

Reentry Surveys: A Reality Check

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How does an individual know if what he or she knows is correct or real? Empirical evidence comes in many forms. At one end of the research continuum is the trustworthy, yet difficult, random assignment experiment. At the other end is the intuitively reasonable, yet highly fallible, anecdote. Somewhere between those extremes is the useful survey. In the corrections field, well-crafted surveys conducted by appropriate methods provide valuable information for establishing baselines and marking progress. Several states effectively use surveys for these purposes; this article describes Georgia's reentry self-examination.

The state of Georgia has been supervising offender reentry since the constitutional creation of the State Board of Pardons and Paroles in 1943. However, recent involvement in three reentry initiatives is focusing top-down attention on creating safer communities by effectively transitioning offenders back into the community. The National Governors Association Reentry Academy, the Serious and Violent Offender Reentry Initiative and the Transition from Prison to the Community Initiative are all combined under the direction of a statewide steering committee. Headed by a member of Gov. Sonny Perdue's staff, the steering committee comprises agency heads in the law enforcement, correctional and service provider agencies who work with offenders. Project planning, implementation and monitoring are directed by a policy team made up of steering committee agencies' directors and division directors. A literature review was followed by an assessment of offender reentry processes for Georgians. A policy team workgroup conducted anonymous surveys last year to answer questions about the needs of both

transitioning offenders and the prison, supervision and service provider staff who work with them.

Methodology

More than 1,100 surveys were analyzed, including the results from 207 offenders and 942 staff members. Surveys were designed and administered to eight groups: recently revoked parolees and probationers (n=20); inmates expecting to be released from prison within 45 days (n=78); inmates in a program for mental health prison releases called Transition Aftercare for Probationers and Parolees (TAPP) (n=109); TAPP case managers (n=18); prison counselors (n=252); mental health prison counselors (n=62); parole (n=201) and probation (n=392) officers; and community service boards that provide mental health, developmental disability and addictive disease services throughout the state (n=25). Most staff surveys were administered via Web-based survey software, and the offender surveys were completed individually or in small groups after consent was obtained.

Reported here are only a few of the survey findings. Similar to data detailed in the literature, the data from all surveys point to employment as the key reentry issue, followed by housing and transportation. However, gaps in the existing transition processes were less obvious before the surveys were conducted.

Offender Views

Sixty-eight percent of the inmates reported being worried or concerned about their reentry needs as their release date approached; however, most (76 percent) did not ask for help, including assistance with finding housing. The revoked offenders, half of whom were back in prison due to a new offense, were most con-

cerned about: avoiding the people "who I got into trouble with the last time" (53 percent), using alcohol or other drugs (45 percent), using transportation (40 percent), obtaining a driver's license (35 percent), finding a job (26 percent) and making new friends (25 percent). Interestingly, their reply to the question of whether there was anything staff could have done to help before they left prison the last time, 75 percent said "no." The main reasons they identified for being back in prison include:

- Hanging out with the wrong crowd (40 percent);
- Using alcohol or other drugs (37 percent);
- Too much pressure (26 percent);
- Gave up and quit trying (26 percent);
- Could not find a job (21 percent);
- Too many rules (16 percent); and
- Disrespected someone with authority (16 percent).

Interestingly, inmates appear to recognize the influence of friends and social acquaintances in reentry success or failure. Inmates reported being interested in developing new skills, but they also reported a lack of knowledge about how to make changes.

Stable and safe housing continues to be a problem for some offenders — 82 percent said they knew where they would be living the day they were released from prison. Yet, in another question, 37 percent said they were worried about where they would live when released. When asked where they will/did stay the first night, 55 percent answered "with a family member," 15 percent "with spouse," 12 percent in "a residential program," and 9 percent "alone." A

key recidivism factor is the number of residence changes. The revoked offenders stated that they remained at the first residence for a range of two nights to seven months, with one-half staying in the first residence between two and six months. A quarter reported not changing residences, a quarter changed once, another quarter changed two or three times, and the last quarter changed residences four or more times.

So, who do offenders turn to for help? A significant proportion of inmates do not view themselves as having substance abuse problems and, therefore, reported that they were not likely to follow through with treatment in the community. The limited capacity of in-prison treatment programs is further exacerbated by the large percentage (50 percent) of prisons that do not offer a 12-step program. As has been the case for several decades, community-based outpatient and residential substance abuse treatment services are limited. The results for the revoked offenders are telling (see Table 1).

The revokees said they asked for help from their parole or probation officers with the following:

- Social Security Insurance/SS Disability Insurance benefits (44 percent);
- Substance abuse treatment (40 percent);
- Finding a job (40 percent);
- Getting a driver's license (36 percent);
- Getting medical care (33 percent);
- Avoiding the wrong crowd (30 percent); and
- Finding a residence (27 percent).

When asked if any community or faith-based group provided help, only 27 percent said "yes." However, the inmates reported that the next time they are released from prison they would "definitely ask for help" from: faith-based groups (60 percent), parents (59 percents) and parole or probation officers (47 percent).

Table 1

Pre-revocation Activity	Did Not Attend	Attended	Completed
Substance abuse assessment	–	47%	11%
AA/NA/Self-help	60%	35%	–
Outpatient substance abuse treatment	78%	17%	–
Cognitive-skills program	93%	–	7%

Staff Responses

From staff surveys, surprisingly, prison staff did not identify reentry planning or preparation as part of their job responsibilities. The institutional assessment, placement and program initiatives are focused on managing security risk. As a result, for the majority of inmates, community-based transitioning begins after the prison gates close. A notable exception to this is the planning and prerelease preparation for offenders with mental health needs.

Also on the positive side, field staff and service providers reported good working relationships. Their primary concern revolves around inefficiencies that occur due to an inability to easily contact each other. Multiple unsuccessful contacts occur often because so much time is spent out of the office or in activities that are not interruptible. Fortunately, almost all community service boards accept referrals from prisons and jails. However, a major barrier to successful reentry is the requirement of up-front fees by 25 percent of treatment providers, regardless of an individual's ability to pay.

Overall, a significant number of field officers reported having little or no information on the existing prison-based programs. Likewise, information on new releases appears to be inadequate for supervision planning. Field officers often have little knowledge about the physical health problems of inmates being released, and accessing medical care is a significant problem reported by inmates. In contrast, mental health appointments and medication supplies appear to be sufficiently addressed before prison release.

Successful Surveys

Critical to the success of surveys is developing carefully worded questions and informed answer options. Field testing before actually administering the surveys helps to address many issues related to ambiguous or inappropriate language, question sequencing and administration methodology. In addition, training the surveyors is paramount to receiving valid and reliable results. Finally, as with all research, sufficient sample sizes are required for generalizing the survey results to the population being studied and for using the results as benchmarks.

Survey results and other information gathered by the policy team led to 27 transition-improvement recommendations. After recently receiving the steering committee's endorsement of the recommendations, the policy team is implementing significant changes to Georgia's reentry process. The surveys produced eye-opening results that are expected to be revisited toward the end of this initiative.

No doubt, experiments are best and anecdotes are pervasive, but surveys can be a reality check. As with all tools, use each of them appropriately.

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