

## Summary of Testimony for 11/18/08 Public Hearing: “From Cell Block to City Block: Strategies for a Successful Re-entry”

### Synopsis

*The purpose of this report is to capture the themes and recommendations from oral testimony and to give voice to prisoners' written testimony that was not read at the hearing because of time constraints. A full transcript of oral testimony is available at [www.endtheodds.org](http://www.endtheodds.org). Copies of written testimony not read at the hearing are available upon request.*

*The report briefly summarizes what is--or was--working, with respect to preparation for a successful reentry and what is impeding successful reentry now. The remainder of the report outlines wide ranging recommendations for successful reentry outcomes. At the heart of the recommendations you will hear a cry for dignity, meaningful activity, civic engagement, and hope. Not programs alone, but policies, practices, and the very culture and structure of the prisons are critical to successful reentry and reintegration.*

### 1. Background

The End the Odds Coalition is a small group of Boston area people—formerly incarcerated and not yet incarcerated—who came together in January 2008 to brainstorm strategies for “ending the odds” against those in prison and those coming back out into the community. After holding two meetings with the Commissioner of Correction and his staff we decided to hold a public hearing. “From Cell Block to City Block: Strategies for a Successful Re-entry” became the theme of the hearing as we believe that what happens inside prison directly impacts the health and safety of our community. We wanted legislators and the DOC authorities to hear not only concerns, but also solutions from the experts—people inside prison, people who have returned to the community, and people who provide direct services to prisoners returning to the community.

We invited people inside to provide written testimony and we invited formerly incarcerated people and agency representatives to speak. We targeted specific legislators who chaired judiciary, public safety, mental health, and health care committees. We invited the Governor, the DOC Commissioner and any staff he chose to accompany him. We sent invitational emails to a broad range of people we knew had an interest in these issues. While we anticipated that time would not allow everyone to speak, we expected those who did speak would represent a wide range of sentiments, issues, and solutions.

Well over 100 people attended the two hour hearing, including formerly incarcerated people and family members. The Commissioner and several staff were present. One Senator-elect attended, but no incumbent legislators. Aides from two legislators' office attended. Approximately 25 people spoke or had their written testimony read. The Commissioner spoke twice during the hearing, once to rebut some of the testimony and the other time to broadly outline his reentry plan.

### 2. What is, or was, working?

Although most people spoke to the lack of adequate programming for reentry, prisoners cited a few programs and policies that are currently working to help prepare for reintegration. They credited volunteer programs, religious groups, and recovery groups with providing tools for successful reintegration by building self-respect through interaction with members of society.

Others identified a number of programs and policies that worked in the past to prepare people for reentry. Broadly speaking the valued programs included furloughs, college education, work release, substance abuse treatment, mental health treatment, employment and coping skills, help

with family dynamics, and community building. Opportunities to earn and save money while in prison eased the transition to the community.

### 3. What is impeding successful reentry now?

The impediments to reentry seem to far outweigh any positive measures. Not only are programs in short supply, but philosophy, policies, and practices stand in the way of a successful reentry. For example, the “breaking rocks” attitude of the 1980’s is still deeply rooted in much of the current leadership and staff. Retribution and punishment seem more operative than rehabilitation and treatment.

The new classification system was supposed to address the problem of arbitrary assignments and “over” classification. Despite some improvements in the process, far too many people are overclassified, necessitating higher security beds. Subjectivity still pervades. The classification system has few incentives for “good” behavior, but many negative consequences for alleged disciplinary problems. Even if the overclassification problem were addressed, opportunities for “step-down” would be limited. Between 1990 and 2005 approximately 1500 minimum and pre-release beds were eliminated, resulting in reduced capacity for step-down opportunities. Too many people are being released from walled facilities.

Violation of basic human rights impedes physical, mental, and emotional readiness for reentry. Many people provided testimony citing the lack of accessible, adequate, and empathic medical and mental health. Others spoke of being subjected to verbal and physical abuse from staff and to disrespect of their personal property. The resultant anger and resentment stand in the way of successful reintegration. In particular, use of solitary confinement, where prisoners are kept hungry, cold, and miserable, risks making people angry and dangerous upon release.

Resources for programs and reentry preparation are grossly inadequate. They are only a small percentage of the DOC budget. The lack of meaningful programs was cited over and over--especially skills training programs. There is also a lack of opportunities for meaningful avocations, such as lack of art supplies for arts and crafts. Some people testified that some programs are offered just for show. When inspections are over, the program disappears. Instead of spending time in programs, prisoners spend time in lockdown. A large percentage of prisoners are prescribed mood altering pills.

Assignment to programs is also problematic. Sentencing for certain types of crimes restricts eligibility for programs and work opportunities. Fairness in assignment to programs was also raised. For example, confidential informants are purportedly given preferential assignment to programs and jobs. And while there are regulations on the books outlining procedures for preparing prisoners for reentry, they are not consistently enforced.

Work opportunities are sorely lacking relative to the number of people who want jobs. Wages for prisoners are not commensurate with the cost of daily toiletries, other canteen items, and other fees and charges, such as telephone service.

The commutation process should be another avenue to reentry for those sentenced to life without parole. However, Massachusetts has not commuted the sentence of a single prisoner for over 12 years. The lack of possibility of reentry for a significant number of the prison population contributes to an atmosphere of hopelessness and despair.

#### 4. Recommendations for change

The concrete and positive recommendations for change that came out of the testimony are far reaching and numerous. However, at the core of all these recommendations is a cry for dignity, meaningful activity, civic engagement, and hope.

##### There is a need for structural and personnel changes:

- Return the Department of Corrections to the Executive Office of Health and Human Services.
- Change the entrenched personnel in top leadership positions and bring in those with a rehabilitative philosophy
- Hire and train staff to have attitudes and behaviors that respect the dignity of prisoners and promote rehabilitation by modeling appropriate behavior
- Promote collaboration between the DOC and the Parole Board so that the DOC will act upon downward movement decisions of the Parole Board.
- Promote collaboration between the DOC and the Massachusetts business community to include additional job site locations within medium and minimum security facilities
- Develop collaboration between the DOC and Parole Board to establish a “volunteer” Offender Relocation Program

##### Guarantee basic human rights; change the culture from retribution to transformative justice

- Provide health care that meets the standards of health care in the community
- Make the grievance procedure more objective and fair

##### Modify policy and practices

- Re-allocate funding within the DOC budget to programs and re-entry
- Revamp the classification system to reduce the number of people held in high security; build in more positive incentives
- Increase the total number of available minimum security and pre-release beds and close one maximum security facility (abandon the double celling proposal at the maximum security facility; allow some choice of cellmate where double celling is the norm)
- Suspend the classification and policy restrictions that prohibit the placement of 1<sup>st</sup> and 2<sup>nd</sup> degree “lifers” from placements at minimum security facilities
- Adhere to the current regulatory guidelines for reentry preparation for health care coverage, housing, and other benefits as needed; start the reentry process at the beginning of the sentence
- Provide more opportunities for earning “good time”

##### Provide opportunities for meaningful activities and fair allocation of programs:

- Provide more job training, with certificates, for jobs in demand;
- Provide more educational opportunities, including computer literacy, more GED programs; expand the Inside-Out (Amherst College) initiative
- Provide more opportunities for gainful employment while incarcerated, including avocation shops e.g. woodworking; consideration of programs like the Prison Industries Enhancement Certification Program (PIE), which allows prisoners to work for private employers while earning prevailing wages
- Pay at least minimum wage for prison jobs
- Provide parenting programs to help prisoners maintain their role as parents

- Provide more opportunities for prisoners to provide peer teaching, tutoring, and mentoring
- Provide more opportunities for civic engagement, including reinstatement of Lifers programs, e.g. Reading for the Blind, Toys for Tots
- End restrictions on programming for people in maximum security facilities
- Consider offering a Certificate of Rehabilitation

Re-define relations with the community

- Enable program volunteers and program employees to submit testimony and attend commutation and parole hearings
- Expand the number and kinds of volunteer-run programs; bring more people from the community into the prisons
- Provide help for grieving family loss
- Establish visitor-friendly policies and procedures to promote more and better quality visitation
- Provide information on service providers in the community who can help with medical needs, housing, jobs, food stamps, financial aid, religious affiliation, AA and NA groups; offer this information in a timely fashion and in different languages
- Place community members and survivors on the Prison Rape Elimination Act committee; these people can compile and create resources for prisoners as they reenter the community
- Offer mediation program to prevent animosities formed inside from traveling into the community upon reentry
- Develop programs on the outside for men and women who have successfully returned to the community to go back inside to help prepare others for reentry

Make changes outside the DOC domain (requiring legislation in most cases)

- Reform mandatory minimum legislation (thus ending restrictions on access to programs and other reentry activities, and providing eligibility for parole)
- Reform CORI to enable people with CORI's to obtain jobs, housing, and other services
- Create an independent commission to have oversight over all aspects of DOC functions; the panel must include representatives of the impacted communities
- Amend the life without parole law, with measures such as a 25/50 option (the possibility of parole for those 50 and over who have served 25 years) and the possibility of parole for Youth Offenders who currently are sentenced with life without parole; revisit the joint venture (felony murder) law
- Implement a compassionate medical release policy for chronically ill or terminally ill prisoners (e.g. hospice care, release to families)
- Provide special reentry programs, such as, COSA (Circles of Support and Accountability) for people designated as sex offenders to enable re-integration without harassment and isolation
- Amend restrictions on media access for prisoners
- Bring back Pell Grants for prisoners

## 5. Next steps

The following next steps are suggested:

- Distribute and use the report, inside and outside, to expand the dialogue and to create a constituency and the political will to change the odds
- Request a written copy of the Commissioner's reentry proposal for review
- Create mechanisms for holding the DOC accountable for its responsibility to provide a humane environment and to prepare people for reentry into the community
- Support/modify current legislative bills on Beacon Hill and in Congress that address Cell Block to City Block concerns and increase the odds of successful reentry
- Formulate and submit new legislation where there are gaps