

OFFENDER RE-ENTRY:

An Examination of Drug Treatment Programs Needed to Ensure
Successful Reentry

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Subcommittee on Crime, Terrorism and Homeland Security

TESTIMONY of

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Introduction

Chairman Coble, Ranking Member Scott, Members of the Subcommittee, I am Scott Sylak and I serve as the Executive Director of Lucas County TASC, Inc. in Toledo, Ohio. I am also the President of National TASC (Treatment Accountability for Safer Communities). National TASC is a nonprofit association representing individual and agency programs across the United States. National TASC and its members aim to improve the professional delivery of screening, assessment and case management services to justice-involved persons with substance abuse or behavioral health problems.

Thank you for holding hearings regarding offender reentry and substance abuse treatment and the need to assure that offenders make a successful reentry when released from prison or jail. National TASC appreciates this focus on securing substance abuse treatment, especially because an estimated 80% of the state prison population report histories of substance abuse, 90% fail to obtain those services while incarcerated. It is estimated that only 10% of offenders receive appropriate community linkage and follow-up services upon release. We can do more to use proven and effective techniques that have been employed by TASC programs in many jurisdictions to reduce the number of unmanaged reentry cases in need of services and to improve the outlook for a substantial number of offenders who reenter society in need of substance abuse services.

National TASC supports the Second Chance Act as critically important legislation that can address multiple challenges related to the return of incarcerated persons from prisons to their communities. A majority of those returning are young, lack a job, have two or more minor children and have a lower educational attainment and housing stability history than those who have never been incarcerated. More than two out of three returning from prison have a substance abuse or mental health history that will require treatment and support. Many also need medications to treat HIV and other communicable diseases. A growing number of released offenders do not have housing and become homeless after discharge from criminal justice custody. Without case management and appropriate services, this population will continue to drive up costs to our communities. Combining targeted clinical case management with services and resources that prevent new crime can solve many of these problems.

National TASC's Recommendations

1. Develop a comprehensive approach that ensures coordination of funds and services at the state level.

In many states TASC programs already exist that can serve as a flexible approach to management and integration of offender services, the criminal justice system and other systems (justice, health, education, housing, employment, family services and community-based networks). TASC elements have been incorporated in many local pretrial, probation, parole, community corrections and substance abuse programs as well as drug courts, juvenile and family services interventions.

TASC supports the Second Chance Act's design to encourage reentry partnerships among many federal, state and local agencies. TASC also knows that this process does not necessarily create the need for a large, costly bureaucracy. For substance abusing offenders, a central focus will be the development of capable professionals who serve released persons and their families as well as working with faith, community and mentoring programs. Bridging entities such as TASC build working partnerships between groups and organizations that serve individuals in the justice system. Examples of this can already be seen in the Breaking the Cycle Program in Birmingham, Alabama as well as throughout the state of Ohio.

2. Prevent recidivism by addressing known barriers to offender reentry such as substance abuse.

States can provide new ways to build effective services using the core components of cost-effective TASC programs as models. This will encourage development of stronger clinical reentry case management in communities already engaged in this effort. In many areas TASC programs provide communities with independent assessment, clinical case management and system integration techniques designed to intervene in the lives of offenders with addictions or behavioral health needs. TASC-style case management provides coordinated individual assessments, appropriate service delivery and resources targeted to follow offenders in need from prison to their home communities. This form of case management helps ensure that offenders who are released from jail and prison have the resources and supervision necessary to become productive members of their communities.

3. Encourage reentering persons to access appropriate opportunities for post-incarceration services.

This bill provides opportunities for states and localities to develop clinical responses across a variety of systems to provide incentives for more effective offender release procedures. It encourages application of the best practices from corrections and parole to substance abuse treatment and clinical case management. Experience with the TASC clinical case management model indicates that the complex systems of housing, employment, substance abuse, mental health and child welfare must be integrated into offender reentry management. The Second Chance Act allows each of these systems to serve their primary functions while building their services, furthering the goals of community safety, offender reentry and client rehabilitation. It also encourages these sectors to understand the need for offender accountability to the court and to the community while maintaining focus on the clinical needs of the individual.

4. Prioritize the use of scarce criminal justice resources to provide drug treatment access to those most vulnerable to relapse.

TASC programs operate within the parameters of the larger justice and treatment systems. For over thirty years TASC programs have served as a catalyst to develop more effective strategies for delivering services to persons involved in the justice system and their families. Although TASC programs have served to educate communities about their clients, local and state executive agencies are often responsible for funding, oversight and management of offender services, treatment and resources. Consequently there is a complex political and cultural climate in many communities that makes it difficult to achieve adequate client services for reentering offenders. By using independent case management, funded programs will help overcome inadequate or inconsistent services. This process can ensure that those who need treatment the most are the most likely to receive it.

5. Manage substance abuse, mental health, housing, medical, employment and family needs.

By providing for clinical reentry case management, reentry agency partners and TASC agencies can accomplish the following:

- Screen and assess for housing needs and develop a short- and long-term plan for residential housing to make sure that released offenders do not become homeless.
- Evaluate the complex problems and diagnoses related to substance abuse and mental health disorders in individuals and their families and refer clients to appropriate treatment, ensuring that the system finds the problems before offenders recidivate.

- Assess employment readiness, job placement needs and refer to workforce development specialists or education programs that are more tailored to individual strengths, improving the likelihood of employment.
- Follow-up progress with case management that provides incremental steps in the domains of housing, treatment, employment and family stability.
- Monitor and report progress to ensure compliance with expectations of the justice system. Routine reporting will prompt sanctions if offenders fail to make progress.
- Advocate and provide linkages to the community to further help offenders make the transition back into society.

6. Build elements into every funded program that measure accountability data and improve outcomes.

In order to absorb the impact of more than 600,000 reentering persons each year, communities must develop and coordinate effective transitional partnerships that assist individuals in meeting justice system requirements while successfully negotiating the necessary transition to communities, families and employment. This includes the following critical elements.

- A process to coordinate justice, treatment and other systems.
- Procedures for providing information and cross training to justice, treatment and other systems.
- A broad base of support from the justice system with a formal structure for effective communication.
- A broad base of support from the treatment and other social service communities.
- Assessment and case management independent from justice and treatment.
- Policies and procedures for regular staff training.
- A management information system with a program evaluation design.
- Clearly defined client eligibility criteria.
- Screening procedures for identification of candidates within the justice system.
- Documented procedures for assessment and referral.
- Policies, procedures and protocols for monitoring TASC clients' alcohol and drug use through chemical testing.

The development of these systems between government and private and local agencies is one of the most difficult aspects of reentry management. Despite this challenge, there is evidence that a wider application of proven justice system innovations can result in more positive outcomes for this population.

Conclusion

On behalf of National TASC, I wish to thank the Subcommittee for holding a hearing on substance abuse systems and their role in offender reentry. Thank you for allowing my participation.