, Where the community release program is housed in the correctional center building, a separate community residence facility is needed.

3. Communication with Institutional Counselors

So that PREP workers can provide clients with the range of services they need at the time they need them, institutional counselors must provide more complete and accurate information about release times, client histories, etc. They are currently hindered in this because of prison overcrowding (a problem listed below).

4. Prevention and early intervention for first-time offenders and minor offenders on a broader state-wide basis.
5. Transportation for clients and families (between PREP agencies, to and from work, for family visits - depending on location of correctional facility, and for counseling sessions at correctional facilities).
6. Systems Approach

Most respondents thought that communication and cooperation among PREP agencies is now satisfactory, but one respondent pointed out that there was always a need to work toward the ideal of a systems approach. That is, service providers should not only cooperate, but also strive to learn from each other and develop common standards of service.

B. Needs Outside (or on the borders of) the Cam-amity Corrections Network.

1. Assistance from mental health agencies

Most respondents thought that these agencies provide only limited services because:

- a. They tend to focus more on the offense committed than the underlying emotional problems.
 - b. They are not confident that they can handle clients that have more than one problem (e.g., those who, in addition to being mentally ill are also drug-dependent). At the least, these agencies should serve as advocates for clients afflicted with two or more health problems.
2. The establishment of a pilot outpatient treatment program for the mentally disturbed offender (See Section 3).
 3. Affordable treatment for certain serious diseases (e.g., AIDS, Herpes).
 4. Relief of Prison Overcrowding

Overcrowding results in sudden transfers from one correctional facility to another and in sudden discharges of offenders to the community. Services provided by institutional and PREP (community corrections) professionals are thereby cut off prematurely and the likelihood of careful referral is sharply reduced.

In addition, in so far as the DOC has already placed less serious offenders under some form of community supervision, additional releases are the more serious offenders. PREP counselors are now dealing with great numbers of repeat, serious offenders. And, one more implication is that, until prison overcrowding is eased, PREP counselors will need to be given significantly more training - to enable them to handle more serious offenders.

5. Pre-release Job Training Program

- a. in conjunction with the private sector (e.g., the co-operative program between the Department of Correction and Computer Processing Institute), from which the placement rate was 80%)
- b. offered by the institutions themselves (currently, vocational programs are not offered everywhere and are usually stressed much less than basic education programs. Moreover, inmates are often transferred before they can complete their training.)

6. Public Education

Some respondents pointed out that public attitudes (i.e., apathy or hostility toward community corrections) limited corrections success much less than such systemic problems as overcrowding. However, other respondents mentioned specific problems linked to those attitudes.

- community resistance to the establishment of halfway houses in the community
- limited volunteer support for the returning ex-offender
- the reluctance of employers to hire skilled ex-offenders for high-paying jobs
- the insistence of many landlords that prospective tenants say where they have lived for the last two years

Respondents thought that community educational programs should focus on:

- a description of the kinds of offenders typically involved in community correction programs, and the actual versus perceived risks they pose in the community
- the services provided by the programs and their public safety and cost-benefits
- the long-term effectiveness of community corrections in reducing recidivism

Respondents did not indicate how such programs should be structured, however they did mention two means of increasing community involvement:

- obtain a series of "loaned executives"
- solicit grants from local businesses after including business leaders in the process of planning new community corrections Programs

FOOTNOTES

1. Andrew S. Fisher, "Adult Imprisonment: The Cost to Connecticut Taxpayers." Prepared for the Criminal Justice Education Center (April, 1984). p.8
2. MetaMetrics, Inc., Technical Report MMI 543-14, "Evaluation of Connecticut's Community Programs," February, 1983. p.6.3
3. James B. Jacobs, et al., "Ex-Offender Employment, Recidivism, and Manpower Policy. CETA, TJTC, and Future Initiatives." Crime and Delinquency, Vol. 30 No.4, October 1984. p.487
4. Interview with James Greene, Director of Programming for the Connecticut Prison Association, August 23, 1984.
5. Action for Justice. Published by the Office of Urban Affairs, Archdiocese of Hartford. March 5, 1984. Some data taken from a Federal Home Loan Bank Board study (1982).
6. MetaMetrics, Inc., Technical Report MMI 543-14, "Evaluation of Connecticut's Community Programs," February, 1983. p. 3. 12.
7. "Addiction Services Survey." Prepared by the Connecticut Department of Correction (1984).
8. Interview with Leonard Barbieri, Executive Aide to the Commissioner of Correction. October 18, 1984.
9. Augusta Arthur, "Lecture at The Third Connecticut Women's Congress: Female Offender Workshop." September 29, 1984.
10. Ibid.
11. The PREP Network, Published by the Criminal Justice Education Center, Inc., March, 1984. pp. 9,10.
12. Interview with Dr. John Fitzgerald, Director of the Courts Diagnostic Clinic. October 18, 1984.
13. "Findings of Incompetent to Stand Trial." From the records of the Courts Diagnostic Clinic.
14. Draft of "Conceptual Outline for the Development of a Comprehensive System for Psychologically Disturbed Homeless People. October 11, 1984.
15. Telephone interview with Eileen Hall, Director of Special Services Programs, The Connection Inc. November 20, 1984.

BUDGET NARRATIVE

The Needs Assessment outlines the need for community corrections services for Connecticut's offender and ex-offender population.

This Assessment is based on present needs and reflects only the services required to assist present caseloads. The budget is designed to serve as a demonstration/guide of how these community correction services can be phased in over a 5 year period. Each service area has been designated as a priority area*and thephase-in approach is used to further prioritize service needs and to allow for the development of model, quality programming that can be evaluated and, when successful, replicated throughout the network.

Rooted in PREP's underlying philosophy of a public/private partnership, the proposed budget is broad-based and does *not* imply that all services would be delivered solely by PREP agencies, but encourages pilot efforts with other community-based agencies and state agencies (such as the Departments of Mental Health and Judicial).

Although the budget includes residential programs for mental health, sex and female offenders, it does not represent total residential needs of the state's offender population, but rather reflects those special needs identified as crucial to the delivery of non-residential services.

The following narrative describes in some detail each service area. Please refer to the body of the report for a full description of each of the prioritized needs and recommended service area options.

*See the Appendix of the Needs Assessment for an overview of the full range of service areas identified by the study.

	85-86	86-87	87-88	88-89	89-90	TOTAL NEW DOLLARS	COMMENTS
-----carry through of dollars from preceding year.							
Employment	5 Counselors (120,000)*	3 Counselors (72,000)*	2 Counselors (48,000)*	-----	-----	10	\$240,000
Stop Gap Housing (Temporary)	30 beds \$60/wk (93,600)	20 beds (62,400)	20 beds (62,400)	10 beds (31,200)	10 beds (31,200)	90 beds	\$280,800
Substance Abuse	5 Counselors (120,000)*	5 Counselors (120,000)*	5 Counselors (120,000)*	3 Counselors (72,000)*	2 Counselors (48,000)*	20	\$480,000
Mental Health	4 Counselors** (105,600)*	4 Counselors** (105,600)*	4 Counselors** (105,600)*	4 Counselors** (105,600)*	4 Counselors** (105,600)*	20	\$528,000
Residential Program	-----	(225,000)	-----	-----	-----		\$225,000
Sex Offender Program							
Inpatient	-----	-----	(225,000)	-----	-----		\$225,000
Outpatient	2 Counselors** (52,800)*	3 Counselors** (79,200)*	3 Counselors** (79,200)*	3 Counselors** (52,800)*	2 Counselors** (52,800)*	10	\$264,000
Families of Offenders and Female Offenders (pre and post incarceration)	10 Counselors*** (264,000)*	-----	-----	-----	-----	10	\$264,000
Female Residential Program	225,000	-----	-----	-----	-----		\$225,000
Research & Evaluation	35,000	15,000	15,000	5,000	5,000		\$75,000 includes computer time
Pre-Release (phase-in)	3 Counselors (54,000)	3 Counselors (54,000)	6 Counselors (108,000)	6 Counselors (108,000)	-----	18	\$324,000
Training	50,000	-----	-----	-----	-----		\$50,000
New PREP Programs							
Meriden/Wallingford	30,000	-----	-----	-----	-----		
Enfield	-----	30,000	-----	-----	-----		
Ansonia/Derby	-----	-----	30,000	-----	-----		\$90,000
Day Treatment Centers (see budget narrative)							
Supervised Home Release (see budget narrative)							
TOTALS	1,150,000	763,200	793,200	374,600	189,800		\$3,270,800

NOTE: THESE FIGURES ARE IN 1985 DOLLARS AND ARE NOT ADJUSTED FOR INFLATION.

Families of Offenders and Female Offenders

10 outpatient counselors to work with either or both families of offenders and female offenders. These would be Masters level people with appropriate family treatment skills. (Breakdown same as sex offender outpatient counselors.)

Female Residential Program - Residential female treatment halfway house program includes involvement of children. Cost to DOC - \$225,000. Up to a maximum of 15 beds

Research and Evaluation

Money to evaluate in-depth the quality and effectiveness of program services.

Pre-Release (Phase-in)

18 pre-release counselors. Money for pre-release programming within the jails and prisons.

\$18,000 for personnel costs for each position (salary and fringes)

Training

Funds for the on-going training of the personnel hired under this proposal.

New PREP Programs

Funds needed to start new programs in areas not currently served. Envisioned as components of existing social service agencies in these areas.

Day Treatment Centers

PREP is interested in and supports a study of the day treatment center concept and its applicability for Connecticut's community criminal justice system.

Supervised Home Release

PREP is committed to expanding the Department of Correction's supervised home release program as an option for both pre-trial and sentenced persons.

Employment

10 counselors and partial non-personnel operating costs.

\$20,000 in personnel costs for each position (salaries & fringes)
4,000 for each position non-personnel operating costs

Estimated two counselors per HSA (health systems agency) region.

Stop Gap Housing

Money to purchase emergency short-term stop gap housing for clients released from jails and prisons without the means or support to get housing. Only for use while client is establishing residency and/or employment.

18 beds per HSA region.

Substance Abuse

4 positions per HSA region.

20 outpatient counselors and partial non-personnel operating costs

\$20,000 in personnel costs for each positions (salaries and fringes)
4,000 for each position for non-personnel operating costs

Mental Health

20 Masters level outpatient counselors with appropriate clinical skills for psychologically disturbed clients.

\$22,000 for personnel for each position (salary and fringes)
4,400 for each position for partial non-personnel operating costs

Residential Program - Residential/inpatient mental health treatment program - operating cost to DOC \$225,000. Up to a maximum of 15 beds

Sex Offender Program- Residential/inpatient sex offender treatment program - operating cost to DOC \$225,000. Up to a maximum of 15 beds

10 Masters level outpatient counselors with appropriate clinical skills for dealing with sex offenders.

\$22,000 for personnel for each position (salary and fringes)
4,400 for each position for partial non-personnel operating Costs