The Trouble with Reentry

Five Takeaways from Working with People Returning to Chicago from Prison

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Executive Summary

The very terms “reentry” or “returning citizen” themselves beg a question—to where and to what are people released from prison returning? What does “successful” reentry look like when you come from having nothing and return to nothing after incarceration, save for the added stigma and burden of criminal justice system involvement on your record? Despite rhetoric by federal, state and local authorities that reentry is a priority, the policy changes and resources required to meet the immense challenge of reintegrating a recently incarcerated person back into the fold of society have not been provided.

The fact is that if we are really serious about promoting reentry success and reducing incarceration, we cannot continue to tinker around the edges of reform. Sweeping changes are needed. And, as part and parcel of such changes, we must finally come to terms with the reality that reentry and criminal justice reform cannot be accomplished without taking bold corrective action to fix a system that falls woefully short of meeting the needs of the individuals and communities most impacted by criminal justice system involvement.

With political backing and public will, a new reentry system can and should be built. A foundation is currently being laid through public-private partnerships that recognize the importance of meeting the basic needs of people leaving the justice system and going back to their communities. But for such a system to succeed, it ultimately must be grounded in the principle that “[t]he dignity of the individual will flourish when the decisions concerning his life are in his own hands, when he has the assurance that his income is stable and certain, and when he knows that he has the means to seek self-improvement.”

Cause for Alarm: The Overuse of Incarceration and Its Aftermath by the Numbers...

- People imprisoned in the U.S. per annum: 2.3 million, the vast majority of whom will return to their communities
- People under correctional supervision in the U.S. per annum: 4.5 million (1 out of every 37 adults)
- People imprisoned or under some form of correctional supervision in Illinois per annum: 200,000, 72% of whom are under a form of community supervision, serving a term or probation or a post-imprisonment Mandatory Supervised Release (MSR) term.
- People subject to MSR who recidivate after leaving prison in Illinois per annum: approx. 30,000, or 43% of releasees
Over the last several months, John Howard Association of Illinois (JHA) staff had occasion to learn from several young adults (all black men in their early twenties) as they attempted to navigate the world of reentry services, mandatory supervised release and reintegration back into impoverished communities in Chicago after being imprisoned for several years in both Illinois Department of Juvenile Justice (IDJJ) youth centers and Illinois Department of Corrections (IDOC) adult prisons. Our final impression from this experience is profound skepticism at the ability of the existing reentry framework to stem the continuous cycle of people exiting and returning to jail and prison. Both conceptually and in execution, reentry as a societal project—at least in its current incarnation—does not begin to adequately address even the most basic human needs (shelter, clothing, transportation, food, medication) of returning citizens. That being said, we were moved and inspired by the patience, dedication and sacrifices of many on-the-ground direct service reentry workers and organizations that we encountered, who tirelessly work to triage and assist an onslaught of returning citizens with desperate needs—despite inadequate resources, unreliable funding streams, and myriad bureaucratic obstacles.

Following herein are some of JHA’s real-world observations made in the process of accompanying and, at times, endeavoring to assist people as they attempted to access critical reentry supports, resources and services following their release from prison. These five key takeaways are based on our on the ground experience navigating reentry programs and opportunities with these young men shortly after their release from prison. This list is in no way comprehensive or exhaustive. Rather, it highlights just some of the more immediate, pressing needs and problems that the young men whom JHA met as they left prison experienced during their first few months after leaving prison. There were also some bright, hopeful encounters along the way. In particular we met some extraordinary, persevering, compassionate, tireless reentry workers who are dedicated to assisting people returning from prison. Our dive into the reentry process on the whole, however, illuminated some large gaps that exist for returning citizens trying to succeed.
Five Observations on Reentry

(1) Getting a State ID remains an intractable problem for people leaving prison.

Four years ago, JHA noted, “[t]here is widespread understanding that an ID is essential for someone to apply for a job, obtain housing, enter treatment programs and engage in other elements of social enfranchisement that are crucial to leading a law-abiding life. Recognizing that a permanent state ID is critical to success upon release, it is vital that the correctional agencies in Illinois be responsible for securing birth certificates and Social Security cards for the adult inmates and youth in their custody.” We cautioned at that time that the legislation that went into effect in 2017 (Senate Bill 3368), which was intended to ensure that returning prisoners obtained permanent state IDs by eliminating certain fees and providing exiting prisoners with temporary IDs, was inadequate to accomplish this task. Preceding and subsequent to the passage of SB 3368, JHA has continued to champion changing Illinois law and policy to ensure that all people leaving prison have a valid State ID. Our efforts in this regard took on a new rigor in 2013, when JHA staff worked with one 19-year-old young man leaving prison to obtain his State ID, and saw firsthand the colossal barriers faced by returning citizens in acquiring official government identification documents.

In February 2019, subsequent to SB 3368’s passage and the enactment of Public Act 99-0907, JHA again undertook to assist two young men in obtaining State IDs following their release from prison. Based on this recent experience, it is clear that the law that went into effect in 2017 has done little if anything to decrease the difficulties in obtaining a State ID upon release from state custody in Illinois. People exiting prison continue to face immense hurdles in obtaining State IDs, for it is not made clear to them that the verification form that IDOC and IDJJ provide serve as fee waivers. Further, without having their birth certificate and social security cards in hand to take to the Secretary of State, the new policy provides very little help in obtaining a State ID. Even with the assistance of JHA staff navigating and accompanying the men to agencies to obtain necessary documents and an interested party covering transportation and document costs, it took roughly three weeks for the men to obtain the underlying documents needed to obtain a State ID.

The process of obtaining underlying identification documents remains circuitous, confusing, expensive, labor-intensive, and extremely frustrating—requiring repeated phone calls, online research and travel to and from federal, state and local entities located all over Chicago in attempts to obtain these necessary records—including multiple trips to the Federal Office of Social Security, the Cook County Clerk’s Office, the Cook County Department of Vital Statistics and the Office of the Illinois Secretary of State.

To illustrate just a few of the steps on the arduous path that to getting a State ID card for these individuals, one day was spent travelling to and from a walk-in clinic, where the young men had to wait several hours to get a free HIV test—done solely for purposes of obtaining a certified medical record to be used as partial documentation needed to obtain a social security card.
On another occasion, half a day was spent travelling to and from one young man’s alternative middle school on the far west side to speak to staff and obtain a certified copy of his Individualized Education Program (IEP), then returning to downtown Chicago, waiting in line at the Secretary of State’s Office for purposes of obtaining a State ID, only to be rejected and turned away on the grounds that a certified IEP from a Chicago Public School was not an acceptable document because it did not constitute a “certified school transcript” as defined by the Illinois Secretary of State’s Office for purposes of obtaining a State ID. In addition to traveling to the school, trips to and from the Cook County Juvenile Temporary Detention Center and an Illinois Department of Juvenile Justice’s Aftercare office were also undertaken before these young men, with help from JHA staff, were finally able to obtain certified copies of a school transcript as needed to obtain a State ID, when other documents were unavailable.

On yet another occasion, JHA staff and one young man spent an afternoon waiting in line at the Illinois Office of Vital Statistics to obtain a copy of his birth certificate as documentation to obtain a State ID, only to discover that the birth certificate was incomplete because the young man’s mother had left the hospital following his birth without filling in his first name. After returning to JHA’s office, researching online, calling the Illinois Department of Health, and obtaining a Birth Certificate Correction request form we learned that in order to correct the birth certificate to properly reflect the young man’s first name, in addition to paying a $15.00 processing fee, he also would have to submit—a copy of his State ID.

The absurdity of this situation cannot be overstated. Researchers, public safety officials, justice reform advocates, and law and policy-makers all uniformly agree that having a valid State ID upon leaving prison is critical to success because it allows people access to vital resources such as housing assistance, jobs, social services, healthcare, educational opportunities, and more. Yet, obtaining a State ID continues to be practically impossible for many leaving prison. Given that the State of Illinois is already required to verify the identities of every person entering its prison population, it follows that the Illinois Secretary of State’s Office, working in tandem with IDOC and other state and county agencies, should be able to come up with a solution and system to ensure that people leave IDOC facilities with a valid State ID. Indeed, other states like California and Florida have been able to accomplish this task—so, why can’t Illinois?

One of Illinois Governor Pritzker’s first acts upon assuming office in 2019 was to sign an Executive Order creating the Justice, Equity and Opportunity Initiative (JEO) with the aims of modernizing sentencing, reducing recidivism, and improving reentry through “a holistic approach that addresses opportunity both inside and outside of our prisons.” To that end, this Executive Order mandates, “[a]ll State Agencies shall work cooperatively with the Initiative as needed to define and achieve the deliverables of the Initiative.” As demonstrated by SB 3368, which attempted to address issues for returning prisoners in obtaining State IDs, legislative initiatives to eliminate bureaucratic barriers and ensure that people leaving prisons have valid State IDs have fallen short thus far. JHA recommends that the JEO, consistent with its authority and mission, should make it a top priority to address the problem and work collaboratively with IDOC, the Office of the Illinois Secretary of State, the Illinois Division of Vital Records and other federal, state,
county and local government authorities to establish formal agreements to facilitate a reliable system to ensure that all people leave Illinois correctional facilities with valid State IDs.

(2) Lack of transportation is a major, underreported problem for people leaving prison which prevents them from accessing essential goods and services and complying with conditions of mandatory supervised release.

Access to practically everything associated with successful reentry, economic stability and upward mobility—such as jobs, healthcare, social services, mental health and substance abuse treatment, food, clothing, housing assistance and affordable housing, education—depends upon the ability to get around in an efficient, affordable way. When a person’s access to physical transportation is impaired—whether in cost or physical location—it makes the process of doing simple things such as getting to work on time much more difficult, if not impossible. Indeed, lack of reliable and affordable transportation is a major reason that low income families stay in poverty. For people returning to the community from incarceration, the need for reliable, affordable transportation is especially acute because many are starting over from square one and require transportation both to obtain basic goods and services in order to live, as well as to comply with mandated terms of release, such as submitting to drug testing or treatment.

The young men that JHA worked with each received a train ticket back to Chicago and $10 cash in “gate money” from IDOC following their release from prison. This typifies the scant resources provided by IDOC to inmates on release. The men’s families were not in a financial position to be able to give them money for transportation. A concerned person who learned of the situation from JHA purchased the young men month-long Ventra Chicago Transit Authority (CTA) passes at a cost of over $100 apiece per month for three months following their release from prison, even though doing so resulted in a substantial and unsustainable financial burden. This allowed the young men the means to travel to government agencies to obtain identification documents for a State ID, to social service agencies to sign up for LINK cards and SNAP for food assistance, to clinics to receive medical treatment and mental health assessments, to housing assistance agencies, to job intake placement interviews, to job sites upon finding employment, to stores and pharmacies to purchase food, hygiene products, clothing, medications and other necessities of daily living and to visit and reconnect with family members and loved ones around the city. One of the young men, who had his personal possessions stolen while he was staying at a homeless shelter following his release from prison and was thus reluctant to return, also used his CTA card as a de facto form of housing assistance, using L trains as shelter during bad weather and as a place to sleep since he lacked a safe place to sleep. Recognizing the importance of transportation, one reentry service organization that young men visited provided them with CTA cards, totaling nine free ride fares, upon their completing an orientation session. However, apart from sporadic transportation assistance through
local direct service organizations, no comprehensive reentry plan or funding is in place to meet the urgent transportation needs of returning citizens.

One advantage for people released to halfway houses or who are transferred to IDOC-operated ATCs (of which there are woefully few—only four in total: three housing men, one housing women) is that these entities often have relationships with public transportation authorities, including the CTA, to assist residents by providing them with access to public transit fare cards. Also, transitional housing staff and other residents are able to help others navigate public transportation and identify other ways of travelling to and from work and appointments. However, for the vast majority of people released from prison, access to transportation is a major barrier, and reentry assistance and subsidies to facilitate transportation are extremely limited and sporadic at best.

Additionally, people released from prison to Chicago face daunting challenges because Chicago’s public transportation and the Ventra card system are cost-prohibitive and do not meet the needs of many former prisoners. Unlike some major metropolitan areas like New York City, Chicago does not have a program to provide reduced fares to low-income riders. Further, the Ventra transit card system itself is a barrier because it places impractical registration requirements on the homeless and those who lack access to the internet, and places excess financial burdens on low-income riders and social service providers. In addition, access via public transit to Cook County suburbs that offer the greatest number of general labor and entry-level job openings (i.e. the kinds of jobs that are more likely to employ people leaving prison) is extremely limited. In seeking employment, the young men JHA worked with were foreclosed from applying to many entry-level labor, warehouse and factory job vacancies in suburbs outside Chicago for which they were otherwise qualified solely because they could not get to the job sites via public transportation.

Much has been written about the need to provide treatment, housing and employment opportunities for people returning home from prison. However, much less attention has been given to addressing the underlying prerequisites to accessing these supports and services, such as the transportation needs of people leaving prison and coming back to the community. Despite renewed interest by Illinois’ law and policy-makers in subsidizing reentry, no strategic plan or specific policy agenda is in place or has been proposed to broadly address the transportation needs of people returning to the community from Illinois’ prisons. The bipartisan Illinois State Commission on Criminal Justice and Sentencing Reform emphasized in its final report issued in 2016 that the issue of transportation must be addressed for people returning home from prison. To that end, the Commission recommended “[p]roviding transportation support through bus passes, reimbursement to employers, or discounted fares” in the short term, and, in the long term considering the need to locate affordable transportation in areas in prioritizing public expenditures.
However, these recommendations remain just that, with no evidence of implementation of this common sense and important suggestion.

Without ready access to affordable, reliable transportation, people leaving incarceration have few options. A person cannot visit an apartment that is available for rent, go to a job interview, get to and from work, go to a doctor appointment, attend a substance abuse therapy session or meet with his or her parole officer without the means to get there. Because access to transportation is really the linchpin for successful reentry, Illinois correctional agencies and law and policy-makers must focus their efforts on addressing this critical need.

(3) People leaving custody, especially those with histories of trauma or mental health issues, could benefit from being assigned civilian caseworkers to provide social support and facilitate access to care and resources to meet basic needs immediately upon their release from prison. Parole agents are not social workers or mental health professionals, nor can we expect them to be.

Illinois law provides that the conditions of parole or mandatory supervised release imposed on a person following release from prison are intended “to assist the subject in leading a law-abiding life.” The young men that JHA worked with following their release from prison had various conditions imposed upon them as part of their MSR that ostensibly were aimed at assisting them in rehabilitation, including obtaining substance abuse counseling, anger management counseling, outpatient mental health treatment, and special education services for purposes of obtaining a high school diploma, among other requirements. These young men’s histories were characterized by trauma, poverty, family instability, prior juvenile and mental health institutionalizations, and exposure to violence and neglect in childhood and early adulthood. While incarcerated in IDOC, the young men were receiving psychotropic medications; they left IDOC with several weeks’ supply, but without renewable prescriptions.

Apart from giving the young men a list of referrals to places where they might obtain mental health and substance abuse treatment, as well as referrals to organizations where they might seek additional help with food, housing and job assistance, parole agents were not actively involved in connecting the young men to reentry services. Parole agents required the young men to check in and meet them periodically to update them on where they were residing and their activities. However, agents were primarily concerned with surveillance and keeping track of the young men and alert to any arrests or new criminal charges that might be grounds for revocation. Given the heavy caseloads of parole agents (reportedly, about 500 parolees per year per agent), it stands to reason that they are not equipped to provide individualized case management for reentry purposes. To their credit, the young men’s parole agents were pragmatic and seemed to recognize that their parolees’ youth and immaturity, coupled with their poverty and lack of
social support, financial resources and transportation, made the prospect of them attending mandatory
counseling and treatment remote, but did not seek to revoke their MSR for these “technical” violations.14

In order to fully understand the barriers these young men faced in getting mental health treatment and
counseling and to assist them in getting services, JHA staff assumed the role of de facto caseworkers
(although JHA staff are neither social workers nor mental health professionals). We did so only after our
repeated efforts to find the young men qualified caseworkers to direct and facilitate treatment failed.
However, the task of getting the young men into treatment ultimately proved daunting, fruitless and
beyond our capacity. To illustrate, we accompanied one young man who had serious behavioral and
mental health issues to no less than four separate mental health clinics on four different occasions, but
still were unsuccessful in helping him obtain treatment. This young man, who stopped taking medication
after he left IDOC, became extremely agitated and paranoid while waiting to be seen at the first mental
health clinic. He stood up, exited the clinic suddenly and got on a bus without ever being seen by a
clinician. Clinic staff explained that, in the absence of him presenting a threat of harm to himself or
others, the young man could not be forced to receive treatment. This scenario, with only slight variation,
also occurred at the second mental health clinic to which JHA accompanied him.

At the third mental health clinic that we went to, a walk-in clinic, this young man was rejected from
treatment on the basis that he did not have health insurance. At the fourth mental health clinic, JHA staff
discovered, with the assistance of an extremely helpful and persistent clinic administrative assistant, that
the young man was, in fact, signed up for and had obtained Medicaid coverage following his release from
prison—although he had no recollection of this occurring and did not know what Medicaid was. Although
this young man finally was able to meet with a mental health intake and assessment counselor at this
fourth clinic, he was non-responsive and unable or unwilling to answer the staff’s questions during the
appointment.

Because this young man was homeless, indigent and lacked stable housing or family support, he was
severely sleep-deprived, and fell asleep both in the clinic’s waiting room and, at one point, during the
mental health assessment itself. The mental health intake and assessment professional who saw him
informed JHA staff that the assessment could not be completed under the circumstances, but
recommended that he be seen by a psychiatrist as soon as possible for a medication evaluation. However,
the earliest available appointment for this young man to be seen by a psychiatrist was a month away.
Based on conversations JHA staff has had with many formerly incarcerated individuals, this young man’s
inability to access crucial services in a timely manner appears to be anything but exceptional. Even for
those who are able to navigate the convoluted process of obtaining services such as mental health care or
substance abuse treatment, their effort often ends when they hit a proverbial wall of having to wait a
month or longer to receive services they desperately and immediately require. Ultimately, he was never
able to make that appointment to be seen by a psychiatrist because several days after he was seen at this clinic, he was arrested for theft and re-incarcerated at Cook County Jail.

Absent the help of a mental health caseworker or an involved counselor or mentor to act as a bridge and to provide individualized social support, including helping to access crisis intervention, continuity of mental health care and wraparound services (including basic needs such as food, housing, clothing, transportation) immediately upon the young man’s release from prison, his return to jail was not just predictable, it was inevitable. “Justice system personnel, behavioral health treatment and service practitioners, researchers, and policymakers agree that the maintenance of better individual-level outcomes and a reduction in recidivism necessitate a formalized continuity of [mental health and substance abuse] services from institution to community settings.”16 Ideally, caseworkers and people nearing their prison outdates would have multiple personal contacts before people leave prison to establish a relationship of trust—as many people with histories of criminal justice involvement reasonably harbor deep distrust and fear of government authorities and service agencies that are bound up with parole or policing functions.16 Parole agents or clinicians can come up with the best plans in the world to assist a person with reentry. However, absent a supportive, trusted caseworker to walk a person through the early steps of reentry (i.e. helping with transportation and, when needed, accompany a person to appointments, and providing the person with social support and addressing their basic living needs), the likelihood of a person in deep poverty—particularly one who suffers from trauma or mental illness—navigating all these things on his own is improbable, if not impossible.

This is not to say that people leaving custody lack autonomy, accountability and responsibility. Ultimately, no program or person can force another person to change. The reality is, however, that structural inequalities related to issues including class, ethnicity, disparity in educational access, poverty, race, disability, mental and physical illness (both due to and resulting in and from histories of trauma, disproportionate justice-system involvement, victimization, and oppression) necessarily impact people’s capacity to realize their human capabilities—and collectively work to undermine the confidence, stability and sense of hope that are a prerequisite for disenfranchised, traumatized people to be able manage and actively engage in new opportunities when they are presented.

In the absence of a supportive, knowledgeable caseworker to provide individualized assistance with reentry, people’s best attempts to navigate and improve their circumstances on their own are often met with crippling disappointment. To illustrate, another young man that JHA worked with, having already had multiple job applications rejected by numerous employers, took public transportation to a temporary job agency to apply for any job that would take him. However, he ended up failing the pre-employment drug screening because the Attention Deficit Hyperactivity Disorder (ADHD) medication that he was taking caused him to test positive for amphetamines. Having left prison with just a few weeks supply of
the ADHD medications, and lacking a written renewable doctor’s prescription or a doctor’s note attesting that he was prescribed ADHD medications, this young man was rejected by the employment agency for failing the drug screen. In a double bind, he gave up, reasoning that even if he was able to timely obtain a note from his prison doctor or his prison medical records to prove that he was taking prescribed ADHD medication, this would require him to reveal to the employer that he was just released from prison and still subject to MSR, marring his job prospects.

In another instance, a young man whom JHA staff referred to a promising job skills training program that paid wages during his participation and would provide him with job placement upon completion, stopped attending the program out of fear and overwhelming anxiety. As the young man explained, travelling to the program (which was located in a south side neighborhood) required him to go into an area that he was unfamiliar with and where he was not known to people on the street. The young man, whose best friend from his west side neighborhood had been shot and killed two weeks prior to him joining the job training program, was deeply concerned and thus hyper-vigilant about the possibility of being shot while going to and from the program. He also feared that other young men in the program, who were unknown to him and not from his neighborhood, might be in other gangs and arrange to jump him. A trained caseworker would have been best positioned to help the young man address the trauma of his friend’s murder and work with him to participate in the program or potentially find placement for him in another paid job training program located in his own neighborhood or a neighborhood where he felt less threatened. As it stood, neither JHA staff nor the young man’s parole officer were competent or capable of resolving the issue, and despite our information-gathering efforts and calling on our criminal justice advocate network for assistance, repeated attempts to locate and connect the young man with a caseworker who could address his needs and provide him with comprehensive services proved futile. Frustratingly, in many instances our messages seeking help for the young man from direct service organizations and advocates (who, in their defense, undoubtedly were already overburdened and underfunded) did not receive responses.

The steep social, economic and public welfare costs of Illinois’ high recidivism rates are by now well known to Illinois’ law and policy-makers. Unless and until Illinois moves beyond a surveillance model of community supervision to provide disenfranchised returning citizens, like the people JHA attempted to assist and to learn from, with essential social support and comprehensive case management through civilian caseworkers (along with some level of basic financial assistance), stories that inevitably end in re-arrest and reincarceration will continue to play out ceaselessly.
(4) People leaving prison need basic financial assistance from day one of their release; otherwise they are being set up to fail.

The young men that JHA recently got to know during their reentry came from deep poverty and returned to deep poverty upon release from prison. Apart from the $10 gate money they were given upon release, they had no financial assets or savings and, having entered into the juvenile justice system in their youth, they had no prior history of employment. When JHA staff met with the young men a few weeks after their release, they quite literally did not have a dollar between them.

One of the young men that we worked with, who had serious mental health and behavioral issues, was alienated from his family and thus could not turn to them for any financial assistance. While staying at a homeless shelter during the early days following his release, he was able to acquire a free cell phone with some prepaid minutes and some clothes and shoes from friends, but he otherwise lacked any money or possessions. As mentioned above, this young man had some clothing that had his parole release papers and referrals to service organizations in them stolen one night at the shelter while he was sleeping, so he left and did not return, even though it was winter and he lacked a coat. Thereafter, he alternated between staying with friends and people he befriended on the street and sleeping on the L train.

Another young man, who was released from prison to stay with his older sister, found himself in a similar, if slightly better situation on leaving prison. His sister provided him with a used cell phone and a one-month pre-paid calling plan, as well as food and some clothes, underwear, hygiene products and shoes. However, as his sister was barely getting by supporting herself while working a full-time, low-paying job, she was unable to shoulder any additional financial burden in helping her brother. Based on interviews with the young man, it seems that the added financial stress for his sister of having her brother financially dependent on her, coupled with fear and resentment that he would not find a job or would return to bad habits and using drugs as a coping mechanism, led to many fights between the siblings. Eventually, about two months after his release from prison, the young man moved out to stay on the couch at a friend’s apartment because the constant fighting with his sister made staying with her unbearable for them both.

As mentioned above, a concerned person eventually provided money to pay for the young men’s monthly phone plans and CTA bus cards, as well as providing them each with a few hundred dollars for living expenses to help supplement the roughly $120 in food stamps they received each month. These were the only funds available to these young men as they attempted to secure stable jobs and housing. Having been institutionalized during critical periods of their social development, they evidenced the need for soft skills training to improve their ability to communicate and problem solve in a professional setting and to learn pro-social coping mechanisms for expressing and dealing with everyday anger and frustration in the workplace. Multiple non-profit reentry organizations offered mental health, counseling, education and job readiness programs. However, none of the entities that JHA was able to find for the young men through
research and network referrals offered immediate economic assistance without requiring the men to participate in programming offered by the organization. But basic economic support was the very thing the men were seeking in the first instance to allow them to survive and meet their basic needs while determining for themselves the supports, programming and services best suited to help them succeed in the workplace and become self-sufficient. This is a fundamental flaw in how Illinois approaches reentry programs. Many if not most of the reentry programs that JHA encountered while working with the young men leaving prison are structured such that the focus is on former prisoners’ personal, educational and professional development, which is critically important; however, without first working to meet reentering citizens’ basic economic needs, it becomes far more difficult to achieve success in the other arenas. Consequently, those who are most in need of treatment and reentry training programs cannot access them because they instead must focus their time and energy on meeting their daily needs for survival: food, clothing, housing, transportation, a safe place to sleep.

A quick internet search of reentry programs will bring up a plethora of research, resources and organizations touting the availability, importance and effectiveness of various behavioral and mental health assessments, job training, substance abuse treatment, counseling, anger management, and education reentry programs. The vast majority of these programs and services are geared towards satisfying MSR conditions that are mandated under IDOC authority and therefore receive government funding. What you will not find, however, are many programs directed at providing for people’s basic needs immediately upon leaving prison through direct economic assistance. Although poverty, crime, recidivism and mass incarceration are inextricably, unavoidably linked, the wealth gap in the United States continues to widen while successful efforts at eliminating poverty remain elusive. This oversight has proved to be a fatal flaw in criminal justice reform efforts.

Unless and until we radically rethink our policies on poverty and government assistance, confront our racial and class prejudices to address the ever growing gap in wealth and income between the rich and the poor, and provide people returning home from prison with the dignity, security and stability of having their basic economic needs met as they work to go forward in a productive, law-abiding way, the continuous cycling of people leaving and returning to jail and prison is unlikely to change. At the end of the day, the persistence of extreme poverty, resulting crime, and the use of incarceration to control impoverished populations, thereby perpetuating poverty and recidivism, is a political reality created by decisions made by those in power which, with political will, could be changed.
(5) Mandatory Supervised Release in its current form does not appear to measurably improve public safety, either by preventing or detecting crime through surveillance or by providing rehabilitative support to people leaving prison to assist in reentry and reduce recidivism.

Mandatory Supervised Release (MSR) in Illinois is what most people know as parole supervision. Indefinite sentencing and possibility of early release parole in Illinois were abolished in 1978 and remain available only to people who were sentenced and incarcerated prior to that year. The conditions of MSR, some of which are required by statute, are set by the Prisoner Review Board (PRB), which is the same entity that makes decisions about whether to grant parole to those who are still eligible, in addition to being responsible for a host of other functions such as vetting Executive Clemency petitions and involvement in the prison disciplinary process. MSR is administered by Parole Agents who work for the Parole Division of IDOC. MSR is functionally the same as parole supervision in other states for people released from prison, and has the same goals, which are to ensure public safety and assist reentering individuals to become law-abiding citizens. In working with young men following their release from prison, we did not see any evidence that MSR works effectively to improve public safety, either by assisting law enforcement in detecting or preventing new crimes, or providing the young men with support and rehabilitative resources to aid in their reentry and reduce the likelihood of recidivism.

For example, the young man with mental health issues whose reentry experience is detailed above, and who ultimately was re-arrested and sent back to jail based on two separate, criminal incidents (involving allegations of theft and assault) was apprehended for these reported acts not through MSR surveillance, but through ordinary police work, i.e. people calling the police, reporting him, and the filing of formal criminal complaints against him. This holds true for most cases involving people on MSR who commit new crimes.

While monitoring former prisoners’ activities and whereabouts on MSR through compliance check-ins with their parole agents may provide a comforting illusion of increased public safety, there is no evidence to suggest that surveillance under post-release supervision increases the detection of new crimes. Rather, research bears out that “[c]ommitting significant correctional resources to what is effectively preventive policing often yields little in the way of public safety benefits, while exposing the individual under supervision to a significant risk of imprisonment based on [technical] violations of the conditions of release—violations whose detection becomes increasingly likely over time.” Although recidivism rates for people recently released from prison are very high, there is little evidence to show that that people on MSR recidivate less than people released from prison without any supervision. Indeed, there is some data suggesting people released from prison with little or no supervision may have higher rates of successful reentry outcomes than people released under supervision. It is our understanding that new leadership at IDOC is seeking to track and analyze information about the “technical violators” who return
to the Agency to better understand what can be done to prevent this from happening. Better understanding and meeting people’s needs before initial release, and connecting people to increased support rather than surveillance has been discussed as the goal of evaluating our current population of MSR violators.

In the absence of evidence that the surveillance component of MSR works to prevent or increase detection of crimes, however, the question still remains whether MSR in its current form works to facilitate rehabilitation for people returning home from prison. According to Illinois law, the conditions imposed on the person being released from custody are those deemed necessary to assist the person in leading a law-abiding life,\textsuperscript{25} and based on the stated goals of the IDOC, including those who administer Parole/MSR and the Parole Reentry Group, MSR is intended to serve not just a surveillance function, however, but also to provide former prisoners with reentry support and assistance with rehabilitation.\textsuperscript{26} Again, based on our experiences with young men recently released from prison and what we have heard anecdotally from others in the same circumstance, we did not find or hear from these people that MSR works effectively to assist former prisoners in successful reentry and rehabilitation.

To their credit, the parole agents assigned to the young men seemed responsive and encouraging of the young men’s efforts towards rehabilitation, and the young men felt that the agents treated them fairly. As described by one of the young men, his parole agent was ‘very cool,’ because he was ‘not looking to trip him up,’ and, as a black man who knew the young man’s neighborhood, he ‘knew what was going on out there’ and the challenges the young man faced. Weekly check-ins with his parole agent were therefore non-adversarial, and his agent instead focused on getting updates on the young man’s activities and his progress towards getting a job and gauging whether he was generally doing okay and staying out of trouble. The young man, who had prior experiences with other parole agents in the past, explained that parole agents like his current parole agent, who took a hands-off approach and just reminded people to stay away from people and situations that can send them back to prison, are much better than intrusive, hyper-controlling parole agents who ‘stress people out’ by requiring them to multiple appointments and constantly monitor them and badger them with demands. In the young man’s opinion, the better practice would be to eliminate MSR and parole completely, and ‘just let people be free and leave them alone’ once they have served their time; but ‘maybe have someone to help them with getting jobs and money and phones and apartments and things people really need’ when they get out of prison.

Given the heavy caseloads of the young men’s parole agents and the focus on surveillance, they were not in a position to provide individualized case management services. The agents instead referred the men to non-profit organizations, which, presumptively were tasked with the job of facilitating and managing reentry services and support. After attending one group intake session at a reentry organization, however, some young men reported to JHA that they were disillusioned and did not plan to return to that
organization. The young men were not assigned specific caseworkers at intake nor did they speak with
them personally, but instead the focus of the initial meeting was filling out paperwork, reviewing their
MSR conditions, and providing them with yet more referrals for services and appointment times to come
back for behavioral assessments, anger management and orientation for a job training and preparation
program. In part due to this experience, these young men reported they felt alienated by the tone that was
set by some of the organizational leaders at the group intake session, who came off as unfriendly,
impatient, authoritarian and militaristic and treated the men like they were still in prison. Further, the
young men’s most pressing issues—lack of money for transportation and to meet their basic needs, as well
as stable housing—were not addressed at the intake session. Under the circumstances, the young men
reasonably felt that going through the organization’s reentry programs, in hopes of potentially getting a
job placement weeks or months later, would be a waste of time because they needed to find jobs and make
money immediately in order to live. This first unsuccessful experience dissuaded them from seeking help
from other reentry organizations and programs. While it is unfortunate that they were not willing to try
other reentry support providers to see if a better fit might be available, the time it took them to get to the
organization, learn about available support or lack of, and understand that there was no immediate
opportunities to earn money left them deflated and unable to differentiate those providing help from
those mandating that they receive certain treatment and programming in order to meet the conditions of
their MSR.

In sum, based on these limited experiences on the front lines with the young men leaving prison, it was
not clear what, if any, public safety or rehabilitative purpose MSR is actually achieving in its current
incarnation. Part of the problem may stem from the fact that the goals of MSR (and the attendant roles
that parole agents must play) are divided between contradictory, often incompatible functions of law
enforcement, surveillance, punishment, social work, support and rehabilitation. Indeed, a persuasive
argument can be made that MSR, at least in its current form, should be eliminated. Under such a system,
defendants would serve their prison terms, minus any good time credit, and the possibility of re-
imprisonment would be over upon their release unless they committed a new crime. This would have the
benefit of making release more predictable and respecting the autonomy of released prisoners to make
choices, exercise self-determination, and direct their own lives as free human beings. This would also
allow the prison system to further reduce population and refocus efforts away from the care and custody
of a constant churn of parole violators who will be in custody in facilities for only a brief time. Already,
many people “max out” or finish their MSR time inside IDOC prisons, leaving without further supervision
or support, because they are unable to meet their MSR conditions in the community as intended.
Eliminating the current form of MSR would not mean abandoning efforts at reintegration, as the Parole
Division could be adapted to provide every prisoner with a reentry caseworker prior to release to assist
them if needed in securing stable housing, medical benefits, government assistance and social services
upon release, as well as access to rehabilitative reentry programs and treatment—but participation in such programs would be voluntary, and not carry the threat of prison if they chose not participate.\textsuperscript{28}

To be clear, abolishing MSR in its current form would not mean that people leaving prison would be wholly unsupervised upon return to their community. The law compels IDOC to notify local law enforcement entities with jurisdiction over the area that a person being released from prison will be returning to of their pending release.\textsuperscript{29} And, as alluded to above, crimes committed by people after being released from prison are by and large detected by police or citizens alerting police about criminal activity that has already occurred. Thus, in most circumstances, IDOC is informed that a person on MSR status has been accused of committing a criminal offense only after the fact by police, but the person’s status on MSR is unrelated to the detection or possible prevention of the crime.

If the ultimate goal is reintegration, the sizable resources that we now spend on supervised release might be productively transferred to job programs inside and outside prison and economic and housing assistance upon release.\textsuperscript{30} This would help to address economic and employment insecurity that are perhaps the greatest impediments to reentry for a broad category of people leaving prison, given that the majority of people exit prison with few job prospects, and no savings or immediate access to unemployment benefits or government assistance to provide for their basic needs.\textsuperscript{31} Based on research and anecdotal information from people in prison and recently released from prison, JHA firmly believes that doing away with MSR in its current form will not jeopardize public safety. On the contrary, shifting resources away from an ineffective model of supervision and instead devoting these resources to services and supports people returning from prison desperately require will improve outcomes and public safety.

It is high time in Illinois that we carefully reexamine the contributions of MSR to public safety and give strong consideration to limiting or fundamentally reworking MSR’s scope and mission.\textsuperscript{32}
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Since 1901, JHA has provided public oversight of Illinois’ juvenile and adult correctional facilities. Every
year, JHA staff and trained volunteers inspect prisons, jails, and detention centers throughout the state.
Based on these inspections, JHA regularly issues reports that are instrumental in improving prison
conditions. JHA humbly thanks all the persons who agreed to be interviewed for this report and who
graciously shared their experiences and insights with us.

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Endnotes

1 As sociologist Loïc Wacquant observed, the term “reentry” is an oxymoron because it ignores that the majority of people leaving prison are not reentering safe, economically and socially viable communities with educational and job opportunities, but instead, racially, economically and geographically segregated areas characterized by extreme poverty, social suspicion, routine violence, and failing public institutions.

“To speak of "pathways of reintegration" disregards the hard fact that there was no integration prior to incarceration as evidenced by the social profile of jail detainees in America: fewer than half of them held a full-time job at the time of their arraignment; two-thirds come from households living under half of the official "poverty line"; 87% have no postsecondary education; and four in ten suffer from serious physical and mental disabilities. Every other jail inmate has an incarcerated family member, and six in ten were previously incarcerated themselves. How could former prisoners be “re-integrated” when they were never integrated in the first place and when there exists no viable social structure to accommodate them outside? How could there be “reentry” when they are enmeshed in a carceral lattice spanning the prison and neighborhoods deeply penetrated and constantly destabilized by the penal state?”


2 For example, see the collaborative work and report on housing re-entry issues recently produced by the Illinois Justice Project and Metropolitan Planning Council, “R-Entry Housing Issues in Illinois: The Current Situation, Challenges and Possible Solutions,” https://www.metroplanning.org/uploads/cms/documents/re-entry_housing_issues_report_final.pdf, as well as innovative work by The Roadmap Initiative, a collaborative partnership of organizations, led by The Safer Foundation, TASC (Treatment Alternatives for a Safer Community), Smart Policy Works and other organizations looking to stop the cycle of justice-involvement, emergency department use, and homelessness and soliciting direct feedback from justice-involved people to better inform reentry


7 Prisoners are also provided with any remaining balance on their IDOC trust fund commissary accounts on leaving prison. However, given that many prisoners are indigent or come from poor families who were unable to provide them with significant outside financial support while in prison, the amount on a prisoner’s trust fund account is often negligible. Additionally, people have reported to JHA that sometimes debts accumulated in prison, such as for copies or healthcare copays, can be deducted from their minimal $10 gate money.


Ibid.


A “technical” violation of MSR occurs when a person fails to comply with a condition of MSR, such as failing to attend mandated treatment or to check in with a parole agent at a scheduled time, but the violation, in itself, does not constitute a new criminal offense. See Illinois Sentencing Policy Advisory Council, “The High Cost of Recidivism,” (Summer 2018), http://www.icjia.state.il.us/spac/pdf/Illinois_Result_First-The_High_Cost_of_Recidivism_2018.pdf.


19 Statement on Visit to the USA, by Professor Philip Alston, United Nations Special Rapporteur on extreme poverty and human rights, Washington, December 15, 2017,

Elie Wiesel Foundation, “Mass Incarceration and Poverty: The Morality of the American Criminal Justice System,”


https://www2.illinois.gov/idoc/parole/Pages/default.aspx.


Christine S. Scott-Hayward, “The Failure of Parole: Rethinking the Role of State Reentry,” New Mexico Law Review Vol. 41 (Fall 2011),

Ibid. See also Jennifer L. Doleac, “Study after study shows ex-prisoners would be better off without intense supervision,” The Brookings Institution (July 2, 2018), https://www.brookings.edu/blog/up-front/2018/07/02/study-after-study-shows-ex-prisoners-would-be-better-off-without-intense-supervision.

730 ILCS 5/3-3-7, Conditions of parole or mandatory supervised release,
26 See IDOC website: Conditions of Parole and Parole Reentry Group (“[the Parole Reentry Group] develops, monitors and coordinates community resources and provides supportive services necessary to enhance an offender’s successful reentry back into the community to become crime free law-abiding members of society.”), https://www2.illinois.gov/idoc/parole/Pages/ParoleReentryGroup.aspx.


29 730 ILCS 5/3-14-1(c)


31 Ibid.