

Community Residential Reentry Services: Essential for Recidivism Reduction

GOAL: SAFELY AND EFFECTIVELY MANAGE THE RETURN OF FORMERLY INCARCERATED INDIVIDUALS TO GREATER BOSTON TO REDUCE CRIME AND ENHANCE PUBLIC SAFETY AND PUBLIC HEALTH.

- The City of Boston's Office of Returning Citizens, states that 3,000 individuals return to Boston each year after being released from state, federal, and county correctional facilities¹.
- The Council of State Governments, finds that more than 2/3 of people leaving MA county jails and more than 1/2 of those leaving MA state prisons in 2011 were re-arraigned within 3 years of release².
- According to the MA Department of Public Health, recently released inmates are 120 times more likely to die from overdose than non-inmates, especially in the first months following release³.

OBJECTIVE: BROADEN SUPPORT TO SECURE SUSTAINABLE FUNDING FOR COMMUNITY-BASED REENTRY SERVICES IN GREATER BOSTON

- Provide a range of evidence-based services that address the risks and needs of returning citizens, including:
 - o Transitional housing
 - Community case management, facilitating connections to employment and training, supporting family reintegration, providing assistance with obtaining identification documents, creating connections to healthcare, substance abuse services, and mental health services.
- Support greater collaboration amongst reentry partners

WHY: REENTRY SERVICES ARE ESSENTIAL TO RECIDIVISM REDUCTION AND HAVE BEEN VALIDATED THROUGH RESEARCH AND EVALUATION, AND ACCLAIMED BY POLICYMAKERS AT FEDERAL, STATE, AND LOCAL LEVEL.

- Research has found that prison-based reentry services and treatment lose their benefit with no follow-up services in the community, and that community programming is more effective at changing behavior.⁴
 - Most DOC inmates are released from high security prisons, and reconviction rates were substantially higher for prison releases (Max- 52%, Med- 39%, Min 31%) compared to prerelease facilities (24%).⁵
- Post-release community-based reentry services allow returning individuals to form stronger, lasting connections to family, employment, housing, and addiction/mental health counseling that in many cases can stay intact when they finish their sentence.
 - A transitional period of post-release supervision based on risk, needs, and responsivity provides support and accountability as a person reenters the community, and reduces recidivism.⁶
 - Formerly incarcerated individuals are at higher risk to die from opioid overdose once in the community.
 - The first month after release proved to be most critical. In 2015, nearly 50% of all deaths among those released from incarceration were opioid-related⁷.
- MA has not committed the resources needed for the necessary services.
 - In the last 9 months, Span has closed; Overcoming The Odds (OTO) and the Worcester Initiative for Supportive Reentry (WISR) ended; Boston Reentry Initiative (BRI) has reduced its scope; and the Boston reentry residential center McGrath House is closing.
 - Brooke House, a prerelease reentry program located in the Fenway neighborhood, and its Transitional Housing Program for returning citizens are in jeopardy based on recent reductions in contracts.

¹ <u>https://www.boston.gov/news/kevin-sibley-lead-new-office-returning-citizens</u>

² <u>https://csgjusticecenter.org/wp-content/uploads/2016/12/JR-in-Massachusetts Key-Findings-and-Policy-Options.pdf</u>

³ https://www.mass.gov/files/documents/2017/08/31/legislative-report-chapter-55-aug-2017.pdf

⁴ S. Lee et al. *Return on investment: Evidence-based options to improve statewide outcomes,* (Olympia: Washington State Institute for Public Policy, April 2012).

⁵ <u>https://csgjusticecenter.org/wp-content/uploads/2016/07/Justice-Reinvestment-in-Massachusetts</u> Third-Presentation.pdf

⁶ <u>https://csgjusticecenter.org/wp-content/uploads/2016/11/JR-in-Massachusetts</u> Fourth-Presentation.pdf

⁷ <u>https://www.mass.gov/files/documents/2017/08/31/data-brief-chapter-55-aug-2017.pdf</u>



Brooke House Program Summary

A prerelease/reentry facility under contract with:

Suffolk County Sheriff's Department, Norfolk County Sheriff's Office, and MA Parole Board

COMMUNITY RESOURCES FOR JUSTICE

For 140 years, Community Resources for Justice (CRJ) has been committed to changing lives and strengthening communities by advancing policy and delivering individualized services that promote safety, justice, and inclusion. Through its Social Justice Services (SJS) division, CRJ supports formerly-incarcerated men and women and young adults with complex clinical needs to make positive, sustainable life transitions through a comprehensive array of case management services at reentry programs in Massachusetts, New Hampshire, New York, and Rhode Island.

BROOKE HOUSE

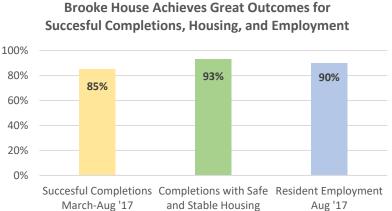
CRJ's Brooke House has been serving men returning from incarceration to Greater Boston for more than 30 years. Brooke House's focus is on preparing residents for successful reentry to their communities through assistance with employment, addictions, housing, and other identified needs.

Brooke House utilizes evidence-based practices to reduce recidivism and provide residents with:

- Case Management Brooke House staff provide coaching and guidance for positive actions; assistance with obtaining identification, birth certificates, and social security cards; skills for healthy relationships with family members and others; and address risk, needs, and responsivity based on an assessment and a case plan guided by assessment results.
- Supervision and Accountability Brooke House staff approve and monitor resident whereabouts, conduct substance abuse testing, and ensure that the program is safe for all residents.
- Connections to community partners Brooke House facilitates connections to educational, vocational, and housing opportunities, and makes referrals to community providers for mental health, medical care, and substance abuse treatment that can be continued after an individual completes the Brooke House program. Some of Brooke House's partners include:
 - o *Education and Job Training:* Pine Street Inn, South End Technology Center, Building Pathways, Project Place, Jewish Vocational Services, ROCA, Strive, New England Center for Arts and Technology, Morgan Memorial Salvation Army
 - o Health and Wellness: Whittier Street Health Center, Fenway Health Center, and Boston Public Health Commission
 - o Reenty Support and Permanent Housing: St. Cecilia's, Road to Redemption, MassHousing, HomeStart

DEMONSTRATED SUCCESS

- Over the past five years, over 1,100 male returning citizens have received Brooke House services.
- From March through August 2017, 85 percent of residents successfully completed the program¹, and 93 percent moved on to safe and stable housing.
- In August of 2017, 90 percent of Brooke House residents were employed.
- In a 2017 survey, 100 percent of Brooke House residents said being in the program has made them feel that they are better able to handle responsibility and that they feel prepared to move back into the community.
- Halfway houses reduce recidivism by 6 to 20 percent for individuals assessed as high risk.²



March-Aug '17

Strooke House received a perfect score in its 2017 accreditation by the American Correctional Association.

Returning citizens face many barriers to successful reentry: employment, housing, identification, CORI, and family relationships to name a few. The combination of community and in-house services at Brooke House works toward eliminating these barriers, as the program focuses on its dual goal to protect public safety, and to prepare residents to return to their home communities.

¹ The evidence-based Correctional Program Checklist (CPC) suggests 65 to 85 percent successful completion for a "high-quality" reentry program.

² Lowenkamp, C., & Latessa, E. (2002). Evaluation of Ohio's community-based correctional facilities and halfway house programs. Cincinnati, OH: University of Cincinnati, Center for Criminal Justice Research..; Ostermann, M. (2009). An analysis of New Jersey's Day Reporting Center and Halfway Back programs: Embracing the rehabilitative ideal through evidence based practices. *Journal of Offender Rehabilitation 48*(2), 139-153.