



Inside Out:

A Plan to Reduce Recidivism
and Improve Public Safety

Report from the Community Safety
and Reentry Commission

Appointed by Governor **Rod R. Blagojevich**

Co-Chairs:

Reverend **Jesse Jackson**

Peoria County State's Attorney

Kevin Lyons



Prepared by the Community Safety and Reentry Working Group

Co-Facilitators: Secretary Carol Adams, Department of Human Services and
Assistant Director Deanne Benos, Illinois Department of Corrections

in memoriam



This report is dedicated in loving memory of former Illinois State **Representative Lou Jones**, who spent her nearly 20-year career fighting for her community and making prison reform and reentry a top priority. Her leadership and pioneering spirit on this issue truly helped pave the way for the Commission and Working Group to discuss this issue in a thoughtful and effective way. Perhaps her greatest legacy was in ensuring a voice for community leaders, grassroots advocates, successful ex-offenders, and faith-based leaders to have a voice in the process.

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a special thank you

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The courage and innovation by which so many different stakeholders—including law enforcement, victims, ex-offenders and their families, business leaders, community leaders, treatment providers, criminal justice policymakers, public officials, and education leaders—contributed to this historic process was something we wanted to ensure was respected by producing a final report that properly reflected all of their ideas in an organized, efficient format that ultimately served as a guide for systemic reform. This process was strongly supported by lead agency staff Gloster Mahon of DHS, Kelly Gilroy of IDOC and Elaine Gordon who formerly worked with IDOC. We would like to thank Rev. Dr. Byron Brazier, Jr., of the Apostolic Church of God, for the tremendous wisdom with which he helped guide the strategic planning of the writing process. The final report also would not have been possible without the dedication, patience, and hard work of our writing team:

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executive summary

Communities in Illinois and nationwide are reeling from a revolving criminal justice door. The cycle of crime, punishment, and reoffending is a major public safety issue, and without intervention is bound to accelerate if recidivism rates remain at near record highs and record numbers continue to be released from state prison.

Illinois's prison population more than doubled from 1988 through 2001, largely due to incarceration rates among drug-involved offenders.¹ Without positive intervention, more than one-half of the record nearly 40,000 inmates estimated to be released from state prisons this fiscal year will be back in prison within three years—after committing new crimes, finding new victims, or violating their parole. No one knows this better than the families in the hardest hit communities in Illinois. In 2005, the vast majority (82%) of the formerly incarcerated returned to just ten regions in the state. These communities also suffer some of the highest poverty and crime rates. Therefore, in addition to increased risk of becoming a crime victim, residents of these communities are losing family members to the vicious cycle of drugs, crime, and incarceration.

The family, community, and statewide toll of crime is only compounded when a formerly incarcerated individual, lacking supports and jobs, commits another crime and returns to prison. When Governor Rod Blagojevich was first elected, he announced that his administration would spearhead a comprehensive public safety initiative to roll back the state's recidivism rate, which had been climbing for more than a decade, standing in 2004 at over 54 percent, a historic high. In other words, for every two inmates released, one committed another crime and returned to prison, likely within a year of release. The costs of this revolving door of incarceration to the community and to the state—which spent \$3 billion over 16 years, primarily in the 1990s, to build, operate, repair, and maintain new state prisons and expand their capacity—are simply too high to sustain. Funds are far better spent breaking this vicious cycle than supporting it.

Under Governor Blagojevich's leadership, the state has taken strong steps to stem this flood, including instituting several innovative programs, such as the Sheridan National Model Drug Prison and Reentry Program (which aims to be the largest state prison and comprehensive reentry program in the nation dedicated to inmates with substance abuse issues; the program focuses its efforts both in prison and during a highly supervised and supported return to the community) and Operation Spotlight Parole Reform Initiative (a long-term plan to dramatically increase the number of parole agents, improve case management, tighten parole supervision to emphasize risk reduction and expand community-based resources that help reduce crime). These efforts are seeing early, promising results. Among graduates of the Sheridan Program within its first two years, recidivism rates were nearly 40 percent lower than comparison groups. In addition, the Operation Spotlight Initiative has already helped to reduce new crimes among all of the state's parolees to the lowest levels in state history. In part, thanks to these and other initiatives, the state's overall three-year recidivism rate has declined to 51 percent. However, much more remains to be done to maintain the momentum.

¹ Illinois Department of Corrections, 2006.

System Change: The Community Safety and Reentry Commission

The Sheridan Program and Operation Spotlight Initiative were only the first steps in stemming the tide of recidivism. Building on lessons learned in the development of these projects, the Governor took the fight to the next level by convening a Community Safety and Reentry Commission to develop a long-term plan for systemic change.

The Commission, co-chaired by Reverend Jesse Jackson and Peoria County State's Attorney Kevin Lyons, is a blue-ribbon panel of 24 statewide leaders. The Commission was supported by a working group of more than 100 individuals representing a broad group of interests, from state and federal officials, to law enforcement officers, prison personnel, community leaders, faith-based leaders, community organizations and services, business owners, crime victims, and the formerly incarcerated individuals and their families.

The Sheridan Program and Operation Spotlight Initiative underscored the importance of systemic change rather than simply focusing occasionally on individual programs with no overall guiding plan. Systemic change would introduce a set of seamless, comprehensive reforms, creating a system that would ultimately be able to better sustain and deliver programs as they were funded. What was also clear was that these goals would never be achieved without building the capacity of communities not only to ensure a safe and well-supervised reentry, but to support the long-term independence of these men and women as productive members of their communities. Returning to a community with few job outlets, few options for drug abuse treatment, or with few other supports would trip up anyone grappling with addiction, mental health, or limited training, let alone someone shadowed by a prison record. More resources and stability in their daily routines, less conflict, and less stigma would better allow these men and women to sustain their success and independence and become law-abiding citizens beyond the embrace of the Illinois Department of Corrections (IDOC)—and ultimately break the generational clutch of crime.

The Commission and its working groups focused on five pivotal issues that the formerly incarcerated and their communities face in their transition from prison to community:

1. Public safety
2. Employment and education
3. Health and behavioral health
4. Housing
5. Faith, family, and community.

Although several programs were already in place in the corrections system to support inmates, it was important to understand how all the parts should fit together in a way that both maximized resources and ensured that inmates were able to address the barriers to a successful life outside the prison walls. Significant investments had already been made in various programs, and it was critical to design a system that incorporated

the lessons learned from existing programs into the new efforts, to capitalize on the strengths and learn from the limitations of those investments in order to design a more effective whole. What was needed, in other words, was system change.

The new system, the Commission recommended, should unfold in four stages along a continuum from prison door to home door:

1. Reception, Assessment, and Classification:

Where the root causes of criminal behavior are identified and assessed and used as the basis of a reentry plan;

2. Prison-Based Reentry Preparation:

During which inmates work to achieve the goals of a reentry plan, and engage in meaningful activities that prepare them for a crime-free, drug-free return to their community and honest work;

3. Post-Release Reentry Management:

Serving as a bridge from prison to community, the highly supervised reentry acknowledges the need to support both parolees and their communities. Central to this process is intensive case management that focuses on public safety while also reconnecting the formerly incarcerated to community support networks, jobs, and services designed to sustain their success;

4. Community Capacity and Sustainability:

Community and family capacity is expanded, long-term public policy barriers to employment and restored citizenship are addressed, and the formerly incarcerated develop the skills and supports needed to sustain success beyond the justice system.

A snapshot of this system is one that begins at the prison door with rigorous screening and assessment that identifies the root causes of criminal behavior. It continues in prison with comprehensive case management that helps inmates devise a strategy for success. The cornerstone of the process is an individualized reentry plan that moves them through a series of concrete steps toward success. It continues outside the prison gates with the oversight of a reentry team led by parole agents and community partners who work hand-in-hand to reduce risk—with the primary goal of identifying and removing truly dangerous predators from communities while also motivating lower-risk offenders to abandon drugs and crime and seek honest work. This is accomplished by access to a strong network of community-based supports. The plan also recognizes that success will be limited without developing the community capacity to ensure ongoing success for the formerly incarcerated, with the ultimate goal of restored citizenship as contributing members of their communities.

The Commission's Recommendations

The Commission consolidated the recommendations of several working groups, which had exhaustively researched the needs of inmates, identified best practices and model programs, and conducted numerous public hearings throughout the state to gain a wide range of citizen input.

The Reentry Process Begins: Day One in Prison

The first stage of the new system is Reception, Assessment, and Classification (RAC). Currently, all individuals admitted to IDOC are first sent to one of the state's four Reception and Classification (R&C) centers. Once simply a way-station before being assigned to a prison, RAC would now become the first step in the reentry process.

Recommendations

- 1. Create a New Mission for RAC:** Instill importance of RACs as the essential first step in planning for an effective system of reentry management. Provide training and support for IDOC staff to change the culture of the IDOC system from one of warehousing to one of reentry success.
- 2. Modify the Flow and Timelines of the RAC Process:** Enhance security, improve the identification of fundamental factors triggering the inmates' criminal behavior and other programmatic and support services they may require, and promote reentry planning.
- 3. Improve Screening and Assessment Tools:** Screen and evaluate all inmates using high-quality assessment tools as a first step in developing their reentry plan.
- 4. Involve Faith and Community-Based Organizations in the RAC Process.** Improve voluntary participation in prison-based programs and involve faith- and community-based organizations in this process to help set the tone that a prison stay should be used to promote personal growth.
- 5. Enhance Information Sharing About Individuals:** Improve data collection and dissemination methods of inmates' criminal and social histories. This process should also enforce the state mandated information-sharing between counties and all RACs statewide and at every stage of the process.

Serving the Sentence: Prison-Based Reentry Preparation

The second stage of the new system is prison-based reentry preparation. The time an inmate spends in prison should be dedicated to defining goals and taking the initial steps to set the foundation for success: learning to accept responsibility for changing their criminal behavior, gaining the necessary education, learning new work skills, addressing substance abuse and health or mental health issues, and reconnecting with family, community, and perhaps most important, employers.

Effective prison-based reentry preparation begins day one in prison, with the basic tenet being that all time spent inside prison walls should include meaningful preparation for a productive crime- and drug-free life outside of prison. The ultimate goal is that they never commit a crime again. The plan must not be ad hoc, but rather a clear progression toward a goal, with solid benchmarks along the way. IDOC should support these efforts with a set of well-coordinated, accessible and practical supports, building on lessons learned from the Sheridan Program and from models across the nation. IDOC itself must reconfigure certain processes to refocus its efforts on successful reentry. To make this possible, IDOC must promote an aggressive process of culture change among all prison-based staff that maintains safety as the primary goal, but enhances the role of rehabilitation.

The three phases of the enhanced prison-based stage are:

1. **Orientation, Induction, and Reentry Plan Development**
2. **Reentry Plan Advancement**
3. **Transition to Community – Transitioning Out Plan**

Recommendations

1. **Launch New Training Program to Promote Culture Change:** Design a training program for all prison-based staff that instills the philosophy that each day spent working with inmates in prison should focus on reducing their risk to prison safety, and ultimately to society on release. Under such a program, the message should be that prison safety and security should remain the primary focus, but that rehabilitation programs can increase the success of that goal and beyond.
2. **Develop Orientation Units and Programs at all Prisons Statewide:** Design a 2–4 week orientation program at each prison statewide. Sessions should be led by IDOC counselors, and advise inmates on how they can use their prison time to prepare for a successful return home by setting goals and becoming involved in programs, as well as advising them on rules and responsibilities. This process may include motivational workshops led by formerly incarcerated persons who have successfully and productively reentered their communities.
3. **Develop Individualized Reentry Plans:** Establish an individualized reentry plan for each inmate that ensures that each day spent in prison is spent planning for a successful return home.
4. **Design a Goal Driven Case Management System:** Establish a comprehensive case management system led by a team of IDOC counselors, who advance inmates' reentry plans, periodically reassess their progress, and coordinate ongoing services to ensure that they achieve their goals. This should include a process of engaging faith, family, and community partners as early as possible to maintain the inmate's focus on preparing to return home.
5. **Establish Group Programming Model in Housing Units Statewide:** Establish peer support groups in housing units within prisons, with regular group sessions led by newly trained IDOC counselors. Balanced and restorative justice community principles should be piloted through these programs.

6. **Develop Specialized Rehabilitative Tracks:** On the basis of the assessment and reentry plan, direct the inmate to one (or more) of the following four rehabilitative tracks: health and mental health, vocational, educational, and substance abuse. The type and timing of services should be tailored to the individual tracks and the inmate's release date. In addition, IDOC should expand programming and support services, or establish regional programming networks at various prisons, to ensure that inmates can meet the goals of their reentry plans prior to release.
7. **Create Specialized Programming for Long-Term Offenders:** Specialized programming that includes the development of step-down systems designed to reduce risk as they return to their communities after extended sentences are critical for this high-risk population.
8. **Expand Gender-Specific Services:** Expand gender-specific programming and services that recognize the unique needs of female inmates, especially women with children.
9. **Develop Dedicated Transition Reentry Units in All Prisons:** Whenever possible, IDOC should transfer inmates who are returning to one of the top ten high-impact regions of the state to a reentry unit at a prison nearest their home communities within 90–180 days of release. Ensure that within at least 90 days of release, all inmates are transferred to a Transition Unit, an Adult Transition Center (ATC) or a Work Release Center. Case management in Transition Units should now begin to serve as a bridge to community services and programs.

This process should include a complete overhaul of the Pre-Start program, which currently offers a limited curriculum for pre-release inmates on key issues, such as parole compliance and obtaining state identification.

Time in the Transition Unit should focus on completing the prison-based components of each inmate's reentry plan, as well as advancing those goals to the next level of concrete transition plans (job contacts, housing, etc.) for a successful community reintegration. In addition to addressing individual community-placement issues, such as housing and connecting with drug and mental health treatment, the Transition Units should offer programming and information sessions, including:

- Job preparation and placement training;
- Securing the proper paperwork to obtain a state ID;
- Ensuring that all proper paperwork has been filed and inmates fully understand their eligibility for public benefits, especially for health care services;
- Connecting to community-based peer support groups and mentors;
- Preparing for family reunification, child support obligations, and counseling needs;
- Learning more about what to expect on parole, how to work with the parole agent to achieve personal goals, parolee rights and requirements, and methods to comply with Prisoner Review Board orders;

- The receipt of a directory of community-based services in the inmate's home region;
- Information on HIV and sexually transmitted disease (STD) management, including sources of community-based health care, such as through the Ryan White CARE Act service networks;
- Health and behavioral health medication management;
- Intensified preparation for addressing domestic violence, violence prevention, and gang intervention on return to the community.

10. Expand Community-Based “Early Release” Alternatives to Prison for Nonviolent Drug Offenders Allowed Under Current Law. Expand the use of diversion programs, which are allowed under current law. These programs allow select nonviolent offenders to serve part or all of their sentences in less expensive, more effective community-based alternatives to prison. This alleviates the continued pressure on the system from the crush of incoming drug-involved offenders while reducing the risk to society. Explore ongoing best practices in states that are implementing such alternatives.

Returning Home: Post-Release Reentry Management

The process does not stop at the prison door. The new system must continue to provide intensive case management, via parole, for the formerly incarcerated who are transitioning from prison to community.

The Commission's recommendations outline a structured reentry process largely defined by validated risk reduction that establishes the right balance between public safety and smart prevention. The role and number of parole agents must continue to be expanded to ensure that there are enough well trained agents to identify parolees who pose a serious threat and remove them from communities in a timely manner, but also to ensure that lower-risk offenders are steered away from crime and drugs and toward alternatives, such as drug treatment and honest work. To be successful, a parole agent must have the tools to motivate and sanction parolees, and the support of community networks and expanded placement services, such as drug treatment, housing, physical and mental health services, and job placement options, to ensure that risk is reduced, and that parolees stay on track toward goals. Ultimately, ensuring that the offender develops the proper tools to secure and sustain stable employment is a crucial factor in their success. The flow of inmates through this new system is divided into four phases:

1. Connecting with the reentry team
2. Reconnecting with community
3. Achieving goals of reentry plan
4. Upholding public safety and accountability.

Recommendations

- 1. Establish Reentry Teams Led by Parole Agents:** Establish reentry teams that are led by a parole agent, and include an employment liaison, Placement Resource Unit (PRU) staff, reentry case manager (where appropriate), community partners and mentors and any applicable community service providers. The post-release team ensures that the former inmate is connected with needed supports in the community while being held accountable for continued drug and criminal abstinence. Case management is highly coordinated and tightly linked with parole oversight such that parolees move through a new system of sanctions and rewards as they work toward meeting reentry goals.
- 2. Continue Implementing the Governor’s Long-Term “Operation Spotlight” Parole Reform Initiative:** Support ongoing parole reforms that focus on increasing the number of parole agents; reducing caseloads; improving parole agent training as case managers; expanding community-based partnerships; strengthening specialized skills training to better serve key populations, such as women and drug-involved offenders; and establishing supervision levels on the basis of validated risk-assessment tools tailored to each parolee. Target agent increases to the top ten high-impact regions first, and co-locate parole agents with IDOC placement resource staff and service providers.
- 3. Expand the Community Support and Advisory Councils (CSAC) Pilot Project:** The CSAC model, which is currently funded through the Sheridan Program, builds community-based networks of stakeholders. Community members visit inmates from their neighborhoods to help rebuild health, family, and community connections. CSACs offer a place for parolees to seek help and guidance once they return home, and CSACs offer ongoing recommendation to IDOC on improving the ability of communities to safely and effectively sustain the reentry of offenders.
- 4. Expand Community-Based Case Management Models for Parolees with Special Needs:** Expand the use of clinical and community-based intensive case managers specializing in mental health, HIV/AIDS, and substance abuse treatment. In addition, increase federal, state, and local investments in these types of supportive services.
- 5. Expand “Spotlight Reentry Centers”:** Add more Spotlight Reentry Centers to the top ten high-impact areas. The Spotlight Reentry Centers serve the dual purpose of helping recently released parolees reconnect with their communities and supportive services, while mandating participation in intensive day-reporting programs to ensure that high-risk parolees stay on track and avoid parole violations. The programs include regular drug testing and treatment, counseling, anger management, and job referrals. A key component of the success is the establishment of stronger partnerships between parole agents and grassroots, faith-based, and service organizations through a community partnership focus of the program.
- 6. Develop Transitional Jobs Programs in the Top Ten High-Impact Areas:** One of the most effective strategies that nonprofit organizations have devised is transitional jobs, a strategy that worked for welfare to

work and is now working for prison returnees. In a transitional jobs program, former prisoners with employment challenges are hired and paid a wage for legitimate employment in a time-limited, subsidized job. The program not only offers real work, income, skill development, and a letter of reference and experience to add to their resume, it also offers coaching and support services to help participants overcome substantial barriers to employment, such as substance abuse or mental health issues. The program focuses heavily on early placement into unsubsidized work as well as job retention services after placement. Employers gain access to a pipeline of workers with demonstrated employability. Most important, communities gain when the formerly incarcerated have the opportunity to contribute positively to family, neighborhood, and the larger environment.

7. **Expand Sanctions and Rewards Programs for Parolees:** More effectively promote behavioral change among parolees by expanding sanctions and rewards programs that can be administered by parole agents, such as “Halfway Back” programs, as alternatives to incarceration. In many cases, diversion programs offer more meaningful, less costly ways to change self-destructive behavior among parolees than instant reincarceration for minor or nonviolent violations of parole.
8. **Continue to Expand Partnerships with Local Law Enforcement:** Ensure that critical information about high-risk offenders is shared in a timely and meaningful way to promote improved public safety. Partnerships should also identify opportunities to work together on diversion programs for nonviolent, drug-involved offenders. In addition, continue to build on the success of federal, state, and local partnerships, such as Project Safe Neighborhoods, that promote targeted violence reduction.
9. **More Aggressively Develop Assessments of Community Needs and Develop a Plan to Meet Those Needs with Expanded Community Services:** Ensure that all community assessments recognize the unique characteristics and needs of both rural and urban communities. Build an integrated network of services and supports, including job placement, transitional jobs programs, education, supportive housing, substance abuse treatment and other support groups, and health and mental health care supports.

It Takes a Village: Building Community Capacity and Sustainability

The cycle of crime, incarceration, and recidivism begins and ends with communities—where crimes and victimization occur, where families of offenders (including many young children) are left behind during a prison stay, and where inmates ultimately return.

Thus, the solutions should extend well beyond the criminal justice system. The fourth phase of the new system must establish accountability and partnerships among city, county, state, federal, and community leaders to support and sustain efforts to reduce recidivism. Without community capacity and sustainability, the vicious cycle will continue.

Because most prison inmates typically come from neighborhoods in the top ten high-impact regions, which are plagued by high poverty, poor performing schools, low employment rates and high rates of drug crime, the Commission has recommended prioritizing resources to these areas. At this stage, enhanced or better coordination of existing resources is needed across the board in these regions to provide job and educational opportunities, accessible treatment programs, stable housing and viable alternatives to crime and drugs. Without them, even the most compliant parolees will return home to empty opportunities and become vulnerable to old, dangerous patterns. In addition to programs and services, staff in existing programs must be trained to identify and support the needs of the formerly incarcerated.

At this stage, it is not only important to bolster community resources, but to ensure that long-term social stigmas and legal barriers be addressed. Despite even the most successful efforts to reform, complete their education, and become responsible members of their communities, many of the formerly incarcerated are blocked from many jobs, and if not barred outright, they face serious hurdles in the form of employer suspicion, lack of accurate information, and other social stigma. Regardless of the nature of their crime or their proven track record of success, checking “yes” to the question on the job application, “have you ever been convicted...?” is today’s scarlet letter. Not only is there stigma and legal restrictions on job applications, but on applications to subsidized housing, applications for federal education assistance, and in many other arenas. If the formerly incarcerated are to reintegrate themselves into our communities as working fathers and mothers, they must be first given the opportunity to prove themselves—and they must be assessed based on their individual circumstances and progress, not on a blanket social stigma.

In many ways, in fact, this last stage could have easily been the first stage because the community is where reentry begins and ends, and sound, community-based prevention policies can help break the cycle of recidivism. Without these efforts, the formerly incarcerated’s needs will go unmet, their responsibilities to family and community will be dodged, and public safety will once again be compromised.

The task of creating an effective, seamless reentry system that extends beyond the prison gates and into the community is not a simple one. Currently, there is no integrated system of reentry in Illinois. Although many programs serve the formerly incarcerated, they often lack sufficient funding, they are not coordinated in any meaningful way, and their ongoing sustainability is at constant risk. The state must therefore foster partnerships among various government agencies and the community and faith-based organizations by creating legislation that supports reentry, eliminating legislation that imposes barriers to reentry, and by reinvesting funds currently used to incarcerate individuals into reentry programs and supports at the community level.

Recommendations

- 1. Remove Legal and Structural Barriers Faced by Formerly Incarcerated Persons to Employment:** Expand the use of existing tools for rehabilitated ex-offenders, such as the Certificate of Relief from Disability; establish “best practice” standards for employers to appropriately interpret criminal records; develop equitable legal standards for background checks; change public agencies’ administrative policies to allow employment of individuals with criminal

- records; prohibit business insurance providers' from indiscriminately refusing to cover employees with certain types of convictions, among other solutions.
2. **Remove Legal and Structural Barriers Faced by Formerly Incarcerated Persons to Housing:** Remove public housing bans for drug offenders in treatment; increase affordable housing stock with various incentives, and increase access to affordable housing for the formerly incarcerated; provide temporary rental stipends and increase housing vouchers for the formerly incarcerated; and develop new supportive housing units for those with mental illness, HIV/AIDS, or substance abuse issues.
 3. **Remove Legal and Structural Barriers Faced by Formerly Incarcerated Persons to Health and Behavioral Health Services:** Better coordinate support services for those with mental health diagnoses. Acknowledge the risk of relapse in substance abuse treatment and expand the “good conduct credit provisions” for those incarcerated more than once and who are in substance abuse treatment. Establish the formerly incarcerated as priority populations in Medicaid, especially those with mental health issues. Increase access to primary care, and ensure the formerly incarcerated with HIV/AIDS have continued access to treatment.
 4. **Target a Percentage of IDOC's Budget to Support Community-Based Initiatives:** IDOC has a \$1.2 billion budget and manages more than 45,000 inmates in prisons and more than 33,000 parolees in Illinois communities. To keep the public safe by maintaining safe prisons and safe communities, IDOC should work toward a long-term goal of ensuring that the proper resources are invested in community programs and public safety initiatives.
 5. **Build Capacity in the Community by Creating a Seamless and Coordinated System of Supports:** Provide training to service providers in effectively addressing this population's needs. Develop a coordinated and uniform system of supports and reporting standards among service providers to help build community capacity to help this population of formerly incarcerated.
 6. **Implement Community-Based Service Networks in the Top Ten High-Impact Regions:** Community-based networks help foster long-term community buy-in, community support, and sustained change. Coordinate community groups, faith-based organizations, and others working independently to maximize efforts, impact, and support for the formerly incarcerated. Expand CSACs to more high-impact regions of the state.
 7. **Access Employment Related Training Grants for Smaller Organizations:** Smaller organizations should have access to training grants and training through the Workforce Investment Act (WIA) and TIF-Works for community-based organizations working with the formerly incarcerated.
 8. **Invest State Funding in Social Entrepreneurship Program Models:** Social entrepreneurship model programs, such as the San Francisco Delancey Street program, offer a hand up rather than a hand out by promoting less reliance on government funding and shifting the focus to social equity or human capital. The state should invest in social entrepreneurship programs that develop businesses, hire formerly incarcerated persons, and use profits to

fund training and other supportive services to help these individuals become independent, law-abiding, and contributing members of their communities.

9. **Develop Coordinated Strategies for Enhancing Investments in Reentry Support Services:** Such strategies should further leverage existing federal, state, and local investments and aggressively develop new funding sources to expand reentry support services, including funds from social service programs (such as WIA, Medicaid, and food stamps). A statewide strategy should also develop a private foundation fundraising strategy and offer matching funds to work within existing private foundation reentry efforts.
10. **Partner with Private Companies to Develop Employment Opportunities:** Develop partnerships that help secure community reinvestment and that support specific reentry initiatives, particularly employment-related initiatives.
11. **Address the Social Stigmas Attached to a Criminal Record:** Launch community-based public awareness campaigns about the importance of providing a second chance to formerly incarcerated persons who are seeking support to move away from crime and drugs and toward honest work and citizenship. This should include stories about the contributions of those formerly incarcerated individuals who have met with success.
12. **Organize Public Education and Advocacy Initiatives:** Organize public education and advocacy strategies at the local, state, and federal levels to highlight the challenges and progress made on the proposed recommendations.

“No Entry” the Ultimate Goal

All this, of course, is not accomplished overnight, nor is it accomplished by simply reconfiguring a few services or a few existing components. It requires all of Illinois’ communities to commit to a fully redesigned system that goes well behind the criminal justice system.

Although not an easy task, it is absolutely a necessary one. Just as the prison population did not spring up overnight, the solution to all-too-high recidivism is a process. But as innovations such as the Sheridan Program and Operation Spotlight Initiative prove, progress need not be elusive.

Finally, an intense focus on reentry is necessary not only to improve public safety, but to release communities from a vicious cycle that has far-reaching social and economic ramifications. Attacking the source of recidivism will go a long way in relieving the stress on the system, improving the safety of our communities, and helping families and individuals avoid the devastation that a prison sentence can inflict. Certainly criminals must be held accountable to laws, but that accountability must also be balanced with opportunity to reform.

Unfortunately, there will always be individuals who are a threat to society and should be incarcerated. However, the last decade of doubling prison populations, driven mainly by drug-involved arrests, has shown that most crime arises from social conditions, including poverty, lack of opportunity, lack of education, mental health conditions, and other issues. If we are to stop this steady flow into and out of prisons, we must simultaneously

work to redirect offenders to successful lives and address the very reasons that spark crime in the first place. Such a process can only take place by ensuring that every day inmates spend in prison is focused on a successful return home, and that they are held accountable for continuing that work upon a well-supervised and supported return home.

The recommendations outlined here will go far in moving the current population of inmates along a path to success. However, the problems that land a criminal in prison begin well before his or her contact with the justice system. The best way to prevent crime and recidivism over the long term is to stop the problem before it starts by investing in schools, in communities, in health and social welfare, and in people. This approach is eminently less expensive, and certainly more effective over the long term. The state has taken a positive initial step by diverting nearly \$150 million slated for two stalled and one nearly vacant prison to forward-thinking investments in areas such as universal preschool and health care for every child. The state must continue to build on these efforts, particularly in the top ten high-impact regions. However, progress cannot be sustained until accountability for addressing solutions is established beyond the justice system. City, county, state, and social service and community leaders must all be part of the solution or success will not be sustained and the vicious cycle will only continue. In the end, the ultimate goal, for any state and any community, should be the prevention of crime and “no entry.”

foreword

For the past decade, the state of Illinois and our nation have been facing a dangerous and costly trend: record recidivism rates and record releases of inmates from our prisons. Over the years, Illinois communities have paid the price for rising recidivism rates in many ways—new crimes, new victims, new prison costs funded with taxpayer dollars, weakened communities. The greatest impact of this vicious cycle can be seen among 10 of the highest-impact regions of our state that have traditionally housed the highest populations of returning offenders and the highest crime.

Addressing the state's rising recidivism rate is a long-term public safety and public policy challenge that my Administration has taken on from the start—including historic investments in programs that have already begun to show promise, including the Sheridan National Model Drug Prison and Reentry Program and the Operation Spotlight Parole Reform Initiative.

Today, I hope to take our state's efforts to fight recidivism to the next level with the launch of a new "Statewide Community Safety & Reentry Working Group" that will target the state's 10 highest impact regions that house over 80 percent of inmates being released from prison. I have charged this team of leaders with applying all we have learned from model programs here in Illinois and across the nation toward making recommendations for the design of a new statewide reentry management system. Through this process, the 10 regions will ultimately serve as sentinels for statewide reform efforts, enabling us to make all Illinois communities safer and stronger.

Governor Rod Blagojevich
December 17, 2004

part 1

background



chapter 1: answering the call

“Please remember that when a person checks that conviction box when applying for a job...they are still a human being. They are a contributor to our community. They can either work or not work. If they do not work, we pay more.”

—Rock Island, Illinois, employer

Communities in Illinois and nationwide are reeling from the revolving door in the criminal justice system. The cycle of crime, punishment, and re-offending is a major public safety issue, and without intervention is bound to accelerate if recidivism rates remain at near record highs and as record numbers of inmates are being released from state prison. In fact, Illinois’s prison population more than doubled from 1988 through 2001, largely due to rising incarceration rates among drug-involved offenders.

Without positive intervention, more than one-half of the nearly 40,000 inmates expected to be released from state prisons this fiscal year will be back in prison within three years—after committing new crimes, finding new victims, or violating their parole.

No one knows this better than the families in the poorest communities of Chicago and Illinois. In 2005, nearly 40,000 men and women were released from Illinois prisons, a record number for the state.¹ About 18,000 of those returned to Chicago, and about one-third of those returning to Chicago—or roughly 6,200 men and women—returned home in one year to only seven communities: North Lawndale, Austin, Humboldt Park, East Garfield Park, West Englewood, Auburn/Gresham, and Roseland.² Yet the impact is not limited to Chicago. In East St. Louis, the rate of returning parolees per

Parolees

The top 10 target area communities and percentage of state’s total parolee population in 2004 residing in the community:

1. Cook County/Chicago (59.7%)
2. Collar County Region (9.8 %)
3. St. Clair/Madison Counties (3.1%)
4. Winnebago County (2.8%)
5. Champaign/Vermilion Counties (2.3%)
6. Macon County (1.9%)
7. Peoria County (1.8%)
8. Sangamon County (1.5%)
9. Rock Island County (0.8%)
10. Jefferson County (0.3%)

¹ 39,031 inmates were released in 2005 according to the Illinois Department of Corrections.

² Numbers calculated using percentages reported in Nancy La Vigne, Cynthia Mamalian, Jeremy Travis, and Christy Visser, *A Portrait of Prisoner Reentry in Illinois*. Washington, DC: Urban Institute, 2003. They report that in 2001, 51% of all parolees returned to Chicago, and 34% of those returning to Chicago returned to six neighborhoods.

1,000 residents is more than double that of Chicago. Other communities across the state are disproportionately affected by crime and incarceration. In fact, 82 percent of the formerly incarcerated return to just 16 of the state's 102 counties.

The neighborhoods and communities to which these men and women are returning are some of the state's poorest. As one resident said of North Lawndale, "it's an industrial ghetto without the industry."³ They are also the most dangerous. Crime rates are sometimes double the area or city averages.⁴ In fact in some Chicago neighborhoods, as many as 70 percent of African-American males have criminal records.⁵ Therefore, in addition to suffering from the loss of a family member to prison, residents also are much more likely to be victims of crime as well.

The challenge of reintegration is not confined to the correctional system. It is not confined to the city or state government. It is not the sole concern of communities. It is everyone's challenge.

High crime, high poverty, low-performing schools, few opportunities, and strained family and neighbor relationships are what greet the formerly incarcerated, already limited by lack of education, frequent substance abuse or mental health challenges, and lack of job experience. Returning to a community with few job outlets, or with few options for drug abuse treatment, or with few other supports would trip up anyone facing these

types of social challenges, let alone someone shadowed by a prison record. Without positive intervention, more than one-half of the nearly 40,000 inmates estimated to be released from Illinois prisons in 2006 will be back in prison within three years, after committing new crimes, finding new victims, or violating their parole. More resources and stability in their daily routines, less conflict, and less stigma would allow these men and women to sustain their success and independence and become law-abiding citizens beyond the embrace of the Illinois Department of Corrections—and ultimately break the generational clutch of crime.

The challenge of reintegrating the formerly incarcerated back into society is not confined to the correctional system. It is not a challenge only for city or state government. It is not the sole challenge of communities. It is everyone's concern. Just because incarceration and its effects are concentrated in a few areas of the city or state does not mean that its ripple effects are not felt by each and every resident.

The cost of ignoring this issue is high. The recidivism rate that the Blagojevich administration inherited stood at 54.6 percent in 2004, the highest in the state's history.⁶ Without stemming this revolving door, the state will be forced to continue spending valuable tax dollars on what some have termed the "prison industrial complex," money that could be better spent on front-end health, education, and other preventive supports. As it stands, between 1988 and 2005, the state spent more than \$800 million on new prisons, new housing units, or new work camps. Operating, repairing, and maintaining those facilities cost an additional \$2.2 billion.

3 Jonathan Kozol, *Savage Inequalities: Children in America's Schools*. New York: Crown, 1991.

4 In the Austin neighborhood in 2001, the crime rate was 7.6% higher than the citywide average of 65.9 crimes per 1,000 residents. Humboldt Park was 13% higher. North Lawndale was 38.3% higher. Englewood was 115.7% higher, and East Garfield Park had rates that were 88.6% higher in 2001. La Vigne et al., *A Portrait of Reentry in Illinois*.

5 *Still Separate, Still Unequal: Race, Poverty, Policy and the State of Black Chicago*. Chicago: Chicago Urban League, 2005.

6 The recidivism rate for 2005 declined to 51.8%. Illinois Department of Corrections.

The cost to families and communities is equally, if not more, profound. Most of these men and women have children. Children of incarcerated mothers—the fastest growing prison population in Illinois—are 5–6 times more likely to end up in prison as an adult, and they are significantly more likely to end up in foster care.⁷ Children from these communities where crime and poverty predominate are the very children at risk for involvement in the juvenile justice system. Having an incarcerated parent only adds to that risk—a risk we cannot ignore if we are to break the cycle of devastating crime and dysfunction. The drain on communities in lost potential is staggering.

The state has begun to address these costs by creating innovative programs and reentry services, such as the promising Sheridan National Model Drug Prison and Reentry Program, which has been shown to reduce recidivism among participants by nearly 40 percent. These and other efforts, including Operation Spotlight, have in turn contributed to the declining recidivism rate. In 2005, the three-year average recidivism rate stood at 51.8 percent, down from 54.6 percent a year earlier.⁸ The state has not seen consecutive annual declines since 1990. However, without continued, concerted, systemic changes, this initial progress will stall.

In 2005, the three-year average recidivism rate stood at 51.8 percent, down from 54.6 percent a year earlier. The state has not seen consecutive annual declines since 1990. However, without continued, concerted, systemic changes, this initial progress will stall.

How we got here is a conversation for the nation. What we can do about it is a question for all of us. The solutions are not easy. But the challenge must be addressed or we risk writing off an entire future generation of young men and women, with reverberations far down the line.

State Takes Action: The Community Safety and Reentry Commission

Under Governor Rod Blagojevich's lead, Illinois chose to tackle the problem head-on. A first step was to assemble a team of committed individuals to produce a blueprint for system change. The goal: revamp the entire system from prison door to home door. The team understood that in a system straining under a crush of inmates, simply building more prisons without staunching the flow was akin to putting a finger in the dam. The blueprint for success was to build on lessons learned from the state's groundbreaking Sheridan National Model Drug Prison and Reentry Program (which aims to be the largest state prison and comprehensive reentry program in the nation dedicated to inmates with substance abuse issues; the program focuses its efforts both in prison and during a highly supervised and supported return to the community) and Operation Spotlight Parole Reform Initiative (which increased the number of parole agents and intensified case management).

The Community Safety and Reentry Commission was co-chaired by Reverend Jesse Jackson and Peoria County State's Attorney Kevin Lyons and represented a broad group of interests, from state officials and leaders, to law enforcement officers, prison personnel, community leaders, faith-based leaders, leaders of community organizations and services,

7 B. Meyers, T. Smarsh, K. Amlund-Hagen, and S. Kennon. "Children of Incarcerated Mothers," *Journal of Child and Family Studies* 8(1), 11-25; and Chicago Project on Female Prisoners and Their Children, University of Chicago.

8 The recidivism rate is calculated by tracking prison exits over three years. Therefore, the 2005 recidivism figures are based on FY 2002 exits tracked through FY 2005.

business owners, formerly incarcerated individuals and their families, and other community members. From the outset, the Commission made things happen. Members saw the dire need for change. They were committed to change. Most important, they saw the possibility for the state and for all those touched by incarceration to effect change. As a result of this commitment, the state is at the forefront of prison-based reforms.

The Need for Comprehensive, Systemwide Change

The state quickly realized that, given the enormity of the challenge, the existing system of supports was no longer efficient or cost-effective. In the past, although several programs were available for inmates, no real *system* was in place to move them through goals and personal development.

There was no blueprint for change. What was needed was a systematic plan, beginning the day an inmate entered prison and continuing well into the community after his or her release. The plan, by its very nature, would maximize limited resources for all inmates. The goal was to develop, within the existing cost and resource parameters, a logical progression for each inmate that helped him or her set and achieve goals that would lead to a job and reintegration into society as a tax-paying, productive citizen. To ensure that limited resources were not wasted, the new system would rely on time-tested, existing model programs and “best practices,” whether for substance abuse treatment, job placement and preparation, or education programs. The programs would become the scaffolding of supports that would help the process take concrete shape. The programs and supports would recognize the individual’s specific needs and provide the necessary bridges between each stage in the system. Each step in the process would become a building block to prepare the individual for the next phase.

It would also be imperative, as a way to both maximize existing resources and to ensure success, to form lasting partnerships with other state, federal and local agencies, faith-based and community organizations, law enforcement, and families. These federal, state, and local partnerships would build the programmatic elements and seed innovative solutions. Also, the Commission recognized the importance of building community capacity to support these efforts and ensure the formerly incarcerated individual was not only well supervised, but also provided with the tools to sustain a successful reentry and productive citizenship.

A central premise guiding all efforts was the role of the formerly incarcerated themselves. Personal responsibility and accountability were a must.

Equally important, the Commission understood that one could provide the most comprehensive and professional services, but until an individual was ready to change—until he or she addressed underlying issues and challenges, from substance abuse to mental health issues, to lack of job experience—all the good intentions and model programs would be wasted. Therefore, a central premise guiding all efforts was the role of the formerly incarcerated themselves. Personal responsibility and accountability were a must. It was not enough to teach offenders

to behave in prison and to be good “inmates,” they must learn to live safely, crime free, and drug free as a contributing member of their communities. At the outset of the prison experience, the inmate must be given the opportunity and structured activities to realize the benefits of change. As this parolee in Springfield said, “One of the hardest things in the world to do when you go to prison is to go to school. You can lift weights, you can

sit in the dayroom, won't nobody bother you. ... It would be a better incentive if they had a program to go through, like boot camp, and a program that started day one.”

Because such a system change is no small undertaking, and requires serious commitment of resources and funding, the Commission was directed to focus its efforts on the top ten regions in the state that were most affected by incarceration, on the basis of number of arrests and returning parolees. These top ten areas include those communities discussed above and other areas of the state with disproportionately high crime rates and parolees (see Chapter 3 for more detail on these areas). The Commission was also tasked with leveraging federal, state, and local resources, and recommending ways to better target existing corrections resources toward the new objectives set forth by the plan.

The Results

The past year and a half have been incredibly productive and action-driven.

- Leaders identified the top ten regions in the state most affected by crime, recidivism, and incarceration and held more than 20 public hearings statewide with residents, law enforcement officials, elected officials, victims of crime, business owners, and community organizations to gain a better understanding of their concerns, fears, and ideas. Thousands of Illinois citizens attended, and their input would prove critical to the final list of recommendations for improving and building the re-entry programs.
- The Commission studied model programs from across the nation and made recommendations for tailoring them to Illinois.
- Working groups studied the most pressing issues of health and behavioral health; employability, education, and training; housing; faith, family, and community; and public safety, and they translated that deep understanding into recommendations for improving existing services and supports, creating a new system for change, as well as building on successes.
- To ensure that the recommendations aligned with on-the-ground realities, a working group analyzed statewide data on such topics as the rate of substance abuse among incoming inmates, their education needs, and other relevant issues. These data would be integral in planning and targeting services and supports.

Throughout the entire process, the voices of all were heard, because giving the formerly incarcerated a second lease on life is an issue for all Illinois citizens.

Putting It All Together

The Commission's work did not stop with the various reports and recommendations of the working groups. The final step of the process was to pull together and synthesize the results into a plan for system change that would maximize resources for all inmates. That blueprint identified four areas of system change:

1. Reception, assessment, and screening,
2. Prison-based reentry preparation,
3. Post-release reentry management, and
4. Bolstering community capacity and sustainability.

The guiding belief is that inmates must prepare for reentry from day one, and that the services and supports they receive in prison must be extended after they leave prison in wrap-around case management services. Also, building capacity in the ten high-impact communities to support these men and women is critical to post-release efforts, not to mention preventing crime in the first place. When inmates in need of housing, substance abuse counseling, or job training do not know where to go, or worse, have no where to go, the in-prison efforts to create opportunities will be wasted. As this formerly incarcerated person so clearly put it during a public hearing, “I walked out the door and basically...I didn’t know where to go. Now there are resources available, ...and I have a chance now and I’m doing better than I’ve done in many, many years.”

This report is the culmination of these efforts. This report details the recommendations for moving forward with systemwide reform. It is the first necessary step in what the Commission believes will be a long-term process.

Prisoners must prepare for reentry from day one, and the services and supports they receive in prison must be extended after they leave prison.

It is hoped that the report will, in turn, serve as a model for other states in the nation. Central to its continued success is the ongoing support of the key stakeholders in the process, from the correctional and legal communities to the community members and organizations, to the formerly incarcerated themselves. The entire system must continue to back these efforts for them to succeed. The following pages are an excellent beginning, and represent hard, strategic work in addressing the serious challenge ahead. However, much more is needed, and the state of Illinois is committed to that mission. We did not get here overnight. The problem of crime and recidivism has been building for decades and it will not be solved overnight. It will take time and continued commitment to transform the business of a system that manages roughly 45,000 inmates and 33,000 parolees—nearly 80,000 people—daily.

Although the road ahead is difficult, it is not impassable, and we have taken those first important steps thanks to the committed and impassioned efforts of the Commission and the people of Illinois. The process is underway. We look forward to continued efforts to implement these exciting and important changes.

The following pages detail these efforts, beginning with a review of the Commission’s mission and progress. Chapter 2 describes the Commission’s Mission and Process. Chapter 3 profiles the ten regions of the state disproportionately affected by crime and recidivism. Chapter 4 begins the detailed recommendations of the Commission, organized by the four key areas: 1) reception, assessment, and screening, 2) in-prison programs, 3) post-release case management, and 4) bolstering community capacity and sustainability. The appendices offer further detail on the top ten high-impact areas, detail from the statewide public hearings, and members of the Commission and its working groups.

chapter 2: the commission's mission and process

Illinois Governor Rod Blagojevich convened the Community Safety and Reentry Commission in December 2004. Through its efforts, the Commission brought an unprecedented group of stakeholders together to design a blueprint for a new statewide reentry system that would help leverage federal, state, and local resources to reduce the state's recidivism rate.

The Commission, with 24 members, was co-chaired by Reverend Jesse Jackson and Peoria County State's Attorney Kevin Lyons, and co-facilitated by Dr. Carol Adams, Secretary of the Illinois Department of Human Services (IDHS) and Assistant Director Deanne Benos of IDOC. The Commission comprised a blue-ribbon bipartisan panel of state legislators, community, faith-based, business, and educational leaders, law enforcement officials, and correctional experts (see Appendices B and C for members). The Commission's activities were supported by the Community Safety and Reentry Working Group. The working group, with more than 100 members, would study relevant issues and existing programs in five broad areas (for working group membership, see Appendices D and E). The working groups would also hold numerous public hearings statewide to learn more about the reentry issues communities were facing and their ongoing efforts to address them. The hearings focused on the ten areas of the state most affected by crime and recidivism.

The ultimate goal of both the Commission and the working groups was to create a seamless "system" of validated risk reduction through which inmates would be provided with the tools to change from the day they entered prison through their return home—beginning with prison reception and screening, continuing in prison, and following through to

The Structure and Timeline of the Commission's Efforts

- > **The executive committee formed five subcommittees. Subcommittees held public hearings and reviewed national best practices and model programs (see Appendix A for a selection of the programs reviewed) in five topic areas:**
 - 1) Public safety;
 - 2) Health and behavioral health (substance abuse and mental health);
 - 3) Employment, education, and training;
 - 4) Housing;
 - 5) Faith, family, and community.
- > **Subcommittees also analyzed the readiness of the top ten target regions to manage their reentering offender populations.**
- > **The executive committee met monthly to review subcommittee topic reports as they pertained to four key areas of systems change:**
 - 1) Reception, assessment, and classification (RAC);
 - 2) Prison-based reentry preparation;
 - 3) Post-release reentry management;
 - 4) Community-capacity building and sustainability.
- > **The executive committee integrated all recommendations from subcommittees into a report on system change, integrating, for example, the public safety committee recommendations with the housing subcommittee recommendations as they applied to the RAC stage of the reentry process.**
- > **The Commission reviewed the final set of recommendations in January 2006.**

post-release reentry management and community supports and capacity. The new system must also work within the limited resources available. This chapter details these efforts.

Guiding Principles

With goals of stemming recidivism, enhancing public safety, and ensuring the successful reentry of returning inmates, the Commission set to work in early 2005, guided by several fundamental principles:

- **Reducing recidivism will help improve public safety.** By working to reduce risk among prison inmates and returning offenders, society will reduce the likelihood of reoffending and thus improve public safety.
- **Recidivism is costly.** The personal toll on families, on new victims, and on the communities when the formerly incarcerated re-offend and return to prison is profound. The economic toll is equally large. Therefore, effective reentry practices will enhance the quality of life for Illinois residents and save taxpayer dollars.
- **Inmates' challenges are long-standing and extensive.** Reentry strategies must be comprehensive to address these myriad issues. The efforts must also be systematic and regularly evaluated to ensure that they are still effective.
- **Just “doing time” is not enough.** Planning and preparation to address the fundamental causes of criminal behavior and reduce risk must begin the moment an inmate enters prison. Providing inmates with the tools to ensure a crime-free re-entry must become the focal point of the prison experience. Prison sentences must be viewed, by IDOC staff and prisoners, as opportunities to create and build the capacity of inmates to change their lives.
- **Learn from past success.** A handful of model programs are already underway. These efforts should be expanded statewide. All programs must also be regularly evaluated and fine-tuned where needed.
- **The long-term success of reentry strategies goes well beyond corrections reform; it will require increased accountability among city, county, state and community leaders to leverage resources and target the root causes of recidivism.** In addition, it will require a long-term review of the legal and social challenges faced by rehabilitated ex-offenders that prevent them from becoming contributing members of their communities. This will rely upon sustained values and sustained partnerships among community groups, private citizens, families, local law enforcement, treatment providers, and religious leaders.

Working Groups and Topic Areas

The scope and magnitude of the challenge dictated no small plans. Only a comprehensive solution that touched all aspects of the issue would suffice—beginning the day an inmate enters the system, throughout his or her stay in prison, and equally important, continuing after release. Therefore, the Commission assembled working groups of more than 100 individuals to focus on one of five topics pertinent to re-entry success.

- **Public Safety:** This group included criminal justice representatives from across the state, including local law enforcement, parole, prosecutors, defense attorneys, probation, and the judiciary. This committee examined ways to incorporate the principles of “balanced and restorative justice” into reentry work as a means of supporting overall community involvement and community safety.
- **Employability, Education, and Training:** This committee identified and developed models to expand access to education, training, job preparation and placement services as well as recommend ways to overcome barriers to employment for the formerly incarcerated.
- **Health and Behavioral Health:** This committee examined the cross-cutting issues of primary health care, mental health issues, as well as substance abuse as they relate to recovery and reentry of formerly incarcerated individuals.
- **Housing:** This committee addressed issues of access to appropriate housing, a key community support for the formerly incarcerated.
- **Faith, Family, and Community:** This committee explored the importance of family reunification and support throughout the incarceration and reentry process, strengthening the role of faith- and community-based organizations and providing a voice to high-impact communities.

Committees would also be charged with studying the existing research and evaluations of reentry programs and policies, with the goal of increasing understanding in Illinois and elsewhere about the best methods of reducing recidivism. Finally, a working group of representatives from current federal, state, and municipal demonstration or pilot programs and other model programs shared their experiences. See Appendix F for a structure and members of the individual working groups by topic.

“Systems” Working Groups

The executive committee also formed four “systems” subcommittees (see Appendix G for membership and structure). The subcommittees were composed of members from the issue-area work groups. Each subcommittee focused on one topic category:

- Reception, Assessment, and Classification
- Prison-Based Reentry Preparation
- Post-Release Reentry Management
- Community Capacity and Sustainability

Planning was guided by the belief that both the prison system and the community should be prepared to meet the needs of the formerly incarcerated. Services must follow inmates from prison to the community, and the community must be involved in the creation and implementation of reentry plans and the delivery of reentry services. The systems subcommittees also identified successful federal, state, and local programs that could serve as models for statewide reintegration, and reviewed best practices and programs. They also held public hearings in the top ten target regions, inviting testimony from residents, crime victims, law enforcement personnel, business leaders, and community organizations and faith-based

leaders statewide about their experiences, programs, concerns, and suggestions on offender reentry (summary of the public hearing testimony in Appendix H). These efforts culminated in a set of recommendations for proceeding with a redesigned system of change for inmates.

Over the short-term, this type of reentry management system will make communities safer by equipping them with more tools to crack down on the highest-risk, formerly incarcerated. Over the long term, it will help hold more offenders accountable for taking the proper steps to become crime-free, drug-free, productive citizens. In the end, that means less crime and lower costs to the taxpayers.

chapter 3: the top ten high-impact areas

Focusing the State's Efforts and Resources

Prisoner reentry disproportionately affects certain communities in Illinois, and those communities are besieged by a variety of economic and social challenges. The Commission identified ten of the highest-impact regions in the state, which were selected on the basis of their substantial parolee populations and high crime rates. As the Governor stated, “Over the years, Illinois’ communities have paid the price for rising recidivism rates in many ways—new crimes, new victims, new prison costs funded with taxpayer dollars, weakened communities. The greatest impact of this vicious cycle can be seen among the top ten high-impact regions of our state that have traditionally housed the highest populations of returning offenders and the highest crime.”

The top ten target areas statewide are (see Table 1 and Map 1):

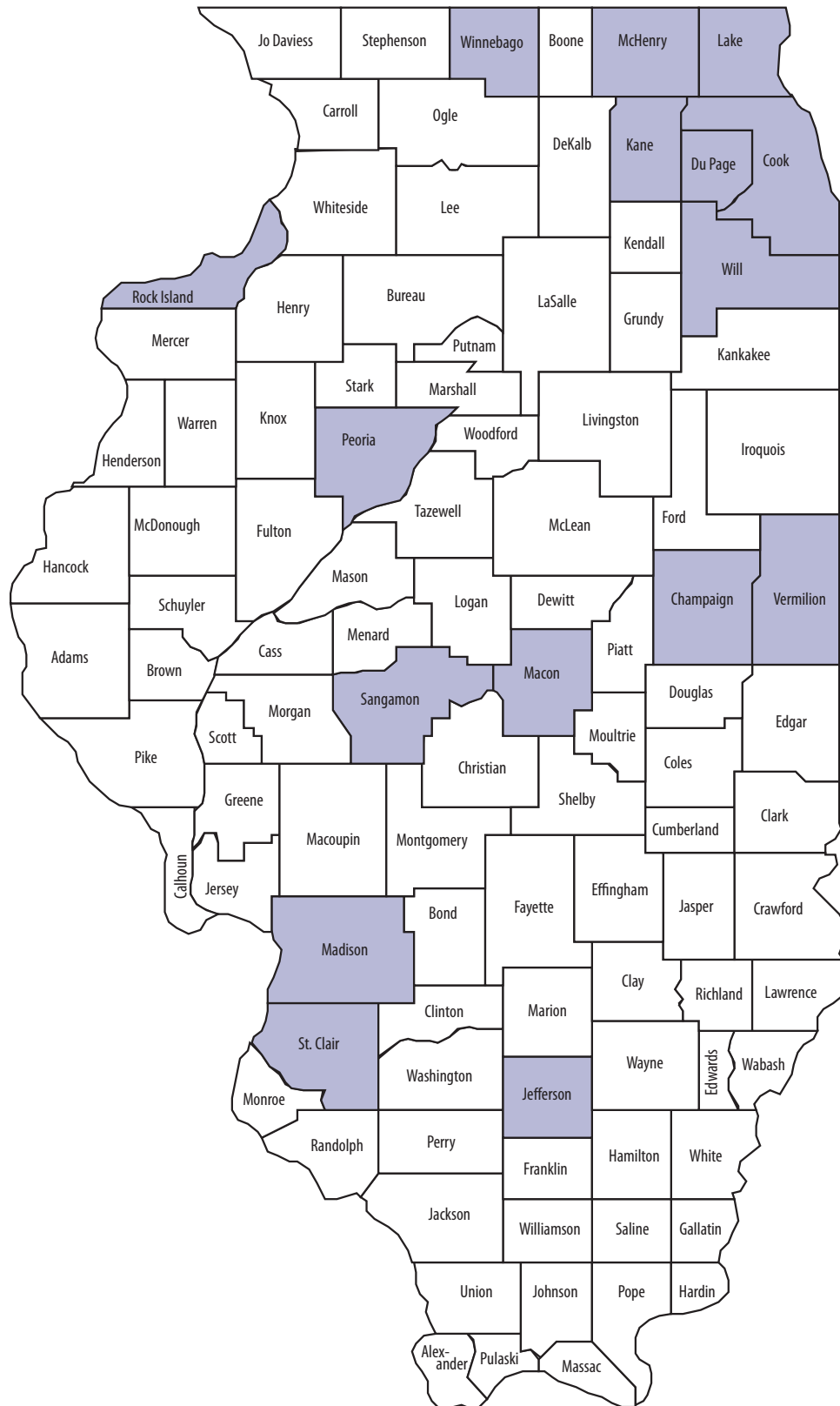
1. Cook County/Chicago
2. Collar county region (five counties, with emphasis on the city of Aurora)
3. St. Clair/Madison Counties
4. Winnebago County
5. Champaign/Vermilion County
6. Macon County
7. Peoria County
8. Sangamon County
9. Rock Island County
10. Jefferson County

By more efficiently focusing resources on these ten critical areas, the Commission’s recommendations will affect 82 percent of the state’s reentering adult parole population and ultimately establish these regions as sentinels for statewide reform. We briefly profile each of these areas here, with more detail in Appendix I.

Table 1. Top Ten High Impact Areas in Illinois					
Community (ranked by rate of parolees to population)	Percent of State's Parolee Population	Population	Parole Population	Rate (no. of parolees/ 1,000 pop.)	Recidivism Rate (%)
Macon County (Decatur)	1.9	114,706	689	6.0	50.1
Cook County	59.7	5,376,741	19,561	3.6	57.4
Winnebago County (Rockford)	2.8	284,313	930	3.3	51.6
Peoria County (Peoria)	1.8	183,433	571	3.1	60.7
Champaign/Vermilion Counties	2.3	262,969	764	2.9	54.4
Jefferson County	0.3	40,045	105	2.6	54.4
Sangamon County (Springfield)	1.5	114,706	460	2.4	54.6
Rock Island County	0.8	147,912	273	1.9	45.4
St. Clair/Madison Counties (East St. Louis)	3.1	258,606 (Madison) 261,689 (St. Clair)	416 (Madison) 534 (St. Clair)	1.8	54.2
Collar Counties (esp. Aurora)	9.8	2,954,577	3,223	1.1	N/A

Source: Calculations by the Commission based on IDOC and census data.

Map 1. Top Ten Areas of the State Most Affected by Crime and Reentry Issues (shaded in blue)



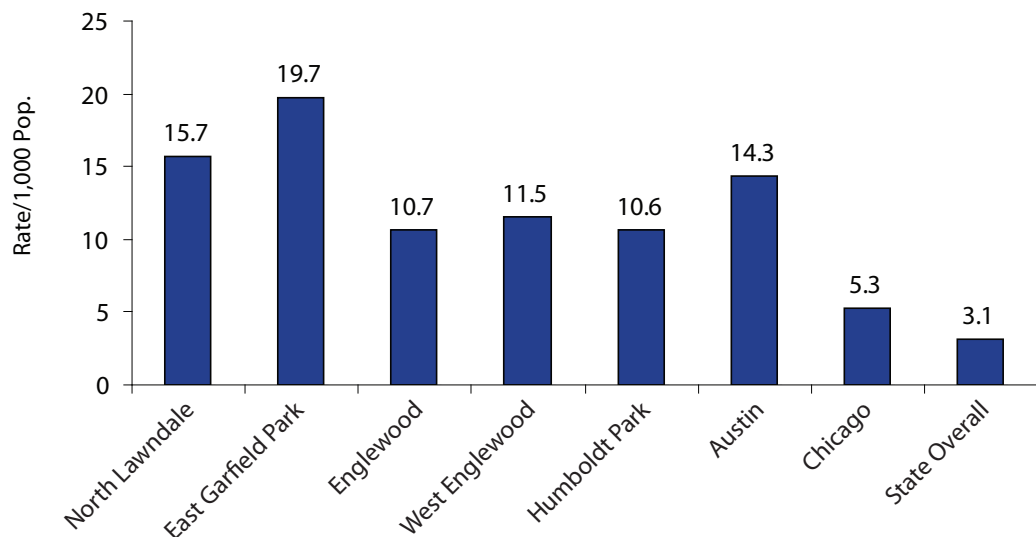
Profiles of Top Ten High-Impact Areas

Cook County—Cook County, and especially Chicago, is home to the highest percentage of formerly incarcerated, with roughly 60 percent of the state’s parolee population. Its rate of parolees per 1,000 population, however, ranks second, below Macon County (Decatur). As noted in Chapter 1, certain neighborhoods in Chicago are disproportionately affected. Approximately one-half of the formerly incarcerated who return to Chicago return to seven communities: North Lawndale, Garfield Park, Englewood, Auburn-Gresham, Roseland, Humboldt Park, and Austin. The rates of returning parolees in these communities are nearly four times higher than the citywide average rate, and six times higher than the state average (see Figure 1).

Collar Counties—The collar counties (with county seats or large cities in parentheses) surround Cook County and the city of Chicago and include Kane (Aurora and Elgin), Will (Joliet), Lake (Waukegan), DuPage (Wheaton and Naperville), and McHenry (Woodstock) counties. Many of the collar counties are seeing substantial population growth as the city population continues to migrate outward. The collar counties also are becoming more diverse as various racial-ethnic groups move outward. However, the white population continues to hold a majority. Crime is less frequent in the collar counties, and they report the lowest rate of returning parolees per 1,000 population (1.1) (see Figure 2) than any other region in the top ten high-impact areas.

Figure 1. Rate of Parolees per 1,000 Population in Six Highest Impact Chicago Communities, 2001

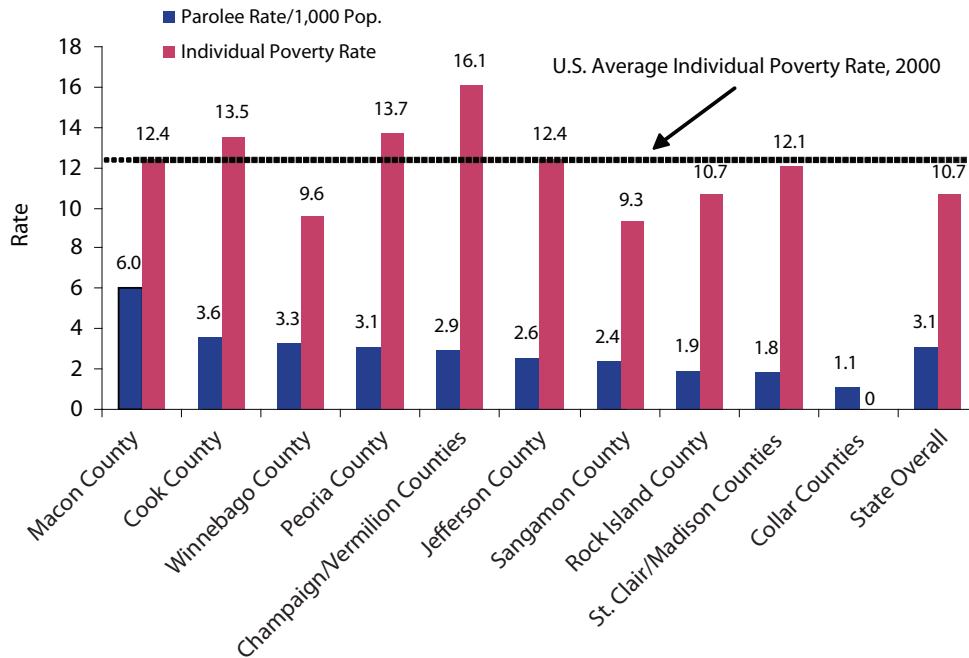
(Data were unavailable for Auburn-Gresham and Roseland)



Source: *A Portrait of Prisoner Reentry in Illinois*. Washington, DC: Urban Institute, 2001.

Will and Lake counties have the highest rate of recently released inmates per 1,000 population among the five collar counties, at 1.8 (see Table 2). In Will County, nearly six in ten inmates returned to Joliet in 2005, while the neighboring towns of Romeoville and Bolingbrook were home to 15 percent of the county’s recently incarcerated in 2005. Lake County was home to the highest reentering population, at 1,198, concentrating in Waukegan, North Chicago, and Zion. Kane County had the third highest rate, at 1.7 parolees for every 1,000 residents. Of the 704 parolees in 2005, about one in five returned to Aurora and roughly 12 percent returned to Elgin. Public hearings in Aurora revealed the important role that community providers play in easing the formerly incarcerated back into the community. They spoke of the need for more cross-cooperation among the various service providers, and the current difficulty in accessing services for substance abuse, mental health issues, and housing. DuPage County had a high number of releasees, but because of its large overall population, the rate per 1,000 residents was among the lowest. Interestingly, Naperville, the largest city in DuPage County, is home to six times fewer offenders than neighboring Aurora.

Figure 2. Rate of Parolees per 1,000 Population and Local Poverty Rate in Top Ten High-Impact Areas, 2000



Source: Poverty data from U.S. Census Bureau, American Community Survey, 2000. Parolee rate from Commission calculations using IDOC data.

Table 2. Parolee Population by Chicago Collar Counties

Collar County	No. of Parolees (2005)	Rate/1,000 Population	County Population (2000)
Will	915	1.8	502,266
Lake	1,198	1.8	644,356
Kane	704	1.7	404,119
DuPage	1,083	1.2	904,161
McHenry	297	1.1	260,077

Source: Calculations by the Commission.

Macon County—Although Macon County, which consists primarily of the Decatur population, is home to only about 2 percent of the state’s parolees, it had the highest number of parolees per 1,000 people in the ten regions (see Figure 2), a rate that was double the statewide average. It ranked first in the rate of felony offenders under correctional supervision (9.2/1,000, compared with 6.6 for Cook County). The county also had the most methamphetamine-related prison admissions in 2004. The recidivism rate in the county is 50 percent. Two factors known to affect incarceration are income and education. In Macon County, the individual poverty rate in 2000 (the latest available data) was 12.9 percent, slightly higher than national individual poverty rate of 12.4 percent that same year. The median household income, at \$37,829, was slightly below the national average (\$41,994). Although one-fourth of U.S. residents, on average, have a bachelor’s degree; only 16.9 percent of Macon County residents hold a bachelor’s degree. Residents and community organizers in the county voiced concerns at public hearings in January 2005 that the formerly incarcerated had difficulty accessing services, although they also spoke of the success of programs that used more holistic approaches to reentry through case management, job development, and stable housing supports.

Winnebago County—Winnebago County, home county of Rockford, suffers from a high rate of index offenses, property offenses, and drug treatment admissions. Its recidivism rate is near the state average, at 52 percent. It is home to about 3 percent of the state’s parolee population. The individual poverty rate in the county was 9.6 percent in 2000 (the national poverty rate was 12.4 percent). The median household income was about \$1,000 below the national average of \$44,684 in 2004. Whereas 27 percent of U.S. individuals in 2004 held a bachelor’s degree, 20.7 percent of Winnebago County residents held bachelor’s degrees.

Peoria County—Peoria County’s recidivism rate, at 61 percent, is significantly higher than the already-high statewide average. It ranks among the top five in rate of parolees as well, at 3.1 per 1,000 (see Figure 2), but like Macon County, is home to only about 2 percent of the state’s parolee population. The individual poverty rate in the county was 13.7 percent in 2000, higher than the national rate (12.4 percent). The median household income was \$39,978; slightly below the national average. Slightly less than one-fourth of the residents of Peoria County have a bachelor’s degree (23.3 percent), nearly identical to

the national average. Residents and community organizers at public hearings cited the need for more in-prison vocational programs to prepare the men and women for jobs once back in their communities. They also cited the need for more job development in the county.

Champaign/Vermilion Counties—These two counties, in the east central Illinois, rank just below the statewide average parolee-population ratio, at 2.9 per 1,000 residents. Its recidivism rate aligns with the statewide average, at 54.4 percent. The individual poverty rate in Champaign County was 16.1 percent in 2000 (the national poverty rate that year was 12.4 percent). The median household income was slightly below the national average. Thirty-eight percent of the residents of Champaign County have earned a bachelor's degree, significantly higher than the national average of 24 percent. The individual poverty rate in Vermilion County was 13.3 percent in 2000. The median household income was about \$8,000 below the national average. Fewer Vermilion County residents than Champaign county residents earned a bachelor's degree—only 12.4 percent, or one-half the national average. Public hearings attended by various community groups, citizens, and public officials revealed that affordable housing remains an issue for the formerly incarcerated.

Jefferson County—Located in south central Illinois, Jefferson County is largely rural and sparsely populated. The number of parolees per 1,000 population is 2.6, which ranks sixth among the top ten high-impact regions of the state. Arrests in the county are dominated by drug arrests. Drug treatment admission rates in the county are also high, especially compared with much larger counties. The recidivism rate, at 58 percent, is also higher than the state wide average. Only 13.7 percent of county residents hold a bachelor's degree, compared with about one-fourth of U.S. residents on average. The individual poverty rate in 2000 (the latest available data) was identical to the national rate at 12.4 percent. Median household income, however, was considerably below the national average. The county's median household income was \$33,555, whereas the national average in 2000 was \$41,994.

Sangamon County—Sangamon County is the home of the state capital, Springfield. Since 2003, it has seen a significant increase in substance abuse treatment admissions, and

Illinois Inmate Profile

- In the past 20 years, the state's prison population tripled, growing from approximately 15,000 in 1983 to nearly 45,000 in 2005. On December 31, 2005, the adult prison population was 44,919. Illinois's prison population ranks third in the Midwest, behind Michigan and Ohio, and eighth in the nation.
- In 2004, 72 percent of IDOC inmates were convicted of non-violent drug offenses and property crimes, which are often drug-motivated. The number of persons sentenced to prison in Illinois for drug offenses increased fivefold in one decade (1988 to 1999).
- Half of all parolees are re-arrested within the first 8 months after release.
- The average length of sentence at admission is four years. Most IDOC inmates (56 percent) are in medium-security facilities.
- A majority of inmates are African American (60 percent); 28 percent are white; and 11 percent are Hispanic.
- Average age of inmates is 34.
- More than half had no high school degree or General Equivalency Diploma (GED) when admitted to prison, and 63 percent are unemployed while on parole.
- Approximately 14 percent of the incarcerated adult men and 40 percent of the incarcerated adult women who recently entered IDOC reported a history of mental health treatment.
- In 2004, more than half of Illinois prisoners reported weekly or daily use of illegal drugs before incarceration.
- HIV/AIDS and other infectious diseases disproportionately affect prisoners. The rate of HIV/AIDS is estimated to be 14 times higher in prisons than in the general population.
- The most common offenses in 2005 were:
 - Crimes against person (43 percent),
 - Drug crimes (25 percent),
 - Property crimes (21 percent),
 - Sex crimes (10 percent).

it remains second only to Winnebago County in the rate of index offenses. Its parole-to-population rate is 2.4, below the state average, but still high enough to rank it among the top ten high-impact areas. Its recidivism rate, at 55 percent, closely mirrors the statewide average. Education and income are both higher than national averages. Approximately 28.6 percent of residents had a bachelor's degree in 2000, considerably higher than the national average of 24 percent. The median household income was also about \$1,000 higher than national averages, and the individual poverty rate, at 9.3 percent, was substantially lower.

Rock Island County—Home of the Quad Cities, Rock Island County is a largely urban, yet is on the low end of the parolee population rate at 1.9 per 1,000 residents. Its recidivism rate (45 percent) is approximately 9 percentage points below the statewide average. The median household income in the county in 2000 was slightly below the national average, at \$38,608, and the county poverty rate at 10.7 percent was about 2 percentage points below the national average in 2000. Approximately 17 percent of residents had a bachelor's degree, below the national average of 24 percent. At a public hearing held in April 2005, employers in the county noted that they have the most success hiring and working with the formerly incarcerated when they work with intermediary organizations that screen job seekers and prepare them for the realities of work.

Madison/St. Clair Counties—These two counties are home to East St. Louis and Edwardsville. East St. Louis is one of the more impoverished communities in Illinois, with high unemployment and high crime and poverty. The city is still de facto segregated with a large (97.7 percent) African-American population. Only 9 percent have a bachelor's degree and poverty is nearly three times the national rate. More than one-third (25.1 percent) of East St. Louis residents lived in poverty in 2000. Not surprisingly given these high poverty rates, the median household income was half the national average, at \$21,324 in 2000. The city's rate of returning parolees per 1,000 residents is double that of Chicago. East St. Louis consistently is part of one of the two most troublesome methamphetamine regions in the state. This region accounted for the second most methamphetamine prison admissions, and the greatest number of methamphetamine treatment admissions in the state. Further, this region had the second-most lab seizures. Residents of East St. Louis spoke out at the public hearings about the need for more youth programs to engage youth and keep them off the streets.

St. Clair County as a whole fares better on most indicators than East St. Louis, and the dire circumstances in that city are likely pulling the overall county averages down. St. Clair County's individual poverty rate, for example, was 14.5 percent, about 2 percentage points higher than the national average in 2000. Nearly one in five of its residents in 2000 had a bachelor's degree, lower than the national average by about five percentage points. Its median household income was just slightly below the national average. Madison County fares similarly, although its median household income was closer in 2000 to the national average. The two counties' parolee rate was 1.8 per 1,000 county residents. Only the collar counties have a lower rate. Recidivism mirrors the statewide average at 54.2 percent.



part 2
the commission's
recommendations

chapter 4: recommendations for new reentry system

The Community Safety and Reentry Commission designed a new statewide reentry system with four phases (see boxed inset). The recommendations to follow outline a new flow and structure through which all incarcerated persons would move, beginning from the first day they arrive in prison through a sustainable, crime-free and drug-free reentry to their communities. In addition, the recommendations indicate the types of resources, programming, and support services needed to support each stage of the process. This purpose of this section, then, is to provide a blueprint of the new system.

The Four Stages in the Newly Designed Process

- Stage 1: Reception, Assessment and Classification
- Stage 2: Prison-Based Reentry Preparation
- Stage 3: Post-Release Reentry Management
- Stage 4: Community Capacity and Sustainability

Stage 1: Reception, Assessment, and Classification

New Mission: Reentry Begins Here

New focus on risk reduction to both prison security and community reentry

New Flow/New Timelines

Triage inmates
21-day evaluation period

Improved Screening and Assessment Tools

Identify root causes of criminal behavior
Identify risk factors to security
Needs assessment to reduce risk to prison/community

Improved Information Sharing

Prison staff: Use information in placement decisions to ensure relevant services/security
Prison staff: Share assessments to better design programs/treatment
Counties and IDOC: Share more information for better risk assessment

Stage 1: Reception, Assessment, and Classification

The first stage of the new system is Reception, Assessment, and Classification (RAC). Currently, all individuals admitted to the Illinois Department of Corrections (IDOC) are first sent to one of the state's four Reception and Classification (R&C) centers. Once simply a way-station before being assigned to a prison, RAC would now become the first step in the reentry process and an opportunity to set the tone for how individuals should use their prison time and to motivate them to improve.

The Vision for a New RAC System

The recommendations to create a redesigned RAC stage include the following steps:

1. Create a new mission for RAC: Instill in both IDOC staff and inmates the importance of RACs as the essential first step in planning for an effective system of reentry management. Provide training and support for IDOC staff to change the culture of the IDOC system from one of warehousing to one of reentry success.
2. Modify the flow and timelines of the RAC process to enhance security, improve identification of fundamental factors triggering the inmates' criminal behavior and other programmatic and support services they may require, and promote reentry planning.
3. Screen and evaluate all inmates using high-quality assessment tools as a first step in developing their reentry plan.



4. Improve voluntary participation in prison-based programs and involve faith- and community-based organizations in this process to help set the tone that a prison stay should be used to promote personal growth.
5. Improve the process by which criminal and social history data of all inmates are collected, processed, and shared at admission to the RAC. This process should also enforce the state mandated information-sharing between counties and all RACs statewide and at every stage of the process.

Background and Context

Currently, newly committed offenders spend 7–14 days at a R&C center to be assigned and transferred to a correctional center. Several tests and screens are performed at this stage, but stays at the current centers are generally too short and involve too little reliable information to permit the kind of comprehensive and valid evaluation that would lead to an effective, prison-based treatment protocol and reentry plan.

IDOC experienced a record number of admissions (nearly 40,000) in 2005, or more than 750 offenders each week. Despite efforts to improve the processing of inmates, the centers are limited in the scope and quality of information they collect, store, and share about incoming offenders, mainly because of the large numbers of incoming inmates. At the Stateville R&C, for example, which is located on the grounds of Stateville Correctional Center, the influx of inmates is so overwhelming that few formal screening and assessment procedures are implemented after the first day of intake.

In addition, information at a RAC center is generally gathered without the guidance of standardized or rigorous screening and assessment tools, nor is the information linked explicitly to one of IDOC's overarching missions "to enhance the success of offenders' reentry into society." Rather, the information collected at intake is based almost exclusively on inmates' own reports. The majority of inmates arrive with little information regarding their offense or treatment histories. Although correctional counselors and psychologists use the Automated Reception and Classification System (ARCS) to gather large amounts of individual data at intake, ARCS data are incompatible with the other data collection systems employed by IDOC. This impedes a complete and general description of the inmate population. This failure to gather and make accessible, reliable information at intake directly affects IDOC's ability to engineer success at reentry. Court processing and legal forms differ from county to county, and data from the reception centers are often not shared with the prison staff members who work directly with inmates, although such data could serve as a valuable baseline for designing offenders' activities and charting their progress while in prison.

Recommendations

Reception, Assessment, and Classification centers can play a vital role in the reentry planning process. The information collected at admission can be better applied in identifying risk factors, planning an inmate's time and activities in prison to reduce that risk and in preparing him or her for the safest and most successful possible reintegration to the community. Although inmates can vary widely in their health, social and economic

backgrounds, and offense histories, they also share common challenges. If those challenges are effectively addressed during incarceration, the transition from prison to the community can be greatly facilitated. To succeed, returning inmates must also be assisted by other government entities, social services organizations, local leaders, and family members.

Recommendation 1:
CREATE A NEW MISSION FOR RAC

Create a new mission for RAC reflecting the philosophy that the RAC process is the essential first step of planning an effective system of reentry management. Provide sufficient training for staff to support them in instituting this new mission.

Recommendation 2:
MODIFY THE FLOW, CONTENT, AND TIMELINES OF THE RAC PROCESS

Modify the flow and timelines of the RAC process to enhance security, improve the identification of fundamental factors triggering the inmates' criminal behavior and other programmatic and support services they may require, and promote reentry planning.

- a. **Change the RAC process such that initial information collection is followed by a triaged process** in which inmates with serious deficits and needs are screened and evaluated with more sophisticated and specialized assessment tools. The evaluation process could be followed by an interdisciplinary team meeting to design an inmate case management and treatment plan. Similarly, inmates with less pronounced service needs and shorter lengths of stay should be reviewed for placement and treatment recommendations.
- b. **Extend the RAC process**—now a 7–14 period—to a 21-day evaluation period to accommodate improved, expanded, and more efficient assessments. This would necessitate hiring additional processing, clinical, and diagnostic staff. By funding operations for the entire 1,800-bed facility at the Stateville R&C, a variable daily schedule could be established to process inmates over multiple shifts and to use all available bed space at the Stateville RAC.
- c. **Implement a master schedule for processing inmates that permits staff to conduct thorough screenings and assessments** to collect extensive information on inmates' service needs. IDOC should also build on current efforts and cooperative initiatives with the Illinois Attorney General's office to start the process of securing personal IDs for each individual committed to IDOC.

Recommendation 3:
SCREEN AND EVALUATE ALL INMATES USING HIGH-QUALITY ASSESSMENT TOOLS AS A FIRST STEP IN DEVELOPING REENTRY PLANS

Improve screening and assessment instruments to enable IDOC to better identify root causes of criminal behavior in efforts to more directly address specific individual needs as well as increase the reliability and validity of personal data. To enhance these instruments, IDOC should:

Illinois Model Program

ILLINOIS DEPARTMENT OF CORRECTIONS

Sheridan National Model Drug Prison and Reentry Program

Governor Rod Blagojevich reopened Sheridan prison in January 2004 at a time when the state of Illinois was confronting the highest recidivism rate (54.6%) in state history and record numbers of parolees. Sheridan was designed to address head-on a central reason for the growing prison population and high recidivism rate: drug-involved offenses. It is estimated that 69% of the nearly 40,000 annual adult prison admissions are for a drug-involved crime. In addition, more than 60% statewide arrestees and 82% Chicago arrestees tested positive for at least one illegal drug at the time of their arrest. At full capacity, Sheridan will serve 1,300 inmates at a time, and 1,700 each year, making it the largest state drug prison of its kind in the nation. Sheridan and other statewide reform efforts have helped lower the statewide three-year recidivism rate to 51.8%. Early results show Sheridan participants with higher employment rates and 40% lower rates of recidivism.

Reentry Begins the First Day an Offender Enters Prison

At the Governor's request, the planning team, with over 100 stakeholders, was one of the most collaborative prison-planning bodies in state history. The result was a holistic, replicable, and multifaceted approach that follows an offender from day one of entering the prison system throughout his or her parole. Moreover, Sheridan is fairly unique in targeting the more challenging, medium security population as a way to impact multiple repeat offenders.

Key Program Components

Drug Treatment and Aftercare Services: Drawing on extensive research and overwhelming best-practice evidence, Sheridan implemented the "therapeutic community" model for substance abuse treatment, which is provided by Westcare/Gateway. The in-prison treatment is combined with extensive community partnerships and reentry programs. These community programs account for a large share of Sheridan's budget and include a year-long case-management and aftercare program for substance abuse, targeted job placement, family reunification, anger management, and other reentry services that are modeled after programs with proven results.

Job Training and Placement: The SAFER Foundation provides job-readiness programming on the inside and follows offenders out the door with job placement services in the community. SAFER career coaches plug Sheridan parolees into an intensive job-readiness and placement program. Vocational training opportunities have been significantly enhanced through partnerships with the Illinois Valley Community College, the Homebuilders' Institute, and Illinois Manufacturing Foundation.

Clinical Reentry Case Management: TASC, Inc., partners closely with specialized parole agents who provide intensified law enforcement supervision. Together, TASC works with parole agents to manage the clinical reentry process for offenders, drawing on research showing that drug offenders receiving 12–15 months of treatment in prison followed by at least six months of aftercare service were twice as likely to be drug-free than offenders who received prison-based treatment alone.

Community Collaboration and Capacity-Building: A unique aspect of the Sheridan project is the extent of national, state, and local collaboration, deemed historic by many community grassroots organizations. In planning the Sheridan program, working groups closely assessed community capacity in the most directly affected regions, and consulted with law enforcement, the formerly incarcerated, service providers, and community members.

Community Support and Advisory Councils: CSACs were established in some high-impact communities to build partnerships between the professional service providers, prison staff, parole agents, and faith, family, and community members. Formerly incarcerated individuals are hired as outreach workers and leaders in the community, which has helped develop an extensive infrastructure of more than 100 community-based service providers so far.

- a. **Convene a group of experts to review current screening and assessment instruments.** Their recommendations should identify empirically tested tools that gauge both pre- and post-placement employment, substance abuse, health, mental health, family or kin networks, and housing needs. IDOC staff should examine the RAC processes of states with comprehensive, evidence-based approaches to intake assessment that include standardized tools.
- b. **Assess education and learning disabilities with a valid screening instrument.**
- c. **Ask organizations that work to place the formerly incarcerated in jobs to identify tools that assess job-readiness skills and remedial training needs.**
- d. **IDOC should adopt a more aggressive voluntary HIV screening policy** at the RACs to ensure that inmates who need services are identified. Testing for and education on HIV, hepatitis, and other communicable diseases should be offered to every inmate at all IDOC facilities during the RAC period.
- e. **Formally incorporate a parole adjustment assessment into the RAC process** to ensure that all parole violators are screened for placement in appropriate community-based programs prior to return to incarceration. This program can be achieved by assigning a parole agent to each RAC facility to screen parole violators and divert them to appropriate community placements.
- f. **Develop a specialized housing assessment/tool for short-term inmates and parole violators** to prevent homelessness and to begin aggressively planning for the most appropriate housing placement from day one.
- g. **Record at intake the number of admissions for probation violation and those with pre-sentence investigations**, which could provide RAC staff with more useful information.
- h. **Train and orient RAC staff to collect both reentry assessment information and security classification information.**
- i. **Ensure that ARCS is operating at all RACs and that staff are trained to use the database to verify and report information.**
- j. **Use ARCS at other IDOC correctional centers to update data.**
- k. **Develop a formal internship program with local universities** to attract students from social work, psychology, criminal justice, and sociology programs to help collect and analyze data in accordance with federal Health Insurance Portability and Accountability Act (HIPAA) and state security requirements.

Recommendation 4:

INVOLVE FAITH AND COMMUNITY-BASED ORGANIZATIONS

Involve faith- and community-based organizations in the RAC process to assist in reentry planning as well as allay the anxiety of offenders and encourage the constructive use of the time they will spend in prison. The faith-based and community-based organizations can also help to set the tone that a prison stay should be used to promote personal growth and responsibility.

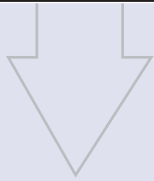
Recommendation 5:**ENHANCE INFORMATION-SHARING ABOUT INDIVIDUALS**

Enhance information sharing about individuals by ensuring the information follows offenders throughout their prison stays and into the community and that it can be more effectively applied to reentry planning and the evaluation of programs. To do this, the system must:

- a. **Better integrate the various computerized information systems** in IDOC such that information gathered at RACs can be tracked and shared at correctional facilities, Placement Resource Unit (PRU) offices, and the parole offices. Enhancing the capacity of information systems will help document changes in “dynamic” factors among offenders and parolees, such as education level and participation in program services. These factors can help guide ongoing reentry planning.
- b. **Train staff to identify and flag certain behaviors, achievements, or problems that may develop.** Staff should be equipped to read, interpret, and respond to issues, and electronically access and append additional information, including documentation on how issues were addressed. Develop policies and a resource guide for correctional counselors and PRU and parole staff member for each “issue” area pertaining to inmates.
- c. **Require IDOC to identify and describe specific reintegration needs,** such as substance abuse treatment or mental health treatment, for example, in statutorily required reports to the legislature, such as the IDOC Annual Report and the Human Services Plan. Measure the extent to which these needs were addressed. This will ensure that needs are identified at RACs, and facilities’ staff can address them and identify when and how they were met. At the departmental level, the information collected at RACs (and subsequently updated/ tracked) should be used by IDOC for strategic planning and evaluation.
- d. **Enforce the state-mandated information-sharing between counties and all RACs statewide at every stage of the process.** To make informed program decisions on the basis of complete records and information, the state should enforce statutory requirements on local jurisdictions for submitting court documents and pre-sentence investigation reports, and allow IDOC to refuse offender admissions unless county jurisdictions have provided all necessary documentation. The state should also mandate that criminal court records and histories, substance abuse, medical, and mental health histories, education status, and employment and housing experiences be submitted. Staff must also conduct inmate screenings and assessments after (not before) this information has been submitted and reviewed
- e. **The state should pass legislation mandating that counties use a standard “paper” process for committing offenders** that includes statements of facts, social investigations, medical information, and police reports. Current practices encourage no systematic, ongoing sharing of this information, which would help IDOC staff and parole agents make better decisions about offenders’ service and programming needs.

Stage 2: Prison-Based Reentry Preparation

Orientation



- Establish tone of hope/opportunity change
- Motivate to take advantage of prison-based programs
- Send message: prison stay is time to plan for reentry

Develop Reentry Plan



- Use RAC screening/assessments to establish goals to reduce risk
- Determine personal goals for reentry
- Establish short- and long-term goals

Advance Reentry Plan



Reentry tracks

Transition to Community

- Establish transition units at all prisons/
90–180 days before release
- Complete reentry plans
- Update reentry plans for post-release
- Intensify community outreach
- Complete job prep program
- Plan placements for community services

Stage 2: Prison-Based Reentry Preparation

The second stage of the new system is prison-based reentry preparation. The time an inmate spends in prison should be dedicated to defining goals and taking the initial steps to set the foundation for success: learning to accept responsibility for changing their criminal behavior, gaining the necessary education, learning new work skills, addressing substance abuse and health or mental health issues, and reconnecting with family, community, and perhaps most important, employers.

It is at this stage that IDOC staff apply Stage 1 screening and assessment information on risk, health, substance abuse, mental health, and social history in creating individualized “reentry plans.” The plans establish goals for participating in prison-based programs and supportive services in preparation for successful return to their communities. The plan must not be ad hoc, but rather a clear progression toward a goal, with solid benchmarks along the way. IDOC should support these efforts with a set of well coordinated, practical supports, building on lessons learned from the Sheridan Program (see boxed inset) and Operation Spotlight, as well as from treatment models across the nation (see appendix A for examples). IDOC itself must reconfigure certain processes to refocus its efforts on successful reentry. Superficial restructuring and additions of new staff without sensitivity and other training will not give rise to a changed IDOC system.

The three phases to this stage are:

- Phase 1:** Orientation/Induction, and Reentry Plan Development
- Phase 2:** Reentry Plan Advancement
- Phase 3:** Transition to Community – Transitioning Out Plan

VISION—Prison-Based Reentry Planning

The Commission’s recommendations for effective prison-based reentry preparation begin from the basic tenet that inmates’ time in prison must meaningfully prepare them for productive, crime- and drug-free lives outside of prison. Along with effective programming and interventions, the systemic reform of the prison-based reentry phase must adhere to the following principles:

- Effective prison-based reentry preparation begins the moment individuals begin serving their sentences.
- Prison-based education, training, and treatment programs should be attuned to the physical, psychological, and language, gender, and cultural barriers to reentry. IDOC prison staff must be trained and supported in making these changes.
- Lessons learned from the Sheridan Program (see boxed inset p. 33) and other model programs, such as the Bridge Program, the Lifestyle Redirection Program (see boxed inset p. 53), and the Transitional Jobs

Program, should be incorporated into the design of all new initiatives and the expansion of existing initiatives.

- All initiatives should involve research on the nature and extent of inmates' needs, incorporate best practices, and include an evaluation of program planning, implementation, and outcomes.
- A systemized and seamless transition of care among RAC, institutions, and communities must be in place.
- To ensure that all offenders achieve the goals of their individualized reentry plan, the state must expand access to resources and programs in the following areas:
 - Education (adult basic education/literacy and GED)
 - Vocational training, certification, and apprenticeship programs
 - Employment planning and preparation
 - Health and behavioral health care treatment
 - Substance abuse treatment
 - Anger management and/or violence interruption
 - Personal identification (temporary and permanent)
 - Family reunification
 - Interventions that reconnect offenders to faith, family, and community groups.

GOAL PLANNING

This form will help you set your short and long term goals. Fill it out as completely as possible.

Today's Date 10/2/05 Projected M.S.R Date 03-08-06

5 years

Marriage? (Yes/no) If I find the right woman
 Children? (Number) Just the five lovely children I have
 Automobile? (Model/number) 2004 Cadillac Deville
 Luxuries? (Pool/boat/etc.) Hot Inlay basket on my house, and I would like a luxury boat.

Education Level
 Self: I've taken my G.E.D. and took advanced in college classes with a bachelor degree
 Spouse: Higher Education woman
 Children: Have completed their schooling and attending college or what ever they choose to do.

Travel? (Where/how often) Miami Fl. About once a year and Memphis TN.
 Power? (Political/finance) Hopely will be financially straight. Take political in a way
 Money? (How much invest.) A few hundred thousand in a bank machine
 Securities? (Job/financial) Have my own business truck
 Leisure time? (How much) Every day and weekend with my children when I'm not working

How much do I need to earn per year to get what I want? Thirty - forty thousand

What type of job do I need to make that amount of money? Unskilled labor Skilled labor
 Professional my own truck

Annual salary range of this type of job? Fourty thousand to a hundred a year

What education do I need for this type of job? Truck driving schooling
 (Example: High school, Technical school, Grad.)

How much time will this education take? Twelve weeks to three months

Describe how you see yourself in five years? A highly respected citizen living like on live terms, taking providing for my family and my lovely children, school work and family living.

Education plans while in DOC? I've really advanced in many areas. Complete E.T.C. and take C.W.T.

Reentry goals of a prison inmate at Sheridan Correctional Center. Inmates create their own reentry plans to prepare for productive release.

Background and Context

Without a comprehensive array of prison-based offender services, many inmates will return to prison in a perpetual and destructive cycle of arrest, imprisonment, release, and re-arrest. Prison-based programming is necessary to end the pernicious effects of recidivism on individuals, families, and communities. This will require significant effort to change the operational culture of the Illinois prison system.

During the past two decades (1985–2005), the Illinois prison population has nearly quadrupled.⁹ The growth was mainly fueled by the rising number of drug-related offenses. From 1990 to 2000, the number of prison admissions for drug crimes

9 Illinois Department of Corrections, 2006

rose fivefold, from 1,984 to 11,086, and the proportion of total Illinois inmates admitted for drug offenses rose from 27 percent in 1990 to 40 percent in 2000. Admissions for nondrug crimes rose as well, more than tripling, from 5,441 to 17,801. During this time, expenditures were largely focused on building space for this massive increase in prison admissions, costing taxpayers billions of dollars.¹⁰

The Illinois prison population has grown not only in size, but also in the severity and complexity of inmates' challenges and deficiencies. Large numbers of Illinois inmates enter the system with psychiatric and substance abuse disorders, as well as educational and employment deficits. Given these sizable hurdles to productive lives, prison can no longer simply warehouse inmates until their term is served. To be effective, and affordable, the time in prison must be spent productively, addressing and resolving underlying issues, such as substance use; and preparing these men and women for jobs, family roles, and citizenship.

Recognizing the changing face and circumstances of Illinois prisons, the state initiated the Sheridan Program, which established a continuum of care that holds drug-involved offenders accountable for addressing their addiction while in prison and upon return to their communities in a highly supervised, supported program (see boxed inset for description). Other initiatives to treat substance abuse and to upgrade education credentials and employment skills have also been put in place. In essence, Illinois has taken steps to ensure that prisons in the state will return to their original intent, which was to transform and rehabilitate inmates. In short, the state is putting the "correct" back into corrections.

Finally, alternatives to prison should be explored. Serving a prison sentence need not always mean that it be served in prison. Several alternative prison models, such as the Women's Treatment Center and the early release laws for certain nonviolent drug offenders, have proved both effective and less costly.

Recommendations

Phase 1—Orientation and Reentry Plan Development

Recommendation 1:

PROVIDE TRAINING AND INSTILL NEW CULTURE AMONG IDOC STAFF

Without additional training (sensitivity and other) for IDOC staff who work directly with prisoners, all efforts to reform the system risk becoming mere superficial restructuring, and will not give rise to a changed IDOC system. The current system is a contributing factor to the recidivism rate with its focus on warehousing inmates without structured activities, long lockdowns, and the overall culture of corrections in Illinois. Efforts must be made, through training and other methods, to change the culture of IDOC.

¹⁰ Illinois Department of Corrections, 2006

Recommendation 2:**DEVELOP ORIENTATION UNITS AT ALL PRISONS STATEWIDE**

All inmates spend the first two to four weeks participating in an orientation session, led by IDOC counselors. The session informs inmates of the rules and responsibilities in serving their sentences and motivates them to set goals for successful reentry. The session will culminate in a personalized reentry plan for each inmate (see Recommendation 3 for more detail). The orientation will include a series of presentations—often by formerly incarcerated individuals who have successfully and productively reenter their communities—as well as workshops, and group and individual counseling sessions. These presentations should cover:

- a. **Education/vocational education.** Education should hold a series of presentations that encourage participation in education programs; disseminate lists of all courses offered at the parent institution and other facilities across the state; discuss requirements for all programs; and invite motivational speakers, such as employers who hire the formerly incarcerated and who can describe the characteristics of successful job applicants and employees.
- b. **Health and mental health care.** Medical and mental health staff should describe the services offered at the institution and stress the rights of inmates to receive quality medical care. These sessions should encourage inmates to take an HIV/AIDS test, and HIV/AIDS peer educators should describe their support services. Education should include counseling on HIV/AIDS; sex and drug risk-reduction strategies; the benefits of knowing one's HIV status; the availability of free, confidential, and voluntary HIV testing; and the availability of in-prison and community-based HIV-related services. In addition, IDOC counselors should gather the information necessary to begin paperwork on public assistance programs, such as Medicaid, AIDS Drug Assistance Program, or Supplemental Security Income (SSI), for which the inmate may be eligible on reentry to the community.
- c. **Substance abuse.** The substance abuse treatment staff should review the harmful effects of substance abuse on individuals, their families, and their communities; distribute a list of substance abuse treatment programs; and encourage inmates to sign up for treatment programs.
- d. **Faith, family, and community.** Using the Community Support and Advisory Councils (CSAC) model from the Sheridan Project, faith-based and community leaders should discuss the recidivism-reducing benefits of community connections and family reunification. CSACs meet with inmates and serve as a bridge between the inmate and the community. They also facilitate partnerships between professional service providers, prison staff, parole, faith-based, and community organizations as well as families. The Illinois Department of Children and Family Services (DCFS) family reunification and child support program should be incorporated in these presentations. Finally, information on the faith-based programming and services in their facility should be included.
- e. **Testimonials from formerly incarcerated persons who have made a difference.** The orientation should include presentations from formerly incarcerated persons who have successfully reentered their communities, are employed, and

are crime- and drug-free. These individuals can share their personal stories about the challenges in prison and reentry and how they overcame them.

- f. **The importance of getting a temporary identification card (ID).** Building on the presentations delivered during RAC, a follow-up workshop should reinforce the importance of obtaining a temporary state ID and conclude with a session to assist inmates with the paperwork necessary to acquire IDs before they are released from prison.
- g. **Fundamentals of Balanced and Restorative Justice (BARJ).** Sessions should be held to encourage inmates to become more accountable for their crimes. These sessions should be rooted in the principles of BARJ, incorporate presentations from crime victims where possible, and be offered throughout an inmate's sentence. A key goal of BARJ is reconciliation. The restorative justice approach focuses on all affected parties: offender, victim, and community. It also builds competencies and focuses on building strengths, and provides structured opportunities to practice the principles in the prison community and to make inmates aware of the ramifications of their actions toward others.

Recommendation 3:

DEVELOP INDIVIDUALIZED REENTRY PLANS

The reentry plan, which is outlined during the orientation session, should incorporate all assessment data from the RAC process with inmates' individual risk assessments and social histories to set goals and develop road maps for success. The reentry plans should specify the expectations and incentives for inmates as well as a timeline for progress throughout the sentence.

Recommendation 4:

SHARE RAC RECORDS

The process begins by ensuring that the parent institution's staff are provided with timely and complete access to all screening, assessment, and risk or needs information that was gathered at RAC. Parent institutions should review this information and incorporate it into a management plan for each inmate.

Phase 2—Reentry Plan Advancement

The reentry plan advancement phase moves inmates through an individual change and skill-development process in prison. This process keeps the inmates focused on achieving the goals of their reentry plans. In light of the obvious implementation challenges that are inherent to prison systems as large as Illinois', the Commission promotes a prison-based reentry structure that is grounded in a systemic approach to institutional assignments and security classification, and incorporates programming that addresses the root causes of crime and recidivism.

The components of this advancement phase include high-impact, structured peer groups and individual counseling sessions, which enhance fundamental cognitive

skills and decision making abilities. The phase also includes a series of “rehabilitative tracks,” which provide inmates opportunities to advance their reentry plans and for staff to respond to inmates’ clinically assessed treatment needs. These tracks, which are largely modeled after the Sheridan Program, include strategic placements of prison-based educational, vocational, substance abuse, and mental health rehabilitation programming at all security level facilities in the system. The key program areas include:

- Education (Adult Basic Education/Literacy and GED);
- Vocational training, certification, and apprenticeship programs;
- Job-related and employment preparation training;
- Health and behavioral health care treatment;
- Substance abuse treatment;
- Anger management and/or violence interruption;
- Identification (temporary and permanent);
- Family reunification; and
- Interventions that reconnect offenders to faith, family, and community groups.

Recommendation 1:

DESIGN A NEW, GOAL-DRIVEN, CASE MANAGEMENT SYSTEM

Establish a comprehensive case management system led by a team of IDOC counselors, who advance inmates’ reentry plans, periodically reassess their progress, and coordinate ongoing services to ensure that they achieve their goals. Inmates with shorter sentences or imminent release should be given priority programming. All inmates should be encouraged to set goals, and the services they receive should intensify as their release dates approach. Counselors should identify inmates with HIV/AIDS, viral hepatitis, and other infectious or chronic diseases and begin identifying services inside and outside the prison to address their specialized needs. This case management process should identify faith, family, and community partners as early as possible to maintain the inmate’s focus on preparing to return home. Repositioning counselors as case managers will require reducing caseloads, and it will also require implementing a new, more intensive training program.

Recommendation 2:

ESTABLISH A STANDARDIZED PROGRAM MODEL FOR PEER GROUPS BASED ON PRINCIPLES OF BALANCED AND RESTORATIVE JUSTICE

Establish peer support groups in housing units within prisons. Peer groups should meet at least weekly, led by IDOC counselors, and focus on cognitive skills development, responsible decision-making, life skills training, and violence reduction, within a framework of balanced and restorative justice. The restorative justice approach focuses on all affected parties: offender, victim, and community. It also builds competencies and focuses on building strengths, and provides structured opportunities to practice the principles in the prison community and to make inmates aware of the ramifications of their actions toward others.

Table 3. Recommendations for Rehabilitative Tracks

Substance Abuse Track

Create pilot program at Southwestern Illinois Correctional center modeled after the Sheridan Program

Expand Sheridan Program model to ten high-impact areas in state.

Expand Sheridan Correctional Center to full 1,300-bed capacity

Create a 200-bed methamphetamine unit at Southwestern Illinois CC and 200-bed unit at Sheridan CC

Add 1,500 substance abuse beds to state correctional centers

Expand the Sheridan Program immersion-training model

Health and Mental Health Track

Include best practice psychiatric standards and guidelines for the purpose of diagnosis and medication management

Provide psychosocial support and therapeutic treatment

Expand dedicated housing treatment units for inmates who have both substance abuse and mental illness.

Pilot mental health prison near Cook County

Develop sex offender treatment models and expand on existing programs

Ensure ongoing collaboration with faith, family, and community-based mental health providers

Expand specialized services to inmates with HIV/AIDS, viral hepatitis, and other infectious or chronic diseases

Vocational Track

Overhaul vocational courses

Establish viable apprenticeship programs

Leverage resources

Place designated job preparation staff at every prison

Expand bridge program

Overhaul and expand correctional prison industries and include community-based transitional jobs programs

Ensure that individuals receive credit or accreditation

Contracting policy recommendation

Education Track

Eliminate waiting lists for GED

Upgrade the standard for mandated school

Restructure teacher schedules and upgrade technology

Dedicated education housing units

Expand access to web-based educational opportunities and distance learning

Restore associate and bachelor degree opportunities

Engage community organizations and faith-based sponsored volunteer efforts in tutoring and mentoring roles

Recommendation 3:

COMPLETE PROPER PAPERWORK FOR ID AND PUBLIC HEALTH SERVICES

IDOC counselors should complete the process begun in RAC to both secure a temporary state ID and gather necessary paperwork to enroll inmates in public health care services in their communities, such as Medicaid or the AIDS Drug Assistance Program.

Recommendation 4:

ASSIGN REHABILITATIVE TRACKS

IDOC counselors should assign inmates to rehabilitative tracks on the basis of their needs and assessments, and that are consistent with their individual reentry plans. (See Table 3 for detail on rehabilitative tracks.) Depending on the intensity of these programs and on inmates' involvement, some inmates may participate simultaneously in more than one track. It may also be necessary to transfer offenders

Inmate participates in a drug treatment group at Sheridan Correctional Center November 14, 2005.



to another housing unit or prison to move to a second or subsequent track. All transfers will be based on behavior and achievement of reentry plan goals.

In addition to these rehabilitative tracks, alternatives to prison should be explored. Serving a prison sentence need not always be an in-prison sentence. Several alternative prison models, such as the Women's Treatment Center and the early release laws for certain nonviolent drug offenders, have proved both effective and less costly. The Chicago Legal Advocacy for Incarcerated Mothers (CLAIM) promotes community-based sentencing instead of prison for non-violent offenses, particularly for primary-caregiver parents, and their services could be tapped in designing alternative prison policies.

Substance Abuse Track. Illinois is committed to implementing effective, prison-based, substance abuse programs that embrace the therapeutic community model used in the Sheridan Program. The therapeutic community model is designed to help persons with substance abuse issues to change their behaviors, attitudes, and beliefs. Treatment must also incorporate multiple levels of care that consider the length of the inmate's sentence and the chronicity of the addiction, and that offer self-help, peer support, or Winner's/Inner Circle support groups. For inmates serving shorter sentences, programs should emphasize motivation or readiness-to-change models.

Methamphetamine Focus. An important focus in the substance abuse track should be addressing methamphetamine abuse, given the rapidly increasing role such abuse is playing, and will likely continue to play, in crime and prison entry, especially in central and southern Illinois. Although recent reports indicate that methamphetamine arrests have stabilized, the number of annual state prison admissions for methamphetamine-related offenses rose from only six in fiscal year 1999 to 829 today, of which 45.6 percent are from central Illinois and 51.7 percent are from southern Illinois. Of those 829, only 141 are receiving any form of treatment.¹¹ IDOC therefore proposes that any model methamphetamine program be located in central or southern Illinois and include funding for small community capacity-building grants to manage the return of offenders into these smaller communities and fund the implementation of a model methamphetamine treatment program.

The following treatment components are recommended:

- a. **Convert the existing 671-bed substance abuse program at Southwestern Illinois Correctional Center to the Sheridan Program model, and devote 200 of those 671 beds to methamphetamine users.** The Sheridan Program model is IDOC's blueprint for managing the drug-abusing prison population in southern Illinois. The proposed program should lower staff-client ratios to one staff per 10 inmates for the methamphetamine unit, and one staff to 20 inmates for the remaining therapeutic community substance abuse beds. The program should also add educational, vocational, and post-release reentry case management services, and build the community treatment capacity in the central and southern regions of the state. In addition, communities' treatment capacity should be "seeded" to establish model methamphetamine programs.
- b. **Regionalize and expand the Sheridan Program model throughout the ten high-impact regions of the state.** Expanding the Sheridan

¹¹ Illinois Department of Corrections, 2006.

- model would also involve a reentry transition team that includes IDOC counselors and parole agents, treatment providers, case managers, job developers, and family and community members.
- c. **Expand Sheridan Correctional Center to full 1,300-bed capacity that includes a 200-bed methamphetamine unit.** This expansion requires the addition of 350 therapeutic-community, substance abuse treatment beds; the expansion of educational and vocational services; and the enhancement of pre-release and post-release clinical case management capacity and community-based treatment. The expansion should include a 200-bed methamphetamine unit.
 - d. **Add or enhance 1,500 substance abuse beds within correctional facilities.** Whenever possible, these beds should be located in or around the ten target communities so that family and community members can play a larger role in reentry planning. This initiative should include adding new or expanding current treatment services at all levels of care (e.g., treatment readiness units, therapeutic community programs, and step-down beds).
 - e. **Expand the Sheridan Program immersion-training model.** All institutions that have substance abuse treatment programs should participate in immersion training designed for administrators, correctional officers, and educational, vocational, and treatment staff.

Health and Mental Health Track. Health and mental health services for inmates should be based on the needs identified in RAC and incorporated into inmates' individualized reentry plans. Because symptoms are often exacerbated by the prison environment, reentry plans and mental health assessments should be periodically updated. Short- and long-term interventions and treatment options must take into account that mentally ill offenders are more likely to have longer criminal histories with violent offenses, to have been using drugs or alcohol when they committed their offenses, and to have histories of homelessness and sexual and physical abuse. Individuals with HIV/AIDS, viral hepatitis, and other infectious or chronic diseases also need specialized services.

Recommended improvements to the health and mental health track are as follows:

- a. **Include best-practice psychiatric standards and guidelines in diagnosis and medication management.** The costs of inmate and correctional officer injury, increased use of segregation and hospitalization, and recidivism can be reduced by correctly diagnosing and treating inmates with medications or other psychiatric interventions. Every effort should be made to adopt clinical practices that increase medication compliance and result in significantly improved outcomes. Formularies and clinical practices should reflect state-of-the-art standards of care.
- b. **Provide psychosocial support and therapeutic treatment.** Therapeutic programs and services should teach basic skills for daily living, encourage peer support, and provide the necessary tools for inmates to better manage their mental illnesses throughout their lives. The menu of mental health services should range from high-end stabilization and trauma treatment to specific problem-solving skills and skills-building techniques. All services must be delivered by qualified mental health professionals and properly trained support staff.

- c. **Expand dedicated housing treatment units for inmates who are both substance abusers and have mental illnesses (i.e., dual diagnoses).** Inmates with co-occurring disorders need specialized treatment that addresses both substance use and mental health disorders. The Dixon Correctional Center dual diagnosis treatment unit, which currently houses 83 inmates with co-occurring disorders, should incorporate the Sheridan model of best practices, which includes treatment, educational/vocational services, pre- and post-release case management plans, and community-based programming.
- d. **Pilot mental health prison in proximity to Cook County.** A specialized mental health prison or dedicated housing units should be piloted near Cook or the collar counties given that these areas have the highest numbers of returning offenders. The model must involve community-based mental health partners who would be involved early in the program development process to promote continuity of care from imprisonment to release.
- e. **Develop sex offender treatment models and expand on existing programs.** High-risk, structured programming must be based on best practices and take into account the serious public safety issues presented by the sex offender population.
- f. **Ensure ongoing collaboration with faith, family, and community-based mental health providers.** All mental health programming and services should involve community partnerships to ensure that appropriate community supports are in place and that mental health treatment, including pharmacological, counseling, and pre- and post release services, are integrated into case management plans.
- g. **Include gender-specific therapy.** Research shows that up to 80 percent of incarcerated women were victims of physical or sexual abuse.¹² Women who are victims of violence often lack trauma-informed, gender-specific services that address their post-assault needs. Therefore, programming for Post-Traumatic Stress Disorder (PTSD) should also be explored, as should male victimization. In the past year, all women's facilities have begun offering therapy grounded in the *Seeking Safety* curriculum. A statewide coordinator has been hired to provide these services. *Seeking Safety* is a present-focused therapy to help people suffering from PTSD.
- h. **Expand specialized services for people with HIV/AIDS and other chronic diseases.** For example, inmates with HIV need support groups focusing on topics such as medication adherence, living with HIV, disclosure to family and partners, health education and disease progression, and safer sex education focused on preventing the spread of HIV. Groups will be strengthened by the involvement of peers and community groups. HIV/AIDS and chronic disease programming should involve community partnerships to ensure that appropriate community support mechanisms are in place and that treatment, including health care, counseling, and pre- and post-release

12 American Civil Liberties Union, *Caught in the Net: The Impact of Drug Policies on Women and Families*. Washington, DC: ACLU, Brennan Center & Break the Chains, April 2005.

services, is integrated into case management plans. Individuals with health needs should be integrated into other tracks to the greatest extent possible.

Vocational Track. Resources must be invested in developing vocational competencies. Vocational education training should correspond to high-demand jobs or employment sectors in the communities to which inmates will return. All vocational programs must connect with real employers. They must also recognize public safety requirements.

Recommendations to enhance the vocational track include:

- a. **Overhaul vocational courses.** In planning the overhaul, incorporate findings from a Department of Commerce and Economic Opportunity (DCEO) and Illinois Department of Employment Security (IDES) job market analysis of the ten high-impact regions in the state. Consult with the Illinois Community College Board and employers to redesign vocational programming. Offer a range of programs at the highest possible security levels and in each security level to enable inmate transfers among institutions.
- b. **Establish viable apprenticeship programs.** Programs must also be coordinated with trade unions to establish inmate apprenticeships.
- c. **Leverage resources.** Because of lack of resources at this time, IDOC should draw creatively on community volunteers or peer tutors, particularly for basic skills training, such as literacy tutoring.
- d. **Expand Bridge program.** Bridge programming develops basic education skills while inmates are gaining practical vocational skills. The Bridge model should be built into as many vocational classes as possible. Allow inmates to participate in vocational courses even without a GED.
- e. **Overhaul and expand correctional prison industries and include community-based transitional jobs programs.** IDOC should conduct a private-sector market analysis and business plan to increase profits for correctional industries' businesses. IDOC should also redesign its employment services to include a smooth transition between prison-based industry programs and parole-based job programs. In addition, IDOC should establish connections with employers in the top high-impact regions of the state interested in hiring the formerly incarcerated to help them to understand the benefits of hiring these men and women.
- f. **Ensure that individuals receive credit or accreditation.** Policies that prohibit accreditations and licensure for individuals with criminal histories should be eliminated. Practical information should be added to all vocational coursework on professions that require such licensure or accreditation. This information should also be available to releasees in the community.

Education Track. IDOC should continue to nurture partnerships with community colleges to leverage educational expertise and programs. Successful prison-based educational programs should have the following features: a full continuum of educational offerings, including GED and postsecondary education; individualized career path planning; adaptable programs that meet individual needs and interests; and training in communication and literacy skills.

Recommendations to enhance the education track are as follows:

- a. **Expand access to GED enrollment.** IDOC has made significant progress in reducing the waiting lists for GED enrollment and should continue those efforts. Progress should also continue in expanding access to Adult Basic Education (ABE) or literacy enrollment.
- b. **Upgrade the standard for mandated education.** Currently IDOC mandates that individuals who test at or below a sixth-grade level attend school for 90 days. This rule should be expanded to individuals who test below a ninth-grade level. IDOC should also explore mandated 12th-grade equivalency or GED.
- c. **Restructure teacher schedules and upgrade technology to maximize cost-effectiveness and increase program capacity.**
- d. **Dedicate education prison housing units.** IDOC should pilot test a specialized education prison that explores new practices, curricula, and models. The fiscal impact of the pilot and replication should be assessed.
- e. **Expand access to web-based educational opportunities and distance learning,** using the College of DuPage's Literacy Program as a possible model. Every prison should have computer labs for distance learning, funded by public/private partnerships.
- f. **Restore associate and bachelor degree opportunities.** Additional funding will be required. Initial model education programs might be funded using Higher Education Cooperation Act grants, which are awarded by the Illinois Board of Higher Education.
- g. **Engage community organizations and faith-based sponsored volunteer efforts in tutoring and mentoring roles.**

Recommendation 5:

INCREASE THE NUMBER OF INMATES WHO VOLUNTEER FOR HIV/AIDS TESTING

The expansion of the peer-based HIV/AIDS prevention and education support programs will help supplement the other rehabilitation tracks that are part of the reentry plan advancement phase and beyond. Involving community-based groups could enrich these programs greatly.

Recommendation 6:

REVIEW THE INCENTIVE SYSTEM FOR TREATMENT PARTICIPATION

Identify possible disincentives to treatment participation, such as prohibiting earned good conduct credit (EGCC) for those incarcerated in IDOC more than twice. Additional good-conduct time opportunities, increased family visits, and certificates or priority enrollments in services are incentives that can motivate inmates to volunteer for programming.

Recommendation 7:**USE A VALIDATED RISK TOOL TO REGULARLY ASSESS INMATE SECURITY RISK**

IDOC should select a validated risk tool that uses established benchmarks and standards to step down the security level of inmates so they can become eligible for needed programming identified in their reentry plans. The ultimate goal is to house these inmates in a secure adult transition center (ATC) setting.

Recommendation 8:**CREATE SPECIALIZED PROGRAMMING FOR LONG-TERM OFFENDERS**

Programming should ensure that long-term inmates gradually reduce their level of risk, and that regardless of the length of their prison sentence, there be incentives to keep moving forward with good behavior and self-improvement. This can be built into their individual reentry plans, but the Commission acknowledges the need for a unique focus on these types of offenders. Special programming should be instituted, wherever possible, to identify contributions that long-term inmates may make to the system. Those with especially long-term sentences, owing to the nature of their sentence, may require their own track.

Recommendation 9:**CREATE HONORS UNITS IN MAXIMUM SECURITY PRISONS**

Create honors units in maximum-security prisons that can be brought online slowly to target programming and supportive services to the better-behaved maximum-security inmates, and to reduce high-risk situations where inmates come into contact with inmates who may not be supportive of treatment.

Recommendation 10:**CREATE A LOGICAL “STEP DOWN” SYSTEM FOR ALL PRISONS TO CREATE INCENTIVES FOR INMATES TO REDUCE RISK**

Ensure a system is in place for all offenders to step down to lower security levels throughout their sentence. IDOC should not be releasing inmates directly from maximum-security prisons to the community; if the IDOC is uncomfortable with their behavior in prison, then we should be even more concerned about their behavior in the community. Every effort should be made to improve their behavior and lower their risk through treatment and programming so they are safer members of their community.

Recommendation 11:

RECOGNIZE THE NEED FOR GENDER-SPECIFIC SERVICES, ESPECIALLY FOR WOMEN WITH CHILDREN

Programming and services should recognize that up to an estimated 80 percent of female inmates have been victims of sexual or physical abuse.¹³ In addition, a large proportion of these women are mothers with children now in the care of family or the state. Several programs are currently underway or being piloted that recognize gender-specific needs, such as the fallout from sexual abuse or violence, which Seeking Safety addresses, or that sustain the bond between mothers and their children (for example, Moms and Babies and other programs in the boxed inset, p. 52). These efforts should continue. Other efforts should

be expanded, such as the Women’s Treatment Centers. More should be done to intensify these programs, perhaps even creating smaller support groups at all women’s prisons. Involving the Chicago Legal Advocacy for Incarcerated Mothers (CLAIM) in this process would be helpful. CLAIM promotes community-based sentencing rather than prison for nonviolent offenses, particularly for primary-caregiver parents; promotes family preservation; and empowers female former inmates to work for policy change. The program provides legal and educational services to maintain the bond between imprisoned mothers and their children, and advocates for policies and programs that benefit families of imprisoned mothers and reduce incarceration of women and girls.

Featured Program

ILLINOIS DEPARTMENT OF CORRECTIONS

The Parent and Child Together Program (PACT)

PACT (currently in operation at the Decatur Women’s Correctional Center) is a novel program that effectively uses technology to help mothers sustain or foster a bond with their children during their imprisonment. The program offers a chance for mothers to communicate with children through video conferencing technology, which helps reinforce parent and child relationships without requiring an often lengthy and costly trip to the facility. Children are given videocassettes of the visit.

Recommendation 12:

ENGAGE FAITH, FAMILY, AND THE COMMUNITY EARLY AND AT ALL STAGES

Inmates should have access to faith-based services and organizations from a variety of religions and denominations. Such opportunities recognize the role of the faith community in helping to cultivate many of the personal and practical skills necessary for self-sufficiency and self-confidence. To help support the transition to the community, the following should occur:

- a. **Expand family reunification programs statewide.**
- b. **Adopt gender-responsive, best-practice parenting programs** for both male and female inmates. See boxed insets (pp. 50–55) for featured programs that address the unique needs of parents, especially women.
- c. **Engage community support and advisory councils (CSACs) in cultural training/programs for both inmates and staff.** Under the CSAC model, community members visit inmates from their neighborhoods in prison to help rebuild health, family, and community connections.

¹³ American Civil Liberties Union, note 12 above.



Women connecting with their children prior to release

- d. **Engage CSACs and other community-based organizations to expand support groups for inmates.** Successful formerly incarcerated individuals should facilitate these support groups.
- e. **Continue developing successful volunteer programs at every prison.**

Recommendation 13:

CONSIDER COMMUNITY-BASED ALTERNATIVES TO PRISON FOR NONVIOLENT DRUG OFFENDERS

The continued pressure on the system from the crush of incoming inmates with drug offenses could be alleviated by diverting nonviolent offenders, especially women with children, to less expensive, more effective community-based alternatives to prison. Such programs could also help to reduce the number of parental rights terminations, especially among nonviolent women who are the primary caregivers of their children. The state should explore ongoing best practices in states that are implementing such alternatives.

Specifically, IDOC should:

- a. Expand the existing program with Women's Treatment Center and/or other residential treatment providers in Chicago that allow for women to serve all or parts of their prison terms in this residential, community-based center with their children (up to age 5).

Featured Program

ILLINOIS DEPARTMENT OF CORRECTIONS

Moms and Babies Program

The program, in place in several states, would allow qualified mothers to keep their newborn babies with them in prison for a specified time. On average, 60 to 70 children are born to offenders each year in IDOC. The Moms and Babies pilot program would allow pregnant women to spend their pregnancy at Decatur and to keep the child on the reunification unit, not to exceed two years.

Planning for a pilot of the Moms and Babies program is underway at Decatur Correctional Center. Currently mothers who give birth in prison are given 24 hours with the newborn before the baby is taken away and placed with a family member or DCFS. The Moms and Babies program allows qualified mothers to keep their newborn babies with them in prison for a specific amount of time. Similar programs are in place across the country, including California and New York.

According to Linda Foglia, spokeswoman for the New York State Department of Corrections, the nursery arrangement leads to stronger family ties, fewer disciplinary problems and better social development for the babies. Research also shows that maintaining contact between incarcerated mothers and their babies can often preempt future psychosocial problems for the child, and their associated burdens on the state. Such arrangements can also motivate mothers to plan for their futures.

In 2005, 60 babies were born to women incarcerated by IDOC. Given current recidivism rates, half of those babies will be raised by a relative or the state. Reducing the recidivism rate by just 2% could allow one more child to be reared by its mother. A 2002 study for the New York Department of Corrections showed marked differences in recidivism between program participants and other mothers. Over three years, 26% of nonparticipating mothers returned to prison compared with 13% of program participants. Similar successes were seen in Nebraska.

In providing the proposed program, IDOC will continue to be in the forefront of gender-responsive programming, affording an opportunity for the inmate mother and her newborn baby to bond in a setting that nurtures physical and emotional health for both the mother and the child. At the same time, IDOC hopes to reduce the recidivism rate for the participants.

b. Implement a pilot project with Cook County to divert women convicted of lower-level felonies into a supportive housing and transitional jobs program in which mothers are allowed to live with younger children.

Phase 3—Transition to Community/ Transitioning Out Plan

The Commission recommends centralizing pre-release resources and related programming. The Commission proposes that, at least 90 days before release, all inmates, regardless of security classification, be targeted for transfer to Transition Units. Transition Units include dedicated reentry release housing units, ATCs, and work release centers that will be located in the ten high-impact regions of the state. Case management in Transition Units should serve as a bridge to community services and programs. Time in the Transition Unit should focus on completing the prison-based components of each inmate's reentry plan, as well as advancing those goals to the next level of concrete plans (job contacts, housing, etc.) for a successful community reintegration.

Recommendation 1: DEVELOP DEDICATED TRANSITION UNITS IN ALL PRISONS

IDOC should house all inmates who are within 90–180 days of release in designated housing units at every prison in the state, called Transition Units. Whenever possible, the IDOC should transfer inmates who are returning to one of the top ten high-impact regions of the state to a reentry unit at a prison nearest their home communities.

a. **Designate Stateville Minimum Security Unit (MSU) as the Cook County/Collar Counties Transition Unit.** One of the two 192-bed housing units at Stateville MSU could be a dedicated Transition Unit. Inmates housed there would have better access to employment opportunities, CSAC, faith, family and community support, and other community-based services.

- b. Pilot a jail-based (as opposed to prison-based) program of reentry.** In accordance with Public Act 94-0383, IDOC should pilot a county or municipal jail-based “program of reentry into community” in Kankakee County, which might also serve the south suburbs of Cook County. Inmates could be released to the jail-based reentry program up to one year prior to their anticipated release date. The jail-based reentry program would facilitate inmates’ reintegration with the community. As outlined in 730 ILCS 5/3-17-20, the program should involve life-skills training, including parenting; relationship development; domestic violence prevention; emotional and physical health maintenance; substance abuse prevention; employment preparation; and budgeting, consumerism, and personal finance training.
- c. Open additional ATCs** to ensure that there is at least one in each of the ten high-impact regions. At least one ATC model program should be for women and their children. Efforts should be made to place inmates in ATCs nearest their homes. Viable housing options should be identified well in advance of release. The ATCs should facilitate the stepping down of long-term offenders by exposing them to structured transitional experiences.

Recommendation 2:

OVERHAUL THE PRE-START PROGRAM

The Pre-Start program currently offers only a limited curriculum for pre-release inmates on key issues, such as parole compliance and obtaining state identification. The program should be completely overhauled and integrated into a more comprehensive program to better serve the reentry plan. Such an overhaul includes the following reforms:

- a. Designate job preparation staff at every prison to teach an expanded three-week curriculum.** Job preparation should tap corporate partnerships for job training assistance and placement services at release. The Sheridan Program job-prep, 40-hour curriculum, delivered by the Safer Foundation, is an excellent model.
- b. Develop transitional portfolios** using best practices of the National Institute of Correction’s (NIC) Offender Workforce Development Specialist Training Program. These plans should include ways to identify and address barriers to reentry (e.g., lack of identification, physical or mental disabilities, or limited English proficiency).
- c. Explore a digital portfolio model**, including technology skills training and access to personal e-mail accounts to help inmates better compete for technology-driven jobs.

Featured Program

ILLINOIS DEPARTMENT OF CORRECTIONS

Lifestyle Redirection

This program is an intensive 12-week curriculum addressing relapse prevention and victim impact. It is designed to accommodate varied educational levels in small group settings (up to 20 inmates). Inmates can volunteer or be mandated to participate if they exhibit highly aggressive behavior. Participants must be under age 21, have a history of domestic battery or orders of protection, and have a record of violence. On graduation from the program, inmates receive intensive case management services.

- d. **Incorporate motivational speakers** from the business and social services community as well as faith-based volunteers.
- e. **Offer voluntary, peer-based HIV/AIDS prevention education and testing as part of the Pre-Start program**, and incorporate viral hepatitis education, prevention, and testing.

Recommendation 3:

CREATE AND IMPLEMENT TRANSITION REENTRY UNIT PROGRAM MODEL

Transition Units should include interventions and programs that afford opportunities to practice positive social behavior and reinforce the individual lifestyle changes that were established in the first and second stages of the prison-based reentry process.

These units should include programming and information on the following:

- Job preparation and placement training;
- Securing the proper paperwork to obtain a state ID;
- Connecting to community-based peer support groups and mentors. Inmates should have greater access to 12-step groups or Inners/Winners' Circles (professionally facilitated, peer-led recovery support groups for the formerly incarcerated), which are nationally recognized as essential components of the recovery process. Support groups are ideal grounds for forming mentor relationships with releasees who have spent considerable time working through the challenges of reentry.
- Preparing for family reunification, child support obligations, and counseling needs. Family reunification efforts acknowledge that many inmates have families and children, some of whom have been removed from their custody. DCFS and family services organizations must help inmates negotiate the complexities of the reunification process;
- Learning more about what to expect on parole, how to work with the parole agent to achieve personal goals, parolee rights and requirements, and methods to comply with Prisoner Review Board orders;
- The receipt of a directory of community-based services in the inmate's home region;
- Information on HIV and sexually transmitted disease (STD) management, including sources of community-based health care, such as through the Ryan White CARE Act service networks;
- Health and behavioral health medication management;
- Community service opportunities: Community service can help reestablish trust between the releasee and community members. Participants also become aware of available services.
- DCEO-hosted workNet™ programs (see p. 69 for more information);
- Domestic violence, violence prevention, gang intervention, and similar services. Many inmates' personal relationships are predicated on power, strength, and violence. These ways of thinking, many of which are deeply ingrained, must be replaced with appropriate notions of respect, self-control, and independence.

The foundation for much of this relearning was put in place in the prison-based services and programs. Local services organizations that understand these interpersonal issues should play an important role in the reentry process.

- Information sessions on eligibility for public benefits. These sessions will focus on completing the process initiated during orientation on available benefits so services can begin at the point of release. These benefits include Temporary Assistance for Needy Families (TANF), food stamps, Supplemental Security Income (SSI), AIDS Drug Assistance Program, and veteran's benefits, among others.
- Continued bridge programming: Continuity in bridge programming will be essential during this reentry stage. Inmates with low skills levels should receive work and vocational training that is in line with their educational and skills levels. Bridge programs customize reading, writing, and math materials to assist participants with job-readiness skills and encourage participation in ongoing vocational training programs and transitional job programs at release.

Recommendation 4:
DEVELOP A TRANSITION PLAN

The reentry team should develop a transition plan to the community with the inmate that will incorporate individualized treatment, employment, education, housing, and health-related goals. Stable housing and other related services and an adequate supply of psychotropic and HIV/AIDS medications (a 30-day supply, rather than the current two-week supply) should be available at time of release. All pre-release planning should involve faith-based representatives, family members, HIV/AIDS and other intensive case managers, and other supportive persons in the community who will cooperate with the post-release reentry case managers, field services, PRU, parole, and CSAC staff, and community-based treatment and service providers. The internal team will coordinate case planning efforts that include records and information-sharing. In addition, the Illinois Department of Public Health (IDPH) should be engaged to create a plan to ensure that all releasees have a scheduled health care appointment within 30–60 days of release, or 14 days for releasees with HIV/AIDS or other chronic medical conditions.

Featured Program

ILLINOIS DEPARTMENT OF CORRECTIONS

The Storybook Project

The program is one of several Lutheran Social Services of Illinois offers to help incarcerated parents stay in touch with their children. The program allows parents to tape-record a children's story that they read aloud, and volunteers send the book and the tapes to the inmate's children. Inmates may also include a personal message to their children or the children's caregiver on the tape. Currently 12 county, state, and federal correctional facilities in Illinois are involved in the Storybook Project. Recording sessions are held four to twelve times a year in each participating facility, usually on Saturdays. This program assists the mothers in fostering a nurturing relationship with her children and promotes growth and development for both.

Recommendation 5:

DEVELOP PRE-RELEASE REENTRY CASE MANAGEMENT MODELS FOR SPECIAL POPULATIONS

IDOC should systematically develop different levels of case management and family case management models for the mentally ill as developed by *Thresholds*, expand the Sheridan model (see Appendix A and boxed inset, p. 33, for more information) for clinical reentry case management for substance abuse, and expand transitional case management models for persons with HIV/AIDS as developed by the AIDS Foundation of Chicago (AFC). Services should be available statewide. For example, AFC can provide links and referrals to services funded throughout the state by the Ryan White CARE Act.

Recommendation 6:

CONTINUE TO EXPAND THE INCARCERATED VETERANS TRANSITION PROGRAM (IVTP)

The IVTP is currently underway in several facilities in partnership with the Illinois Department of Employment Security (IDES), Veterans Affairs, and IDOC, as well as the U.S. Department of Labor. Incarcerated veterans should be enrolled in the IVTP while in prison, and through the program receive intensive case management to help them prepare for reentry.

Stage 3: Post-Release Reentry Management

Reentry Team



Highly coordinated, ensure person receives community support/held accountable
Intensive case management/community resource directories

Community Reconnections



Increase CSACs/involve community
Establish community resource centers in the top ten regions

Public Safety

Develop graduated sanctions
Develop alternative to parole revocation
Parole with supervision for revoked parolees
Partnerships with community law enforcement

Stage 3: Returning Home: Post-Release Reentry Management

The process does not stop at the prison door. The new system must continue to provide intensive case management, via parole, for the formerly incarcerated who are transitioning from prison to community. The Commission's recommendations outline a structured reentry process largely defined by validated risk reduction, which establishes the right balance between public safety and smart prevention.

This stage, which focuses on parole improvements, is founded on the twin notions of reducing community risk by balancing caseload reduction with improved case management. The Governor's Operation Spotlight Parole Reform Initiative has begun to show some promise in preventing crime and improving public safety, but additional investments are needed for the reforms to function as designed. Operation Spotlight has already identified key investments and reforms; however, the following initiatives must be continued or implemented: increase the number of parole agents and reduce caseloads; provide new and improved case management that shifts parole culture to one of preventing crime; tailor case management by type of crime (sex offenders, drug offenders, etc.); and expand community capacity to support parolees. With more agents on the street with reduced caseloads, agents can reduce risk to public safety by working more closely with the parolees to move them toward productive lives. The ultimate goal of this process is to create a solid bridge from prison to the community with little interruption of services and supports to the parolee.

This recommended system also depends heavily on the involvement of faith, family, and community members. In addition, it relies on expanded partnerships to leverage placement resources among city, county, state, and community leaders to improve success. The reentry management system incorporates these groups and individuals by empowering, enabling, and supporting them in their roles in the reentry process.

THE VISION for a Redesigned Post-Release Reentry Management Structure

The Commission's recommendations outline a structured reentry process largely defined by validated risk reduction. The flow of inmates through this new system is divided into four phases:

1. Connecting with the reentry team
2. Community reconnections
3. Achieving goals of reentry plan
4. Upholding public safety and accountability among the formerly incarcerated.



Background and Context

Of the approximately 39,000 annual releases from IDOC, approximately 85 percent (or approximately 33,000) are released on parole supervision, and the remaining 15 percent (approximately 6,000) are discharged from prison without parole (usually as a result of a prior parole violation or revocation that required a parolee to serve out the entire or remainder of the parole term in prison).¹⁴

When individuals are released from IDOC, they receive a small amount of “gate” money; a bus ticket, usually to their committing county; and whatever funds they had accumulated in their accounts from institutional jobs or work assignments. They are also directed to a host site, where they must remain until they are visited by their parole agent. The visit by the parole agent and a case manager or other members of the “reentry team” (described below) occurs within 72 hours of a parolee’s release from prison. After

Welding instructor Harry Bell (C) guides inmates Richard (L) and Tony in the weld shop at Sheridan Correctional Center, November 14, 2005. A dedicated center for the treatment of inmates with drug and alcohol abuse problems, Sheridan opened in January 2004 to combat recidivism.

¹⁴ Illinois Departments of Corrections.

the initial visit, parolees are required to meet with their parole agents, initially between one and four times monthly depending on the supervision level of the parolee.

This process, however, has traditionally been challenged by high parole caseloads, lack of community services, and a lack of resources, such as drug treatment, to support risk reduction among parolees. As noted above, Operation Spotlight is designed to support a process of validated risk reduction that is led by parole agents, with the goal of reducing caseloads, increasing well supported case management, improving supervision and strengthening community partnerships. Its success to date, even though it has yet to be fully implemented, is indeed promising.

Historically, the approach of parole in IDOC has been to monitor parole “compliance” in a very black or white context, which resulted in high, and costly, numbers of technical parole violations, with very few long-term benefits to the parolees or to their communities. With high caseloads, fewer resources to move parolees toward alternatives to crime and drugs, and weak case management training, parole agents spent little time developing partnerships with community members or organizations or working to change the behavior of struggling parolees. Furthermore, there were too few agents to develop specialized caseloads that ensured more intensive supervision for high-risk populations, such as sex offenders. In the last three years, the state has focused much of its reentry reform efforts on this phase through the Operation Spotlight Parole Reform Plan, and has progressively sought to build a case management system that not only changes the role of the parole agent, but also increases the role of community members. At the same time, it also worked to strengthen public safety by establishing specialized caseloads for sex offenders. This was largely made possible through gradually increasing the number of parole agents and reducing caseloads to a statewide average of 78, down from 114 in 2003,¹⁵ gradually rolling out new case management training programs and policies statewide, and providing parole agents with more tools to promote the use of graduated sanctions designed to help struggling parolees improve their behavior.

As the long-term Operation Spotlight Plan has progressed, it has become increasingly clear that parole agents cannot successfully transition parolees back to their communities without increased capacity and partnership with the faith, family, and community members there. A successful reentry infrastructure will require ongoing parole reform, along with significant investments in developing treatment and employment networks for parolees.

The recommendations in this section of the report draw on lessons learned from Operation Spotlight and the Sheridan Program. The Sheridan Program engages drug-involved offenders in intensive drug treatment coupled with cognitive and vocational skills development and job preparation. These services begin in prison and continue after release with heightened parole supervision, case management, and funded community treatment services. IDOC’s Placement Resource Unit coordinates the community services. The Sheridan Program relies on a team management approach that includes the participation of parole agents, treatment providers, job developers, case managers, and community representatives. Case management is coordinated through the two pilot Community Support and Advisory Councils (CSACs), which are located on Chicago’s West and South sides. Council members and staff make regular visits to Sheridan Prison to establish a relationship with offenders prior to their release and to inform them of services that are available in the community

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through the CSACs and its member organizations. Early results in reducing recidivism are again quite promising. Unfortunately, parolees released from other institutions do not have the benefit of these increased resources or networks of community partners.

Continuing to learn from model programs such as Operation Spotlight and the Sheridan Program are at the heart of this section's recommendations. Although solid models have been developed, the challenge will be in implementing these reforms systemwide to create a reentry network and infrastructure capable of seamlessly moving parolees back into their communities.

Recommendations

Phase 1—Connecting with the Reentry Team

The reentry team at this bridge stage includes the parole agent and PRU staff, as well as reentry case manager (where appropriate), and any representatives of community services the parolee needs. The reentry team ensures that a bridge is built between the prison-based services and the eventual return to full citizenship in the community.

The regionally based reentry team meets with the inmate prior to his or her release to a community-based transitional unit (such as ATCs). However, the reentry team should also meet with the former inmate when the parole agent performs the initial host-site contact—within 72 hours of release. Although many of the following procedures and practices are currently underway, the overall vision is one of a highly structured system of case management handled by a team of stakeholders.

Recommendation 1:

REENTRY TEAM SHOULD TRANSPORT PAROLEE TO HOST SITE

Building from the Reentry Housing Unit infrastructure, whenever possible, parolees should be transported to their host sites by a member of a reentry team (see below) and a family or community member. This reduces confusion, saves state funds, and provides for a smoother transition to the community. The reentry team serves as the bridge between the in-prison programs and supports and those in the community that will help the parolee successfully re-engage in life.

Recommendation 2:

PROVIDE OVERVIEW OF REENTRY TEAM'S ROLE TO PAROLEE AT INITIAL POST-RELEASE MEETING

At the initial, post-release meeting at the host site between the parolee, parole agent, and other members of the reentry team, the parole agent and case manager (when applicable) should review the rules and procedures of parole, discuss how they can work together to ensure success, review the reentry plan, and make initial recommendations for meeting the determined goals. The team will also ensure that parolees have a regional resource directory of available services and providers, and will be given information on the nearest reentry resource center.

Recommendation 3:

CREATE NEW RESOURCE DIRECTORIES

New regional community and government resource directories should be created, maintained, and distributed regularly to parolees, providers, pre-release counselors, case managers, and parole agents. In addition, systemic and regional training programs for IDOC parole, PRU, field services, and counselors should be developed to focus on available resources in each region and ensure that the components of effective programs are understood by all.

Recommendation 4:

COORDINATE REENTRY TEAM EFFORTS

To ensure smooth coordination of the reentry team's efforts, the state should:

- a. **Co-locate parole agents and PRU field agents in the top ten target communities.** This change will require a small increase in PRU staff to manage reentry service contracts and to make continued progress toward the Operation Spotlight twin goals of increasing the number of parole agents and reducing and more effectively managing parole caseloads.
- b. **Provide gender-responsive training for parole agents and counselors.** Formerly incarcerated women and men often face very different situations as they prepare to return home.
- c. **Improve and intensify case management by:**
 - **Embedding dedicated case managers into the system** throughout the state to provide ready access to needed services.
 - **Increase state funding and resources for clinical and community-based intensive case managers in community groups specializing in mental health, HIV/AIDS, and substance abuse treatment.** Case managers serving these parolees have lower caseloads and take a more intensive approach. Parolees are linked with specific programs and services to address their mental health, substance abuse and/or HIV-related health needs and connected with critical services such as housing. These intensive case management services ensure that parolees with special needs make a successful transition back to the community. Such success will help to ensure that parolees pose a lower public health and safety risk to community members. Parolees can transition to less-intensive case management when they are stable. Examples are Thresholds, TASC, and AIDS Foundation of Chicago (AFC). IDOC should establish a pilot project with the AIDS Foundation of Chicago and its partner agencies to explore the feasibility of providing intensive case management to parolees in prisons around the state.
 - **Include families in case planning.**

- **IDOC must work with its union to establish hiring and/or educational standards for parole agents** so that agents—especially those working with high-need parolees—have the case management skills that will be necessary to manage caseloads of parolees with multiple risk factors and barriers to successful reintegration.

Recommendation 5:

ESTABLISH REGULAR MEETINGS BETWEEN REENTRY TEAM AND PAROLEE

As previously described, this level of involvement and case management will require a continued commitment by the state to the goals of Operation Spotlight. In accordance with the parolees’ individualized reentry plan, the reentry team will primarily facilitate connections to the services in the two phases described in the following sections, “Community Reconnections” and “Achieving the Goals of the Reentry Plan.”

Recommendation 6:

USE A STANDARDIZED TEMPLATE TO RECORD DISCHARGE INFORMATION AND REENTRY PLANS

Using such a template will ensure that parole agents, PRU, and case managers have all relevant file information (including ID status; employment and education status; treatment referrals, etc.) to individualize case management.

Phase 2—Community Reconnections

One of the most important components of developing a reentry system that can support the real needs of those returning from prison will be developing, empowering, and including nontraditional partners in the process. Nontraditional partners, including family members and community and faith-based service providers, must be part of the reentry equation.

Because formerly incarcerated individuals usually return to the communities in which they lived prior to incarceration, these partners must be informed, empowered, and supported in meaningful ways to assist and support reentering individuals. To facilitate a parolee’s reconnection or initial connection to these nontraditional partners, the Commission proposes the following steps and recommendations (again, although some of the following procedures already exist on some level, the embedded recommendations represent a vision for a system of community reconnection):

Recommendation 1:

INCREASE NUMBER OF CSACS AND INVOLVE COMMUNITY

The Sheridan model of using CSACs as a bridge between prison and community can be especially valuable in this stage of community reentry. Because the CSACs have established relationships with inmates, and because they are knowledgeable of and well connected to community supports, the pilot programs should be expanded

and established in all ten target communities. In addition to CSAC expansion and involvement, efforts during this transition stage should involve faith-based organizations, family, and community members in the reentry planning.

Recommendation 2:

ESTABLISH COMMUNITY RESOURCE CENTERS AND AN INTEGRATED NETWORK OF SERVICES AND SUPPORTS WITH A STRONG FOCUS ON EMPLOYMENT

Establish resource centers in the top ten high-impact regions. The centers will house the CSACs and offer a meeting place for parolees, their families, community service providers, and parole agents. In addition to their coordination role, these centers should also provide information on available resources and funding opportunities for organizations that help parolees return to the community. All resource centers should host as many different support groups as possible, such as 12-step programs, Winner's Circle, and family support groups. The groups should represent a wide range of providers, including state contractors, federal, state, and local public assistance programs, nonprofit organizations, faith-based organizations, and community colleges. Ultimately, service programs should be designed to help give parolees the tools they need to address personal challenges, such as drug addiction, while moving them toward sustainable independence through honest employment.

Services represented should include:

Employment and training, including:

- Transitional jobs programs
- Illinois workNet™ Resources and Information Portal (a computerized skills matching project developed by the DCEO) should be available at all Lifeskills and Reentry Centers and with community reentry partners throughout the state. Illinois workNet™ is now available in three reentry and employment centers for the formerly incarcerated, including sites in two high-impact communities. Site counselors have used Illinois workNet™ Portal data on statewide and local career planning information, job search, education planning, and support services to help place more than 1,200 participants in jobs since August 2005.¹⁶
- Supported social entrepreneurship
- Prison industries (newly developed parole-based component)
- IDES' Reentry Employment Service Program (RESP) (see pp. 68–69)
- Local workforce investment boards
- County, municipal and/or state workforce development agencies
- Labor union partnerships and/or apprenticeship programs

¹⁶ Illinois Department of Corrections, internal memo, "Background Information on Illinois workNet Partner Sites that are Working on Re-entry Issues and Future Plans," April 2006.

Ongoing education, including community or city colleges:

- Adult literacy
- GED
- Academic and vocational postsecondary education

Substance abuse treatment, including:

- Inpatient and/or intensive outpatient
- Recovery homes or halfway houses
- Detox and/or residential treatment for relapsing parolees

Support groups, including:

- Alcoholics Anonymous, Narcotic Anonymous, etc.
- Winner's Circle
- Overcomers group
- Family reunification services
- Anger management
- General counseling
- Mentoring supports, including faith- and community-based partners
- Specialized groups for people with HIV/AIDS and other chronic diseases

Primary and chronic health care, including:

- Medicaid or Medicare for eligible populations
- Family care, Kid Care, and All Kids
- County health departments
- HIV/AIDS and other specialists who can treat chronic diseases

Mental health, including:

- Dual diagnoses programs
- County health departments
- Networks of local providers funded by other local, state, or federal sources

Recommendation 3:**PROVIDE A PAROLEE ORIENTATION SESSION AT RESOURCE CENTERS**

Require all parolees in the top ten high-impact regions to attend an orientation session in a regional community resource center. The orientation session should:

- Include presentations from local community groups, service providers, faith-based organizations, parole agents, and formerly incarcerated individuals who have successfully returned to their communities.** Parolees will have the opportunity to sign up for services or set appointments with service providers or other organizations for future appointments.

- b. **Introduce the parolees to the community support network**, which will provide ongoing support in meeting their goals as well as an opportunity to redevelop ties to their communities or develop new community relationships. Parolees will be able to ask common questions and find the most appropriate places to get help and support.
- c. **Connect the parolee with a support group**, including Alcoholics Anonymous (AA), Narcotics Anonymous (NA), Sexaholics Anonymous (SA), Winner's Circle, HIV/AIDS or other chronic disease support groups, and/or Overcomers groups. Addresses and meeting times should be provided to the parolee, along with sign-up sheets. Although attendance need not be mandatory or enforced, each parolee should be encouraged to sign up for at least one support group in their area before leaving the orientation.
- d. **Familiarize the parolee with the community resource center**. All parolees will be provided ongoing access to their local reentry center, which in addition to the previously mentioned services will include regular sessions or classes on topics that will assist them in overcoming reentry challenges.
- e. **Ensure a strong focus on employment or career opportunities**: All parolees should be provided with an overview of how to use the center to identify job, training or educational opportunities to help them progress toward their goals.

Recommendation 4:

EXPAND SPOTLIGHT REENTRY CENTERS

An important component of Operation Spotlight is the “Spotlight Reentry Centers” initiative for high-risk parolees. These Centers provide a valuable risk-reduction tool for communities because they provide both a day-reporting program that high-risk parolees must attend for daily drug treatment, testing, job placement, mental health and other services, and also a resource for other parolees seeking help with reentry. The resources can help to parolees reconnect with their communities and identify the support and service they need for success. More are needed, and the Commission recommends expanding their numbers.

Currently, there are seven of these innovative centers, located in the heart of communities most heavily affected by drugs, crime, gangs, violence, unemployment, poverty, and family dissolution. These centers have gained national attention for their integrated and research-based approach to offender reentry. The Centers are co-located within parole offices and are the largest coordinated effort by a state to deliver community-based intensive supervision and treatment for high-risk parolees.

The centers incorporate three elements: 1) intensive supervision, 2) treatment and training on the basis of assessed risks and needs, and 3) links to valuable resources in the community. More than 700 parolees participate daily. Parolees progress through three levels of supervision, moving from the most intensive to least intensive level, a tethered approach that corresponds to their behavior and response to programs they attend.

Recommendation 5:**DEVELOP TRANSITIONAL JOBS PROGRAMS IN THE TOP TEN HIGH-IMPACT AREAS AND EXPAND PROGRAMS THAT PROMOTE HONEST EMPLOYMENT**

One of the most effective strategies that nonprofit organizations have devised is transitional jobs, a strategy that worked for welfare to work and is now working for prison returnees. In a transitional jobs program, former prisoners with employment challenges are hired and paid a wage for legitimate employment in a time-limited, subsidized job. The program not only offers real work, income, skill development, and a letter of reference and experience to add to their resume, it also offers coaching and support services to help participants overcome substantial barriers to employment, such as substance abuse or mental health issues. The program focuses heavily on placement into unsubsidized work at the earliest possible time and job retention services after placement. Employers gain access to a pipeline of supported workers who have demonstrated an ability to do the job and remain employable. Most important, communities gain when the formerly incarcerated have the opportunity to reconnect to the work world and become contributing citizens once again.

Recommendation 6:**DEVELOP COMMUNITY NEEDS ASSESSMENTS**

The CSACs should take a lead role in conducting community needs assessments to identify service gaps. This information can be used to help create or maintain and update the regional resource directories, as well as to identify the community's support groups and to actively recruit trainers. Special attention should be paid to the problem of methamphetamine treatment.

Recommendation 7:**RECOGNIZE UNIQUE CHARACTERISTICS OF RURAL AREAS IN DEVELOPING CAPACITY**

Attending to community capacity in rural areas calls for a tailored approach that recognizes the unique demographic, geographic, and economic characteristics of rural areas. Because of population sparseness, fewer social services locate in rural areas. Geographic isolation also makes transportation to jobs and services more difficult. Although rural areas are known for their tight-knit family networks, they often lack the wider, "bridging" networks of supports that can connect the formerly incarcerated to jobs and services. In addition, in close-knit communities, reputations often precede an individual, which can block employment prospects. Without broader bridging networks of support, the formerly incarcerated in rural areas may have more difficulty finding work. Building community capacity in rural areas should recognize these unique characteristics and work to reach across communities or areas to link social supports and employment networks. Addressing transportation limitations is also necessary. Welfare-to-work programs in rural areas may offer model programs for connecting those with employment barriers to jobs.

Phase 3—Achieving Goals of Reentry Plan

As the term of parole proceeds, it is imperative that parolees continue to work toward their reentry plan and adhere strictly to their parole requirements to ensure public safety, as well as to project the formerly incarcerated on a path toward productive citizenship and a crime-free, drug-free future life. To stay on the right path, avoid parole violations, and continue the concrete steps forward, parolees should meet regularly with their parole agent and members of their reentry team to track progress toward goals, as well as to update them on new goals. In the ten high-impact regions, regular meetings should be held in the reentry community resource centers, where more resources will be available.

Recommendation 1:

INCLUDE ILLINOIS DEPARTMENT OF EMPLOYMENT SERVICES (IDES) REENTRY EMPLOYMENT SERVICE PROGRAM (RESP) LIAISON IN REENTRY TEAM

Expand the reentry team to include one full-time reentry liaison from the Illinois Department of Employment Security's (IDES) Re-entry Employment Service Program (RESP) to ensure that at least one liaison is available in each of the ten high-impact communities. IDES launched its innovative RESP in 2005 to address the high rate of unemployment among the formerly incarcerated in Illinois. IDES trained re-entry liaisons, who match job seekers with employers and provide follow-up support, to serve the formerly incarcerated in each of its nearly 70 offices throughout the state. However, because RESP was implemented without expanded funding, almost all liaisons have other responsibilities in their local offices, making it impossible for them to meet the growing demand for the reentry population. Full-time regional liaisons would enable RESP to increase its outreach. The new liaisons would be responsible for linking services between local IDES offices and IDOC by working more closely with both parole officers and PRUs. These liaisons would focus on job development from a regional perspective, contributing to economic development in Illinois by linking formerly incarcerated job seekers with the critical skills shortages in each area. In addition, if IDES' Illinois Skills Match program is integrated into the IDOC reception and assessment process and/or the Reentry Housing Units, reentry liaisons will be better able to match available jobs in the community with parolee job skills. See boxed inset (page 57) for more information on RESP.

Recommendation 2:

TARGET ADDITIONAL STATE AND LOCAL RESOURCES TO REENTRY POPULATION

State and local agencies—beyond IDOC—should target more resources to reentering populations so basic needs such as housing, health and behavioral health issues, education, training, and employment opportunities are accessible to all. To ensure the access to these primary services, the following short- and long-term recommendations are proposed:

Employment

- a. **Develop more transitional jobs.** As their time of release nears, more transitional jobs programs for parolees should be developed by partnering with

local government, private philanthropy, and others interested in developing and evaluating time-limited, paid work experiences, combined with case management, soft or hard skills training, and support services (for a model transitional jobs program, see Appendix A). The state of Illinois should continue to fund state transitional jobs programs.

In a transitional jobs program, former inmates with employment challenges are hired and paid a wage for legitimate employment in a time-limited, subsidized job. As U.S. Senator Barack Obama said in testimony in November 2005 before Congress in support of the Second Chance Act: “The program not only offers real work, income, skill development, and a letter of reference and experience to add to their resume, it also offers coaching and support services to help participants overcome substantial barriers to employment, such as substance abuse or mental health issues... Studies of successful transitional jobs programs have found that transitional jobs result in a 33% increase in employment when compared to other types of employment preparation programs, and that 81% to 94% of transitional job graduates go on to unsubsidized employment at wages between \$7.00 and \$10.00 per hour. Employers also gain access to a pipeline of supported workers who have demonstrated an ability to do the job and remain employable. Most of all, our communities gain by creating a productive place for ex-inmates, where they contribute positively to family, neighborhood, and the larger environment rather than the opposite.”

b. Establish a state-led Joint Council on Reentry Employability (J-CORE)

that consists of business and labor leaders, state agency directors, and local community groups (including formerly incarcerated individuals) in a cooperatively funded effort to implement the employment-related recommendations in this report and improve employment opportunities for the formerly incarcerated.

c. Create a new IDOC position in the Adult Education Department that is responsible for job preparedness and development. Currently, the IDOC Adult Education Department largely focuses on prison-based Adult Basic Education, GED classes, and college vocational courses. The state

Featured Program

ILLINOIS DEPARTMENT OF
EMPLOYMENT SECURITY

Reentry Employment Service Program

The Illinois Department of Employment Security (IDES) launched its innovative Reentry Employment Service Program (RESP) in 2005 to address the high rate of unemployment among the formerly incarcerated in Illinois. The department trained re-entry liaisons to serve the formerly incarcerated in each of its nearly 70 offices throughout the state, including offices in all top ten high-impact regions. Liaisons assess the formerly incarcerated for job readiness and provide referrals when appropriate. They also meet with employers, explaining the benefits of hiring qualified, formerly incarcerated job seekers. Liaisons match job seekers with employers and provide follow-up support. In some areas, IDES also provides job preparation services for those who are still incarcerated as they begin the transition back to the community.

In its first nine months of operation, RESP liaisons assessed more than 2,000 job seekers, conducted 165 workshops, and placed more than 600 formerly incarcerated in jobs. IDES, in cooperation with the Chicago Jobs Council, also developed a website to support this work: www.ides.state.il.us/ExOffenders, which brings together the growing body of workforce resources available to those who assist the formerly incarcerated in a publication. See, *Winning Job Opportunities*, a publication that lists the best jobs available and a full set of materials to assist both job seekers and employers.

should establish a full-time position dedicated to practical job preparation and placement programming for both prison inmates and parolees.

Health and Behavioral Health

- a. Create a partnership among IDOC, IDHS, Division of Alcoholism and Substance Abuse (DASA), and the Illinois Department of Mental Health (IDMH) to **create a continuum of care model** that includes housing for the formerly incarcerated with mental illness and substance abuse issues.
- b. Create and formalize agreements among IDOC, IDHS, the Illinois Department of Healthcare and Family Services (IDHFS), and the Social Security Administration (SSA) to **coordinate the benefit reinstatement process for Supplemental Security Income and Medicaid** so that these and other public benefits are available to parolees immediately on release. The Social Security Administration has a pre-release procedure that allows incarcerated individuals to apply for SSI benefits so that benefits begin quickly after release. An institution may execute a pre-release agreement with its local Social Security office. Under the agreement, Social Security will help institutional and social service personnel learn the pre-release procedure and provide a contact to assist the institution in applying the pre-release procedure.
- c. **Increase funding for access to primary health care and prescription drugs**, especially to individuals with HIV/AIDS or chronic health-related needs, to ensure a continuity of services from prison to the community. To increase access to reduced-costs prescription drugs, parolees should be connected prior to release to the I-SAVE RX prescription drug card program. Adding enrollees will benefit all in the state given that higher enrollment numbers help to lower overall rates for all participants.
- d. **Encourage state, counties, and municipalities to work together to connect parolees to a designated community health clinic where they can gain regular primary care services.**

Housing

- a. **Use the new Rental Housing Support Program (launching in 2007) to locate rental units in each of the top ten high-impact communities to provide rental subsidies for the reentry population.**
- b. **Increase PRU staffing and funding resources** to assist more parolees in finding needed services and allow more 30-day extensions when warranted, especially for high-risk and high-need parolees.
- c. **Issue a request for proposal with integrated funding from multiple state agencies to initially underwrite 100 permanent supportive housing units for reentering individuals.** Funding should cover capital costs where applicable, rent/occupancy subsidies, and needed services related to mental health, substance abuse treatment, and other needed services. These units could be spread out in different facilities or locations. State and local agencies that control subsidized or treatment-based housing should also create set-asides for reentrants.

- d. **Consider a special task force to explore issues of housing for sex offenders.** The roughly 1,400 sex offenders currently in the state face a very different set of housing issues than even other parolees. The taskforce therefore should explore housing and placement issues for this population.

Phase 4—Upholding Public Safety and Individual Accountability

Throughout the reentry process, the goal is to stop recidivism of those leaving prison. However, the reality is that some formerly incarcerated individuals pose a high risk to their communities and refuse to participate in efforts to reform. In accordance with the goals of Operation Spotlight and using the validated risk assessment tool and other close observations of behavior, efforts should continue to be enhanced to ensure that risk is identified as quickly as possible and dangerous parolees are returned to prison, as appropriate. In addition, parole will work to reduce long-term risk among nonviolent formerly incarcerated individuals, such as drug offenders, by working to divert them through programs that will reduce their recidivism.

Although Operation Spotlight provides the framework for sanctioning, IDOC will need to further expand graduated sanctions, rewards, and alternatives to parole revocation. Building on the successes of increased sanctions, such as day reporting, additional intervention tools are needed to address reentry issues and curb the growing numbers of parole violators. More meaningful, less costly, and more responsive interventions must be considered as alternatives to parole revocation. This approach is necessary because parole revocation often fails to serve the long-term public safety interests of communities. Parole revocation generally results in offenders being returned to prison for a short time period before being re-released with no additional parole or law enforcement supervision.

Recommendation 1:

DEVELOP GRADUATED SANCTION OPTIONS

The state has made progress in creating a variety of sanction options and in launching new alternatives to incarceration, such as sanctions matrix and reentry centers. A sanction matrix is a set of decision-making tools that guide parole officers through options for graduated sanctioning. However, more such tools are needed. IDOC should expand graduated sanctions options, including day-reporting centers and other community-based programs. It is important to create other community-based alternatives to parole revocations (i.e., funding mandated community-based treatment). Funding for the newly expanded Spotlight Reentry Centers and day-reporting centers must be secured to continue these programs when grant funds expire in fiscal year 2008.

- a. **Open “Halfway Back” Facilities in the Northern, Central, and Southern Regions of the State:** Locate these facilities near the top ten high-impact areas. Parolees who violate their parole can be diverted into this community-based facility as a last-chance option for technical parole violators, with the goal of diversion from prison.
- b. **Expand Spotlight Reentry Centers** (see Recommendation 4, p. 55).

Recommendation 2:

DEVELOP ALTERNATIVES TO PAROLE REVOCATION

Develop alternative sanctions to parole revocation for parolees who are arrested but not charged with new offenses, or who are absent without leave (AWOL) with outstanding warrants. This could include partnering with local jurisdictions to build on local drug court or diversion models, or authorizing the Prisoner Review Board (PRB) to extend parole time by a period equal to the length of time a parolee was AWOL. Legislation would likely be required, but giving the PRB the ability to revoke parole time without re-incarcerating a parolee and/or partnering with local courts would help divert parolees into more cost-effective and meaningful interventions and alternative sentences.

Recommendation 3:

INCLUDE PAROLE WITH SUPERVISION FOR REVOKED PAROLES

When parole revocation is appropriate, the PRB should consider revoking parole in a way that allows offenders to be paroled with supervision for at least a small period of time rather than allowing them to serve their entire sentence in IDOC and then be discharged with no parole supervision or access to departmental resources.

Recommendation 4:

CONTINUE TO DEVELOP AND EXPAND THE USE OF GRADUATED REWARDS AND INCENTIVES

In addition to graduated sanctions, such as improved Electronic Detention (bracelets) and expanded Spotlight Reentry Centers, IDOC should develop “graduated rewards” or incentives, such as reduced levels of supervision (requiring fewer parole agent contacts), or greater recognition of accomplishments (i.e., certificates for completing programs such as day reporting). The carrot and stick approach in the graduated sanctions and rewards can help reshape behavior. Parole should also make greater use of early discharge from parole to provide a greater incentive for parole compliance. Consider allowing parole time to be cut by four, eight, or twelve months on the basis of length of parole and reentry goal achievements.

Recommendation 5:

FINALIZE AND IMPLEMENT RISK ASSESSMENT TOOL

IDOC should finalize and implement its risk/needs assessment tool using validated research. This tool can help parole agents determine the proper supervision level and resources to use for individual cases. The assessment tool should also indicate the likelihood of a parolee to re-offend (i.e., the risk to the community) and the types of resources and intervention that may reduce that risk. This will allow resources to be concentrated on higher need or higher-risk parolees and to frontload resources during a parolee’s first 180 days when the risk of recidivism is the highest. One method of increasing the level of supervision for higher-risk parolees would be to create specialized caseloads for lower-risk parolees who have shown progress while on parole. These agents could carry larger caseloads and concentrate on maintenance issues, thereby freeing

up the caseloads of other agents to focus on higher-need parolees. To maintain both public safety and effective case management, parole agents should conduct periodic needs and risk assessments to evaluate and consider changes in circumstances.

Recommendation 6:

EXPANDED PARTNERSHIPS WITH LAW ENFORCEMENT AGENCIES

Encourage partnering among law enforcement agencies to maintain safe communities. This will require an ongoing commitment to the goals of Operation Spotlight, including parole compliance checks, currently conducted by both parole agents and police officers and involving drug tests and interviews to determine compliance with parole requirements. These checks routinely turn up parolees in illegal possession of firearms or narcotics and help rid communities of parolees who are posing a public safety risk. These checks also help to quickly identify parolees who are in possession of illegal drugs and move them into drug treatment programs before they slip back into high-risk behavior owing to their addiction.

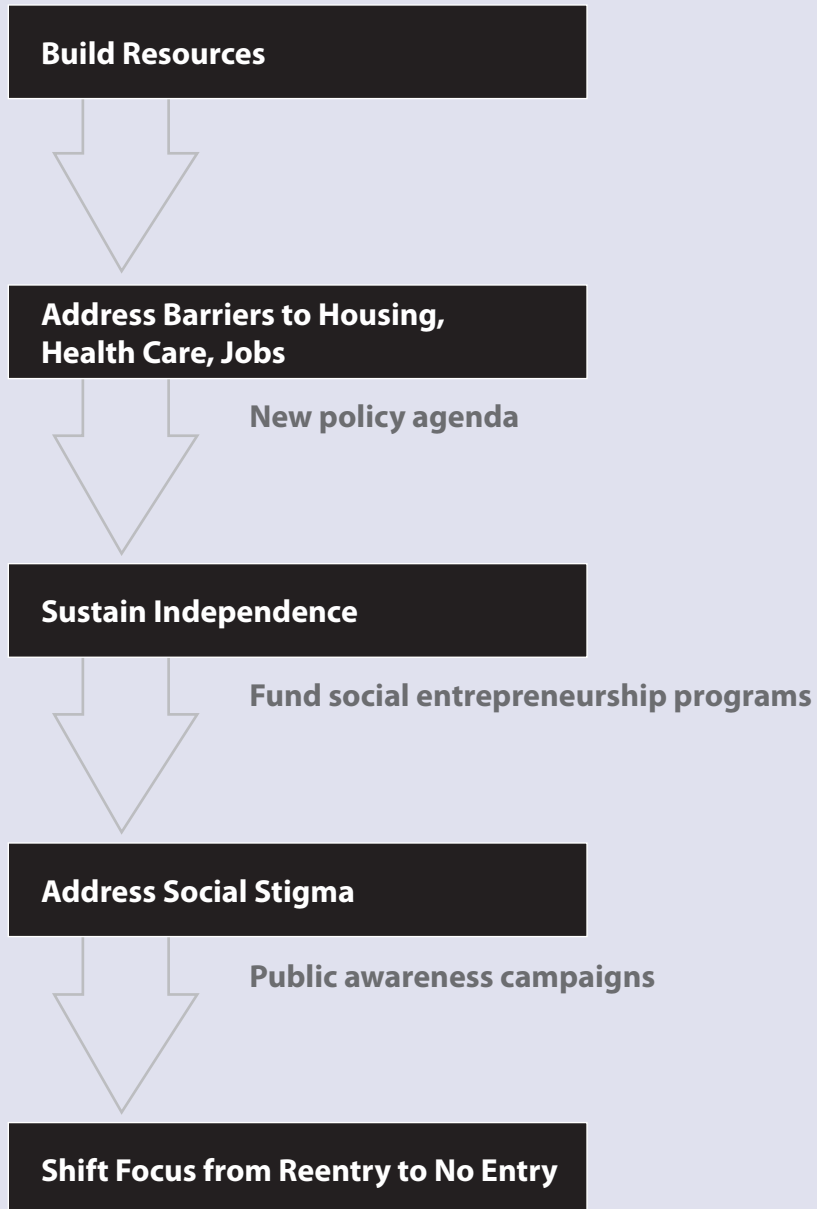
In many ways, in fact, this last stage could have easily been the first stage because the community is where reentry begins and ends, and sound, community-based prevention policies can help break the cycle of recidivism.

Recommendation 7:

EXPAND THE “PROJECT SAFE NEIGHBORHOODS” PROGRAM

Expand Project Safe Neighborhoods to the top ten high-impact regions in the state. The program is a gun violence reduction initiative of the U.S. Department of Justice. It is a partnership of federal, state, and local law enforcement agencies and community organizations centered on aggressive outreach to returning parolees in high gun-crime neighborhoods in Chicago. The program provides community forums that make returning offenders aware of mandatory minimum sentences for convicted felons found in possession of firearms, and provides them with information about alternatives to guns, drugs, and crime.

Stage 4: Community Capacity and Sustainability



Stage 4: Community Capacity and Sustainability

The fourth stage of the envisioned new reentry system is the community capacity and sustainability stage.

Critical to success is building the capacity in the top ten high-impact communities—some of the most impoverished in the state—to sustain these efforts once the former inmate returns home. Without community capacity to offer job opportunities, accessible treatment programs, and viable alternatives to crime and drugs, parolees will return home to empty opportunities and old, dangerous patterns. After all, as Jeremy Travis, a reentry specialist at the Urban Institute says, “There is something irrational about a criminal justice system that spends ten times as much on an inmate’s last day in prison as it does on his first day after prison.”¹⁷

It is not only important to bolster community resources, but to address through new policies and legislation long-term social stigmas and legal barriers that the formerly incarcerated attempting to rehabilitate face. Many of the formerly incarcerated are blocked from certain jobs, and if not barred outright, they face serious hurdles in the form of employer suspicion, lack of accurate information, and other social stigma. Checking “yes” to the question on the job application, “have you ever been convicted...?” is today’s scarlet letter. Not only is there stigma and legal restrictions on job applications, but on applications to subsidized housing, applications for federal education assistance, and in many other arenas. If the formerly incarcerated are to reintegrate themselves into our communities as working fathers and mothers, they must be first given the opportunity to prove themselves. More resources and stability in their daily routines, less conflict, and less stigma will allow these men and women to sustain their own success and independence and become law-abiding citizens beyond the embrace of the IDOC.

In many ways, in fact, this last stage could have easily been the first stage because the community is where reentry begins and ends, and sound, community-based prevention policies can help break the cycle of recidivism. Without these efforts, the formerly incarcerated’s needs will go unmet, their responsibilities to family and community will be dodged, and public safety will once again be compromised.

The task of creating an effective, seamless reentry system that extends beyond the prison gates and into the community is not a simple one. Currently, there is no integrated system of reentry in Illinois, nor is there an integrated, uniform system to guide contracted service providers in the community in their efforts to respond to this population. Although many programs serve the formerly incarcerated, they often lack sufficient funding, they are not coordinated in any meaningful way (in either the services they provide, how they report their effectiveness, or how they interface with parole officers), and their ongoing sustainability is at constant risk. The state must

17 Jeremy Travis, *But they All Come Back: Facing the Challenges of Prisoner Reentry*. Washington, DC: Urban Institute Press, 2005.



Parolees give back to their communities in this Safer Foundation program to beautify Pablo Casals elementary school, Chicago.

therefore foster partnerships among various government agencies and the community and faith-based organizations by creating legislation that supports reentry, eliminating legislation that imposes barriers to reentry, and by reinvesting funds currently used to incarcerate individuals into reentry programs and supports at the community level.

Finally, the Commission's recommendations should inform a statewide strategy for a system that specifically targets resources to the top ten high-impact areas. As noted at the outset of this report, of the 40,000 individuals in Illinois who left prison on parole in 2005, 82 percent returned to just 16 of the state's 102 counties. The communities within these regions also are the same communities that have the highest rates of unemployment in the state, lowest average income, poorest schools, and highest crime rates. It is clear that long-term solutions to crime and recidivism must be addressed in these communities.

Recommendations

Plans and strategies to build community capacity and sustain reentry efforts should focus on changes already underway, build on lessons learned, and invest in the future of Illinois. Many of the following recommendations build on previous recommendations, especially those noted in Stage 3. Their overlap is both intentional and evidence of the comprehensive and seamless nature of the new reentry system this report has built. Finally, although we can achieve some immediate and potentially easy “wins,” capacity building and sustainability require a long-term view of impact and change—both within the formerly incarcerated themselves and in communities.

The Commission has focused its recommendations on:

- Building resources
- Addressing barriers
- Ensuring that individual independence is sustained to break the generational cycle of crime, ensuring that “no entry” is the fate of future generations

Phase 1—Building Resources

Recommendation 1:

TARGET A PERCENTAGE OF IDOC’S BUDGET TO SUPPORT COMMUNITY-BASED INITIATIVES

Investing in community-based initiatives can pay for itself several times over through savings from reduced recidivism and fewer prison admissions. These efforts, however, require significant upfront investment. Future savings can be continually reinvested in additional community-based alternatives and opportunities, thereby establishing a process of “justice re-investment.”¹⁸

Recommendation 2:

COORDINATE COMMUNITY GROUPS, FAITH-BASED ORGANIZATIONS, AND OTHERS WORKING INDEPENDENTLY TO MAXIMIZE EFFORTS, IMPACT, AND SUPPORT FOR THE FORMERLY INCARCERATED

Service providers in most communities are woefully unaware of each other and the services provided. Therefore, the state must address the need for an integrated service network. The community resources centers discussed earlier within this report could be a source of information and coordination for the network members. Community-based service networks in the top ten high-impact areas could help to foster long-term community buy-in, community support, and sustained change.

18 Justice re-investment is to invest in public safety by reallocating justice dollars to refinance public education, housing, health care, and jobs. See Open Society Institute, *Ideas for an Open Society*, volume 3, number 3 (November 2003).

Recommendation 3:**DEVELOP A MORE SYSTEMATIC PROCESS FOR TRAINING AND SUPPORTING CONTRACT PROVIDERS**

Efforts are needed to train community and faith-based organizations across the state in effectively working with the previously incarcerated. Efforts should also be undertaken to create a uniform process in which contracted service providers provide services, report progress and effectiveness of services, and interface with parole officers and others in the reentry process.

Recommendation 4:**ESTABLISH A POINT PERSON IN LOCAL POLICE DEPARTMENTS AND AT SOCIAL SERVICE AGENCIES IN THE TOP TEN HIGH-IMPACT AREAS TO FOCUS ON REENTRY ISSUES**

The point person at the police department would communicate with IDOC on both high-risk situations and on diversions for when parolees are arrested or need services. The designee at a social service agency would be held responsible for working with the state to coordinate and leverage services.

Recommendation 5:**LEVERAGE CURRENT FUNDING**

Leverage and expand funding, and develop new funding sources, including from social service program funds (such as WIA, Medicaid, and food stamps).

Recommendation 6:**DEVELOP A PRIVATE FOUNDATION FUNDRAISING STRATEGY**

The philanthropic community has taken a strong interest in curbing recidivism. To further that commitment, foundations should develop a dedicated fundraising strategy with the state offering matching funds to work within existing private foundation reentry efforts.

Recommendation 7:**PARTNER WITH PRIVATE COMPANIES**

Likewise, private industry and the private sector are equally concerned with problems of recidivism and crime. It would benefit the state to partner with private companies in efforts to reengage the formerly incarcerated toward productive pursuits. Such public-private partnerships can go far in broadening the web of services, employment and training options, and other opportunities, with the ultimate goal of creating a stronger safety net, one not wholly reliant on government (and IDOC) supports. Such efforts will likely improve the prospects that the formerly incarcerated will be able to sustain their success and return to productive, tax-paying, consumers and citizens.

Recommendation 8:

ESTABLISH A REGULAR EVALUATION OF THE COMMISSION'S PROGRESS MADE IN ADDRESSING RECOMMENDATIONS

Organize public education and advocacy initiatives at local, state, and federal levels to address recommendations and to highlight the challenges and progress made on reentry, recidivism reduction, and community safety. Toward that end, develop cross-department strategic plans to implement recommendations of the Commission. Conduct impact evaluations on reentry programming and cost-benefit analyses, identify ongoing needs and gaps in services for returning individuals, and convene an annual summit to review success of reentry initiatives.

Phase 2—Addressing Barriers

Develop a local, state, and federal policy agenda, including legislation and administrative initiatives that addresses legal or procedural barriers to successful reintegration and restores full citizenship of formerly incarcerated individuals. Partner with Representative Danny K. Davis (U.S. 7th District) to advocate for the *Second Chance Act* and other federal legislation that specifically invests in communities and remedies barriers faced by the formerly incarcerated. Recommendations for removing barriers to housing, employment, and health and behavioral health are outlined below.

Housing Barriers

Critical to successful reentry is safe, stable housing immediately upon release. Studies show up to two-thirds of those without appropriate housing return to prison within one year.¹⁹ Recent U.S. policies, such as the Anti-Drug Abuse Act of 1988, the Housing Opportunity Program Extension Act of 1996, and the Quality Housing and Work Responsibility Act of 1998, exclude people with criminal records from public or subsidized housing. Reducing these barriers to housing should be a central priority in the state's reentry strategy.

Recommendation 1:

REMOVE PUBLIC HOUSING BANS FOR DRUG OFFENDERS IN TREATMENT

The state should also encourage and/or mandate local Public Housing Authorities to avoid categorically excluding people with criminal records from their housing units or developing more stringent bans than federal regulations require and to instead make case-specific determinations.

19 Linda Ostreicher, "When Prisoners Come Home," *Gotham Gazette*, January 1, 2003.

Recommendation 2:**ADVOCATE FOR ADDITIONAL HOUSING VOUCHERS**

The state should encourage the federal Department of Housing and Urban Development to create additional housing vouchers for individuals with criminal records. It should also advocate to allow those leaving prisons and jails to be considered homeless so that housing organizations with McKinney-Vento funds can serve them.

Recommendation 3:**PROVIDE TAX INCENTIVES FOR HOUSING DEVELOPERS**

Illinois should adopt a version of the *Public Safety Ex-Offenders Self-Sufficiency Act* of 2004, Congressman Davis's model that provides tax credits for developers of housing for people with criminal records. The state would thus encourage economic development in areas of highest reentry and address the lack of available housing for formerly incarcerated individuals.

Recommendation 4:**SUPPORT THE MIDWEST RE-ENTRY HOUSING INITIATIVE**

Public and nonprofit agencies from Iowa, Illinois, Michigan, Minnesota, and Ohio are collaborating to create 500 units of affordable, service-supported, community-based housing for individuals released from correctional settings or criminal justice custody. The housing, both new development and access of existing units, will be placed in service or in development over a three-year period, January 2006 to December 2008.

Recommendation 5:**INCREASE AFFORDABLE HOUSING**

Encourage set-asides within affordable housing development for those with criminal records, maximizing the use of existing housing resources, and increasing affordable housing with attached supportive services. Specifically, the state should work with private sector and nonprofit housing developers (community development corporations) to create housing accessible to returning individuals and identify units in each of the ten target areas for the reentry population using the Rental Housing Support Program, administered by the Illinois Housing Development Authority. Likewise, the state should identify and expand short-term rental subsidies, such as the Chicago Department of Public Health's program to provide a three-month subsidy for homeless men with substance abuse issues, as a way to help the reentry population transition into the community prior to obtaining employment.

Recommendation 6:**INCLUDE HOUSING IN CONTINUUM OF CARE PLANNING**

The state should ensure collaboration between the Division of Alcoholism and Substance Abuse (DASA), the Division of Mental Health (DMH), and IDOC to create a continuum of care model, including housing, for people with criminal records and mental illness or substance abuse issues, modeled on the New Jersey PROMISE Initiative.

Recommendation 7:

PROVIDE TEMPORARY RENTAL STIPENDS

Provide temporary rental stipends or housing assistance for the period immediately after release to those who demonstrate that they are without adequate resources to pay rent.

Recommendation 8:

DEVELOP SUPPORTIVE HOUSING FOR VULNERABLE POPULATIONS

The state should issue a Request for Proposals to develop 100 supportive housing units targeted to serve those with mental illness, substance abuse issues, or HIV/AIDS. Support for this initiative would come from capital funds from the Illinois Housing Development Authority, rental subsidies from the Rental Support Program, HOPWA, Section 8, and supportive services funding from the Illinois Department of Human Services, the Illinois Department of Commerce and Economic Opportunity, and IDOC as part of the Midwest Re-Entry Housing Initiative. The state should designate a lead agency to manage billing and administrative duties for this initiative. IDOC, the Illinois Department of Public Health, the Illinois Department of Human Services, and the Illinois Department of Healthcare and Family Services should jointly create an IDOC-specific supportive living facility for individuals on parole (primarily those convicted of sex offenses) with mental health diagnoses. This facility could potentially be located on state-owned property, such as Stateville CC.

Health and Behavioral Health Barriers

Compounding the difficulties of reentry is a high prevalence of serious and/or chronic health issues among the formerly incarcerated. No formal, regionalized partnership approach to community service providers currently exists, making it difficult to engage new providers and to ensure that existing providers are appropriately equipped to work with formerly incarcerated individuals. In addition, nontraditional and faith providers have no formal role in this strategy. Therefore, the Commission recommends the following to remove health care barriers for the formerly incarcerated:

Recommendation 1:

CREATE SUPPORTIVE LIVING FACILITIES FOR THOSE WITH MENTAL HEALTH DIAGNOSES

IDOC, the Illinois Department of Public Health, the Department of Human Services, and the Department of Healthcare and Family Services should jointly create supportive living facilities for individuals on parole who have one or more mental health diagnoses. Pool state funding from these agencies to create a request for proposal for 100 units of supportive reentry housing.

Recommendation 2:**BETTER COORDINATE SUPPORT SERVICES FOR THOSE WITH MENTAL HEALTH DIAGNOSES**

To better coordinate support services, use the evidence-based Assertive Community Treatment (ACT) model. The ACT model has been shown to reduce symptoms of mental illness, incarcerations, psychiatric hospitalizations, and homelessness. (See Appendix A for model program, Thresholds AfterCare Program.)

Recommendation 3:**EXPAND GOOD CONDUCT CREDITS**

Amend the Unified Code of Corrections to allow persons incarcerated more than once to be awarded Earned Good Conduct Credit for substance abuse treatment participation even if they have received such credits previously. Substance abuse recovery often involves relapse, and limiting a good conduct credit can unduly block treatment and employment opportunity. With these certificates, individuals can show potential employers that they are good candidates for employment because they are considered rehabilitated.

Recommendation 4:**ESTABLISH THE FORMERLY INCARCERATED AS PRIORITY POPULATIONS FOR MEDICAID**

Revise Illinois' Medicaid plan to establish formerly incarcerated individuals as a priority population, with particular attention to those with mental illness. According to a study Commissioned by the National Institute of Justice, individuals with serious mental illness who had Medicaid on release had 16 percent fewer detentions in one year than those without Medicaid.²⁰

Recommendation 5:**INCREASE ACCESS TO PRIMARY HEALTH CARE**

Encourage IDOC, the Illinois Department of Public Health, and health care associations to develop strategies for increasing access to primary health care, using the DASA/IDOC model, which links DASA-licensed substance abuse treatment providers to individuals needing treatment in the correctional institution and on reentry to the community.

Recommendation 6:**IMPROVE COORDINATION BETWEEN FEDERAL AND STATE AGENCIES WITH A STAKE IN SUBSTANCE ABUSE TREATMENT**

Coordinating services across federal and state agencies will enhance the availability of resources to those with substance abuse issues, and will better use limited state and federal funding.

²⁰ Joseph Morrissey, *Medicaid Benefits and Recidivism of Mentally Ill Persons Released from Jail*. Revised draft. December 8, 2004.

Recommendation 7:

BUILD COMMUNITY CAPACITY TO ADDRESS ONGOING METHAMPHETAMINE AND HEROIN ADDICTION

The rapid rise of methamphetamine use (especially in rural areas of the state, where community capacity is even more limited) and heroin use will likely tax current service providers. More substance abuse services are needed in the communities, with a special focus on treating these two, very different, forms of addiction. It is essential to success that the formerly incarcerated, no matter where they live, have access to substance abuse treatment. Rural and smaller communities are especially lacking in such services.

Recommendation 8:

ALLOW EDUCATION GRANTS FOR THOSE WITH DRUG CONVICTIONS

Education is critical to sustainable advances toward work and active citizenship. The state, therefore, should advocate for the removal of federal stipulations that forbid state or federal education grants for people with drug convictions.

Recommendation 9:

ENSURE PAROLEES IN WORK RELEASE RECEIVE HIV/AIDS MEDICATION

IDOC and IDPH should coordinate efforts to ensure that parolees with HIV/AIDS in work release can receive HIV/AIDS medications and related health care.

Employment Barriers

An immediate barrier that returning individuals frequently confront is the lack of sufficient education or training necessary to obtain gainful employment. Formerly incarcerated individuals, however, are often excluded from educational loans and grants, such as Pell grants, because of their criminal records. Even when trained or educated, formerly incarcerated individuals face barriers to employment because of employers' blanket no-hire policies. Furthermore, although recent legislation has reduced the number of barriers to obtaining gainful employment, many ex-offenders are still barred from professions. Therefore, the Commission recommends the follow to remove education and employment barriers:

Recommendation 1:

EDUCATE INDIVIDUALS ON EXPUNGEMENT, RECORD SEALING, CERTIFICATES, AND WAIVERS

IDOC, the courts, and the Illinois Department of Financial and Professional regulations should educate individuals with criminal records on their rights to apply for expungement, record sealing, certificates, and waivers. These legal procedures can be invaluable in minimizing the stigma associated with a criminal record, especially for employment purposes.

Recommendation 2:

EXPAND THE PROFESSIONS AND OCCUPATIONS COVERED UNDER A CERTIFICATE OF RELIEF FROM DISABILITY

Barriers to 65 occupations remain. Expand the eligibility pool for a Certificate of Relief from Disability, which is currently restricted to first-time offenders.

Recommendation 3:

DEVELOP BEST PRACTICES FOR EMPLOYERS WHEN CONSIDERING JOB APPLICANTS WITH CRIMINAL RECORDS

Establish standards to appropriately interpret criminal records; developing equitable legal standards for background checks; educating employers about these best practice standards for tailoring hiring standards to safety concerns; changing public agencies' administrative policies to allow for the hiring of people with criminal records.

Recommendation 4:

CHANGE HIRING POLICIES FOR THOSE WITH CRIMINAL RECORDS

Advocate for eliminating blanket employment exclusions among private employers. Prohibit business insurance providers from indiscriminately refusing to cover employees with certain types of convictions. Require that they justify their denial of coverage to individuals the company is willing to hire.

Recommendation 5:

INCREASE FAIR AND EQUAL ACCESS TO ENTRY-LEVEL JOBS

Issue an executive order for state agency employment standards related to criminal records that will increase the fair and equal access to entry-level jobs with the state. State agencies should adopt administrative policies to encourage the employment of people with criminal records. The state should also enforce individualized determinations, and offer remedies for individuals denied employment.

Recommendation 6:

RESTORE PELL GRANT ELIGIBILITY

Support efforts to restore federal Pell grant eligibility for inmates and formerly incarcerated individuals, and to include them as a target group for workforce development programs.

Recommendation 7:

CONSIDER EMPLOYER HIRING INCENTIVES

Expanding employer incentives to hire the formerly incarcerated, similar to the federal Work Opportunity Tax Credit, should be considered. Efforts should be coordinated with the Office of Chicago Mayor Richard Daley, which is developing similar strategies.

Also examine the possibility of increasing the amount of the state-guaranteed Fidelity Bond (perhaps to \$50,000) and increasing the length of coverage to one year.

Recommendation 8:
**GIVE PREFERENCE IN STATE CONTRACTS TO FIRMS
HIRING THE FORMERLY INCARCERATED**

Give state contract preferences to firms that hire individuals with criminal backgrounds, perhaps similar to the Illinois Toll Highway Authority’s new point-based request for proposal process in which employers who hire the formerly incarcerated receive additional points. The Earned Credit Program (ECP) is a voluntary program implemented on November 1, 2005, and made possible by a \$5.3 billion Congestion-Relief Plan, to promote the State of Illinois’s employment initiative by encouraging contractors and fabricators to sponsor into applicable unions, employ and retain qualified and eligible disenfranchised people with criminal records, African-Americans and Hispanics, women, and veterans on any construction-related project in the State of Illinois.

Recommendation 9:
**REQUIRE IDOC VENDORS TO HIRE A MINIMUM PERCENTAGE
OF FORMERLY INCARCERATED WORKERS**

Amend all IDOC vendor contracts to require hiring (to some degree) formerly incarcerated. Review model programs in other states, such as Iowa, for guidance.²¹

Recommendation 10:
INCREASE ACCESS TO ENTRY-LEVEL JOBS

Target currently and formerly incarcerated populations with workforce development programs. Target those with criminal records for the state’s Critical Skills Shortage Initiative.

Phase 3—Sustaining Individual Independence

Recommendation 1:
PROVIDE TRAINING GRANTS FOR SMALL ORGANIZATIONS

Offer training for smaller organizations and training through the Work Investment Act (WIA) and TIF-Works for community-based organizations working with the formerly incarcerated. This may include rethinking the state’s strict “fee-for service” reimbursement model. The state should also provide smaller community organizations with training to identify and apply for grant funding, as well as to ensure that funding opportunities match identified need. Training provided for community-based service organizations will enable them to sustain their efforts when local funding sources become limited.

²¹ The Iowa Department of Corrections included language in their contracts with appropriate vendors that mandates the hiring of a set percentage of the formerly incarcerated in their workforce. The Commission is studying this issue and analyzing other related contracting policies in other states as well.

Recommendation 2:**INVEST STATE FUNDING IN SOCIAL ENTREPRENEURSHIP PROGRAMMING**

Social entrepreneurship revolves around the belief that building community capacity can solve many social problems. The social entrepreneurship model promotes reduced reliance on government funding and shifts the focus to social equity or human capital, offering individuals a hand-up rather than a handout. Participants invest in the program through “sweat equity” and build skills that allow them to explore other job opportunities. The state should:

- Replicate California’s Delancey Street model program (see Appendix A) in a high impact Chicago community.
- Develop, in partnership between IDCEO, the U.S. Department of Labor, the Small Business Administration, a sweat equity funding program to enable returning individuals to work for developers, simultaneously learning a trade and earning a place to live.
- Establish transitional jobs programs for offenders soon after their release from prison to ensure they find honest employment as quickly as possible (see Appendix A for a model program).

Recommendation 3:**ADDRESS SOCIAL STIGMA IN PUBLIC AWARENESS CAMPAIGNS**

Address the social stigmas attached to a criminal record by launching community-based public awareness campaigns about the importance of providing a second chance to formerly incarcerated persons who are seeking support to move away from crime and drugs and toward honest work and citizenship. This should include stories about the contributions being made by formerly incarcerated individuals who have returned home successfully.

Recommendation 4:**BREAK GENERATIONAL CYCLE AND SHIFT FOCUS TO “NO ENTRY” AS ULTIMATE GOAL**

To fully realize the state’s public safety agenda, the focus must extend beyond prison and reentry to crime, crime prevention, the courts, sentencing practices, and community capacity. IDOC should develop a “no-entry” Commission, process, and strategy to prevent crime and incarceration. Issues that should be addressed include community capacity, law enforcement, disproportionate minority contact, sentencing laws, and practices. As the state and communities manage the growth of the prison population, those savings should be reinvested in communities.

Conclusion

The recommendations contained in this report are the scaffolding of a new system, a process that guides inmates and the formerly incarcerated through a logical set of experiences, all designed to reduce risk by ensuring that they connect with as many resources as possible. The experience and resources should keep them moving forward along a goal-oriented track that will move them away from crime and drugs and toward honest work and restored citizenship.

A snapshot of this system is one that begins at the prison door with rigorous screening and other information-gathering that identifies the fundamental causes of their criminal behavior. It continues in prison with the establishment of individualized reentry plans, expanded programming, and a new case management system that ensures every day of prison is spent preparing for a successful return home. It continues outside the prison gates with the oversight of a reentry team, which includes community-based partners, coupled with convenient access to a variety of community-based supports. It also recognizes that progress will be limited without developing the community capacity to better support the ongoing success and independence of the formerly incarcerated as restored citizens.

All this, of course, is not accomplished overnight, nor is it accomplished by simply reconfiguring a few services, a few existing components. It requires the state and its communities to commit as partners to a fully redesigned system. Although not an easy task, it is absolutely a necessary one. Just as the prison population did not spring up overnight, the solution to all-too-high recidivism is a process. But as reforms such as the Sheridan Program and Operation Spotlight prove, success need not be elusive.

In an era of tight government budgets, resources are a constant challenge, but the Commission believes that many of the reforms can be implemented with common-sense operational, cultural, and logistical changes to the system as well as through improved partnerships with federal, state, and local authorities and leaders. That said, several pieces of this blueprint will require additional investments. These investments, however, are in programs that have a proven track record (elsewhere and in Illinois) of reducing recidivism (see model programs highlighted in this report). The Commission firmly believes that without investing in model programs to support each stage of the reentry process, the overall effectiveness of the reentry plan will be severely diminished.

This report represents changes that can only occur gradually, over the long-term. It will take time to design the new systems and the operational plans to put them into place. Furthermore, it will take time to identify the resources and staff and to train staff to accomplish the goals. Therefore, the Commission's final recommendation is that the Governor appoint an Implementation Task Force to move this report to the next level, with solid and realistic timelines for the components he endorses, and to ensure that new resources flow through a logical planning process to accomplish priorities established in this report.

Finally, an intense focus on reentry is necessary not only to improve public safety, but because it has trapped so many communities in a vicious cycle that has far-reaching social and economic ramifications. Attacking the source of recidivism will go a long way in relieving the stress on the system, improving the safety of our

communities, and helping families and individuals avoid the devastation that a prison sentence can inflict. Certainly criminals must be held accountable to laws, but that accountability must also be balanced with opportunity to reform.

Unfortunately, there will always be individuals who are a threat to society and should be incarcerated. However, the doubling prison populations, driven mainly by drug-involved arrests, has shown that most crime arises from social conditions, including poverty, lack of opportunity, lack of education, mental health conditions, and other issues. If we are to stem this steady flow into and out of prisons, we must simultaneously work to redirect offenders to successful future lives *and* address the very reasons that spark crime in the first place.

The recommendations outlined here will go far in moving the current population of inmates along a path to success. However, the problems that land a criminal in prison begin well before his or her contact with the justice system. This is an issue that begins and ends with communities, and only through a truly statewide partnership approach will meaningful, sustainable solutions be developed. The best way to prevent crime and recidivism over the long-term is to stop the problem before it starts by investing in schools, in communities, in economic development, in health and social welfare, and in people. This approach is eminently less expensive, and certainly more effective over the long-term. The state has taken a positive initial step by diverting nearly \$150 million slated for two stalled and one nearly vacant prison to forward-thinking investments in areas such as universal preschool and health care for every child. The state must continue to build on these efforts, particularly in the top ten high-impact regions of the state. In the end, the ultimate goal, for any state and any community, should be “no entry.”

appendix A

model programs

Employment and Education Models

Delancey Street Foundation (San Francisco)

Founded in San Francisco in 1971, the Delancey Street Foundation provides a structured living and educational environment for former felons, substance abusers, the homeless, gang members, and individuals with other serious problems. The program operates without professional staff or government funding and at no charge to its clients. The residents of Delancey live and work together, pooling all of their income earned through a variety of business schools. The program philosophy is based on the principle of “each one, teach one” and the belief that people learn best by doing. Residents are expected to help each other by taking responsibility for each other’s welfare and holding each other accountable for achieving the highest possible standards in everything they do. The model requires that all residents take an active part in learning job skills, acquiring an education, and practicing new ways of living.

Components of the program include a chartered college campus to foster higher education, a sweat equity housing program that provides training in the construction trades while remodeling low-income housing units, and over 20 entrepreneurial enterprises run completely by formerly unskilled people. Some examples of these enterprises are a national moving and trucking business, a bookstore, a gallery, private driving and Para transit services, the Crossroads Café, a coffee house, and the award-winning Delancey Street Restaurant. A resident spends an average of 4 years (a minimum stay of 2 years) in the program, acquiring an academic education, three marketable skills, accountability and responsibility, dignity, and integrity. The program has successfully graduated over 15,000 people from America’s underclass into society as successful taxpaying citizens leading productive lives. Headquartered in San Francisco, the Delancey Street Foundation has facilities in New Mexico, North Carolina, New York, and Los Angeles.

Delancey’s accomplishments:

- More than 10,000 formerly illiterate individuals have received high school equivalency degrees.
- More than 1,000 have graduated with a diploma from Delancey’s state accredited postsecondary vocational academy, a three year program taught by Delancey residents.

- 30 students have received an accredited BA from Delancey's chartered college campus with another 20 currently majoring in Delancey's Urban Studies program at San Francisco State University.
- All 31 eligible students have graduated from Delancey Street's four year charter public high school for juvenile justice youths, 80 percent of whom have gone on to college and the other 20 percent into career jobs. This is remarkable, considering that 90 percent entered the school as dropouts.
- Delancey has moved over 10,000 violent gang members away from gangs into active non-violence.
- Over 5,000 Delancey residents have mentored others, teaching non-violence and interracial mediation.
- Delancey is completely self-governed by a Board and resident councils that are one-third African American, one-third Hispanic/American Indian, and one-third Anglo, representing the make-up of Delancey's population. Women comprise about 25 percent of the population and about 30-40 percent of the management.
- Through complete sweat equity, Delancey has built and/or remodeled over 1500 units of very low income housing, training over 800 people in the building trades.
- Delancey has moved over 2,000 homeless people into permanent housing.
- Delancey's high school students renovated their own school, expanding it from 8,000 square feet into 24,000 square feet.
- Delancey developed and built its award winning 400,000 square foot San Francisco headquarters, the largest self-developed, self-built, self-managed complex in the country.
- Delancey has pooled its resources so that its enterprises have provided about 60 percent of the funding and growth of the organization.

Sources: <http://www.grass-roots.org/usa/delancey.shtml>
<http://www.eisenhowerfoundation.org/grassroots/delancey/replication.htm>

Center for Employment Opportunities Transitional Jobs Model (New York)

The Center for Employment Opportunities (CEO) in New York City offers a highly structured, job-focused “second chance” to formerly incarcerated individuals to help them manage their reentry into the workforce and society. The program begins at the critical stage immediately after release and consists of three distinct components: rigorous pre-employment training workshops, participation in the Neighborhood Work Program, and the Vocational Development Program.

Neighborhood Work Program

The Neighborhood Work Program (NWP) provides short-term, minimum-wage employment for participants so they are able to receive a paycheck while participating in the Vocational Development Program. NWP work crews perform

maintenance, repair, and sanitation jobs for dozens of government facilities in the New York City area. NWP currently coordinates 35-40 work crews with 5-7 members each. Examples of tasks handled by NWP crews include:

- Preparing and painting walls in hundreds of dormitories and classrooms throughout the City University system
- Polishing floors, emptying trash, and dusting office furniture in courthouses in all five boroughs
- Clearing debris from construction sites, airports, and highways
- Graffiti removal, light demolition, and maintenance of city-owned housing.

Vocational Development Program

After working with the NWP for at least a week, CEO participants meet with a Vocational Development Program (VDP) employment specialist to develop an employment plan. VDP services include:

- In-depth vocational assessment
- One-on-one job counseling
- Placement in appropriate jobs
- Intensive follow-up services with employers

Each participant at CEO is assigned a personal Job Coach to guide him/her from transitional to permanent employment and to improve his/her post-placement outcomes by evaluating and improving the participant's resume, interview skills, and other professional skills. The Job Coach also maintains daily contact with crew supervisors, sharing information about the participant's progress and needs for improvement. Support continues through the first year of permanent employment.

CEO places 60 percent of its graduates in full-time jobs within three months of completing the program. All CEO graduates have enough work experience to qualify for starting pay above minimum wage. Participants earn \$8.00 per hour on average at first placement with some earning up to \$15.00 per hour, depending on experience and skill level. CEO has assisted thousands of men and women are making a crucial first step toward staying out of prison and returning to their families and communities.

Source: www.ceoworks.org/ceo.model.htm

Illinois Employment and Education Models

The Enterprising Kitchen (Chicago)

The Enterprising Kitchen (TEK) is a Chicago-based company that manufactures and markets natural specialty soap products. It is an intensive, but individually oriented workforce development program that targets women who have challenging personal histories, including substance abuse, homelessness, or a criminal record and provides them with an opportunity to achieve self-sufficiency and economic independence through job and life skills training, paid employment and access to support services. Revenues generated through product sales help sustain the workforce development program and enable participants to benefit from a wide range of onsite resources and activities.

Employees learn all aspects of the soap making business, including production, packaging, and shipping. Individuals work 25 hours per week, earn minimum wage, and spend at least six months learning each phase of the manufacturing process. Once acquired, these skills can be transferred to other manufacturing environments at higher wages. Women at TEK also learn life skills that help them manage their lives outside the workplace.

Business has grown 50 percent since the company's inception, and sales are expected to top \$350,000 this year. About 70 percent of the women who work at The Enterprising Kitchen are employed for at least a year after leaving the program. Others have gone on to continue their education and training and have obtained better jobs in the community.

Sweet Beginnings Transitional Jobs Initiative (Chicago)

Sweet Beginnings Transitional Jobs Initiative, in the Lawndale community of Chicago, is another social entrepreneurship model program. It was piloted in 2003 through a start-up grant from the Illinois Department of Corrections to the North Lawndale Employment Network (NLEN). The initiative was piloted to address the employment needs of formerly incarcerated individuals and to promote community development. The project trains nonviolent returning individuals in all aspects of the honey production business, including beekeeping, landscaping, food processing, retail sales, and distribution. Sweet Beginnings employees are enrolled in NLEN's U-Turn Permitted program prior to interviewing for a position. U-Turn Permitted training provides pre-employment skills training, including intake assessments, case management, drug testing, mental health treatment, substance abuse treatment, anger management, assistance securing state identification cards, peer counseling, basic skills, résumé preparation and interviewing skills, financial education, job placement, occupational skills training, post-placement and retention support, and transportation subsidies. Individuals earn minimum wage during the first year of employment. After acquiring necessary skills and building a core business in the second year, employees are expected to find permanent employment in the community or to start their own business.

Currently in its second year of operations, the program maintains 50 beehives and employs 15 formerly incarcerated individuals. Employees work 30 hours a week and earn between \$8.00 and \$10.00 an hour, depending on the position and experience. Last year, the program generated \$29,600 in sales at local Farmers Markets.

Housing Program Models

St. Leonard's Ministries (Chicago)

St. Leonard's Ministries in Chicago has been serving people with criminal records, individuals with substance abuse issues, physically disabled individuals, developmentally impaired individuals, homeless persons, and persons with HIV/AIDS for over 50 years. SLM serves over 300 men and women with criminal backgrounds each year. 96 percent of these program participants have lingering substance abuse problems; 88 percent complete intensive substance abuse programs prior to leaving SLM sites; 84 of participants have been imprisoned more than once; and, while recidivism rates for individuals leaving Illinois prisons are at record highs, they are dramatically lower for SLM program participants at approximately 20 percent.

SLM provides two emergency/interim housing facilities: St. Leonard's House, with units for 40 men, and Grace House, with units for 18 women. SLM also provides second-stage housing and supportive services for men who have completed the St. Leonard's House program at St. Andrew's Court, with 42 single room occupancy units.

Participants at St. Leonard's House, St. Andrew's Court, and Grace House are provided with residential and case management services needed to begin the process of rebuilding their lives. Services provided through the Adler School of Professional Psychology are a core component. Community resources are used for substance abuse treatment, medical/mental health referrals, and other rehabilitative opportunities.

Education

Literacy assessment is available for those who want to further their reading and writing skills. St. Leonard's Adult High School is for adults ages 21 and older. It is an accelerated, single-semester equivalent to the senior year of high school. Graduates earn a high school diploma endorsed by Regina Dominican High School in Wilmette, Illinois. Introductory college courses will be offered in the fall of 2005.

Training and Employment

St. Leonard's House has developed the Michael Barlow Center (MBC) to provide education, training, and job placement for SLM participants through collaborations with a variety of community organizations. This new three-story employment center is by far the largest employment center at any residential housing facility serving this population and is the only onsite, stand-alone facility of its kind. The Employment Project provides individuals at the MBC the soft skills critical to succeeding in today's workplace through a four-week, 50-hour employment preparation training program.

In collaboration with the Inspiration Corporation, the Jane Adams Resource Center, and the Local Economic and Employment Development Council, the MBC offers training in food service handling, light manufacturing/machining, and building maintenance. Training is presented in modules of several weeks, providing entry-level skills to participants and reintroducing them into the workforce as quickly as possible.

Job seekers who have completed education or training programs are placed into jobs through a relationship with an MBC job developer. The job developer meets with participants and assesses their skills for appropriate job referrals.

Transitional job opportunities that offer residents current work references and enhanced resumes are also offered to residents at St. Leonard's House through the MBC. Additionally, Sheltered Care Employment Opportunities are made available for residents who cannot enter the mainstream job market because of mental or physical challenges.

Treatment for Individuals Convicted of Sex Offenses

In addition to its ideal location, St. Leonard's is the *only* provider in the entire State that provides ongoing treatment and counseling services for individuals convicted of sex offenses at no cost to its residents. While some transitional housing providers will fund an initial assessment, nearly all sex offense treatment in the State is "self-pay." Additionally, sex offense treatment is offered onsite at St. Leonard's facilities, setting it apart of every other facility housing individuals convicted of sex offenses in the State.

Financing

Development cost: \$3,612,371

Cost per unit: \$86,009

Total permanent financing: \$1,544,638

St. Leonard's costs approximately \$18,000 to \$20,000 per participant compared to incarceration costs of \$25,000 to \$30,000 annually.

Major sources of funding were the Illinois Housing Development Authority, the City of Chicago's Department of Housing, and several Chicago area foundations.

Source: www.slministries.org

A Safe Haven (Chicago)

Since 1995, A Safe Haven (ASH) has provided extended care licensed recovery home services for men and women in early recovery from drug and alcohol abuse in Chicago and the southern suburbs. ASH is presently the largest provider of recovery home services in the state of Illinois. ASH aims to provide a continuum of care through partnership agreements for the provision of support services with the Department of Children and Family Services, the Division of Alcoholism and Substance Abuse (DHS/DASA), the City of Chicago Department of Public Health, the Chicago Housing Authority, the Cook County Drug Courts, IDOC, and Treatment Alternatives for Safe Communities.

Health and Behavioral Health Models

AIDS Foundation of Chicago’s Community Reentry Program for HIV-Positive Former Inmates

Building on a successful, federally funded program, the AIDS Foundation of Chicago’s (AFC’s) Community Reentry Program for HIV-Positive Former Inmates facilitates the transition of incarcerated individuals living with HIV/AIDS from incarceration to healthy living in the community through a comprehensive system of intensive case management. The program provides community-based housing services, mental health and substance abuse treatment, job readiness training and placement, and comprehensive medical care. Once clients have succeeded in establishing a stable living arrangement in the community, they are transitioned into regular case management services. Program partners include the City of Chicago’s Department of Public Health and a variety of faith-based and community service providers.

Thresholds Psychiatric Rehabilitation Centers Jail Program (Chicago)

The Illinois Division of Mental Health funds Thresholds’ Jail Program. Thresholds has partnered with the Illinois court system and uses an assertive community treatment (ACT) approach, a research-based model for case management, to work with chronically incarcerated non-violent individuals who have severe and persistent mental illness. Clients are engaged before they are released from jail. Thresholds’ personal and intensive case management program employs a team of outreach workers for home visits seven days a week, including holidays, for as long as the client needs help. Thresholds secures housing, medication, and identification for clients upon release.

Key elements of the Assertive Community Treatment model:

- A team of practitioners provides services so consumers can access a variety of services from the same group of people.
- Services are available whenever and wherever they are needed. Teams work with people in community settings and are available 24 hours a day.
- There are no time limits on how long someone can receive services. Services are provided for as long as they are wanted and needed.

Winners’ Circle (Illinois)

The Winners’ Circle is a national program, funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), that provides weekly peer-led support groups designed to address the special needs of returning individuals recovering from substance abuse. Individuals who have participated in intensive substance abuse treatment gather to remain sober and crime-free and support one another in these goals by practicing the tools of the therapeutic community. The weekly group meetings aid in the ongoing

recovery process by helping individuals create a safe environment in which to develop healthy, productive lifestyles, expand their network of recovering associates, and address the problems that previously led to criminal activities. Currently, there are more than 100 active members in the 12 groups that meet in five cities across the State of Illinois.

Family/Community Models

La Bodega de la Familia (New York)

From a storefront on the Lower East Side's Loisaida community, La Bodega de la Familia works in partnership with New York State Parole and New York City probation officers to improve community justice supervision outcomes by tapping the natural support of families. Serving over 1000 families, La Bodega's bilingual staff provides three core services:

- Family Case Management, practiced through Family Justice's Bodega Model, for families with a loved one involved with the criminal justice system, struggling with addiction or drug abuse, mental illness, or both.
- 24-hour support for families experiencing a drug or family related emergency.
- Walk-in and prevention services for all neighborhood residents.

La Bodega de la Familia's partnership with law enforcement has earned a place among five national winners for the prestigious Innovations in the American Government Award honoring imaginative and effective programs that meet urgent economic and social challenges.

In an effort to further distill and refine the Bodega Model and apply it to work beyond the Lower East Side, La Bodega continues to research, plan, and implement program enhancements.

Working with New York City Housing Authority—La Bodega is setting up a satellite office in the neighborhood in a designated senior building. This will provide easier access to support seniors and their families living in public housing who have a loved one under community justice supervision or have a loved one at risk due to addiction, drug use, or mental illness.

The Voices of the Youth Project—Funded by the William T. Grant Foundation, this project was designed to engage youth in a creative project of their own design and, through this process, to expand La Bodega's family case management work to include perspectives of youth. This information helps to develop clinical tools that ultimately enhance the Bodega Model.

The Elderly Initiative—With the support of the Fan Fox and Leslie R. Samuels Foundation, La Bodega is engaging the elderly in the design, implementation, and development of new components of the Bodega Model oriented to senior citizens.

The Mental Illness Project—This project, supported by The Jacob and Valeria Langeloth Foundation, is designed to provide La Bodega with the knowledge and tools to explore how its family-focused case management approach can best respond to the special needs

of those who are struggling with mental illness and involved in the criminal justice system, including persons under community-based supervision who are dually diagnosed.

Family Focused Employment Initiative—As a family focused service, La Bodega has the unique opportunity to develop strategies to assist returning individuals, individuals on probation, and their families to secure and maintain employment.

The Bridge Program—Supported by the Florence V. Burden Foundation, this initiative provides La Bodega families a transitional phase from La Bodega’s intensive family case management service. The Bridge Program helps sustain the gains made by intensive family case management and provides opportunities to develop peer support and neighborhood leadership.

Amachi (Philadelphia)

The Amachi program began in Philadelphia in January 2000. A West African word, Amachi means “who knows but what God has brought us through this child.” Recognizing that an estimated 20,000 children in Philadelphia have parents who are incarcerated, the Amachi program was developed to provide support to these at-risk children by providing them with caring adult mentors. Amachi has three types of mentoring programs: community-based one-on-one mentoring, school-based one-on-one mentoring, and church-based one-on-one mentoring. The program is organized around clusters of ten congregations, each of which is given a stipend. As part of a performance-based agreement, each participating congregation must maintain at least ten active mentors. To maintain the full stipend, each congregation is required to submit data collection forms in a timely manner. Public/Private Ventures staff provides data collection, reporting, and management services, which allow program managers to assess the congregations’ activities and monitor the mentoring matches.

The Amachi model for pairing adults and children begins in the congregations where volunteer mentors are recruited. Volunteers are screened by Big Brothers Big Sisters of America (BBBSA) in order to ensure that they are suitable to participate in the program. BBBSA also provides training in appropriate and effective mentoring techniques, with a focus on developmental approaches that allow children to establish trust in their mentors. Children are recruited by Amachi and by the congregations through prison-based outreach, community-based outreach, and the individual congregations. BBBSA case management and church coordinators supervise the matching of mentors and children.

The primary goals of Amachi are to provide a support network to at-risk children whose parents have been incarcerated. Amachi is a partnership between secular and faith-based institutions, including 71 congregations (50 in Philadelphia, 10 in Chester, and 11 in New York), Public/Private Ventures (a social policy think tank), Big Brothers Big Sisters of Southwestern Pennsylvania, and the Center for Research on Religion and Urban Civil Society at the University of Pennsylvania. Due to increased exposure of Amachi, the program is expanding to other cities and states.

Since the inception of the Amachi program, over 600 matches have been made, with 75 percent remaining active as of April 2003. Many of the matches have been active for more than 18 months. Activity reports from the mentors indicate that, on average, they spend more than nine hours per month with the children and have

four hours of telephone contact per month. More rigorous evaluations measuring the value and the impact of the Amachi program will be conducted within the year.

The Rhode Island Family Life Center

The Rhode Island Family Life Center (FLC) is a non-profit organization whose purpose is to support and advocate for the reintegration of returning individuals into their communities. The organization's goals are to:

- Stabilize returning individuals so they are less likely to recidivate.
- Strengthen families to help returning individuals reintegrate and reconnect with their loved ones.
- Remove barriers to reintegration for returning individuals.

The Family Life Center's reentry program uses a holistic, family-based approach to support individuals as they prepare to leave prison, return home, and stabilize in their communities. The FLC begins to work with clients while they are still incarcerated and then offers a one-stop center for them (and their families) as they reintegrate into their communities. The Family Life Center's Reentry Case Management program works with individuals at least six months prior to release to establish an individualized plan for transitioning back into the community. Community Life Counselors coordinate employment, housing, substance abuse treatment and a variety of other services depending on each individual's needs and strengths. Since April 2003, CLCs have been meeting with more than 130 individuals both in each of the State's eight prison facilities and in communities. For evaluation purposes, CLCs use a custom, open source database developed by the FLC to record case notes, service plans, risk and need assessments, and appointment outcomes.

Illinois Family/Community Models

Chicago Ready4Work Model

The Safer Foundation's Ready4Work (R4W) faith-based initiative has been recognized by the U.S. Department of Labor as one of the most successful models in the nation. This program provides resources and technical assistance to Chicago's faith-based organizations (fbos) and facilitates a partnership between the fbos and the Safer Foundation aimed at providing supportive programming to young men and women during their transition from prison. Mentors from the faith community and Reentry Counselors from the Safer Foundation are the anchors of this support.

Mentoring Component

Each faith partner facilitates small group mentoring, with faith-based mentors providing consistent bi-weekly group mentoring via a 2:4 mentor to mentee group structure. The faith partners recruit and select mentors. Safer provides background screening, training, and mentoring supports.

Supportive Services

Reentry Counselors assist participants with resolving barriers to successful reentry, including the identification and leveraging of resources to assist in the transition. Critical areas include assistance with housing arrangements and resource arrangements for substance abuse treatment, healthcare treatment, mental health treatment, and legal assistance.

Employment/Retention Component

Safer provides each participant with a full range of employment/retention services, including assisting participants acquire basic employability and life skills, as well as training and employment opportunities.

Networking, Partnering, and Collaboration

The R4W Program is a unique partnership among several different organizations:

- Public/Private Ventures, a national non-profit intermediary organization, is providing the financial support for the first three years of Ready4Work. As part of P/PV's national Ready4Work demonstration, Safer is one of several sites across the country receiving technical assistance, resources, and research and evaluation. P/PV's funding has been leveraged from the U.S. Department of Labor's Center for Faith-Based Initiatives, the U.S. Department of Justice, the Annie E. Casey Foundation, and other private foundations.
- Safer Foundation is a non-profit organization established in Illinois in 1972, and is the largest and oldest provider of services to people with criminal records in the United States.
- Saint Sabina is an African-American Catholic Church, with a membership of 2,000. The church provides services to the community through its St. Sabina Academy (pre-K to 8th grade), the ARK community youth center, the Social Services Center, and the Employment Resource Center. Target Communities: West Englewood and Auburn Gresham.
- People's Church of the Harvest is a Christian Resource Facility that links resources and people together to improve the community. The church has a membership of 400 people. The church provides day care before and after school, has a monthly food and clothing giveaway, offers GED classes to adults, and runs a job placement program. Target Community: North Lawndale.
- Ambassadors for Christ is a non-denominational, community-based church with 800 members and a focus on community organizing (Target) and the provision of family resources (food, clothing, and emergency assistance). Through its community organizing, this fbo has successfully advocated for the removal of legislative barriers that impede employment options for those with felony convictions. Target Communities: Englewood and Auburn Gresham.
- Trinity United Church of Christ is an African-American United Church of Christ with 12,000 members that offers services around HIV/AIDS, substance abuse, housing, domestic violence, prison, prison correspondence, reentry, legal issues, social justice, African education, and employment, as well as over 30 other ministries. Target Community: Auburn Gresham.

Every Block a Village (Chicago's Austin Neighborhood)

Every Block a Village (EBV), a model that has been developed by the Westside Health Authority in Austin, is a network of over one hundred blocks. Each month, a citizen leader from each EBV block meets to plan relationship building activities and/or to learn about City or State plans for their neighborhood. Since 1995, citizen leaders have been empowered to approach neighborhood youth to divert them from anti-social behavior, such as acting as lookouts for drug dealers. Leaders have raised money for summer camps, taught young mothers sewing skills while mentoring them, organized community baby showers to build relationships with young parents, and conducted prayer vigils in playgrounds.

Public Safety Models

Weed and Seed

Weed and Seed supports capacity building to enhance public safety by improving community policing to “weed” out crime and to “seed” the community with support and infrastructure to prevent crime. Representatives from each law enforcement entity, including local police, parole, sheriff's office, state's attorney, DEA, and the U.S. attorney's office, and community agencies attend monthly meetings in the community, convened by a law enforcement entity and a lead community agency to strategize on crime prevention activities. Representatives include mental health and drug treatment agencies, sports associations, schools, social service providers, and faith- and community-based organizations. Activities have included organizing community drug courts and peer juries. In particular, Weed and Seed may be a smart and politically balanced approach to community capacity building with public safety as the top priority. The state should use the Weed and Seed model, which supports capacity building to enhance public safety by using targeted law enforcement (i.e. parole compliance checks), to “weed” out crime while simultaneously “seeding” the community with support and infrastructure to increase and enhance job, housing, and treatment opportunities.

Project Safe Neighborhoods (Chicago)

Project Safe Neighborhoods (PSN) seeks to disrupt gang crime and the use of guns on Chicago streets through routine police intervention. As a pilot demonstration project, PSN combines several law enforcement entities to deter formerly incarcerated persons from using a weapon. Returning individuals are brought before a panel that includes parole, police, U.S. Attorney, and other law enforcement entities upon their release. The panel uses “scare” tactics to emphasize the severity of the law in punishing formerly incarcerated individuals who are caught with a gun or bullet, including mandatory sentencing and longer prison terms, usually at a distant federal prison. Several reports credit this project for reducing recidivism related to firearm violations on Chicago's west side.

CeaseFire

CeaseFire is a community-based initiative that focuses on reducing violent crime. CeaseFire unites law enforcement entities with community groups to influence the street behaviors of suspected drug dealers to discontinue criminal behaviors. Community workers conduct outreach on the streets with suspected drug dealers and provide assistance in finding employment and other supports as an alternative to criminal behavior.

Amer-I-Can

Amer-I-Can is a gang prevention program that works with schools and law enforcement to prevent gang violence and other crime. Gang members are provided with support and guidance to complete schools and conform to laws.

National Initiatives

Public Safety Ex-Offender Self-Sufficiency Act

The Public Safety Ex-Offender Self-Sufficiency Act, introduced by Congressman Danny Davis, is aimed at reducing the recidivism rate and improving public safety in Illinois by providing transitional housing for formerly incarcerated individuals as they return home. It uses creative financing strategies similar to the Low-Income Housing Tax Credit.

How the Public Safety Program Works

The proposed legislation will amend the Internal Revenue Code of 1986 to provide for a temporary low-income housing credit for returning individuals. Tax credits will be allocated through a competitive process to States, local jurisdictions, developers, and nonprofit organizations to receive capital subsidies to develop transitional housing for individuals with convictions. Annual tax credits will be allocated to states (a minimum of \$500,000) based on the number of individuals being released from prison each year. States in turn will allocate the credits to individual projects, and investors can take the credits against their income taxes.

Program Components

Eligible projects will develop structured living arrangements that provide transitional housing for a maximum of two years and include mandatory on-site delivery of an array of supportive services, including drug and alcohol addiction counseling, job training, health/mental health services, and probation services, to facilitate successful reentry. Other services will include screening, case management, and needs assessment. An individual contract will be developed for each resident specific to his/her needs. Residents will be required to pay no more than 30% of their income in rent.

Eligibility Criteria

To be eligible, an individual must:

- Have a low income, defined as 60% of area median income;

- Have been released from a correctional facility within the last 12 months upon entering the program (or must have been convicted within 12 months if sentencing did not result in incarceration); and
- Have a felony conviction.

Developers must hold the facilities for at least 15 years. Participating corporations will get the benefit of their investment back within a 10-year period in the form of tax credits. The bill calls for the development of 100,000 units over the next 5 years. The bill is designed to give the private sector an incentive to provide formerly incarcerated individuals with stable housing, thereby removing one of the greatest barriers to successful reentry into the community.

Sources: www.hirenetwork.org
www.house.gov/davis/offender.htm
<http://www.november.org/parole/Proposals/HR-2166.html>

Midwest Re-Entry Housing Initiative

What Is the Midwest Re-Entry Housing Initiative?

Public and non-profit agencies from the states of Iowa, Illinois, Michigan, Minnesota, and Ohio will collaborate to create 500 units of affordable, service-supported, community-based housing for individuals released from correctional settings or criminal justice custody. The housing, both new development and access of existing units, will be placed in service or in development over a three-year period, January 2006 to December 2008.

Why This Initiative?

- Individuals released from prison or jail, particularly those living with chronic health challenges, are at high risk of homelessness.
- Homelessness among formerly incarcerated individuals increases their likelihood of recidivism.
- Research demonstrates that access to service-supported, affordable housing helps end the cycle of homelessness and incarceration.
- A formerly incarcerated individual with access to safe, affordable housing is much less likely to re-offend, resulting in improved public safety.
- This initiative will help achieve the goals of state and local plans to end long-term homelessness and complement existing re-entry initiatives.
- More than ever, in these times of severe budget constraints, federal, state and local governments need to use scarce public funding in the most cost-effective manner.

Goals of the Midwest Re-Entry Housing Initiative

1. Create 500 units of re-entry supportive housing—affordable rental housing linked to supportive services—for individuals released from correctional settings or criminal justice custody who are at risk of homelessness.
2. Demonstrate the effectiveness of re-entry supportive housing in preventing homelessness and reducing reincarceration and victimization.

3. Measure the financial cost and benefit to public systems when providing supportive housing as a post-release option for individuals at risk of homelessness.

Target Population

- Individuals being released from correctional settings or criminal justice custody
AND
- At risk* of becoming homeless upon release due to lack of viable housing options
AND
- Who have chronic health problems, such as mental illness or chemical dependency, that increase their risk of experiencing homelessness and/or re-offending.

** Individuals returning to the community are considered at risk of homelessness if the individual is leaving with no defined mailing address, was homeless prior to incarceration, or has no identified means of financial support upon release and there is little or no evidence of family support.*

Who Are the Members of the Initiative's Planning Team?

- State agencies in Iowa, Illinois, Michigan, Minnesota, and Ohio (lead agencies TBD)
- Community Corrections Improvement Association of Iowa
- The Corporation for Supportive Housing with offices in Illinois, Michigan, Minnesota, and Ohio
- One or more evaluation entities (TBD)
- Others as needed for advice and technical assistance, initially including:
 - > RS Eden, a Minnesota supportive housing developer with experience in serving formerly incarcerated individuals
 - > Safer Foundation, an Illinois non-profit with experience in serving formerly incarcerated individuals

How Will the Initiative Be Organized?

- Each participating state will assemble its own planning team to coordinate its reentry housing efforts across multiple agencies within their state (housing, criminal justice, human services, housing, and service providers).
- A regional implementation team, consisting of representatives from each of the five state teams, will work together to achieve the goals of the initiative. Participants will draft and sign a Memorandum of Agreement. Over the three-year period, this team will:
 - > Monitor progress and report back to funders.
 - > Share best practices and address common issues.
 - > Oversee documentation and dissemination of outcomes.

- The Corporation for Supportive Housing will provide staff support and technical assistance to the initiative (staffing level will depend on funding available).
- The participating states will undertake joint and/or coordinated advocacy efforts to secure increased financial resources, both public and private, for reentry housing operations and services.
- Each state will use such federal funding to leverage local public and private investments.
- Each state will choose the most appropriate method to administer this initiative.

President's Prisoner Re-entry Initiative

Presidential Action

In his State of the Union Address, President Bush proposed a four-year, \$300 million initiative to reduce recidivism and the societal costs of reincarceration by helping returning individuals find work in their communities. The President's initiative, contained in his fiscal year 2005 budget, will harness the resources and experience of faith-based and community organizations (FBCOs) in helping returning individuals contribute to society.

Background

Studies show that approximately two-thirds of returning individuals are rearrested within three years of release, and the costs to the communities (particularly urban communities) of these crimes are large. This year, more than 600,000 adults will complete their sentences and be released. To help these individuals stay away from crime, a substantial number of faith-based and community leaders have created resourceful programs. Working with business and service providers, these organizations provide job training, housing options, and transitional services that help returning individuals contribute to their communities.

Program Specifics

Working together, the Department of Labor (DOL), the Department of Housing and Urban Development (HUD), and the Department of Justice (DOJ) will help returning individuals find and keep employment, obtain transitional housing, and receive mentoring—the three key requirements for successful reentry.

Employment

FBCOs will offer job training and job placement services in coordination with business and other employment providers.

Transitional housing

Grants will be available to organizations providing housing services or vouchers to individuals to partially subsidize transitional housing.

Mentoring

FBCOs will provide post-release mentoring and other services essential to reintegrating individuals in coordination with the corrections, parole, and probation structure. This proposal will expand on elements of the Ready4Work pilot project now underway at DOL (See above, community models).

Grant in Illinois

The Safer Foundation in Chicago was awarded a \$663,746 grant as part of the President's Prisoner Re-Entry Initiative.

Source: <http://www.dol.gov/cfbc/reentryfactsheet.htm>

appendix B

Governor's Community Safety and Reentry Commission Members

Co-Chairs:

Reverend Jesse Jackson, Operation Push

Kevin Lyons, State's Attorney, County of Peoria

Co-Facilitators:

Dr. Carol Adams, Secretary, Illinois Department of Human Services

Deanne Benos, Assistant Director, Illinois Department of Corrections

Appointed Members:

Danny K. Davis, United States Congressman, 7th District

Constance A. Howard, Illinois State Representative, 34th District

Karen Yarbrough, Illinois State Representative, 7th District

Jacqueline Y. Collins, Illinois State Senator, 16th District

Kwame Raoul, Illinois State Senator, 13th District

Peter J. Roskam, Illinois State Senator, 48th District

James T. Meeks, Illinois State Senator, 15th District

Monique D. Davis, Illinois State Representative, 27th District

Lovana Jones, Illinois State Representative, 26th District (*deceased 2006*)

Milton Patterson, Illinois State Representative, 32nd District

Patricia Avery, Executive Director, Champaign Urbana Area Project

Reverend Byron Brazier, Church Administrator, Apostolic Church of God

Mark Ishaug, CEO, AIDS Foundation of Chicago

Tracye Smith Miles, President, Chicago Minority Business Development Council

Herman Brewer, Director, Chicago Working Group, MacArthur Foundation

Ricardo Millett, President, Woods Fund of Chicago

Roberto Ramirez, CEO, Tidy International

Elmer W. Johnson, Jenner & Block

Bobbie L. Steele, Cook County Commissioner, 2nd District

Haki Madhubuti, Author & Founder, Third World Press

Governor's Staff:

Robin Olsen, Senior Policy Development Advisor

Joyce Probst, Senior Policy Development Advisor

Ginger Ostro, Policy Director, Office of Management and Budget

appendix C

Governor's Community Safety and Reentry Commission Biographies

Reverend Jesse Jackson

Reverend Jesse Jackson was born in Greenville, South Carolina. He graduated from the public schools in Greenville, and then enrolled in the University of Illinois on a football scholarship. He later transferred to North Carolina A&T State University and graduated in 1964. He began his theological studies at the Chicago Theological Seminary, but deferred his studies when he began working full-time in the Civil Right Movement. Reverend Jackson received his earned Master of Divinity Degree in 2000. Reverend Jackson is Founder and President of the Rainbow/PUSH Coalition, Inc. and is one of America's foremost civil rights, religious and political figures. Over the past forty years he has played a pivotal role in virtually every movement for empowerment, peace, civil rights, gender equality and economic and social justice. Reverend Jackson has received more than 40 honorary doctorate degrees, and frequently lectures at major colleges and universities including Howard, Yale Princeton, Morehouse, Harvard, Columbia Stanford and Hampton. On August 9, 2000, President Bill Clinton awarded Reverend Jackson and other distinguished notables the Presidential Medal of Freedom, the nation's highest civilian honor. The Presidential Medal typifies a life of service and concern for the least fortunate.

Kevin Lyons, Peoria County State's Attorney

Kevin Lyons was born in Peoria, Illinois. He received his Doctor of Jurisprudence law degree in 1981 from Drake University Law School where he served as clerk to the Attorney General of Iowa, writing appellate briefs for the Iowa Supreme Court. He was engaged in private practice and served as assistant public defender until 1988, when he was elected Peoria County State's Attorney. He has been re-elected in 1992, 1996, 2000 and 2004. He has served as a village board member and for ten years served as a member and school board president of District #265. He has also served as chairman of the Illinois State Bar Association's Committee on Prisons and is past chair of the ISBA Criminal Justice Council. Lyons is past president of the Illinois State's Attorneys Association and is a member of the Board of Governors of the State's Attorneys Appellate Prosecutor. He serves as the Illinois delegate on the Board of Director for the Nations District Attorney's in Capitol Litigation, the nation's largest group of death penalty prosecutors. Lyons is a frequent lecturer throughout the country for the National College of District Attorneys and the National District Attorney's Association. He is licensed to practice law in Illinois, the United States District Court and the United States Court of Appeals. Lyons is a member of the Peoria County and Illinois State Bar Associations, and the American Bar Association

Secretary Carol Adams, Ph.D.

Dr. Adams was appointed Secretary of the Illinois Department of Human Services by Governor Rod R. Blagojevich in February 2003. She is a career public servant and public policy innovator who has, for more than 25 years, made substantial contributions to human services, community development, sociological research and African American education and culture. Dr. Adams has had an extensive career history including Executive Director of Northeastern Illinois University's undergraduate and graduate Center for Inner City Studies, Director of the Resident Services Division at Chicago Housing Authority, and Director of the Department of African American Studies at Loyola University. Dr. Adams has consulted for numerous, federal, state and city agencies and institutions. Dr. Adams is affiliated with ETA Creative Arts Foundation, Chicago Project for Violence Prevention, the A. Phillip Randolph Pullman Porters Museum, the Bronzeville Arts Trust and the Harold Washington Research and Policy Institute. She has been the recipient of numerous awards and honors. Educated at Fisk University, Boston University, the University of Chicago and The Union Graduate School where she earned a Doctorate of Philosophy, Dr. Adams holds the prestigious Phi Beta Kappa key.

Deanne E. Benos

Ms. Benos was appointed by Governor Rod R. Blagojevich as the first woman to serve as the Assistant Director of the Illinois Department of Corrections in November 2003. While providing the second tier of agency management support to the Director, she has primarily been charged by the Governor with developing management solutions that improve community safety through addressing the state's recidivism rates. Key initiatives managed out of the Office of the Assistant Director are the Governor's Sheridan National Model Drug Prison & Reentry Program and "Operation Spotlight" Parole Reform Plan. Both initiatives place a greater emphasis than ever before on community supervision, capacity-building and partnerships as a method of reducing crime in high impact areas. Prior to her current position, Ms. Benos served as the Policy Director to Governor Blagojevich. She began working with the State of Illinois after serving as the Associate Director for Crime & Gun Safety of the White House Domestic Policy Council under President Bill Clinton. She is a graduate of Northwestern University.

Patricia Avery

Patricia Avery is currently the Executive Director of the Champaign-Urbana Area Project, a nonprofit organization providing juvenile delinquency prevention programs and services to low income urban youth, their families and communities. She has served 4 years as Champaign County Board Chair, Champaign County Consorting Policy Chair, and Chair of Rape Crisis Center and has participated in many other community organizations such as Champaign County Juvenile Delinquency Board, Don Moyer Boys and Girls Club, Best Interest of Children Board, Young Women's Christian Association Board of Directors, Lincoln's Challenge Academy State Advisory Board and Founder and Coordinator Mentoring Young Sisters Program for Girls. Ms Avery has also received many awards such as the City of Urbana MLK Outstanding Achievement Award, Green Meadows Girl Scouts "No Stopping Us Now" Award, NAACP Outstanding Community Service Award, Gerrie Parr Distinguished Democrat Award, National Council of African American Men Outstanding Community Service Award and numerous other certificates and recognition for her work in civil rights, education, and women and children causes. Ms. Avery has an A.A.S. from Parkland College.

Byron Brazier

Dr. Byron Brazier is an ordained minister and Assistant Pastor of the Apostolic Church of God as well as the General Administrator and board member for the church. Prior to joining the staff of the Apostolic Church of God, Dr. Brazier held the following positions: President of Brazier & Associates; Chief Information Officer for the Chicago Housing Authority, and Executive for IBM Corporation. Dr. Brazier also holds multiple positions within the community: Vice Chairman of the African-American Leadership Partnership, Board member of McCormick Theological Seminary, Board Member of the Merit Board of the Cook County Sheriff's Department, Board Member of the Olive Branch Mission, and Board Member of the Woodlawn Preservation and Investment Corp. Dr. Brazier received his Bachelor's of Science Degree in Management from Roosevelt University, Master of Arts in Theological Studies, and a Doctor of Ministry Degree from McCormick Theological Seminary.

Herman Brewer

Herman Brewer is the Director of the Chicago Working Group in the MacArthur Foundation's Program on Human & Community Development. He is responsible for coordinating and integrating grantmaking strategies for the Program's work relating to Chicago neighborhoods, particularly in the areas of community development, education, juvenile justice, public housing, affordable housing and policy research. Brewer joined MacArthur Foundation in May 2003 after a year as the Chief Operations Officer at the Center for New Horizons (CNH). Prior to his work at CNH, Brewer served in various capacities both in the national office and the Chicago office of the Local Initiatives Support Corporation (LISC). Mr. Brewer has a Bachelor's degree in City and Regional Planning from the Illinois Institute of Technology, Graduate work at Virginia Commonwealth University and a Graduate and Business degree from University of Illinois at Chicago.

Senator Jacqueline Y. Collins

Senator Collins is an accomplished advocate of political activism and social justice which makes her well-prepared to serve the constituents of the 16th Legislative District of Illinois. As a former journalist and Emmy-award-nominated editor at CBS-TV, Collins has used her journalism experience and communication skills to support progressive agendas that seek to create economic and social welfare policies that reduce inequality, expand opportunity and strengthen community. During her first year in office, Collins successfully sponsored and passed legislation to support Illinois Working families, protect children and assist senior citizens. Some of her major accomplishments include landmark legislation extending the statute of limitations for civil and criminal prosecution of sex crimes among children and legislation that prevented public utility companies from disconnecting low income participants during the winter months. In 2004, she was a recipient of the Black Pearl-Woman of Excellence Award. She has a master's degree in public administration from Harvard's John F. Kennedy School of Government and graduated with a Master's degree in Theological Studies from Harvard Divinity School

Congressman Danny K. Davis, Ph.D.

Dr. Davis currently serves as Representative for the 7th Congressional District of Illinois serving on the Committee on Government Reform, the Committee on Small Business and the Committee on Education and the Workforce. Congressman Davis is also the Chairman of the House Postal Caucus and a member of the Congressional Black Caucus, the Progressive Caucus, the India Caucus, the Steel Caucus, the Art Caucus, the Hellenic Caucus, and the Community Health Caucus. His initiative to quadruple the Access to Jobs funding in the 105th Congress, one of only two successful amendments to the transportation authorization bill; and his Community Renewal Act in the 106th Congress, designed to bring investment and jobs to economically impacted communities. In the 107th Congress, Davis introduced legislation to facilitate the return of ex-offenders to the community-at-large; the Public Safety Ex-Offender Self-Sufficiency Act of 2002. Davis also hosts several weekly television and radio shows and is widely sought after as a speaker. Prior to his election to the Congress, he served on the Cook County Board of Commissioners and as a member of the Chicago City Council as Alderman of the 29th Ward. Prior to his public career, Congressman Davis was an educator, community organizer, health planner/administrator, and civil rights advocate. He has received hundreds of awards and citations for outstanding work in the areas of health, education, human rights, politics, and advocacy.

Representative Monique Davis

Rep. Davis represents the 27th District which covers part of the City of Chicago's South Side where she was born and raised. Prior to being elected State Representative, Davis taught in the Chicago Public School system, served as Coordinator for the Chicago Board of Education and was a Training Specialist with Chicago City Colleges. During her tenure, Rep. Davis has received many awards including: "Best Legislator Award" presented by the Independent Voters of Illinois, the Friend of Labor Award presented by the Illinois AFL-CIO, and the Presidential Citation Award in recognition of her exemplary experiences that honor her Alma Mater. Davis has also received the Opportunity in Higher Education Legislative Award from member of the Illinois Committee on Black Concerns in Higher Education and an award for Excellence in the Area of Primary Health Care presented by the Illinois Primary Health Care Association and Davis has earned funding for Chicago State University Building Program she was presented with the 2002 Chicago Teacher's Union Best legislator Award, has supported the Aids Prevention Programs and sponsored Racial Profiling Legislation and the Video Taping Confessions and Interrogation Legislation. Rep. Davis received the 2002 Human Resources Development Institute Commitment to the Community Award she sponsored and co-chaired the 2002 Education Conference "You Can Make It" has increased education funding. Rep. Davis has a Bachelor's Degree in Elementary Education and a Master's degree in Guidance and Supervision from Chicago State University.

Representative Constance A. "Connie" Howard

Rep. Howard is currently a full-time legislator, having served as State Representative of the 34th District since January 11, 1995. She is a member of eight House Committees including Chair of Computer Technology, Fee for Service Initiatives, Health Care Availability Access, Appropriations – Elementary and Secondary Education, Higher Education, Human Services, Labor, Judiciary II – Criminal Law, and on the Workers Compensation Unemployment Insurance sub-committee. Rep. Howard is also a member of the Legislative Reference Bureau Board. Educated in the Chicago Public

School system, she holds a Bachelor of Arts Degree in Liberal Arts and a Master of Science Degree in Corrections and Criminal Justice from Chicago State University.

Mark Ishaug

As the executive director of the AIDS Foundation of Chicago (AFC), Mark Ishaug has helped establish AFC as the Midwest's largest HIV/AIDS service organization, a leading advocate for people with AIDS and the agencies that serve them. Mark joined AFC in 1991 as a policy analyst and worked as Policy Director and Associate Director before being appointed Executive Director in August 1998. Prior to joining AFC, Mark studied and taught international economics at the University of Zimbabwe in 1987 as a Rotary Foundation Scholar, and in 1989, was awarded a MacArthur Foundation Scholarship from Northwestern University for research on Mozambique. His work in Africa led him in 1990 to CARE International-Mozambique, where he monitored emergency relief efforts as the Assistant Director of the Emergency Relief Program. Mark has also worked in the program department of New York's Africa-America Institute. Ishaug has received numerous awards in recognition of his leadership on HIV issues, including the Christian Community Health Center's "Leadership Award" in 2005, Hearts Foundation's "Biggest Heart" award in 2004, the South Side Help Center's "Leadership Award" in 2002, and AIDS Legal Council's "Advocate of the Year" award in 1996. Mark received a BA in government and international studies from the University of Notre Dame and a MA in political science from Northwestern University.

Elmer W. Johnson

Elmer W. Johnson is currently a partner in the law firm of Jenner & Block, a national law firm headquartered in Chicago, he is also currently a Director and Vice Chair of the United Way of Metropolitan Chicago, Chair of the Executive Advisors of Metropolitan Planning Council, and a member of two visiting committees at the University of Chicago. He has been a member of the Commercial Club of Chicago since 1978 and a Fellow of the American Academy of Arts and Sciences since 1989. In the past, Mr. Johnson has been a Director of the Economic Club of Chicago, Vice-Chairman of the Detroit Symphony Orchestra, general campaign Chairman of the United Way of Detroit, a trustee and executive committee member of the University of Chicago and Chairman of its Hospitals and Clinics Board, a Trustee of Chicago's Lyric Opera Association and Children's Memorial Hospital, a Director of the Chicago Council on Foreign Relations, an Advisory Council member at Harvard University's Kennedy School of Government and a member of the Wheaton City Council. He has also served as a member of the Executive and Civic Committees of the Commercial Club of Chicago and as a member of the Legal Advisory Committee of the New York Stock Exchange. He is the recipient of honorary degrees from four Chicago area universities and colleges. Mr. Johnson received a B.A degree from Yale University and a J.D. degree from the University of Chicago Law School

Representative Lovana "Lou" Jones (*deceased 2006*)

Rep. Lovana "Lou" Jones served nine terms as the State Representative from the 26th District, located on the South Side of Chicago. Rep. Jones served as House Assistant Majority Leader four times. In addition, she served on the following House Committees: Public Safety Appropriations, Executive, Judiciary II-Criminal Law, Prison Management, Prosecutorial Misconduct, Public Utilities and Telecommunications Rewrite. Throughout her legislative career, Jones was a vocal leader on the children's issues, women's issues, and reforming the state correctional system. Rep. Lou Jones participated in the following civic and community organizations: Task Force for Black Political Empowerment, Operation

PUSH, NAACP, Chicago Urban League, Independent Voters of Illinois, Cook County Democratic Women, and St. Ambrose Catholic School Board Member, NARAL. Rep. Jones received numerous awards: “Gappie” for Community Participation, Beatrice Caffrey Foster Care, Board of Governors Chicago State University for Participation in Internship Program and Lakeside Community Organization “Outstanding Support.” Rep. Jones earned a B.A. in Business Administration from Ohio State University.

Haki R. Madhubuti

Haki Mahubti is the founder of the Third World Press Publications, a distinguished Professor of English at Chicago State University. Professor Madhubuti has been on the faculty of Cornell University, Howard University, the University of Iowa and several other institutions of higher learning. He is the co-founder of two elementary schools, the Institute of Positive Education and the Betty Shabazz International Charter School and DuSable Leadership Academy. As a proponent of the development of Black Institutions in 1997, he was a founder of the Literary Hall of Fame for Writers of African Descent; previously, he was a founder of the National Association of Black Book Publishers and the National Black Writers Retreat. As a poet, publisher and educator, he has been a pivotal figure in the development of a strong Black literary tradition beginning in the 1960s. He has authored twenty-five books and remains one of the world’s best selling writers of poetry and non-fiction. He has received numerous awards from the National Endowment for the Arts, the National Endowment for Humanities, the Illinois Arts Council, the Black Caucus of the National Council of Teachers of English and several others including the American Book Award in 1991. The Maryland House of Delegates, The State of Alabama House of Representatives and the City Council of Detroit, have honored him by the passage of resolutions commending his work.

Reverend (Senator) James T. Meeks

Rev. Meeks established the Salem Baptist Church in 1985 with nearly 200 members. The church, located in Chicago’s Roseland community, now has more than 20,000 members, making it one of the fastest growing churches in the nation. In 1998, Rev. Meeks led the rally to “dry up” the Roseland Community by collecting enough votes to close 26 liquor stores. An established leader in civil rights and diplomacy, Rev. Meeks serves as the Executive Vice-President of the National Rainbow-PUSH Coalition. In 2002 Rev. Meeks successfully ran for Illinois State Senator from the 15th Legislative District, representing of over 200,000 residents. His win made him the first Independent Legislator ever elected to the Illinois Senate. In 2005, Rev. Meeks led Salem Baptist in the construction of the House of Hope. Rev. Meeks also authored two books, “How to Get out of Debt”, and “Life-Changing Relationships.

Tracye Smith Miles

Ms. Miles is currently a principal in Sphinx Enterprises, Ltd. She is a seasoned veteran whose blend of talents includes management, finance, marketing and sales. She most recently oversaw the day to day operations of one of the nation’s oldest and largest organizations devoted to increasing corporate and government purchasing from minority-owned businesses, The Chicago Minority Business Development Council, Inc. (CMBDC) a regional affiliate of the National Minority Supplier Development Council (NMSDC) has over 200 corporate members and 1,000 minority business affiliates. Ms. Miles serves on several boards and advisory committees. She has provided congressional testimony and conducts various speaking engagements locally

and nationally on issues concerning minority businesses development and supplier diversity. She holds an M.B.A. in finance/marketing from Atlanta University.

Ricardo A. Millett

Ricardo is President of the Woods Fund of Chicago. Prior to his presidency at the Woods Fund, Ricardo was Director of Program Evaluation for the W.K. Kellogg Foundation. Mr. Millett has also served as senior vice president of planning and resource management for the United Way of Massachusetts Bay in Boston, Deputy Associate Commissioner for the Department of Social Services for Massachusetts, and Senior Analyst at ABT Associates where he worked on research projects that helped to inform national policy in areas such as day care regulations and housing development in urban areas. He has also served as Director for Neighborhood Housing and Development for the Boston Redevelopment Authority, Executive Director of Roxbury Multi-service Center, Associate Professor of research and evaluation at Atlanta University, and Director of the Martin Luther King Center at Boston University. Mr. Millett is a frequent lecturer and consultant on program evaluation.

Representative Milton Patterson

Rep. Milton “Milt” Patterson represents Chicago’s 32nd District where he was elected to the General Assembly in the fall of 2004. He previously served as Chief Electrical Inspector and Deputy Commissioner of the Chicago Department of Building and as the 17th Ward committee. He is a certified licensed electrician, a licensed real estate broker in the State of Illinois and serves as an Adult Education Professor at Kennedy King College. Rep. Patterson is committed to protecting working families, seniors and the disabled and children. He supports increased funding for education, economic development, equal and affordable housing, and job creation and retention throughout the area. Rep. Patterson earned a Bachelor’s of Science degree from Southern Illinois University, a Master’s of Public Administration from the University of Illinois and holds an Electrical Engineering Degree from Chicago Technical College.

Roberto Ramirez

Mr. Ramirez moved to the United States from Mexico as a child, and left school at a very young age to help support his mother and siblings. In 1991, Ramirez started his own cleaning business and in just six years, was recognized as the “Chicago Hispanic Business of the Year” presented by the Hispanic American Construction Industry Association (HACIA). After being granted U.S. citizenship, he was elected to the HACIA Board of Directors. In 1998, the business was recognized as one of the fastest growing Hispanic companies in the U.S. and a multi-million-dollar endeavor. In 2000, Ramirez was named by Governor George Ryan to the Governor’s Commission on Capital Punishment and was elected to the Board of Directors of Hispanics in Philanthropy (HIP). Mr. Ramirez continues to be an advocated for offender rights and reentry initiatives.

Senator Kwame Raoul

Senator Raoul currently serves the 13th Senate District of Illinois. As a former Cook County Prosecutor and now Senior Attorney for the City Colleges of Chicago, Senator Raoul is a career advocate for the neighborhoods comprising the 13th Senate District. The senator is also the founder and director of the Janin and Marie Raoul Foundation, which promotes healthcare as a human right. He serves on the Board of Directors of the Cook County Bar Association and the Cook County Bar Foundation. He has also served as a member of the Quad Community Development Corporation’s Community Enrichment

Committee. Reflecting his commitment to young people, Senator Raoul has served as an Advisory Board Member and mentor for the Ariel Foundation, is a Hyde Park Biddy Basketball coach, and an AYSO Soccer volunteer. He has participated in voter registration campaigns with Rainbow/PUSH and has served as a volunteer Election Day lawyer to protect voter's rights. Senator Raoul earned his Bachelor's Degree in Political Science from DePaul University and a law degree from Chicago-Kent College of Law in 1993.

Senator Peter J. Roskam

Senator Roskam has served in the Illinois State Senate since 2000 representing Chicago's 48th District and has previously served in the House of Representatives from 1993 to 1999. He is the current Senate Minority Whip. Senator Roskam served as a teacher, Executive Director for a scholarship program for disadvantage students, and Partner in the Salvi, Roskam and Maher law firm. He has chaired the legislative subcommittee on capitol punishment, sponsored legislation giving the Illinois Supreme Court the authority to reserve a death sentence, and has worked to streamline education programs by eliminating duplicative educational programs and initiatives. Rep. Roskam has served on the Family Shelter Service Advisory Board, The Heartland Institute Legislative Advisory Board and received many awards such as Constitutional Scholar Award Illinois Judges Association, Illinois Family Institute Leadership Award, Illinois State Crime Commission-Legislator of the Year, Illinois State Chamber of Commerce-2002 Champion of Free Enterprise and Outstanding Freshman Senator Award. His educational background includes: BA from the University of Illinois and IIT Chicago-Kent University College of Law, JD.

Commissioner Bobbie L. Steele

Bobbie L. Steele is currently Cook County Commissioner of District 2 in Chicago. Steele received a B.S. Degree in Elementary Education from Chicago Teacher's College and a Master's degree in Supervision and Administration of Education from Roosevelt University. Commissioner Steele was employed in the Chicago Public School System for more than 20 years. Steele was elected to the Cook County Board of Commissioners and is currently the longest serving African American woman on the Cook County Board of Commissioners. She is also the first African American female to serve as Vice-Chairman of the Cook County Corporate Budget with an estimated budget of (3.075) billion dollars for 2006. Steele serves as Chairwoman of the following Cook County Board committees: Contract Compliance, Department of Corrections, Education, Real Estate, and Rules. Steele's relentless dedication to public service has propelled her to national leadership in her role as past President of NABCO, (National Association of Black County officials). Steele has also received over one hundred awards or citations for leadership and service including her 1993 induction in the "Chicago Women's Hall of Fame". In 2004 Commissioner Steele introduced the Cook County Re-Entry Employment Project Ordinance. This ordinance seeks to reinforce the evidence that formerly incarcerated individuals can succeed if they are employed.

Representative Karen A. Yarbrough

Rep. Karen Yarbrough is in her first two terms as the 7th District State Representative. She has distinguished herself as an active legislator, a visible and accountable advocate for her district, and an elected official that works at empowering her electorate. Entering her third term, she continues to pursue the ideals that have made her a community leader for years: Better education, improved access to health care and economic development. Rep. Yarbrough has served on the Board of Directors fro the Proviso Area United Way of Suburban Chicago. In this capacity, she has help support local human services

agencies, which provide child-care, home care for the elderly, substance abuse treatment, and aid to victims of domestic violence. Believing that one of the greatest needs in her district is constructive activities for young people, Karen also serves as a board member of Maywood Youth Mentoring Program, the Oak Park YMCA, and the Fred Hampton Scholarship Fund. In recognition of her accomplishments, Karen has received many awards, including: The Unsung Heroine Award, Illinois Reaches out Volunteer Recognition Award, Uplift Human Service Award, Proviso Area NAACP Civic Award, 2001 Legislative Award-National Assoc. of Blacks in Criminal Justice, Legislative Advocacy Award-Illinois Council Against Handgun Violence, Graduate of the Bowhay Institute for Legislator Leadership Development, 2004 Better Housing Leadership Award-Lawyer Communities for Better Housing, Legislative Service Award-The America Lung Association, Best Legislative Voting Record-IVI-IPO, Outstanding 2003 Legislator-Illinois Drug Education Alliance, Economic Development-Midwestern Council of State Governments. Rep. Yarbrough graduated with a B.S. in Business Management from Chicago State University and an M.A. in Inner City Studies from Northeastern Illinois University.

appendix D

Governor's Community Safety and Reentry Working Group Members

Executive Committee

Co-Chairs:

Dr. Carol Adams, Secretary, Illinois Department of Human Services

Deanne Benos, Assistant Director, Illinois Department of Corrections

Appointed Members:

Reverend Leroy Smith Jr., Founder, Jesus Cares Ministries of Decatur

Sgt. Luis Gutierrez, President, Hispanic Law Enforcement Association (HISLEA)

Melody Heaps, President, Treatment Alternatives for Safe Communities, Inc. (TASC)

Pam Rodriguez, Executive Vice President, Treatment Alternatives for Safe Communities, Inc. (TASC)

Paula Wolff, Executive Director, Chicago Metropolis 2020

Angela Rudolph, Program Director, Chicago Metropolis 2020

Honorable George Timberlake, Chief Judge, Second Judicial Circuit – Jefferson County

Sue Augustus, Executive Director, Corporation for Supportive Housing

Reverend Patricia Watkins, Executive Director, Developing Justice Coalition

Jackie Reed, Executive Director, West Side Health Authority

Reverend John Crawford, Founder and President, FAITH, Inc. (Designee: Sam Crawford)

Linda Martin, Executive Director, R.I.T.A.S. Ministry

Lou Douglas, Springfield Outreach Coordinator, Gateway Foundation

Tio Hardiman, CeaseFire, University of Illinois at Chicago

Dr. Lance Williams, Assistant Director, Northeastern Illinois University, Center for Inner City Studies

Dr. Davis Jenkins, Senior Fellow, UIC Great Cities Institute

B. Diane Williams, President & CEO, SAFER Foundation

Greg Washington, Executive Director, Grand Boulevard Federation

Darryl McGibany, Director, Madison County Probation
and Court Services (Designee: Linda VanDyke)

Brenda Palms Barber, Executive Director, North Lawndale Employment Network

Michelle Light, Assistant to the Mayor on Reentry Initiatives,
Office of the Mayor, City of Chicago

Roger C. Logue, Executive Director, Prisoner Release Ministry, Inc.

Jim Noe, Program Manager, Rosecrance

Benneth Lee, Community Liaison and Reentry Specialist, TASC

Reverend Henry Barlow, Founder, Chicagoland Youth & Adult Training Center

Honorable Jeffrey O'Connor, Chief Judge, Civil/Criminal
Felony Division – Rock Island County

Howard Saffold, CEO, Positive Anti-Crime Thrust (PACT)

Whitney Smith, Associate Director, Chicago Jobs Council

Sharod Gordon, CSAC Director, Target Area

John Fallon, Program Director, Thresholds

Jonnie Kawolsky, UCAN – Lifeskills Center, Peoria

Tracy Parsons, President, Urban League of Champaign (Designee: Diane Beetz)

Brian Rowland, Founder & CEO, A Safe Haven

Honorable Paul Froehlich, Illinois State Representative, 56th District

Melinda Haag, Justice and Public Safety Practice Leader, Crowe Chizek and Company LLC

Karen Barber, Divisional Director, Cornell Companies

Jim Anderson, Vice President of Business Development, BI Incorporated

Brian Banks, Partner, BAC Partners

Walter Boyd, Director, Protestants for the Common Good

Jodina Hicks, Vice-President Public Policy & Community Partnerships, SAFER Foundation

Patricia Jones, Supervisor, Waukegan Township

Kevin Downey, Director of Corrections Programs, TASC, Inc.

State Agency Officials and Staff:

Dr. Anderson Freeman, Director of Forensic Services, Division of Mental Health,
Illinois Department of Human Services

Theodora Binion-Taylor, Director, Division of Alcoholism & Substance Abuse,
Illinois Department of Human Services

Brenda Russell, Director, Illinois Department of Employment Security
(Designee: Sherrie Moses)

Jack Lavin, Director, Department of Commerce & Economic Development
(Designee: Julio Rodriguez)

Marva Arnold, Director, Capitol Division, Illinois Department of Human Services

Steve Guerra, Director, Community Health and Prevention,
Illinois Department of Human Services

Jesse Montgomery Jr., Deputy Director Parole Division, Illinois Department of Corrections

Rick Guzman, Director, Office of Reentry Management and Community Safety,
Illinois Department of Corrections

Leslie Balonick, Senior Policy & Program Development Administrator
for the Illinois Department of Corrections

Jorge Montes, Chairman, Illinois Prisoner Review Board

Lori Levin, Director, Illinois Criminal Justice Information Authority

Kelly King Dibble, Executive Director, IHDA (Designee: Jennifer Novak)

Tom Johnson, Member, Illinois Prison Review Board

David Olson, Chairman, Department of Criminal Justice, Loyola University at Chicago

Gloster Mahon, Associate Director, Illinois Department of Human Services

Jennifer Novak, Assistant Director, Office of Housing Coordination Services,
Illinois Housing Development Authority

Linda Van Dyke, Chief Probation Officer, East Alton Community Corrections Center

Governor's Staff:

Robin Olsen, Senior Policy Development Advisor, Crime

Joyce Probst, Senior Policy Development Advisor, Housing

Ginger Ostro, Policy Director, Office of Management and Budget

appendix E

Governor's Community Safety and Reentry Working Group Biographies

Jim Anderson

Mr. Anderson is currently the Vice-President of Business Development for Behavioral Interventions (BI) reentry and day reporting programs providing overall leadership to BI's Marketing and Communications, Market Research and Proposal Center Teams. Before joining BI, Jim was cofounder of Peregrine Correction in Denver, where he developed adult and juvenile day reporting centers, which operated in several states. Prior to founding Peregrine Corrections, he was an attorney for over 20 years, working in most areas of the criminal justice system as a defense attorney, special prosecutor, arbitration judge, and volunteer probation officer. In addition, Mr. Anderson was a Public Defender for the state of Colorado, and he worked in Washington D.C. as Assistant General Counsel for ACTION, the Federal agency that managed the Peace Corps and VISTA. Anderson also has authored several papers addressing Juvenile Justice Reentry Services. Anderson holds a Bachelor of Science in Business/Accounting from Colorado State University and a J.D. (Law) degree from the University of Colorado. He is also a graduate of the National Institute of Trail Lawyers.

Marva Arnold

Marva Arnold is currently the Director of the Illinois Department of Human Services, Division of Human Capital Development where she manages a variety of income support and human services programs whose goals are to assist poor and low income families. Programs under her care include, Food Stamps, medical and cash assistance (TANF), child care subsidies, food banks, homeless prevention, refugee and immigrant services, Title XX specialized social services, and employment and training. Ms. Arnold has more than twenty years of human services management and administrative experience as well as the health care field as a director of nursing and manager of program development for Illinois long term care nursing facilities. Ms. Arnold also worked in the private sector as the operations manager for a chain of long term nursing facilities and was a hospital administrator for the state's largest public psychiatric hospital, Chicago Read Mental Health Center. She has also been a member of the Chicago and Cook County Workforce Boards. Ms. Arnold received her Bachelor's degree from the University of Illinois and her M.B.A. from the University of Chicago.

Sue Augustus

Sue Augustus has been the Director of the Illinois office of the Corporation for Supportive Housing since August 2002. She works with a staff of three to provide project specific assistance and training to providers of permanent supportive housing, and policy and advocacy on permanent supportive housing issues. She has over 22 years of experience representing people in poverty in civil and criminal issues. Prior to CSH, Sue worked for 6 years as the Deputy Director of the SSI Coalition for a Responsible Safety Net,

where she provided legal representation and advocacy on public benefit issues for low-income seniors and people with disabilities. Sue also worked at the Legal Assistance Foundation of Chicago, the Legal Aid Society of Dayton, Ohio, and the Illinois State Appellate Defender's Office. Sue is a graduate of the University of Notre Dame and the IIT/Chicago-Kent College of Law, and is admitted to practice law in Illinois and Ohio.

Leslie A. Balonick

Leslie Balonick has been the Senior Policy & Program Development Administrator for the Illinois Department of Corrections since 2005. Prior to coming to IDOC, she had nearly 28 years administrative and operations management experience in developing behavioral health treatment and juvenile and criminal justice programming. Leslie is considered a national expert in criminal justice programming for adults and juveniles and programming for women and adolescent girls. She has consulted on social policy, system change and behavioral healthcare programming and gender policy in Illinois, Texas, Wisconsin, Michigan, Indiana, Arkansas, Ohio and Florida. Leslie has a Master's degree in Human Service Administration from Spertus College and a Bachelor's degree in Addiction Management from DePaul University.

Brian Banks

Brian Banks of BAC Partners is a consultant providing research-based strategies, grant writing, and technical assistance to community-based and faith-based organizations interested in education, economic development and jobs creation. Mr. Banks assists organizations to develop collaborative partnerships with universities, government, business and philanthropic organizations. Projects he is involved with include faith-based initiatives that help at-risk youth, adults, ex-offenders and low-income individuals become self-sufficient; a community-based education initiative that helps low income African-American youth matriculate into top universities; and a taskforce to help increase minorities and women in the construction building trades. Prior to joining BACP he was research coordinator for the Policy Research Action group (PRAG). Mr. Banks is also involved in (PRAG) a multi-university collaboration that provides university level research for community organizations; education policy staffs for Chicago Urban League; and community liaison for the Cook County Clerk's office. Mr. Banks started as a marketing representative for IBM Corporation. He has a B.A. from Harvard University.

Brenda Palms Barber

Brenda is the Founding Chief Executive Officer of the North Lawndale Employment Network and is responsible for managing its program development, human and financial capital and resources. She is also responsible for developing and maintaining the many diverse internal and external relationships needed to meet both employer and job seeker needs. She also serves on the Board of Directors for the Lawndale Business Local Development Corporation, the Advisory committee of St. Leonard's Michael Barlow Employment Center and chairs the Social Justice and Political Action Committee at her church. Before joining NLEN in February 1999, Brenda served as the Associate Director of the Annie E. Casey Foundation's and Piton Foundation's Denver Workforce Initiative (DWI) for two years, this initiative formed in 1996, creates a labor force in metro Denver that meets employer needs, supports economic growth, and broadens work opportunities to residents of the city's low-income neighborhoods. Brenda holds a Bachelor's Degree in Business Management from the University of Phoenix.

Karen Barber

Karen Barber is Divisional Director for Cornell Companies, Midwest Division, and the Executive Director for Cornell Interventions, Inc. She is responsible for nearly 40 programs at 8 sites in Illinois. Ms. Barber has more than 15 years experience managing programs for clients with alcohol, drug and mental health issues in residential, outpatient, and correctional facilities. At Cornell Interventions' Turing Point, Southwestern Illinois Correctional Center Ms. Barber supervised staff, developed TC programming, administered policies and procedures utilizing best practices. Previously, Ms. Barber implemented policies and procedures in the educational department at Alexander Youth Services in Alexander, Arkansas. Ms. Barber holds a Bachelor's of Science in Education from Indiana State University and a Master's degree in Science in Rehabilitation Counseling from Southern Illinois University. Ms. Barber also holds certifications as a Clinically Certified Substance Abuse Counselor and a Licensed Clinical Professional Counselor.

Reverend Dr. Henry A. Barlow

Rev. Dr. Barlow served for several years as Associate Minister of the Christ Community Church before moving on to being installed as Pastor of Christ Tabernacle Baptist Church in 1995. Dr. Barlow also serves on several national and community organizations including serving as President of the New City Ministers' Coalition, Fourth Vice Moderator of the Salem Baptist District Association and an instructor at the Baptist Ministers Fellowship of Chicago & Vicinity. Dr. Barlow serves as Project Director of the recently established the Chicagoland Youth & Adult Training Center, a joint venture with Ford Motor Company, to train at risk youth in the field of automotive technology. Dr. Barlow received his Doctrine of Theology from the Gospel Ministry Outreach Theological Institute of Houston, TX.

Dianne Beetz

Ms. Beetz, CWDP, has been with the Urban League of Champaign County since 1998, serving as Job Developer, Placement Specialist and Case manager for their Transitional Employment Program, a program open to any individual who has had a conviction. After working a few years in Interior Design, she was recruited for a position in the private employment industry. Except for a brief hiatus to develop and implement a fund raising program for Parkland College's Art Gallery, she worked in that private employment field as a licensed consultant and agency owner until joining the Urban League. In addition to her other responsibilities, she has presented workshops for a variety of agencies, including the Department of Human Services, assisted in job development for the local Workforce Development Center and served on several in-service job development workshop panels. Ms. Beetz has a Bachelor's degree in Fine Arts from Blackburn College.

Walter Boyd

Walter Boyd has been Director of the Ex-offender Opportunity Program for Protestants for the Common Good since 2004. He has generated support for legislation creating a new Illinois Department of Juvenile Justice. Mr. Boyd worked closely with the Developing Justice Coalition to promote The SMART Act, legislation to provide treatment as an active for drug offenses and expand access to existing alternatives for drug offenders of structured probation, treatment, and expungement upon the successful completion of probation. Prior to coming to Protestants for the Common Good, Mr. Boyd served as Program Manager of the North Lawndale Employment Network from 2001 to February 2004. He received his Bachelor of General Studies with honors in the social services from Roosevelt University in 1992.

James R. “Chip” Coldren, Jr., Ph.D.

Dr. Coldren recently joined the faculty of Governor’s State University as Academic Program Coordinator in the Criminal Justice Department. He is concluding his term as the sixth President of the John Howard Association in Chicago, a century-old non-profit organization dedicated to monitoring and improving the conditions of confinement in prisons and jails, as well as to fair, humane, and effective sentencing and correctional policies. Prior to joining the John Howard Association, Dr. Coldren served as the Director for the Center for Research in Law and Justice and the Institute for Public Safety Partnerships at the University of Illinois at Chicago (UIC). Prior to joining UIC, Coldren was a Deputy Director with the Project on Human Development in Chicago Neighborhoods, a longitudinal prevention-oriented research project of the Harvard University School of Public Health. Dr. Coldren also served for seven years as Director of Research for the Justice Research and Statistics Association (JRSA) in Washington, D.C. He began his profession career in Chicago with the Illinois Criminal Justice Information Authority (ICJIA) before becoming Director of Research and Computer System Development at Patuxent Institution in Maryland, a maximum security, treatment-oriented prison, and he recently published a book about Patuxent Institution. Dr. Coldren holds a Master’s and Doctorate of Sociology from the University of Chicago. He currently serves as Chair of the Salvation Army Community Corrections Research Committee, Chair of the Institute for Public Safety Partnerships Policy Board, Vice Chair of the Institutional Review Board (IRB) of the ICJIA, Associate Editor for Evaluation Review, as a consultant trainer in community policing and on several committees and working groups relating to public safety and corrections.

Reverend John H. Crawford

Reverend Crawford is currently the president and founder of F.A.I.T.H., Inc. With over 40 years of social services experience he is considered one of Chicago’s pioneers on issues related to offender reentry. He founded the first organization on Chicago’s Westside that had the primary mission of providing substance abuse treatment for both men and women incarcerated in the Illinois Department of Corrections. Community and political leaders alike have recognized Reverend Crawford’s lifelong commitment to offender reentry issues. He has received numerous awards, certificates and letters of support for his leadership in the community. Reverend Crawford has an associate’s degree from Lincoln College and a bachelor’s degree in sociology from Roosevelt University.

Sam Crawford

Mr. Crawford is currently the I.D. Coordinator/Director for F.A.I.T.H, Inc. He has been working in increasingly more responsible positions in the social services field for the past 25 years. At F.A.I.T.H., Inc. Mr. Crawford provides outreach and support to offenders on Chicago’s Westside that have been released from the Illinois Department of Corrections. He travels throughout the State of Illinois attending meetings and representing the mission of F.A.I.T.H, Inc. He has received many awards and certificates for his dedication and commitment to reentry issues. Mr. Crawford has attended Malcolm X College and Roosevelt University and has extensive experience and competences in addiction studies.

Kelly King Dibble

Ms. Dibble currently serves as the Executive Director of the Illinois Housing Development Authority. She has extensive public and private real estate experience. As a deputy Commissioner for the Chicago Department of Planning and Development, Ms. Dibble created initiatives to stimulate the residential and commercial development

on the city's near west and south sides. In the private sector, Ms. Dibble was a director of Chicago's Hyatt Development Corp. from 1995 to 2000, providing analysis and project leadership. For the next two years, she was vice president of business development for Rezmar Corp. of Chicago, specializing in hotel and commercial project development. Before graduating in 1985 from Harvard Law School, Ms. Dibble launched her long-standing interest in affordable housing and community development as president of the Harvard Real Estate and Urban Development Forum. Earlier, she earned a B.A. in economics from Wellesley College in 1982.

Lou Douglas

Mr. Douglas is a certified drug and alcohol counselor, a certified criminal justice addictions professional, and a mental health and substance abuse counselor in the State of Illinois. Mr. Douglas has worked in the substance abuse field for thirty years, the last ten as Outreach Coordinator for the largest national provider of recovery services, both community and corrections-based. He has extensive experience working with probation and parole populations statewide. Mr. Douglas has also developed a program working with paroled clients on a range of serve needs including anger management, transitional skills, and communication. Mr. Douglas holds a Master's degree from University of Illinois at Springfield in Human Services. He is also a candidate for Licensed Clinical Professional Counselor.

Kevin Downey, Ph.D.

Dr. Downey currently serves as the CEO at Crosspoint, Inc. in San Antonio, Texas. He also served as Director of Corrections Operations for Treatment Alternatives for Safer Communities (TASC). Dr. Downey oversaw all TASC reentry programs and staff throughout the State of Illinois. His responsibilities included strategic planning, staff management, policy and program development, external agency representation and system linkage. Prior to coming to TASC, he served in an administrative capacity at residential correctional facilities in Iowa and Missouri, as a parole examiner for the Texas Board of Pardons and Paroles, and as an executive director of an organization serving the developmentally disabled and mentally ill in St. Louis. Dr. Downey has a Bachelor's degree in Social Work from the University of Iowa, a Master's degree in Criminal Justice Management from Sam Houston State University, and a Ph.D in Public Policy Analysis and Administration from St. Louis University.

Patricia Ellis

Patricia Ellis has worked in the field of social services/correctional health for the past 26 years, currently holds the position of Prison – Jail / Liaison for the past nine years, at the Ruth Rothstein CORE Center, her responsibilities and self initiated, job related functions includes; female transitional health services. Developed and facilitate the Women Correctional Task Force, court advocacy in support of her clientele. Ms Ellis has received numerous of certificates to enhance her knowledge on HIV/AIDS as a holistic approach to health care maintenance, maintaining her 14-year certification with the American Red Cross as a basic HIV/AIDS instructor. Ms Ellis affiliations continue with membership with FAITH Inc, Congressman Davis ex-offender task force, past chairperson for the self-sufficiency act committee, the Women task Force Committee, board member of CSAC northwest, a member with the Department of Women Justice Services, Sheriff Female Furlough Program. Ms Ellis has written abstracts that have been published for women correctional health services, recent educational advancements, completion of her Bachelors of Science Degree in Health Care Leadership, January 2005, from National-Lewis University.

John Fallon

John Fallon serves as the Coordinator of the Demonstrations Projects at Thresholds and directs two specialized teams working to place people from Cook County Jail back into the community. The success of this project has resulted in the American Psychiatric Association awarding this project with the National 2001 Gold Achievement Award for small community based programs. Hoping to duplicate this success in another setting, Thresholds has started working on their second two-year grant developing after-care programs at two state prisons. The current project is designed to involve other community agencies in developing effective mental health aftercare plans using assertive community treatment approach. John has over twenty year experience in the mental health field which includes providing residential and outreach services to adolescents, children, persons who are homeless, as well as persons in corrections and health care settings. John serves on the following boards: National Assertive Community Treatment Association and the Mayoral Task Force. He has a Bachelor's of Science degree from The University of Illinois, Champaign/Urbana.

Anderson Freeman, Ph.D.

Dr. Freeman currently serves as Deputy Director for Forensic Services for the Illinois Department of Human Services – Division of Mental Health (DHS – DMH). As Director for Forensic Services, Dr. Freeman is responsible for administering a statewide program that coordinates services for individuals referred by the courts to DHS after being adjudicated as unfit for trial or acquitted after a finding of insanity. This responsibility included oversight for five state operated forensic inpatient programs servicing adults and juveniles. Dr. Freeman is also the administrative supervisor for the state operated Sexually Violent Person Program in Joliet and the DHS – DMH staff person responsible for the Mental Health Juvenile Justice Initiative. Dr. Freeman is a graduate of Michigan State University and a licensed clinical psychologist.

Representative Paul Froehlich

Rep. Froehlich represents the 56th Legislative District located in the northwestern suburbs of Illinois since 2003. Prior elected offices include: District 54 Board of Education (elected in 1989), Schaumburg Township School Trustee (1997), Schaumburg Township Republican Committeeman (1998), and Schaumburg Township Assessor (2001). Rep. Froehlich has served on numerous committees and boards including: Schaumburg Police Pension Board, Chairman of the Mayor's Scholarship Committee, Chairman of the Local Draft Board, Board member of the DuPage Railroad Safety Council, Board member of the Illinois State Crime Commission and Founding Board Member of the Alliance Against Intoxicated Motorists. He also was a High School Social Studies teacher and coach for thirteen years, Director of a nonprofit agency for five years and Program Manger for a division of the Secretary of State's Office for eight years. Rep. Froehlich has a B.A. in Political Science and a M.A in History from Northeastern Illinois University.

Sharod Gordon

Sharod Gordon is currently the Director of Violence Prevention Programs and Lead Organizer for TARGET Area Development Corporation. TARGET Area is a grassroots community organization in the Auburn/Gresham community on the Southside of Chicago. His responsibilities include direction, oversight and coordination of TARGET Area's public safety programs. He began his foray in community work by volunteering for TARGET Area through the Ambassadors for Christ Church, which founded the organization. He is also the co-convener of the Developing Justice Coalition, which

comprises 18 grassroots community groups and churches that work on improving public safety by addressing issues such as prisoner reentry, sentencing reform, and street level intervention. He currently serves as a minister at the Ambassadors for Christ Church. Sharod has worked as a Chicago Public School high school teacher, Cease Fire outreach supervisor, community organizer, job developer, and youth outreach worker. He is chair of the local school council at Scott Joplin School in Auburn/Gresham.

Steven Guerra

Steven Guerra has a distinguished 30-year career in human and community development. He has served and worked in the city and state government, social services, and the foundation communities. In November 2004, Mr. Guerra was appointed to serve as the Director of the Division of Community Health and Prevention for the Illinois Department of Human Services. The Division focuses on community prevention efforts and selected services in the areas of health, family nutrition and support, youth development, substance abuse prevention, and violence prevention and intervention. The Division also promotes volunteerism and community services efforts in behalf of the State of Illinois.

Sergeant Luis M. Gutierrez

Sgt. Gutierrez is the Hispanic Liaison for Community Affairs with the Illinois State Police. He is responsible for all media inquiries, community outreach program and legislative liaison for the Latino Caucus. Sgt. Gutierrez has been with the department for 11 years and served on various committees within the department including Illinois State Police Heritage Foundation Committee, Diversity Advisory Committee, Human Resource Advisory Committee and the Latino Community Outreach Committee for the Governor's Office. Sgt. Gutierrez is also currently the President of the Hispanic Illinois State Law Enforcement Association (HISLEA) and a member of the Minority Recruitment Committee for the Illinois Chief of Police Association.

Richard Guzman

Rick Guzman was named Manager of the Illinois Department of Corrections' Office of Reentry Management and Community Services in October, 2004. This new office assumes the responsibilities of the Placement resource Unit Manager, as well as oversight of other key Department initiatives involving programs, support services and reentry. Guzman has been the Program Director of the Department's model "Going Home Program," a federally funded pilot program, since October, 2002. Previously, Guzman worked as a Policy Advisor to the Governor on Criminal Justice issues including corrections issues, human rights and the moratorium on the death penalty. He was a member of Governor Blagojevich's Transition Team on Corrections Reform and has helped shape a number of the Department's current reform efforts. He graduated summa cum laude with sociology and public policy degrees from North Central College and has worked on public policy issues at various levels in the private sector, municipal and state government.

Melinda S. Haag

Melinda S. Haag is with Crowe Chizek and Company LLC where she serves as the Justice and Public Safety Practice Leader in its Public Services Sector, Government Consulting Group. Prior to joining Crowe, Melinda served as the Director of the Marion County Justice Agency in Indianapolis, while at Marion, she managed a number of projects that resulted in substantial change and process improvements in the criminal and juvenile justice systems, including court systems, pretrial services and offender processing, as well as numerous

technology initiatives in Marion County, including a partnership with the Indiana Supreme Court's Judicial Technology and Automation Committee. Melinda also championed the creation and sustainment of violence reduction initiatives involving many local, state, and federal law enforcement and government partners. Before serving as Director of the Marion County Justice Agency she was a federal prosecutor, her expertise focused on gun violence prosecutions and project coordination of the Indianapolis Violence Reduction Partnership, one of the five initial strategies created, supported and evaluated by the United States Department of Justice. For her work on that project, the United States Attorney General Janet Reno honored Melinda with The Director's Award 2000. Ms. Haag has a Bachelor's of Arts degree from DePauw in Indiana and a Juris Doctorate Law Degree from Indiana University.

Tio Hardiman

Tio Hardiman joined The Chicago Project for Violence Prevention in 1999 to work with Dr. Gary Slutkin to reduce the homicide rate in Chicago. The neighborhoods in which he works have experienced 40%-50% reductions in shootings since the implementation of Ceasefire. Prior to Ceasefire, Hardiman worked for Bethel New Life and Mayor Daley's CAPS Program and The Chicago Alliance for Neighborhood Safety, where he organized over 50 block clubs and facilitated problem-solving sessions for crime-ridden communities. He has received various awards for his outstanding dedication to help Chicago reduce crime. Hardiman received a master's degree from Northeastern University.

Melody M. Heaps

Melody Heaps is founder and president of TASC, an independent, not-for-profit agency that provides clinical case management services to drug-involved individuals who are mandated to treatment via public systems. Ms. Heaps is recognized as a national expert on improving system responses to drugs and crime, and she provides consultation and technical assistance to public and private agencies and other TASC programs across the United States. Ms. Heaps serves on the board of directors of the National Association of Drug Court Professionals, the Community Renewal Society and the Illinois Alcoholism and Drug Dependence Association, of which she is also past president. She is a member of the Illinois Research Advisory Council on Crime and Justice, past president of the National TASC Association, and a fellow on the National TASC Leadership Council. Ms. Heaps has a M.A. in Criminal Justice from Chicago State University.

Jodina Hicks

Jodina Hicks is currently the Vice President of Public Policy and Community Partnerships at the Safer Foundation, one of the nation's largest private non-profit providers of social services, educational programs, and employment training a placement exclusively targeting people with criminal records. At Safer, she provides direction and oversight of programs, evaluation and policies, with particular emphasis on affecting local and state policy and programs related to returnees and employment. Prior to coming to Safer in 2004, Ms. Hicks was the Deputy Director for Public Policy and Community Partnerships (PPCP) at Public/Private Ventures (P/PV), where she had operations oversight of multi-site demonstrations, including Ready4Work. Before joining P/PV, Jodina worked for 12 years designing, implementing and directing adolescent youth development programming for at-risk youth in New Jersey. Ms. Hicks received her Bachelor of Arts in Urban Studies from Eastern University in Pennsylvania and Juris Doctorate from Rutgers School of Law.

Dr. Davis Jenkins, Ph.D.

Dr. Jenkins is senior fellow at UIC's Great Cities Institute. He conducts research on how to increase access to economic opportunity by disadvantaged youth and adults. He also consults on the development of programs and policies that reflect finding from research on what works. Davis has 20 years of experience as a researcher, program manager, evaluator and consultant on projects related to education for employment in the U.S. and abroad. He holds a bachelor's degree from Princeton University and a Ph.D. in Public Policy Analysis from Carnegie Mellon University.

Thomas Johnson

Mr. Johnson served as an Assistant State's Attorney in DuPage County where he became Chief of the White Collar Crime Division. He was an instructor at the College of DuPage during this period, as well teaching a course on crime scene investigations. He was a founding partner in the law firm of Johnson, Westra et al where he continued in the private practice of law until taking office as the State Representative for the Illinois 50th District. He served ten years in the Illinois House where he chaired the House Judiciary Committee and was chairman and co-chairmen of the Illinois Prison Reform Committee. He has a passion for criminal justice reform so that the recidivism rates can be reduced. He has served on numerous boards, task forces, and community organizations and remains a member of the Illinois Juvenile Justice Initiative. After finishing a tour of duty in Vietnam, he earned his bachelor's degree from the University of Michigan and a Doctorate of Law from DePaul University.

Patricia Jones

Patricia Jones is distinguished by over twenty years of outstanding public service to the citizens of Lake County. She is an elected official of Waukegan Township where she holds the position of Supervisor and Chief Executive Officer. Ms. Jones efforts are exhibited in the creation of the Park Place Senior Center, Staben House for homeless woman and children and the Staben Center for homeless men. She has also held the position of Trustee, an elected official to the College of Lake County Board since 1989. She has also served on the Advisory Committee for the College of Lake County's Lakeshore Campus. Ms. Jones is a prominent member of numerous boards and organizations including the United Way of Lake County, the Heart Association of Lake County, the Waukegan Exchange Club, the Delta Sigma Theta Sorority, and the University Center of Lake County Board. She has gained recognition by the YWCA-Women of Achievement Award, the Girl Scouts of America-Women of Achievement Award, the Most Influential African American in Lake County Award, and the Humanitarian Award from Chi Eta Phi Sorority Inc., Nu Phi Chapter of Waukegan, the Special Recognition Award from Catholic Charities, and recently the Gail Svendsen Award from the Academy of Hospitality & Tourism Program.

Jonnie Kawolsky

Mr. Kawolsky serves as a Client Services Specialist for UCAN – Lifeskills Center, Peoria. In this role, Mr. Kawolsky provides transitional services for offenders upon release from prison. All transitional services are specific to each individual client and may include assistance with employment, shelter, counseling, transportation, as well as medical and acquisition of emergency food. Prior to his current position, Mr. Kawolsky served in various functions at the Department of Corrections. He also worked for Keystone Steel and Wire Company for 24 years.

Jack Lavin

Jack Lavin has served as Governor Rod Blagojevich's Director of the Illinois Department of Commerce and Economic Opportunity for over two years. As Director of DCEO, Jack has led the total reorganization of the agency, which included the introduction of regional business outreach and goals, the coordination of state job training programs geared for maximum economic impact, and the overall streamlining of the agency. Jack has nineteen years of experience and a record of job creation and financial management in both the business world and Illinois state government. Jack has also served as Deputy State Treasurer for Illinois from 1993-1995, where he was directly responsible for all investment strategies and programs in the Treasurer's \$5 billion annual investment portfolio. Prior to that, he was Director of Development Finance for the State Treasurer from 1991-1993. Jack holds a Master's degree in Business from the University of Chicago with a specialization in finance as well as a Master's degree in International Relations from the University of Chicago. He also completed a semester of graduate studies at Yonsei University in South Korea. He is a magna cum laude graduate of the University of Illinois at Champaign.

Benneth Lee

Benneth Lee currently serves as a Community Liaison and Reentry Specialist for TASC. He has over 18 years experience working with the criminal justice substance abuse clients. He has worked on an out-patient, residential and institutional basis. A recovering addict of 20 years and ex-convict, Mr. Lee has taken a personal life experience and developed a model and strategies to support the field in new and effective approaches in helping ex-cons make their transition from prison to treatment and back into the community.

Lori Levin

Lori G. Levin is Executive Director of the Illinois Criminal Justice Information Authority (ICJIA). ICJIA is a state agency dedicated to improving the administration of criminal justice by bringing together key leaders from the justice system and the public to identify critical issues facing the criminal justice system in Illinois, and to propose and evaluate policies, programs, and legislation that address those issues. As Executive Director, she serves on the Illinois Sex Offender Management Board, the Illinois Violence Prevention Authority, the Illinois Family Violence Coordinating Council, and Redeploy Illinois' Executive Steering Committee. She was also elected Chair of the Illinois Integrated Justice Information Systems Implementation Board. Prior to being appointed to this position by Governor Rod Blagojevich in August 2003, Lori was on the Governor's Transition Team as Vice-Chair of the Social Services Committee and Co-Chair of the Aging Subcommittee. Lori is a graduate of the Georgetown University Law Center. She holds a Bachelor of Science in Journalism from the University of Illinois at Champaign-Urbana. Lori is currently President of the Women's Bar Association of Illinois.

Michelle Light

Michelle Light joined the Office of Mayor Richard M. Daley as the first Manager of Reentry Initiatives in May 2003. For this new position, Ms. Light has been spearheading the development of strategies and initiatives for the City of Chicago to support people with criminal backgrounds as they transition from prison back to their home communities, with the goal of reducing recidivism, enhancing community safety, and restoring these individuals to productive citizenship. Before coming to the Mayor's Office, Ms. Light worked at the Children & Family Justice Center where she detailed the impact of zero tolerance policies in the Chicago Public Schools and

fostered support for alternatives to suspension and expulsion. Ms. Light previously served in various capacities at The Abraham Fund, the Center for Battered Women's Legal Services in New York, NY and at the Youth Law Center in Washington, D.C. Ms. Light received her B.A. from Woodrow Wilson School of Public & Internal Affairs at Princeton University and her J.D. from New York University School of Law.

Roger Logue

Roger Logue is currently the Executive Director of Prisoner Release Ministries (PRM), which he helped create in 1976. PRM is an organization that is committed assist ex-offenders with support services and job placement. Mr. Logue was incarcerated from 1961 to 1976 and while in prison wrote programs designed to help ex-offenders gain employment once they were released, Prisoner Release Ministries under Roger's direction helped locate jobs for 13,000 ex-offenders. He has worked with the following agencies including the United Way of Will County, Agencies United, Community Services Council of Will County and the Exchange Club of Joliet. Roger has a Bachelor's Degree in Psychology and a Master's degree in Criminal Justice from Lewis University.

Gloster Mahon

Mr. Mahon currently serves as the Associate Director of the Office of Prevention for the Illinois Department of Human Services (IHDS). He has worked with non-profit organizations and is a practitioner in the human/community development arena. He also assisted in developing a model program called CADRE (Combating Drugs and Alcohol through Rehabilitation and Education) for the Chicago Housing Authority. This program provided substance abuse treatment to adult residents and prevention activities to youth in public housing communities. Mr. Mahon has also worked in welfare reform, violence prevention groups and formed his own for-profit company in the private sector. In 2001 he served as the Deputy Director of the Department of Alcoholism and Substance Abuse for the Illinois Department of Human Services (IHDS) and is responsible for all matters involving Prisoner Reentry. Mr. Mahon has a Master's degree in Community Economic Development from Southern New Hampshire University.

Linda Martin

Ms. Martin is the Executive Director of R.I.T.A.S. Ministry and has been actively involved with inmates and their families since 1995 when she began volunteering for the Illinois Department of Corrections, Prison Fellowship and the Kane County Jail. Ms. Martin has also developed and conducted various programs and trained numerous volunteers to minister to inmates and ex-offenders through their service and aftercare programs. Ms. Martin has been the recipient of numerous awards including the Lincoln School of Excellence and the Women of Distinction Award and an award from the Illinois Courts for bring the restorative justice concept to Illinois.

Darrell McGibany

Mr. McGibany is the Director of Madison County Probation and Court Services Department, Madison County Illinois. In this role, he provides management oversight of all department divisions, juvenile and adult probation, juvenile detention, pretrial services, community satellite offices and drug court. Mr. McGibany has held previous positions within the department including Associate Director, Superintendent of Detention and Probation Officer. He is a member of the Department and has been a probation professional for 30 years. Mr. McGibany is actively involved on many boards and groups

including APPA, Region 9, Illinois, Illinois Probation and Court Services Association, Illinois Juvenile Justice Commission, American Correctional Association, National Juvenile Detention Association, Illinois Correctional Association, International Community Corrections Association and IDOC Juvenile Advisory Board. He holds a B.A. Degree in Government/History and an M.A. Degree in Political Science and Criminal Justice.

Jorge Montes

Jorge Montes received his bachelor's degree in communications from Loyola University of Chicago in 1985 and a law degree from the same school in 1988. He has served multiple terms as president of the Hispanic Lawyers Association of Illinois and as a member of the board of directors of various bar associations and colleges, including the Chicago Bar Association. He first came to appointed office in 1994 when Attorney General Burris named him as a liaison to the Hispanic community. That same year Gov. Jim Edgar appointed him to the Illinois Prisoner Review Board. Two years later he was re-appointed to that board and in 2004 he was named chairman of the parole board by Governor Blagojevich. Mr. Montes has not only been active in the legal and political communities, but he has also hosted television and radio programs, as well as published articles and pamphlets, including a series for the American Bar Association. In 1994 he also founded Montes & Associates, a seven- member general practice firm in Chicago. He is a frequent speaker, writer and guest on radio and television programs.

Jesse Montgomery, Jr.

Jesse Montgomery Jr. serves as the Deputy Director of the Parole Division for the Illinois Department of Corrections. Mr. Montgomery has been with the Department for over seventeen years, serving in numerous roles and units including Correctional Officer, Sergeant, Internal Affairs, Superintendent, Assistant Warden of Operations and Programs, Warden, and District Deputy. Mr. Montgomery currently oversees implementation of Operation Spotlight, Governor Blagojevich's parole reform initiative, co-chairs the Public Safety Committee for the Reentry Commission, and has been recognized for his achievements and service by numerous community and non-profit organizations. Mr. Montgomery is a graduate of Prairie State College.

Sherri Moses

Sherri Moses the Policy Director at the Illinois Department of Employment Security (IDES), where she led the development of the Re-Entry Employment Service Program (RESP), a statewide job preparation and placement initiative for the formerly incarcerated. Sherri's policy work at IDES has focused on re-entry, workforce development, and gender equity. She has also led several IDES strategic planning initiatives. Before joining IDES, she worked as a policy specialist and advocate for low-income youth at the Illinois Caucus for Adolescent Health, where she led a statewide coalition on the intersection of welfare, race, and reproductive rights. Previously, she developed one of the nation's first Individual Development Account Programs, financial literacy programs for women and girls, and led advocacy efforts that resulted in changes to IL welfare law to include entrepreneurship as an employment option. As a Ph.D. candidate in English literature, she has taught college-level English, film, and women's studies at the University of Michigan and at several Michigan prisons. Sherri has a Bachelor's degree in English & Mass Communications from Wayne University and a Master's degree in English from the University of Michigan.

James Noe

Mr. Noe has attained a master's degree in Public Health from Northern Illinois University and is a certified AODA counselor with the Illinois Alcoholism and other Drug Abuse Professional Certification Association. He has been employed as a supervisor in the field of addictions for over 17 years, working almost exclusively in the development and implementation of programs specifically for the criminal offender. Mr. Noe supervised programs operating in the Winnebago County Adult Transition Center, prior to its closure. Currently he manages a residential long-term program, as well as Intensive outpatient and continuing care programs within the Rockford community, and inside the men's and woman's jail in Winnebago County.

Jennifer Novak

Jennifer Novak is the Assistant Director in the Office of Housing Coordination Services at the Illinois Housing Development Authority (IHDA). IHDA's Office of Housing Coordination Services (OHCS) serves as the housing information clearinghouse for the State of Illinois and has the lead role in the development of the State's Consolidated Plan. The Consolidated Plan serves as the application for HUD's formula grant programs—HOME, CDBG, ESG, and HOPWA. OHCS also provides information on other Federal, State and private housing programs in Illinois. OHCS is also the lead staff for the Illinois Housing Task Force, its subcommittees and working groups. She has represented IHDA on the Governor's Rural Affairs Council, the Illinois Disabilities Services Advisory Committee, the Older Adult Services Advisory Committee, and at various conferences. Jennifer earned a bachelor's degree with honors from DePaul University.

David Olson, Ph.D.

David Olson is Chairman and Associate Professor of Criminal Justice at Loyola University Chicago, a member of Loyola's graduate faculty, and a senior scientist at the Illinois Criminal Justice Authority. Prior to his appointment at Loyola, Dr. Olson was the Director of Illinois' Statewide Drug and Violet Crime Control Strategy Impact Evaluation Program, where he oversaw the evaluation and monitoring of federally funded drug control efforts in the state. He previously served as staff to the Illinois Governor's Task Force on Crime and Corrections (1992-1993), the Illinois Legislative Committee on Juvenile Justice (1994-1996), and the Illinois Truth-in-Sentencing Commission. (1996-1998), and worked with a variety of local agencies during his 19 years in the field of criminal justice. Dr. Olson has managed more than \$5.5 million in research grants from federal, state and local units of government, has more than 100 presentations at professional conferences, training symposia and governmental hearings, and has published more than 90 articles, research reports and research bulletins. David's most recent research has been published in *Law and Human Behavior*, *Law and Policy*, *The Journal of Law and Economics*, and *Justice Research and Policy*. Dr. Olson received his B.S. in Criminal Justice from Loyola University Chicago, his M.A. in Criminal Justice from the University of Illinois at Chicago, and his Ph.D. in Political Science/Public Policy Analysis from the University of Illinois at Chicago, where he was the recipient of the Assistant United States Attorney General's Graduate Research Fellowship.

Robin D. Olsen

Robin Olsen is a Senior Policy Development Advisor in the Office of Governor Rod Blagojevich. Olsen began work with the Blagojevich Administration in April 2003. As a Senior Policy Advisor, Olsen generates and implements policy ideas that reflect the Governor's priorities as well as performs research and policy assessments for current

questions and initiatives. Olsen's responsibilities include public safety issues, focusing in particular on both law enforcement and substance abuse treatment initiatives. Prior to joining the Governor's Office, Olsen worked for a family foundation in Chicago, concentrating on community development and strategies to address the high number of returning offenders to the community. She developed a turn-around strategy for a grassroots community development corporation and worked to open a local job center. Earlier in her career, Olsen worked as a management consultant with McKinsey and Company, focusing on clients in the health care, financial services, and nonprofit sectors. A graduate of Princeton University, Olsen majored in politics.

Tracy Parsons

Tracy Parsons is President and Chief Executive Officer of The Urban League of Champaign County (ULCC). Mr. Parsons has served in this capacity since 1994. The ULCC is an affiliate of The National Urban League. He established Urban League Development Corporation, establishing ULCC as a model organization, and formed multiple collaborations with government, schools, colleges and universities. Tracy Parsons began his business career as a District Manager for both the Deans Food Company and the Pillsbury Company. Moreover, Parsons served as a "Distinguished Sales" person with the Donnelly Yellow Pages and he was the Executive Director of Chicago's largest private sector employment program, annually serving over 6,000 students with over employers participating. Mr. Parsons has served on numerous Boards of Directors, Chamber of Commerce, Champaign County Alliance, Provena Covenant Hospital, Black Community Network, and Community Collaborative for Economic Development, Project 2000, National City Bank, and Urban Exchange Center. Mr. Parsons is a graduate of Northwestern University.

Jacqueline Reed

Jacqueline Reed is the Founder and Executive Director of the Westside Health Authority (WHA), a 501(c)3 community-based organization that works in the areas of employment, economic development, community organizing, youth development, technology, and health promotions. Founded in 1988, WHA is a catalyst for improving both the physical and economic health of residents on Chicago's West Side. Mrs. Reed combines over 25 years of experience in social work with community organizing. Her diverse experience from private and public caregiving institutions enriched her capacity to understand the complexities of change from within the community. As a community activist, Mrs. Reed has provided leadership around organizing citizens to have a voice in shaping public policies and programs on the West Side. WHA's most recent accomplishment was the development of the Austin Wellness Center, a \$9.6 million healthcare facility which opened in July 2004. Jacqueline Reed holds a M.A. in social service administration from the University of Chicago.

Julio Rodriguez

Mr. Rodriguez is currently the Director of Program Services, Bureau of Workforce Development, Illinois Department of Commerce & Economic Opportunity (DCEO). He has worked in the field of human services for the last twenty years both in a direct service capacity and at the senior management level. Prior to coming to work for DCEO, he was a Senior Public Administrator for the Illinois Department of Human Services (IDHS) and was on the leadership team involved in the original planning and implementation of IDHS when it was created in 1997. Between 1994 through 1996 Mr. Rodriguez worked in the Governor's Office as part of the staff of the Taskforce on Human Services Reform

where the concept for IDHS was developed. Julio has been involved in a number of community projects and is the founder of the Latino Lead non-for-profit organization. He also serves as a consultant for a number of public and private organizations and sits on a number of oversight boards. Mr. Rodriguez was inducted into the International Who's Who for Public Service and in 1991 was presented with the Illinois Prevention Leadership award, and in 2003, was a recipient of the Community Leadership Awards for Philanthropy. Mr. Rodriguez has a degree in business from DePaul University.

Pamela F. Rodriguez

Ms. Rodriguez is Executive Vice President at Illinois Treatment Alternatives for Safe Communities (TASC). Since joining TASC in 1982, Ms. Rodriguez is responsible for development and implementation of a broad array of programs including corrections and re-entry services, HIV/AIDS outreach, testing and counseling, TANF co-location and Recovery Coaches in child welfare, as well as overall responsibility for TASC's research and court and criminal justice services throughout Illinois. Ms. Rodriguez is Treasurer of the National TASC Board, is a member of the Redeploy Illinois Oversight Board, the Illinois Juvenile Justice Commission, and the Cook County Disproportionate Minority Contact working group focused on the adult criminal justice system. Ms. Rodriguez has a M.A. in Social Services Administration from the University of Chicago and has presented trainings in Project Management, Leadership and other related topics on a national level.

Brian Rowland

Mr. Rowland is the Founder/CEO of A Safe Haven L.L.C. assisting those suffering from diseases of drug and alcohol addiction. Today, A Safe Haven offers the range of services supportive housing, case management, childcare, job training and independent living programs, averaging over 395 residents a year from criminal justice institutions, 140 residents a year from homeless programs, families from Women with Children programs, and over 800 people a year from private programs resulting in almost 6,000 residents in the last three years. In the past year, A Safe Haven has added affordable housing to their mix of services providing the next step toward independence. Mr. Rowland has a Bachelor Degree in Business Finance from Loyola University.

Angela Rudolph

Angela Rudolph currently serves as a Program Director at Chicago Metropolis, where she focuses on justice and violence issues. Rudolph joined Chicago Metropolis in 2003 after serving as the Education Director with the Chicago Urban League. There, she was responsible for coordinating the development and implementation of the League's education and youth development programming. Prior to joining the Chicago Urban League, Rudolph served as a Program Associate with the policy and advocacy division of the Ounce of Prevention Fund, a public-private partnership that integrates the unique perspective and resources of these two sectors to promote the healthy development of low-income young children and their families. Rudolph holds a Master's in Education from the University of Illinois at Urbana-Champaign and a B. A. from Union College in American History.

Brenda A. Russell

Brenda Russell has served as Director of the Illinois Department of Employment Security (IDES) since February 2003 following her appointment by Governor Rod. R. Blagojevich. Under her leadership, among many other accomplishments, IDES has created a unit focused on helping formerly incarcerated individuals find

employment. Prior to her IDES appointment, Ms. Russell served for three years as Resident Vice President of CSX Transportation, Inc., representing the railroad industry on legislative matters. From 1998-2000, she worked for CSX Corporation as Vice President for Community Relations, assisting in developing the company's successful community relations program. Ms. Russell began her career at CSX Transportation as counsel in 1994. As graduate of Harvard with a degree in Economics, Ms. Russell also holds a Juris Doctorate from the University of Virginia Law School.

Howard Saffold

Mr. Saffold is currently the Chief Executive Officer of Positive Anti-Crime Thrust, Inc. (PACT). Previously, he served as the Chief of Executive Security for two Mayors of the City of Chicago where his responsibilities included administering a specialized law enforcement unit, including the selection, training and assignment of personnel. Mr. Saffold retired from the Chicago Police Department after 25 years of service. He has received several awards and special accomplishments over the years. Mr. Saffold holds a B.S. in Business Administration from Chicago State University and an M.A. in Urban Studies from Northeastern Illinois University.

Reverend Leroy Smith Jr.

Rev. Smith has an extensive record in the field of social and human services. He helped found the Jesus Cares Ministry, which was incorporated in 1984. Jesus Cares has assisted hundreds of residents in the Macon County area for over 20 years. Rev. Smith has orchestrated another entity of the Jesus Cares Outreach Center, which is the JOMIC Model, developed to assist ex-offenders reentering society. He continues to serve the community by promoting stability, empowerment, and economic self-sufficiency to the less fortunate and those in need.

Whitney Smith

Whitney Smith joined the Joyce Foundation as the Employment Program Manager in November 2005. The Employment Program awards approximately \$7 million in grants annually to support the development of public policies that help low income workers get jobs, enable them to move up the job ladder, and increase the incentives and benefits of staying employed. Before joining the Foundation, Whitney served as Associate Director at the Chicago Jobs Council where she coordinated workforce and welfare policy advocacy activities. When working in New York, she helped homeless families' secure permanent housing and developed job training programs for low-income woman. Ms. Smith received a Bachelor's Degree from Bowdoin College and a Master's Degree in Social Service Administration from the University of Chicago.

Theodora Binion Taylor

Ms. Binion Taylor presently serves as Director of the Illinois Department of Human Services, Division of Alcoholism and Substance Abuse. This office is responsible for a \$200+ million budget geared toward drug intervention and treatment. She has worked in the field of substance abuse since 1981 starting as substance abuse counselor on the West Side of Chicago. Ms. Binion Taylor additionally served on the Centers for Disease Control and Prevention, HIV Prevention Planning Group for Chicago, working on the Needs Assessment and Cap Analysis committees Mental Health Treatment. Her educational Background includes a Bachelor's of Science in Commerce, Master's degree in Rehabilitative Administration from DePaul University and a Master's degree in Divinity from the Chicago Theological Seminary.

Judge George W. Timberlake

Judge George W. Timberlake is currently Chief Judge of the Second Judicial Circuit. He is a board member of the State of Illinois Redeploy Oversight Board, Illinois Juvenile Justice Initiative, Illinois Juvenile Detention Alternatives Initiative, and Illinois Balanced and Restorative Justice Project. He is a member of the Supreme Court Study Committee on Juvenile Justice, MacArthur Foundations Model System Project Steering Committee, and PBIS Statewide Leadership Team. He serves on the Executive Committee of Governor Community Safety and Re-entry Working Group, is Chairman of the Second Judicial Circuit Juvenile Justice Council, and is Chairman of the Conference of Chief Judges Juvenile Committee. Judge Timberlake has a Bachelor's degree in Political Science, Juris Doctorate, and Master's degree in Business Administration from the University of Illinois.

Linda Van Dyke

Linda Van Dyke has served as Chief Probation Officer for the East Alton Community Corrections Center since 1998. She supervises a staff of sixteen who work with offenders in the northern communities of Madison County. As her department's coordinator for implementation of evidence-based practice, she is deeply involved in community and statewide efforts to improve probation practice. During the years 2002 through 2004 she served as the first female President of the Illinois Probation & Court Services Association and received its highest award, The Gene Hughes Award for Highest Standards of the Profession, in 2005. She is also a former board member of the American Probation & Parole Association. Linda graduated from the University of Illinois in 1972.

Gregory Washington

Gregory Washington has been the Executive Director of the Grand Boulevard Federation since 1995. The Grand Boulevard Federation is one of five community federations formed as part of the Governor's Task Force on Human Services Reform. Before assuming this position, Mr. Washington worked at Centers for New Horizons, a multi-service, human capacity building organization serving children and families in Grand Boulevard. Mr. Washington is also a member of the Board of Trustees for the Lugenia Burns Hope Center, an institute for training residents to be community organizers and leaders. In addition, Mr. Washington is also on the Board of Directors for "Community Organizing and Family Issues" (COFI), and a member of the Mid-South Planning and Development Commission. Mr. Washington received a Bachelor's degree from Beloit College and a Master's degree in political science from the University of Chicago. He was trained as a psychotherapist at the Chicago Counseling and Psychotherapy Center where he practiced from 1977-1982.

Reverend Patricia Watkins, CPA

Rev. Watkins is the founding director of the TARGET Area Development Corporation established in 1995 by the Ambassadors for Christ Church, community leaders, and local clergy. Born in Chicago, she studied accounting at DePaul University and earned her Bachelor's Degree at Roosevelt University and a Master's of Human Services Administration at Spertus College. Before entering the field of community leadership development and organizing, Rev. Watkins worked as a social service director, a church administrator, and an affordable housing developer. Her concern for the African American people led her to boldly challenge the traditional public safety dialogue in her own community and to effectively launch community-driven initiatives that reduce crime and incarceration in the Auburn Gresham neighborhood. In addition, Rev. Watkins is the co-founder and convener of the Developing Justice Coalition, a cross-community alliance of local

organizing groups whose focus is public safety, justice reform policy, and ex-offender issues. Through her leadership, many community groups from around the city have embarked on a bold new approach toward increasing public safety and reducing violence utilizing methods that result in the least amount of criminalization of area residents.

B. Diane Williams

Diane Williams was named President of Safer Foundation in February 1996. The Safer Foundation is one of the nation's largest private non-private providers of social services, education programs and employment training and placement exclusively targeting offenders and ex-offenders. Under contract with the Illinois Department of Corrections, Safer manages two large adult transition centers with a total of 550 beds. Ms. Williams has an undergraduate degree in Education. She also has an MBA from Northwestern University's Kellogg School of Management, and has over 20 years of management experience in the telecommunications industry. Ms. Williams is a member of the National Institute of Corrections Advisory Board. She has served in consulting roles for the U.S. Department of Labor, Department of Justice, Department of Health and Human Services, Department of Housing and Urban Development and the Council of State Governments Reentry Initiative, and is frequently called upon by The Urban Institute and other agencies to lead and participate in reentry programs and planning.

Lance Williams

Dr. Williams is the Assistant Director at Northeastern University's Center for Inner City Studies (CICS). He is also an instructor of Inner City Studies at CICS and an adjunct faculty member in the School of Public Health at the University of Illinois at Chicago (UIC). Dr. Williams' work as an activist-scholar is exemplified by his involvement as a founding member of the grassroots organization Voice of the Ex-offender (V.O.T.E.). Reformed ex-offenders founded V.O.T.E., the most highly profiled ex-offender advocacy group in Chicago. Dr. Williams has been working with V.O.T.E. to understand, in an ethnographic way, the far-reaching implications for understanding how and why marginalized populations mobilize themselves to shape public policy. In addition to his other work, Dr. Williams has been doing engaged research on race-related public policy and health disparities among African Americans at the University of Illinois' Institute for Research of Race and Public Policy.

Paula Wolff

Paula Wolff is a Senior Executive at Chicago Metropolis 2020, a regional policy advocacy organization. The Justice/Violence program at Metropolis works at the local, regional and state levels to improve policy in the area of justice/violence and to break the cycle of violence and incarceration. Prior to CM2020, Wolff served between 1992-00 as President of Governors State University. Between 1977 and 1990, Wolff served as Director of Policy and Planning for Governor James R. Thompson. In 1990-91, she directed Governor Jim Edgar's Transition Team as she had participated in Governor James R. Thompson's in 1976-77. Prior to her appointment as GSU President, she was a Visiting Fellow at the John D. and Catherine T. MacArthur Foundation. Wolff has a B.A. from Smith College and an M.A. and Ph.D. from the University of Chicago in political science. She serves on numerous boards including the Joyce Foundation, the Ariel Capital Management Board, Harris Insight Funds, the Metropolitan Planning Council, and the Johnson Foundation, Chair of the University of Chicago Hospitals Board and a Trustee and Vice Chair of the University of Chicago Board.

appendix F

Governor's Community Safety and Reentry Working Group Issues Subcommittees

Public Safety

Co-Chairs:

Jesse Montgomery, Deputy Director, Parole Division, Illinois Department of Corrections

Tio Hardiman, Director, Gang Mediation Services,
CeaseFire, University of Illinois at Chicago

Sergeant Luis Gutierrez, Illinois State Police & President,
Hispanic Law Enforcement Association (HISLEA)

Darryl McGibany, Director, Madison County Probation & Court Services

Honorable Jeffrey O'Connor, Chief Judge of the 14th Judicial District,
Civil/Criminal Felony Division – Rock Island County

Honorable Judge George Timberlake, Chief Judge,
Second Judicial Circuit – Jefferson County

Stewart Umholtz, States Attorney, County of Tazewell

Tom Johnson, Illinois Prisoner Review Board

Paul Froehlich, Illinois State Representative, 56th District

Susan Silver, U.S. Probation and Parole Officer – Central District of Illinois

Sam McDade, Coordinator, Community Support Advisory Council – South

State Agency Team:

Bill Buckner, Crime Policy Development Advisor, Office of the Governor

Lori Levin, Director, Illinois Criminal Justice Information Authority

Dr. David Olson, Senior Scientist, Illinois Criminal Justice Information Authority;
Chairman, Department of Criminal Justice, Loyola University

Phillip Stevenson, Illinois Criminal Justice Information Authority

Jorge Montes, Chairman, Prisoner Review Board

Ken Knox, Central/Southern Regional Parole Supervisor, Illinois Department of Corrections

Sharon Shipinski, Senior Policy & Programs Advisor, Illinois
Department of Corrections

Jac Charlier, Northeastern Regional Parole Supervisor, Illinois Department of Corrections

Tincie Harris, Illinois Department of Corrections

Housing

Co-Chairs:

Kelly King Dibble, Executive Director, Illinois Housing Development Authority

Sue Augustus, Executive Director, Corporation for Supportive Housing

Tumia Romera, Office of Congressman Danny K. Davis, 7th District

Tracy Parsons, President, Urban League of Champaign (Designee: Diane Beetz)

Michelle Light, Assistant to the Mayor for Reentry Initiatives,
Office of the Mayor, City of Chicago

Reverend LeRoy Smith, Jr., Founder, Jesus Cares Ministries of Decatur

Melinda Haag, Executive, Crowe, Chizek & Company, LLC

Brian Rowland, Founder/CEO, A Safe Haven

Commissioner Earlene Collins, Cook County Commissioner – District 1
(Designee: Bill Peoples)

Brian Allen, CEO, Mental Health Centers of Central Illinois

Lore Baker, Dove/Homeward Bound

Jean Butzen, President/CEO, Lakefront Supportive Housing

Bob Dougherty, Executive Director, St. Leonard's Ministries

John Fallon, Program Director, Prison Aftercare Program, Thresholds

Andy Geer, Executive Director, Heartland Alliance

Reverend Doris Green, Director of Community Affairs, AIDS Foundation of Chicago

Janet Hasz, Executive Director, Supportive Housing Providers Association

Carl Jones-EL, Reentry Coordinator, Continuity Clinic, Cermack Health Services

Gladys Jordan, President, Interfaith Housing Development Corporation of Chicago

Steve Knox, Executive Director, Triangle Center

Allen (Skip) Land, COO, A Safe Haven

Helen Latimore, AMER-I-CAN

Dawn Layne

Mike Loschen, Village of Rantoul-CD

Anthony Lowery, Housing Director, Safer Foundation

Yvonne Mesa-Magee, Westside Health Authority

Brenda Palms Barber, Executive Director, Ambassadors for Christ

Thom Pollock, Executive Director, Crosspoint Human Services

Jacqueline Reed, Executive Director, Westside Health Authority

Jim Rose, Homestead Corporation

Kublai Toure, AMER-I-CAN

John Sullivan, Director of Mental Health Services, Champaign

J. Schulenburg, Provena Health

Reverend Leroy Smith, Housing Commissioner Decatur

Patricia Watkins, Executive Director, Developing Justice Coalition

Diane Williams, President/CEO, Safer Foundation

State Agency Team:

Joyce Probst, Senior Policy Development Advisor, Office of the Governor

Jennifer Novak, Assistant Director II, Illinois Housing Development Authority

Rick Guzman, Manager, Office of Reentry Management &
Community Safety, Illinois Department of Corrections

Toni Barnett, Illinois Department of Employment Security

Jim Fagan, CCI-Peoria ATC, Illinois Department of Corrections

Fred Nettles, Illinois Department of Human Services

Katherine Rush, Illinois Department of Veterans' Affairs

Health & Behavioral Health

Co-Chairs:

Theodora Binion-Taylor, Associate Director, Division of Alcoholism & Substance Abuse, Illinois Department of Human Services

Melody Heaps, President, Treatment Alternatives for Safe Communities (TASC)

Lou Douglas, Springfield Community Outreach Coordinator, Gateway Foundation

Dr. Lance Williams, Assistant Director, Northeastern Illinois University, Center for Inner City Studies

Jim Noe, Program Manager, Rosecrance, Rockford

Benneth Lee, Community Liaison and Reentry Specialist, Treatment Alternatives for Safe Communities

Chip Coldren, President, John Howard Association

Jim Anderson, Vice President Corporate, BI Incorporated

Karen Barber, Divisional Director, Cornell Companies

John Fallon, Program Director, Prison Aftercare Program, Thresholds

Mark Ishaug, Executive Director, AIDS Foundation of Chicago

Dan Boehmer, Executive Director, Jefferson County Comprehensive Services

Bruce Carter, Executive Director, The Wells Center

Angela Bowman, CEO, IADDA

Craig Cooper, Area 9 Administrator, TASC Edwardsville

Coleen Glanagan, Area 8 Administrator, TASC Murphysboro

Lynn O'Shea, CEO, The Association for Individual Development (Aurora)

Ron Vlasity, Vice President, Family Guidance

Richard Jackson, Vice President of External Relations, Habilitative Systems, Inc.

Tiffany Kilpatrick, GLATTC, Jane Addams College of Social Work, University of Illinois at Chicago

Armando Reyes, Pilsen-Little Village Community Mental Health Center

Dan Lustig, Associate Director, Haymarket House

Charlie Fasano, John Howard Association

Paul Goldstein, University of Illinois – Great Cities Project

Peggy Flaherty, Thresholds

Reverend Russell J. Hagen, President, Chestnut Health Systems

Marco Jacome, Executive Director, Healthcare Alternative Systems, Inc.

Dr. Art Lurigio, Loyola University at Chicago

Sterling Gildersleeve, A Safe Haven

Kate Mahoney, Executive Director, PEER Services, Inc.

Peter McLenighan, Director, Stepping Stones

Alan Sandusky, CEO, South Suburban Council

Dr. Terra Thomas, President, HRDI

Dorothy Thomas, Director, Addiction Services, Loretto Hospital

Lance Williams, NIU, Assistant Director, Jacob H. Carruthers Center for Inner City Studies

Doris Reynolds, Executive Director, Substance Abuse Services, Inc.

Reverend Doris Green, Director of Community Affairs, AIDS Foundation of Chicago

Michelle McMullin, Division Director, Behavioral Health
Association of Individual Development

Dr. Laurie Crowder, Jane Addams College of Social Work, University of Illinois at Chicago

Dr. Lisa Braude, Director of Research and Policy, TASC

Lorena Roque, Research Associate, TASC

Sharon Sheridan, Deputy Director of Communications & Marketing

State Agency Team:

Dr. Anderson Freeman, Director of Forensic Services, Division of
Mental Health, Illinois Department of Human Services

Dr. Dave Olson, Senior Scientist, Illinois Criminal Justice Information Authority;
Chairman, Department of Criminal Justice, Loyola University

Mark Montgomery, Southern Region Manager, Placement
Resource Unit, Illinois Department of Corrections

Bruce Bonecutter, Division of Mental Health, Illinois Department of Human Services

Dona Howell, Coordinator, Addiction Recovery Management
Services Unit, Illinois Department of Corrections

Lillian Pickup, Administrator, Planning & Performance
Management, Department of Human Services

Dr. Willard Elyea, Medical Director, Illinois Department of Corrections

Dr. Amy Ray, Chief of Mental Health, Illinois Department of Corrections

Jimmie Whitelow, Public Service Administrator, Illinois
Department of Children & Family Services

Lisa Cohen, Department of Human Services

Employability, Education & Training

Co-Chairs:

Brenda Russell, Director, Illinois Department of Employment Security

Paula Wolff, Executive Director, Metropolis 2020

Diane Williams, President/CEO, Safer Foundation

Dr. Davis Jenkins, Senior Fellow, University of Illinois - Great Cities Institute

Greg Washington, Executive Director, Grand Boulevard Federation

Brenda Palms Barber, Executive Director, North Lawndale Employment Network

Illinois State Representative Constance A. Howard, 34th District

Reverend Henry Barlow, Founder, Chicagoland Youth & Adult Training Center

Whitney Smith, Associate Director, Chicago Jobs Council

Howard Saffold, CEO, Positive Anti-Crime Thrust (PACT)

Illinois State Representative Karen Yarbrough, 7th District

Jeffery Allington, Chicago Jobs Council

Lauri Alpern, Enterprising Kitchen

Diane Beetz, Champaign County Urban League

Joy Dawson, Safer Foundation

David Disabato, Heartland Alliance for Human Needs & Human Rights

Vickie Herman, Illinois Central College

Lois Hummel, Independent Consultant

Johnnie Kawolsky, UCAN Project, Lifeskills Center, Peoria

Preston Morgan, Illinois Community College Board

Michelle Light, Assistant to the Mayor for Reentry Initiatives, Office of the Mayor-City of Chicago

William Peppers, Positive Anti-Crime Thrust (PACT)

Jennifer Phillips, The Joyce Foundation

Stephanie Sommers, Safer Foundation

Michael Elliott, Roosevelt University

Steve Haight, Promised Land Employment Services

Lisa Hampton, Chicago Jobs Council

Angela Rudolph, Chicago Metropolis 2020

State Agency Team:

Jack Lavin, Director, Illinois Department of Commerce & Economic Opportunity

Julio Rodriguez, Director of Program Services, Bureau of Workforce Development, Illinois Department of Commerce & Economic Opportunity

Sherri Moses, Policy Director, Illinois Department of Employment Security

Rick Guzman, Manager, Office of Reentry Management & Community Safety, Illinois Department of Corrections

Brian Cooper, Illinois Department of Corrections

Algie Crivens III, Illinois Department of Employment Security

Ted Duckett, Illinois Department of Employment Security

Cynthia Lockett, Illinois Department of Employment Security

Christine Rothwell, Illinois Department of Corrections

Patricia Rusoff, Illinois Department of Employment Security

Eric Searcy, Illinois Department of Employment Security

Roger Williams, Acting Superintendent, School District # 428, Illinois Department of Corrections

Faith, Family & Community

Co-Chairs:

Rick Guzman, Manager, Office of Reentry Management & Community Safety,
Illinois Department of Corrections

Reverend Patricia Watkins, Executive Director, Developing Justice Coalition

Jackie Reed, Executive Director, West Side Health Authority

Reverend John Crawford, Founder and President, F.A.I.T.H., Inc.

Sam Crawford, Case Manager & Outreach Worker, F.A.I.T.H., Inc.

Linda Martin, Executive Director, R.I.T.A.S. Ministry

Herman Brewer, Program Director, MacArthur Foundation

Johnnie Kawolsky, Client Services Specialist, UCAN Project – Lifeskills Center, Peoria

Brian Banks, Partner, BAC Partners

Kublai Toure, AMER-I-CAN, Illinois

Illinois State Representative Lou Jones, 26th District

Walter Boyd, Protestants for the Common Good

Sharod Gordan, Target Area Development & Community Support
Advisory Council – South

Rochelle Perry, Policy Field Educator/Organizer, Safer Foundation

Reverend Leroy Smith, Jesus Cares Ministries of Decatur

Sam McDade, Coordinator, Community Support & Advisory Council –South

James Coleman, Project Director, Prison Reentry Services,
Community Support Advisory Council-West/North

Yvonne Mesa-Magee, Westside Health Authority – Weed & Seed

Hakeem Ward, Community Support Advisory Council – West/North

Jeffery Jones, AGORA & Target Area Development

Benneth Lee, Community Liaison & Reentry Specialist, TASC

Natalie Hagan, Community Support Advisory Council – South

Myra Jordan, Community Support Advisory Council – South

Della Mitchell, Brand New Beginnings

Patricia Ellis, The CORE Center

Comrad Hayes, UCAN Project

Amy Schnieder, UCAN Project

Amanda Blucher, Westside Health Authority

Darlyn Gaston, Westside Health Authority

Anthony Bowman, Westside Health Authority

State Agency Team:

Steve Guerra, Associate Director, Division of Community Health & Prevention,
Illinois Department of Human Services

Deb Denning, Deputy Director, Women & Family Division,
Illinois Department of Corrections

Michael Byrd, Regional Administrator, Cook/South, Illinois
Department of Children & Family Services

Jimmie Whitelow, Public Service Administrator, Illinois
Department of Children & Family Services

Leslie Balonick, Senior Policy Administrator, Illinois Department of Corrections

appendix G

Governor's Community Safety and Reentry Working Group Systems Subcommittees

Reception & Classification

Chairs:

Dr. David Olson, Senior Scientist, Illinois Criminal Justice Information Authority; Chairman, Department of Criminal Justice, Loyola University

Steven Karr, Manager, Planning & Research, Illinois Department of Corrections

Dr. Anderson Freeman, Director of Forensic Services, Division of Mental Health, Illinois Department of Human Services

Honorable Jeffrey O'Connor, Chief Judge, Civil/Criminal Felony Division, Rock Island County

Howard Saffold, CEO, Positive Anti-Crime Thrust (PACT)

Dr. Davis Jenkins, Senior Fellow, University of Illinois, Great Cities Institute

Dr. Kevin Downey, Director, Center for Excellence for Criminal Justice, Treatment Alternatives for Safe Communities (TASC)

John Fallon, Program Director, Prison Aftercare Program, Thresholds

State Agency Team:

Lori Levin, Director, Illinois Criminal Justice Information Authority

Dona Howell, Coordinator, Addiction Recovery Management Services Unit, Illinois Department of Corrections

Colleen MacRunnells, Assistant Warden, Illinois Youth Center-St. Charles, Illinois Department of Corrections

Prison-Based Reentry Preparation Systems

Chairs:

Deb Denning, Deputy Director, Women & Family Services,
Illinois Department of Corrections

Leslie Balonick, Senior Policy & Program Development
Administrator, Illinois Department of Corrections

Pam Rodriguez, Executive Vice President, Treatment
Alternative for Safe Communities (TASC)

Illinois State Representative Constance A. Howard, 34th District

Illinois State Representative Lou Jones, 26th District

Sam Crawford, Case Manager & Outreach Worker, F.A.I.T.H., Inc.

Chuck Schwartz, Senior Vice President of Business Development, Gateway Foundation

Rebecca Douglas, Area Director - Corrections, Gateway Foundation

Reverend Patricia Watkins, Executive Director, Developing Justice Coalition

Tony Salaam, Vocational Rehabilitation Therapist, Safer Foundation

Xavier Williams, Outreach Worker, CeaseFire, University of Illinois at Chicago

John Peller, Director of State Affairs, AIDS Foundation of Chicago

Sam McDade, Coordinator, Community Support Advisory Council (CSAC) - South

James Coleman, Project Director, Prisoner Reentry Services, Community Support
Advisory Council (CSAC) - North/West, Westside Health Authority

Karen Barber, Divisional Director, Cornell Companies

Melinda S. Haag, Executive, Crowe, Chizek & Company, LLC

Whitney Smith, Program Manager, Joyce Foundation

Rochelle Perry, Policy Field Educator/Organizer, Safer Foundation

Laura Brookes, Policy Associate, Treatment Alternative for Safer Communities

Mary Jo Rizzo, Contract Specialist, Gateway Foundation

State Agency Team:

Roberta Fewes, Deputy Director, Program & Support Services,
Illinois Department of Corrections

Michael Rothwell, Warden- Sheridan Drug Prison & Reentry Program,
Illinois Department of Corrections

Roger Williams, Acting Superintendent, School District # 428,
Illinois Department of Corrections

Dr. Wendy Navarro, Acting Chief, Mental Health Psychiatric Services,
Illinois Department of Corrections

Dona Howell, Coordinator, Addiction Recovery Management Services Unit,
Illinois Department of Corrections

Post-Release Reentry Case Management

Chairs:

Rick Guzman, Manager, Office of Reentry Management & Community Safety,
Illinois Department of Corrections

Tracy Parsons, President, Urban League of Champaign

Illinois State Representative Karen Yarborough, 7th District

Roberto Ramirez, CEO, Tidy International

Darryl McGibany, Director, Madison County Probation & Court Services

Sergeant Luis Gutierrez, President, Hispanic Law Enforcement Association

Kevin Lyons, State's Attorney, County of Peoria

Melody Heaps, President, Treatment Alternatives for Safe Communities (TASC)

Janelle Prueter, Director of Corrections Programs,
Treatment Alternatives for Safe Communities

Daphne Baille, Director of Communications & Marketing,
Treatment Alternatives for Safe Communities

Bob Dougherty, Executive Director, St. Leonard's Ministry

Jim Noe, Program Manager, Rosecrance

Sue Augustus, Executive Director, Corporation for Supportive Housing

Linda Martin, Executive Director, R.I.T.A.S. Ministry

Herman Brewer, Program Director, MacArthur Foundation

Johnnie Kawolsky, Client Services Specialist, UCAN Project– Lifeskills Center, Peoria

Walter Boyd, Director of Ex-offender Opportunities, Protestants for the Common Good

Brian Rowland, Founder & CEO, A Safe Haven

Ray Soucek, President & CEO, Haymarket

Dan Lustig, Associate Director, Haymarket

Diane Beetz, Job Developer, Urban League of Champaign

Jim Anderson, Vice President Corporate, BI Incorporated

State Agency Team:

Brenda Russell, Director, Illinois Department of Employment Security

Sherri Moses, Policy Director, Illinois Department of Employment Security

Jesse Montgomery, Deputy Director, Parole Division, Illinois Department of Corrections

Jorge Montes, Chairman, Illinois Prisoner Review Board

Jac Charlier, Northeastern Regional Parole Supervisor, Illinois Department of Corrections

Ken Knox, Central/Southern Regional Parole Supervisor, Illinois Department of Corrections

Marva Arnold, Director, Human Capital Development,
Illinois Department of Human Services

Community Capacity Building & Sustainability

Chairs:

Steve Guerra, Associate Director, Division of Community Health
& Prevention, Illinois Department of Human Services,

Diane Williams, President/CEO, Safer Foundation

Facilitators:

Jodina Hicks, Vice President Public Policy & Community Partnerships, Safer Foundation

Gloster Mahon, Deputy Director, Illinois Department of Human Services

Honorable Judge George Timberlake, Chief Judge, Second Judicial Circuit, Jefferson County

Bennett Johnson, Vice President, Third World Press

Paula Wolff, Executive Director, Metropolis 2020

Jackie Reed, Executive Director, West Side Health Authority

Reverend LeRoy Smith, Founder, Jesus Cares Ministries of Decatur

John Pugliese, Vice President of Marketing & Development, Gateway Foundation

Gale Spencer, Associate Director of Program Initiatives, Gateway Foundation

George Williams, Director of Community Partnerships,
Treatment Alternatives for Safer Communities

Sharon Sheridan, Manager, Communications & Marketing,
Treatment Alternatives for Safer Communities

Jeffery Clemons, Sheridan Statewide Manager, Safer Foundation

Anthony Lowery, Housing Director, Safer Foundation

James Coleman, Project Director, Prisoner Reentry Services, Community
Services Advisory Council (CSAC), Westside Health Authority

Cory Muldoon, Community Organizer, Organization of the Northeast

Carrie Cox, Administrative Assistant, Safer Foundation

Mary Jo Rizzo, Contract Specialist, Gateway Foundation

State Agency Team:

Julio Rodriguez, Director of Program Services, Bureau of Workforce
Development, Illinois Department of Commerce & Economic Opportunity

Theodora Binion-Taylor, Associate Director, Division of Alcoholism
& Substance Abuse, Illinois Department of Human Services

Rick Guzman, Manager, Office of Reentry Management & Community Safety,
Illinois Department of Corrections

Sam Koschmann, Assistant to the Director, Division of Community
Health and Prevention, Illinois Department of Human Services

Jennifer Novak, Assistant Director, Office of Housing Coordination Services,
Illinois Housing Development Authority

appendix H

Public Hearing Summaries

Top Ten High-Impact Regions in Illinois

Aurora

Kane County (Aurora)

Overall Population: 457,122

Parole Population: 742 (5th)

Index Offense crime rate: 37th—but 6th in overall number of index crimes and Controlled Substance crimes

Kane County is the fifth most populous county in the state and is also fifth in number of parolees. Significantly, nearly 70% of the parolees who returned to Kane County returned to Aurora & Elgin. DuPage County which includes parts of Aurora is the county most likely to send felony offenders to IDOC.

- ✓ HEARING LOCATION: Provena Mercy Medical Center
- ✓ SPONSORING SUBCOMMITTEE: Health & Behavioral Health Sub-Committee—Co-chairs: Melody M. Heaps, TASC and Theodora Binion-Taylor, DASA
- ✓ HEARING DATE: May 9, 2005
- ✓ ATTENDANCE: Approximately 59
- ✓ ELECTED and/or STATE OFFICIALS PRESENT: Rick Guzman, IDOC
- ✓ SUBCOMMITTEE MEMBERS: Melody M. Heaps (co-chair); Lynn O’Shea; Dr. Anderson Freeman; Kate Mahoney; Peter McLenighan; and Allen Sandusky

Dominant or Recurring Theme(s):

- Community providers (i.e., substance abuse treatment, mental health, transitional living/housing, and job placement) across the state play a vital role in promoting the successful reintegration of formerly incarcerated people back into the community. Many provider groups attending the Aurora hearing spoke of a need for interdisciplinary cooperation between parole, treatment providers, community mental health center and health departments before, during and after incarceration.
- More resources need to be targeted to community-based reentry efforts. Several parolees and family members who attended the Aurora hearing cited difficulty in accessing services for substance abuse treatment, health and mental health challenges, job placement and housing.
- The Executive Director of the Kane County Health Department questioned how care for releasees (who may have no access to care and no insurance) would be adequately funded when the community mental health system is already overburdened.
- Several attendees mentioned the need for more long-term treatment centers in and around the southern Illinois regions.

Notable Quotes or Testimonies:

- One attendee discussed his two separate reentry experiences and has some very good things to say about how the reentry process has improved. The first time *“I was walked to the door and basically...I didn’t know where to go. [Now] there are resources available...thanks to God, TASC, Cornell Interventions, I have a chance now and I’m doing better than I’ve done in many, many years. So it’s out there, the support. These things are possible, but families, communities – it’s big.”*
- A Chaplain for IDOC spoke of the promising results IDOC was seeing from utilizing community-based agencies prior to release. *“If [inmates] are part of the reentry/Pre-Start Program you’ve given that inmate a head start and you’ve also given that community an opportunity to begin to establish contact with that inmate months before he comes home.”*

Champaign & Vermilion Counties

- ✓ HEARING LOCATION: Council Chambers, Champaign
- ✓ SPONSORING SUBCOMMITTEE: Housing—
Co-Chairs: Kelly King-Dibble, Director IHDA; and
Sue Augustus, Corporation for Supportive Housing
- ✓ HEARING DATE: June 25, 2005
- ✓ ATTENDANCE: Approximately 100
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
State Rep. Naomi Jakobssen; Deborah Frank Feinen, County Board;
Julia Rietz, State's Attorney; Catherine Hogue, Champaign Co.
Board; Lt. Swenson, Champaign PD; Nancy Griffin, Champaign Co.
Sheriff's Office; Cope Cumpston, Urbana School Bd; Darren Cooper,
IDOC Parole Supervisor; Kelly King-Dibble, (Co-Chair—IHDA);
- ✓ OTHER SUBCOMMITTEE MEMBERS: Tracy Parsons,
Champaign Urb. League; Bob Dougherty, SLM; John Fallon,
Thresholds; Rick Guzman, IDOC; Tony Lowery, Safer

Dominant or Recurring Theme(s):

- Champaign/Vermilion Counties' public hearing was extremely well rounded and well representative of the communities and groups that are affected by the issue of prisoner reentry. There were law enforcement officials from the Champaign County Sheriff's Office to the Champaign Police Department & IDOC Parole. The public defender's office was there along with Federal Probation & a member of the Urbana School Board. Several parolees and/or formerly incarcerated individuals were there as well as both public & private providers and several employers and civic groups.
- Also barriers to affordable housing persist due to the lack of a defined time standard after which ex-felons can apply for affordable or subsidized housing

Notable Quotes or Testimonies:

- A member of the Urbana School Board brought a copy of the Urbana Human Rights Ordinance which included, "**prior arrest or conviction record**" as a protected class in opportunities for "*housing, employment, credit or access to public accommodations.*"
- A U.S. Probation Officer from the Urbana office of the Central District of Illinois testified that 80%—or more—of federal parolees are transitioned from prison to community through a halfway-house or work-release type of program
- Mr. Joshua Smith, a parolee and client of Project Success in Vermilion County said, "Without them, and ACES, I would be right back in DOC or back on the streets. Nobody ever looked at me the way they did. Everybody usually looked at me like I'm a convict or I'm a number. They actually treat me like I'm a person. They relate to me. That's the only reason this time I'm staying out and doing good because Tammy and everybody has helped me try to get jobs, and go to school, go to college. I never thought I would go to college before. And they're helping me go to college. They really are a help to us."

Champaign & Vermilion Counties

Population: Champaign: 186,800 & Vermilion 82,804

Parole Population:
Champaign 534 (10th)
& Vermilion 230 (16th)

Rate of Parolees: 286 & 277
per 100,000 respectively

Recidivism Rate:
54.4% ('01 exits)

Champaign County ranks 12th in rate of index crimes, however, Vermilion County ranks 4th in property rate; felony probation rate & rate of reported child abuse. Champaign & Vermilion Counties have a combined recidivism rate of 54.4% almost exactly the statewide average.

Cook County (Chicago)

Overall Population: 5,376,741

Parole Population: 19,561 (1st)

Rate of Parolees: 364/100,000 (2nd)

Index Offense crime rate: 4th in IL

Con. Subst. Act Arrest rate: 2nd

Recidivism Rate: 57.4% ('01 exits)

Not surprisingly, Cook County numerically ranks first in the state in nearly every category (i.e., murder, rape, robbery aggravated assault, burglary, theft, motor vehicle theft, arson, controlled substances arrests). But it is not just the size of the county. Cook county's rate of index offenses is the 4th highest in the state & its rate of drug-related arrests is 2nd in the state. Additionally Cook has the second highest rate of parolees (364) per 100,000. Cook's higher than average recidivism rate (57.4%) significantly affects the statewide average.

Chicago

- ✓ HEARING LOCATION: 1st Baptist Congregational Church – 1613 W. Washington Blvd, Chicago
- ✓ SPONSORING SUBCOMMITTEE: Faith, Family & Community—Co-Chairs: Rick Guzman, IDOC; Jackie Reed, WHA; and Patricia Watkins, Target Area Dev.
- ✓ HEARING DATE: June 11, 2005
- ✓ ATTENDANCE: Approximately 300
- ✓ ELECTED and/or STATE OFFICIALS PRESENT: State Representative Milton Patterson (D-32); State Representative Deborah Graham (D-78); Cook Co. Commissioner Bobbi Steele; Chicago Aldermen Walter Burnett (27th Ward); Alderman Isaac Carothers (29th); Alderwoman Emma Mitts (37th); CPD Commander Williams (15th District); DHS Secretary Adams
- ✓ OTHER SUBCOMMITTEE/COMMISSION MEMBERS: Jackie Reed (WHA – Co-chair); Rick Guzman (IDOC – Co-chair); Patricia Watkins (Target-Co-Chair); Haki Madhubuit; Rev. Michael Eaddy; Walter Boyde (PFCG);

Dominant or Recurring Theme(s):

- Very large numbers of formerly incarcerated individuals turned out and testified about their experiences and needs. Also dozens of provider groups attended the hearing and spoke of promising results from programs that incorporate case management, job development, treatment and stable housing, etc.
- Well over one-hundred of the approximately 300 attendees testified or provided written statements on areas ranging from the need for more counseling, housing, transportation costs to the need for upgraded prison libraries and restoring Pell grants and other educational services both pre- & post-release. While no single issue-area dominated the testimony, nearly everyone who testified spoke to the difficulties of reentry and the desperate need for more services.

Notable Quotes or Testimonies:

- One parolee, who was recently released, struggled to find the words for what he wanted to say before finally throwing up his hands and with outstretched arms declaring, “I’m in pain.” He went on to talk about how prison was not the only traumatizing experience—but that trying to re-join his family and “being afraid to take a glass of milk from the fridge because you can’t find a job and can’t contribute.”
- Haki Madhubuti, a member of the Governor’s Commission said that in addition to a state ID, parolees need a library card and the state should upgrade its prison libraries.

Decatur

- ✓ HEARING LOCATION: Antioch Miss. Baptist Church
- ✓ SPONSORING SUBCOMMITTEE: Faith, Family & Community—Co-Chairs: Rick Guzman, IDOC; Jackie Reed, WHA; and Patricia Watkins, Target Area Dev.
- ✓ HEARING DATE: June 28, 2005
- ✓ ATTENDANCE: Approximately 75
- ✓ ELECTED and/or STATE OFFICIALS PRESENT: State Representative Robert Flider (D-101); Macon County Sheriff Joe Ferguson; IDOC Director Roger Walker; IDOC Asst. Director Deanne Benos;
- ✓ OTHER SUBCOMMITTEE MEMBERS: Jackie Reed (WHA – Co-chair); Rick Guzman (IDOC – Co-chair); Rev. Leroy Smith;

Dominant or Recurring Theme(s):

- Community providers (i.e., housing, treatment, transitional) play a critical role in helping to transition parolees from prison to community—Several provider groups attended the hearing and spoke of promising results from programs that incorporate more holistic approaches to reentry through case management, job development, treatment and stable housing.
- More resources need to be targeted to community-based reentry efforts. Several parolees; past offenders and or family members of past offenders attended the Decatur hearing citing difficulty in accessing services to help them find jobs or get other needed services. Several attendees cited IDOC’s massive budget and the need to spend more of it on in-prison programming (i.e., more educational opportunities) or post-release services (i.e., more funding for halfway houses, continuing education, etc).

Notable Quotes or Testimonies:

- One parolee, who disclosed that this was his third time being released from IDOC, had very good things to say about the Decatur Spotlight Reentry Center that had recently been opened as an extension of the IDOC parole office in Decatur. This parolee had received assistance in finding two jobs through this center and had good things to say about the counselors. “This program’s why I’m making it now. I didn’t have a program like this to come back to the first couple of times” (one of which ended with him being sent back to prison for nine months on a technical parole violation for what he claimed was a relatively minor infraction)
- The Macon County Sheriff testified, that despite his law-enforcement background, that he believed that Illinois prisons ought to be “converted to work-release centers or treatment programs” to allow ALL offenders who will be returning access to these types of necessary programs.

Macon County (Decatur)

Overall Population: 114,706

Parole Population: 689 (7th)

Rate of Parolees:
601/100,000 (1st)

Index Offense crime
rate: 6th in IL

Con. Subst. Act
Arrest rate: 31st

Recidivism Rate:
50.1% ('01 exits)

Macon County is not only ranked first in the state in terms of the rate of parolees per 100,000 residents, but it also ranks first in rate of felony offenders under correctional supervision (925) per 100,000 and rate of prisoners in state prison (363 prisoners per 100,000).

St. Clair & Madison Counties (East St. Louis)

Population-Madison Co: 261,689

Population-St. Clair Co: 258,606

Combined population: 520,295

Parole Population: St. Clair-534 (10th) & Madison-416 (12th)

Index Offense crime rate: 9th in IL

Con. Subst. Act Arrests: Madison is 5th & St. Clair is 11th

Average Recidivism Rate for both counties: 54.2% ('01 exits)

When added together, the number of parolees in both Madison & St. Clair counties is more than any other county in the state other than Cook. While St. Clair is only the 9th most populous county in the state, it ranks second in number of violent index offenses which include murder, rape, robbery & aggravated assault.

East St. Louis

- ✓ HEARING LOCATION: Clyde C. Jordan Senior Center
- ✓ SPONSORING SUBCOMMITTEE: Public Safety—Co-Chairs: Jesse Montgomery, Jr., IDOC; Tio Hardiman, Ceasefire
- ✓ HEARING DATE: April 28, 2005
- ✓ ATTENDANCE: Approximately 65
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
Senator James Clayborne; State Representative Wyvetter Younge; Councilman Eddie Jackson; Judge Milton Wharton; Dem. Chairman Robert Eastern, Jr.; Police Chief David Bradford; Police Chief Marion Hubbard; Police Chief Mearl Justice
- ✓ OTHER SUBCOMMITTEE MEMBERS: Jesse Montgomery, Jr. (IDOC – Co-chair); Tio Hardiman (Ceasefire – Co-chair); Lori Levin (ICJIA); Sharon Shipinski (IDOC); Chief Judge Jeffery O'Connor

Dominant or Recurring Theme(s):

- More resources need to be targeted toward the youth in East St. Louis so that they are not just hanging in the streets (i.e. summer jobs, youth programs).
- There is a need for more adult transitional centers for both women and men. Without them the judicial system is like a revolving door.

Notable Quotes or Testimonies:

- Police Chief Marion Hubbard stated that the police need the community's help. When police are trying to solve a crime, it is very difficult when the community treats them as the enemy. The police can be your friends. Parents need to teach their children that the police are not the enemy.
- An ex-offender stated that after serving his sentence in prison he believed he would obtain his rights back once released. He found that this was not true. He was released from prison 11 years ago but to this day when he applies for a job they always perform a background check and his incarceration keeps coming back to haunt him.

Jefferson County

- ✓ HEARING LOCATION: Rend Lake College – Ina, IL
- ✓ SPONSORING SUBCOMMITTEE: Health & Behavioral Health Sub-Committee—Co-chairs: Melody M. Heaps, TASC and Theodora Binion-Taylor, DASA
- ✓ HEARING DATE: April 25, 2005
- ✓ ATTENDANCE: Approximately 63
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
Deputy Sheriff Bill Gray (Mt. Vernon); Judge Timberlake (Chief Judge of the 2nd circuit, southern IL)
- SUBCOMMITTEE MEMBERS: Theodora Binion-Taylor (Co-chair); Kate Mahoney; and Jim Noe

Dominant or Recurring Theme(s):

- Community providers (i.e., substance abuse treatment, mental health and transitional living) across the state play a vital role in promoting the successful reintegration of the formerly incarcerated back into the community. However, the recurring theme of the hearing was the apparent disconnect between the community and public systems to provide a continuum of services for individuals returning from incarceration.
- Several attendees stated that if an inmate leaves and is not coordinated with a treatment program or a self-help program upon his release, the likelihood of falling back into negative associations increases. A substance abuse counselor stated that clients are often told to seek out services as part of their parole. They may be given the name of an agency, but they are left on their own to figure out how to make contact.
- IDOC program mandates attempt to coordinate aftercare to link an inmate to community programs, however many community providers are struggling with the same problems of budgets and waiting lists. Community/faith-based providers are a vital resource in the reentry process, and more resources need to be targeted to community-based reentry efforts.

Notable Quotes or Testimonies:

- A concerned citizen and ex-offender expressed the need for more long-term treatment centers around the southern Illinois area. “After a person is released from prison and the majority being alcoholic and drug addicts, it is real hard for them to really adjust to being back in society...the reality is that we need better jobs, long-term treatment centers, help with housing...addicts and alcoholics need help...they need to feel worthy and they need support.”
- Another testifier stated that programs that provide an individual with a positive environment that supports living a clean and sober life are rare in southern Illinois “where you simply don’t have the population to provide and keep them going.”

Jefferson County

Overall Population: 40,334

Parole Population:
105 (26th)

Rate of Parolees:
260/100,000 (8th)

Index Offense crime
rate: 7th in IL

Con. Subst. Act
Arrest rate: 4th

Recidivism Rate:
58.1% ('01 exits)

Jefferson County has a higher than average recidivism rate (58.1%) and has had a significant increase in methamphetamine crimes. Jefferson County is 4th & 7th in substance abuse & index crime rates respectively and is 6th in violent offense rate with 426 violent offenses per 100,000 people.

Peoria County (Peoria)

Overall Population: 183,433

Parole Population: 571 (9th)

Rate of Parolees: 311/100,000 (4th)

Index Offense crime rate: 3rd in IL

Con. Subst. Act Arrests: 9th (411)

Recidivism Rate: 60.7% ('01 exits)

Located Centrally, Peoria County is an urban county which ranks 3rd in index offense rate with 3,114 per 100,000. Peoria County also consistently ranks in the top ten counties for controlled substance arrests; violent index offenses & child abuse/neglect cases reported. Its recidivism rate has increased to 60.7% - significantly higher than the statewide average of 54.6%

Peoria

- ✓ HEARING LOCATION: Peoria City Council Chambers
- ✓ SPONSORING SUBCOMMITTEE: Public Safety—Co-Chairs: Jesse Montgomery, Jr., IDOC; Tio Hardiman, Ceasefire
- ✓ HEARING DATE: May 26, 2005
- ✓ ATTENDANCE: Approximately 50
- ✓ ELECTED and/or STATE OFFICIALS PRESENT: Mayor Jim Ardis; Chief Judge John Barra; Police Chief Steven Settingsgaard; City Manager Randy Oliver
- ✓ OTHER SUBCOMMITTEE MEMBERS: Jesse Montgomery, Jr. (IDOC – Co-chair); Lori Levin (ICJIA); Sharon Shipinski (IDOC); Chief Judge Jeffery O'Connor

Dominant or Recurring Theme(s):

- There was concern that individuals who were not residents of Peoria are being released from prison and placed in Peoria.
- More jobs are needed to support the individuals who return from prison. Vocational programs within the prison would be helpful in this endeavor.

Notable Quotes or Testimonies:

- An ex-offender stated that when he was released from prison he was given a check by the state but had no way to cash it because he had no identification.
- An ex-offender stated that she has been released for 3-years now. She transferred from Indiana to Illinois via an Interstate Compact Transfer. She is grateful for the education she received from Indiana State University while incarcerated. She is now a successfully employed beautician.

Rock Island

- ✓ HEARING LOCATION: Sheraton Four Points Hotel
- ✓ SPONSORING SUBCOMMITTEE: Employability, Education & Training—Co-Chairs: Brenda A. Russell, IDES and Paula Wolff, Chicago Metropolis 2020
- ✓ HEARING DATE: April 14, 2005
- ✓ ATTENDANCE: Approximately 75
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
Sheriff Michael Grchan

OTHER Executive Committee MEMBERS: Brenda Palms-Barber; Diane Williams; Brenda Russell, (IDES—Co-chair); Whitney Smith; Dianne Beetz; Jonny Kowolski; Paula Wolff (Chicago Metropolis 2020—Co-Chair).

Dominant or Recurring Theme(s):

- Employers have the greatest success in hiring the formerly incarcerated when they work with intermediary organizations that screen jobseekers and prepare them for the realities of work
- The formerly incarcerated leave prison with multiple challenges: lack of education and training, health issues, and the trauma of incarceration. Although government and community agencies have developed model programs to address these issues, more resources are needed to meet the demand for services.

Notable Quotes or Testimonies:

- From the county health department:
“The nature of our criminal justice system is that the people who are incarcerated tend to come from marginalized populations. One of the very sad facts is that many of these people have their first encounter with a health care provider after birth when they enter incarceration.”
- From a formerly incarcerated man, now enrolled in college on a basketball scholarship:
“I think that people with 90 days or less—I think they should have their own little community. Because if they still in the general population, people with seven, eight, nine, ten, twenty years, they don’t want to see them go home.”
- An employer with a track record of successfully hiring the formerly incarcerated:
“Please remember that whether a person checks that [conviction] box or does not check that box [on a job application], they are a person. They are a contributor to our community. They can either work or not work. If they do not work, we pay more.”

Rock Island County

Overall Population: 147,912

Parole Population:
273 (15th)

Index Offense crime
rate: 11th v

Con. Subst. Act
Arrests: 303 (12th)

Recidivism Rate:
45.4% ('01 exits)

Rock Island is an urban county located on the western edge of the state and is the 14th largest in terms of population. Its 45.4% recidivism rate is lower than the statewide average of 54.6% for 2001 IDOC releases. The County's rate of property crimes (2001 per 100,000) is nearly that of Cook County's (2,123 per 100,000).

Winnebago County (Rockford)

Overall Population:
284,313 (7th)

Parole Population:
930 (2nd)

Rate of Parolees:
327/100,000 (3rd)

Index Offense crime
rate: 1st in IL

Con. Subst. Act
Arrests: 7th (501)

Recidivism Rate:
51.6% ('01 exits)

Winnebago County is only the 7th largest county in Illinois but has the 2nd highest number of parolees. It has the highest rate of index crimes in the state AND the highest rate of property offenses in the entire state—with a rate nearly 50% higher than that of Cook County.

Rockford

- ✓ HEARING LOCATION: Zeke Georgi State of Illinois Building
- ✓ SPONSORING SUBCOMMITTEE:
Employability, Education & Training—Co-Chairs:
Brenda Russell, IDES and Paula Wolff, Chicago Metropolis 2020
- ✓ HEARING DATE: April 12, 2005
- ✓ ATTENDANCE: Approximately 80
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
Brenda Russell, Director, IL Dept. of Employment Security
OTHER SUBCOMMITTEE MEMBERS: Whitney Smith;
Paula Wolff (Chicago Metropolis 2020—Co-Chair).

Dominant or Recurring Theme(s):

- Community providers (i.e., housing, treatment, transitional jobs, substance abuse treatment, etc.) play a critical role in helping to transition parolees from prison to community. However most feel overwhelmed by the numbers of returnees and many do not have formal connections with the IDOC do not know who is returning to the community prior to release and are struggling with minimal resources to support the returnees.
- Several attendees spoke about how a returnee's success is often limited by the stigma of having a criminal background. Individuals with criminal backgrounds struggle with employers' hesitancy to hire someone with a criminal record, programs cite their records as a reason to not provide services, and landlords use their records as a basis for denial of housing.

Notable Quotes or Testimonies:

- One participant, who had served 25 years in IDOC, shared the following regarding stigma:
“I’ve got several degrees and I can’t get a job. . . . I had all the job skills. I had everything. But it was that stigma that we go back to, or when they pulled your application up or did a background check on you, you were always faced with that, so you were hopping from one job to another. . . .”
- A pastor from one of the local Rockford churches testified on the need for additional community supports.
“My experiences with those that have been released back into the community are often at our door asking for assistance for various things. . . . Often we feel very inadequate for that task, because we don’t have a lot of resources. . . .”

Springfield

- ✓ HEARING LOCATION: Living Word Fellowship Church, 319 S. Wheeler St., Springfield, 62703
- ✓ SPONSORING SUBCOMMITTEE: Housing -Co-Chairs: Kelly King Dibble, IHDA; Sue Augustus, Corporation for Supportive Housing.
- ✓ HEARING DATE: May 21, 2005
- ✓ ATTENDANCE: Approximately 40
- ✓ ELECTED and/or STATE OFFICIALS PRESENT:
- ✓ OTHER SUBCOMMITTEE MEMBERS: Rev. Leroy Smith; Sue Augustus; Gladys Jordan.

Dominant or Recurring Theme(s):

- It is very difficult for ex-offenders to get jobs, both because of their criminal backgrounds and because of lack of job skills.
- There is a lack of housing for this population, especially for those with sex offenses.
- More resources need to be targeted to community-based reentry efforts, with greater coordination of those resources.

Notable Quotes or Testimonies:

- The community of Danville created Project Success to help the transition of ex-offenders back into their community. They used all the community resources available and have helped 75 individuals successfully transition, but they need more resources – money – in the local community to increase their ability to wrap services and housing around the returning offenders.
- One parolee had the following recommendation: *Let me tell you a little story. One of the hardest things in the world to do when you go to prison is to go to school. You can lift weights, you can sit in the dayroom, won't nobody bother you, but if you attempt to try to educate yourself, even there's a waiting list sometimes you can't get in the library. If you want to go to school, you got to go through all kinds of red tape to go to school. My suggestion would be rather than want to - - let's -- maybe we can take some of those resources, the money, you guys already got their undivided attention. They got control. Don't do the pre-start two weeks before they get out of prison to try to link them with these resources. That process needs to start day one. These guys need to learn how to communicate effectively to do an interview, just little simple things. They need some training. You know, those things, it would be a better incentive like they have a program -- what is the program they go through like the army thing, boot camp. You get good time if you go through boot camp and be rewarded for exercising yourself physically. I wonder what would happen if a guy had eight or ten years and he went to prison and you told him, you know what, we're going to give you an incentive if you get your doctorate degree or if you had your Master's Degree. I wonder what would happen.*

Sangamon County (Springfield)

Overall Population: 114,706

Parole Population: 460 (11th)

Rate of Parolees: 238/100,000

Index Offense crime rate: 2nd in IL

Recidivism Rate: 54.6% ('01 exits)

Centrally located, Sangamon County is second only to Winnebago in terms of index offense rate with 3,240 offenses per 100,000 persons. Sangamon has the third highest number of violent offenses in 2003 (1,811).

appendix I

Top Ten High-Impact Regions in Illinois

Cook County

In 2001, Cook County had the second highest number of returning prison inmates in the United States. Cook County ranks first in Illinois in both population size (5,376,741 persons in 2003) and density (5,686 persons per square mile). In fact, Cook County is five times larger than the state's next most populated county (DuPage, with 925,188 persons in 2003). Cook County has the largest concentration of parolees (19,561 as of November 30, 2004) and felony probationers (25,929 in 2004); the highest number of index offenses, including murder, criminal sexual assault, robbery, aggravated assault, burglary, theft, motor vehicle theft, and arson (269,640 in 2003); arrests for controlled substances act violations (36,188 in 2003); prisoners (24,343 as of November 30, 2004); and drug treatment admissions excluding alcohol (60,546 in 2003). Although other counties rate higher in some crime and victimization categories (e.g., child abuse/neglect), Cook County deserves special attention because of its potential impact on the state's recidivism rate of 57 percent, which is slightly higher than the statewide average of 55 percent.

In fiscal year 2005 (FY05), nearly half (48 percent) of parolees returned to Chicago, while 58 percent returned to Cook County, and 69 percent returned to Cook and the collar counties (Lake, Will, DuPage, Kane, and McHenry). The city of Chicago has 77 community areas, seven of which receive especially high numbers of returning parolees. Recent research by the Urban Institute shows that 54 percent of Chicago's reentry population returned to these seven Chicago communities: Austin, North Lawndale, East and West Garfield Park, Humboldt Park, Englewood and West Englewood, Auburn Gresham, and Roseland (Travis, Solomon, & Waul, 2001).

Austin's three zip codes (includes some overlap with Humboldt Park) received 2,615 parolees in fiscal year 2005. North Lawndale has the highest rates of vacant housing, renter-occupied housing, female-headed households and families below the poverty level in Chicago. It has the second lowest rate of high school graduates and second highest Part I violent crime rate. The median income is \$18,342 (the poverty line is \$18,850 for a family of three). An Urban League report found that, in Chicago, 74 percent of African Americans live in neighborhoods that are more than 90 percent black, and that black unemployment in Chicago is almost four times higher than white unemployment. Additionally, 40 percent of black children live in poverty (compared to 15 percent of white children), and 55 percent of African-American men in Chicago have a felony record (Travis, Solomon, & Waul, 2001). Black students in Illinois are nearly 4,000 percent more likely to attend an "Academic Watch" or chronically failing school than are white students. Schools are more segregated now than they were 40 years ago (Chicago Tribune, May 9, 2004).

DuPage County

Located in the collar counties just west of downtown Chicago, DuPage County ranks second to Cook County in terms of population (925,188 persons in 2003) and population density (2,710 persons per square mile). Geographically, however, it is the sixteenth smallest county in Illinois. DuPage is the county most likely to send felony offenders to IDOC (2,135 in 2003). DuPage also ranks second to Cook County in terms of the number of index offenses, with 22,348 in 2003 (murder, criminal sexual assault, robbery, aggravated assault, burglary, theft, motor vehicle theft, and arson). DuPage also stands out in terms of the number of arrests for controlled substance act violations (639 in 2003), ranking third in the state behind Cook and Lake Counties. DuPage County is grouped among the collar counties, with special attention paid to the Aurora area.

Kane County

Located in the collar counties just west of DuPage County, Kane County has the fifth highest population in the state (457,122 in 2003) and is among the top five counties in terms of parole and probation populations (695 parolees as of November 2004 and 1,858 probationers in 2003), as well as the number of persons in IDOC facilities (1,042 as of November 2004). Kane County will be grouped within the collar county target area, focusing on the Aurora region.

Lake County

Part of the collar county region to the north of Chicago, Lake County has a significant impact on statewide statistics, ranking third largest in terms of population (685,019 persons in 2003), parolees (921 as of November 2004), population density (1,440 persons per square mile), and drug treatment admissions (3,137 in 2003). This county also had the fifth largest felony probation population (1,647 in 2003). Lake County is second in the state in number of arrests for controlled substances (730 in 2003) and reported cases of child abuse/neglect (3,754 in 2003). Lake County is being targeted with other collar county regions as part of an overall strategy concentrating on the Aurora area.

Will County

Just south of Chicago in the collar county region, Will County presents unique challenges to reentry efforts with its 586,706 residents, ranking Will County the fourth largest county in terms of population (586,706 in 2003), parolees (891 as of November 2003), number of arrests for controlled substances (579 in 2003), and number of drug treatment admissions (2,516 in 2003). Will County also ranked fifth in the state in terms of number of index offenses (1,184 in 2003) and is ranked sixth in the number of offenders currently residing in IDOC facilities (1,008 as of November 2004). Will County is included in the collar county target area with specific focus near Aurora.

Madison County

Ranking among the top 10 regions in terms of number of people residing in IDOC facilities (756 in November 2004) and number of felons under correctional supervision (prisoners, parolees, and probationers), Madison County is considered urban in nature and ranks eighth in the state for population (261,689 in 2003). Recidivism rates for the Madison County and St. Clair County areas averaged 54 percent for fiscal year 2001 exits, just under the statewide average of 55 percent. Madison County is also ranked fifth in the state for number of controlled substance arrests (641 in 2003) and number of drug treatment admissions (2,486 in 2003). Madison County is included as a target area with St. Clair County.

St. Clair County

St. Clair County, located in southwestern Illinois, is the ninth largest county in Illinois (258,606 in 2003) but ranks second in the state for number of violent index offenses, which include murder, criminal sexual assault, robbery, and aggravated assault (2,231 in 2003). It ranks eighth in Illinois in the number of index offenses overall (10,559 in 2003). There are also 732 prisoners (as of November 2004), 553 parolees (as of November 2004) and 1,291 probationers (2003) from St. Clair County, ranking it ninth in the state for felons under correctional supervision. St. Clair County is included as a target area with Madison County.

A city of only 31,542 residents, East St. Louis is ranked eighth among Illinois cities with respect to the number of returning parolees in fiscal year 2005. Its rate of returning parolees per 1,000 residents is more than double that of Chicago and surpassed only by the Cook County suburb of Maywood among high-impact cities. Over a third of the population (35 percent) is below the poverty line with nearly half (49 percent) of those under the age of 18 living in poverty. The median household income in the city is \$21,324 (nearly \$1,000 less than the federal poverty level for a family of four).

Winnebago County

The seventh largest county (284,313 in 2003), Winnebago County is located on the northern border of Illinois and is home to the second largest number of felons under correctional supervision (930 parolees as of November 2004, 2,075 probationers in 2003, and 1,428 prisoners as of November 2004). Furthermore, Winnebago County has the highest index offense rate in the state with 3,460 offenses/100,000 persons (Cook County has an index rate of 2,580 offenses/100,000 persons). In addition, Winnebago County also has the highest property index offense rate in the state, with 3,147 offenses/100,000 persons (Cook County has an index rate of 2,123 offenses/100,000 persons). Finally, Winnebago County has the second highest number of drug treatment admissions behind Cook County (2,769 in 2003) and the third highest number of child abuse/neglect reports (3,850 in 2003). The recidivism rate for Winnebago County is 52 percent, slightly lower than the statewide average of 55 percent.

Champaign County

Champaign County is located in east central Illinois. It is the eleventh largest county in terms of population (186,800 in 2003), the tenth largest in terms of numbers of parolees (534 as of November 2004), and the seventh largest in terms of number of prisoners (908 as of November 2004) and number of felons under correctional supervision (including probationers, 841 in 2003). Champaign County is also seventh in the state in the number of violent index offenses (including murder, criminal sexual assault, robbery, and aggravated assault), with 1,314 offenses in 2003, and it ranked tenth in the number of arrests for controlled substances (366 in 2003). Champaign County will be paired with Vermilion County as a target area.

Vermilion County

Located on the eastern edge of the central part of the state, Vermilion County is home to 82,804 residents, making it the twentieth largest county in Illinois. Vermilion County has 767 probationers (2003), 230 parolees (November 2004), and 346 prisoners (November 2004), ranking it seventh statewide for the number of persons under correctional supervision. The county also ranks fourth in property index offense rate, fourth in felony probation rate, and fourth in rates of reported child abuse and neglect. Champaign and Vermilion counties have a combined recidivism rate of 54 percent, just under the statewide average. Vermilion County will be paired with Champaign County as a high-impact target area.

Macon County

Macon County is the seventeenth largest urban county in Illinois, centrally located in the state, with a population of 11,175 (2003), and has the seventh largest parole population. It is ranked first in the number of parolees, with 308 /100,000 persons (compared with Cook County's 200/100,000). Macon County is sixth in terms of index offense rate (2,497 offenses/100,000 persons) and the number of felons who end up in IDOC (575 in 2003), and is fifth in terms of the property offense rate (2,211 property offenses/100,000 persons). Macon County also has the highest rate of felony offenders under correctional supervision, with 925 felons/100,000 persons (compared with Cook County's 665/100,000), including 638 parolees (November 2004), 856 prisoners (November 2004), and 610 probationers (2003). Furthermore, Macon County ranks first in the state for the number of prisoners (363 prisoners/100,000 persons, compared to Cook County's 227/100,000). Macon County's recidivism rate is 50 percent.

Peoria County

Located centrally, Peoria County is an urban county that ranks third in index offense rates with 3,114 offenses/100,000 persons, compared to Sangamon County, which is ranked second with 3,239 index offenses/100,000 persons. Peoria County also consistently lists in the top 10 counties for controlled substance arrests (501 in 2003), number of child abuse/neglect cases reported (2,093 in 2003), and number of violent index offenses (353 in 2003). The recidivism rate for Peoria County has increased to 61 percent, which is higher than the statewide average.

Sangamon County

Centrally located, Sangamon County is the 10th largest county in terms of population, with 191,875 residents (488 parolees and 723 prisoners as of November 2004 and 545 probationers in 2003) and is second only to Winnebago County in terms of index offense rates, with 3,240 offenses/100,000 persons (Winnebago has 3,460 offenses/100,000 persons). Sangamon had the third highest number of violent offenses in 2003 (1,811) and the eighth highest number of arrests for controlled substances (482 in 2003). It had the ninth highest number of child abuse/neglect cases reported (2,527 in 2003). Sangamon is also in the top 10 for substance abuse treatment admissions, with 1,744 (a 300+ increase in admissions over 2003). Sangamon's recidivism rate is the same as the statewide average (55 percent).

Rock Island County

Rock Island, an urban county located on the western edge of the state, is the fourteenth largest county in terms of population, with 147,912 residents in 2003. With its 251 parolees (as of November 2004), Rock Island has a 45 percent recidivism rate, lower than the statewide average. Rock Island is among the top 10 counties for property index offense rate (2001 property offenses/100,000 persons compared with sixth-ranked Cook County with 2,123/100,000) and number of drug treatment admissions (1655 in 2003).

Jefferson County

Located in south central Illinois and considered a rural county, Jefferson County is ranked thirty-fourth in overall population, with 40,334 residents, including 105 parolees, 204 prisoners (rated eighth overall as a portion of the county population as of November 2004), and 203 probationers. Jefferson County is significant in terms of index offense rates (seventh overall with 2,470 offenses/100,000 persons), and ranked fourth with 2,580/100,000. Jefferson County is also sixth in terms of violent offense rates, with 426 violent offenses/100,000 persons (compared to fifth-ranked Cook County's 457/100,000). It ranks eighth in property index offenses (2,044 property offenses/100,000 persons versus sixth-ranked Cook County's 2,123/100,000). In addition, Jefferson County has high rankings for rate of controlled substance arrests, with 287 arrests/100,000 persons, again compared to second-ranked Cook County's 344/100,000. Drug treatment admission rates in this community are also high when compared with much larger counties (564 admissions in Jefferson County/100,000 persons versus 487/100,000 in Cook County). Part of the emphasis on Jefferson County is attributable to the fact that it has a higher recidivism rate than the statewide average of 58 percent as well as the highest number of controlled substances act arrests of all the counties in the Second Judicial Circuit. Southern and southeastern Illinois counties have experienced dramatic increase in methamphetamine activity and associated justice system and treatment involvement, which is coupled with one of the highest crime rates relative to a high parolee population.

