

Summer 2011

# Influences on the Reentry and Rehabilitation of Ex-Offenders: A Case Study of First Step Recovery Homes

Luke Christopher Moos

Follow this and additional works at: <https://dsc.duq.edu/etd>

---

## Recommended Citation

Moos, L. (2011). Influences on the Reentry and Rehabilitation of Ex-Offenders: A Case Study of First Step Recovery Homes (Master's thesis, Duquesne University). Retrieved from <https://dsc.duq.edu/etd/945>

This Immediate Access is brought to you for free and open access by Duquesne Scholarship Collection. It has been accepted for inclusion in Electronic Theses and Dissertations by an authorized administrator of Duquesne Scholarship Collection. For more information, please contact [phillips@duq.edu](mailto:phillips@duq.edu).

INFLUENCES ON THE REENTRY AND REHABILITATION OF EX-OFFENDERS:  
A CASE STUDY OF FIRST STEP RECOVERY HOMES

A Thesis

Submitted to the McNulty Graduate School of Liberal Arts

Duquesne University

In partial fulfillment of the requirements for  
the degree of Master of Arts

By

Luke Christopher Moos

August 2011



INFLUENCES ON THE REENTRY AND REHABILITATION OF EX-OFFENDERS:

A CASE STUDY OF FIRST STEP RECOVERY HOMES

By

Luke Christopher Moos

Approved April 13, 2011

---

Dr. Douglas Harper  
Professor of Sociology  
First Reader

---

Dr. Charles Hanna  
Associate Professor of Sociology  
Second Reader

---

Dr. Christopher M. Duncan  
Dean, McNulty College and Graduate  
School of Liberal Arts

---

Dr. Joseph Yenerall  
Chair, Social and Public Policy

## ABSTRACT

### INFLUENCES ON THE REENTRY AND REHABILITATION OF EX-OFFENDERS: A CASE STUDY OF FIRST STEP RECOVERY HOMES

By

Luke Christopher Moos

August 2011

Thesis supervised by Dr. Douglas Harper and Dr. Charles Hanna

With a significant amount of the United States' population incarcerated, scholars and communities are becoming increasingly concerned with ex-offenders return to mainstream society. The risk factors that influenced these individuals' crimes also impact their reentry following incarceration. Community-based therapeutic communities attempt to address these risk factors and facilitate the transition from incarceration to community. The main risk factors of residence, family, financial concerns, and substance abuse must be properly addressed in order for ex-offenders to be successfully reintegrated. This thesis is a case study of the First Step Recovery Homes program of McKeesport, Pennsylvania. It is an examination of the ways in which this program attempts to address the above risk factors in order to facilitate the successful reentry of ex-offenders.

## ACKNOWLEDGEMENT

I could not have done this study without the inspiration and guidance of Dr. Doug Harper and Dr. Charles Hanna. I am also very grateful for the love and support of my mom, dad, brother Patrick, sister Claire, and grandmothers. I am indebted to many of my fellow students in the Social and Public Policy program. Finally, I'd like to acknowledge all my friends for their support especially Andy Gutierrez, Lindsay Barron, and Andrew Wilkens.

## TABLE OF CONTENTS

	Page
Abstract	iv
Introduction	vii
Literature Review	1
Comparative Programs	19
Methods	26
Research Findings	28
Discussion	58
Policy Recommendation	61
Reflections	63
References	65

Scholars and communities are becoming increasingly more concerned with the issue of ex-offender reentry. In 2009, 760,400 individuals were incarcerated in jails, 1,524,513 were incarcerated in prisons, and 95% would eventually reenter society (Bureau of Justice Statistics 2011). Approximately 600,000 ex-offenders are released each year from prisons across the country (Taxman, Young, Byrne, Holsinger, Anspach 2002). Despite its importance, reentry is a complicated and not fully understood process (Petersilia 2005). However, increasing our understanding of the process can ease the transition from incarceration to community. Understanding the critical factors associated with the reentry process can provide insight into the challenges of ex-offenders, their families, and their communities. By examining the difficulties associated with reentry, we can begin to understand how policymakers and reentry programs can better facilitate successful reentry cases and reduce recidivism rates.

The majority of ex-offenders returning to free society can be described as substance abusers (Mallik-Kane, Visher 2008). The therapeutic community model for treating and rehabilitating ex-offenders with substance abuse issues is becoming increasingly prevalent in the criminal justice system (Zhang, Roberts, McCollister 2009). Techniques have been developed to evaluate these programs in order to examine their strengths and weaknesses (Smith, Potter 2006; Welsh, Zajac 2004). An in-depth study of a particular therapeutic community can provide criminal justice policymakers, reentry programs, and communities with knowledge to better address issues associated with the reentry of ex-offenders. Successful reentry and rehabilitation would result in decreasing in recidivism rates and incarceration populations.



Focusing on a specific therapeutic community can provide some critical insight on the issues associated with ex-offender reentry. Qualitative research on the topic of ex-offender reentry can provide policymakers, families, and communities with information on how to better facilitate the reentry and reintegration of ex-offenders. A “neighborhood-centered” approach may be the most effective way to address crime, and in this case re-offence (Fleisher 1995). While policymakers have the authority to make the decisions, they are often far removed from the problem itself. Therefore, it is in the interest of the policymakers to learn more about the issues occurring in specific neighborhoods and how these issues affect the reentry of ex-offenders.

Because “policies are based on theories” and “programs put theories into action” (Fleisher 1995:241), understanding a specific program can allow policymakers to make better informed decisions regarding the reentry process. Fleisher contends that “education, vocational training, and drug treatment programs” are approaches that can be used to assist ex-offenders with their reentry (Fleisher 1995:245). Combining these elements into a single reentry assistance program is a way in which communities can address the fundamental issues facing ex-offenders. Furthermore, understanding the specific circumstances of ex-offenders and the way in which a specific program addresses these circumstances can allow for a more focused and individualized approach for reentry and rehabilitation assistance programs.

### *Hypothesis*

This study is an evaluation of a specific reentry and rehabilitation assistance program. This program has not been previously studied. Given the nature of the

qualitative data collected, my research does not easily fit into an experimental model. Rather I sought to understand the institution under study as an example of a recovery community, and to listen and observe in order to evaluate in a tentative and holistic way whether the community was achieving its goals. Because little reliable data exist on treatment outcomes, it is not possible to perform a quantitative evaluation of the program's success beyond that.

### *Definition of Terms*

This study's definition of reentry builds off Visher and Travis's (2003) definition as "leaving prison and returning to free society." Previous reentry and rehabilitation studies have tended to focus on release from prison, but there is a growing concern of the importance of reentry also from jails across the United States (Freudenberg 2006). Therefore, this study's definition of *reentry* includes jail and any form of juvenile incarceration. The term *incarceration* indicates any type of forced removal from one's residence and community into a facility associated with the criminal justice system.

*Reintegration* and *adjustment* along with reentry describes the process of transitioning from incarceration to community. The term *therapeutic community*, described by Welsh (2007), is the approach that "generally focuses on changing negative patterns of thinking and behavior through individual and group therapy, group sessions with peers, and participation in a therapeutic milieu with hierarchical roles, privileges, responsibilities" (Welsh 2007:1482).

A critical aspect of the reentry process is the risk of *recidivism*, which is defined as an ex-offender's "re-arrest, reconviction, or re-incarceration" (Visher, Travis 2003:89).

Of the 514,962 Federal and State inmates released in 2007, over 37% or 193,636 people would be re-incarcerated (Glaze, Bonczar 2009). Recidivism is an important factor of ex-offender reentry yet recidivism-focused studies tend to ignore “the reality that recidivism is directly affected by post-prison reintegration and adjustment” (Visher, Travis 2003:89). The term *successful reentry* describes an ex-offender’s transition from an incarcerated individual to a positively contributing member of their community. Positively contributing may be determined by the individual’s status as adequately housed, experiencing positive familial relationships, employed or actively seeking employment as well as paying taxes and keeping up with other financial obligations, and being free from substance dependency. *Rehabilitation* describes the successful transition from a former substance abuser and offender to a substance and crime free individual.

Studying recidivism rates alone can distort the issue because some ex-offenders continue to offend but are able to avoid contact with law enforcement. Therefore, recidivism is a very important aspect of reentry, but a more meaningful concern is that of a successful reentry. *Successful reentry* is a complex combination of social factors including but not limited to permanent residence, family connections, employment, crime and substance desistance, and positive overall life goals (Bahr et al. 2010:668).

### *Research Study Summary*

Until recently incarceration populations have been steadily on the rise. With a large number of individuals being housed in jails and prisons, the number of ex-offenders being released from these institutions is also significant. These individuals face several significant challenges immediately following their release. Issues relating to residence,

money, transportation, and untreated substance abuse make the reentry process difficult and increase the likelihood of recidivism. Understanding programs that attempt to alleviate some of the burdens faced by ex-offenders following their release can allow for an understanding of the factors that lead to successful reentry. Gaining a significant understanding of these difficulties can allow policymakers, reentry programs, and communities to assist these individuals, reduce recidivism, and socially and economically strengthen communities.

## LITERATURE REVIEW

Reentry concerns have increased recently due to the sheer number of people being released from jails and prisons every day (Bureau of Justice Statistics 2010). One way to effectively address reentry is to examine the process with a community-based focus. Understanding the ways in which communities address reentry can provide insight into how best to assist individuals and reduce the likelihood of recidivism (Fleisher 1995:240-243). Addressing reentry issues at the neighborhood level can better serve ex-offenders because service providers have more direct knowledge of the specific challenges of their community. An essential aspect of examining the reentry process is understanding the several risk factors that ex-offenders are exposed to once released. Main risk factors influencing an ex-offender's reentry are residence, familial relationships, employment, and substance abuse issues. These risk factors may increase individual's likelihood of recidivating and decrease their likelihood of successfully reentering society.

### *Residence*

Recently released ex-offenders are very likely to return to the communities they resided in prior to their incarceration. These neighborhoods are often impoverished communities with little legitimate means of employment and even less for ex-offenders. Reentry has become "increasingly concentrated in a relatively small number of communities that already encounter enormous social and economic disadvantages" (Scott 2004:108). The residential location of an ex-offender is an important element of reentry. When ex-offenders reenter communities that suffer from widespread poverty and little to

no employment opportunities they are very likely to engage in gang and other criminal activities (Scott 2004:108-110).

Another way in which residential location affects recently released ex-offenders is their proximity to former partners in crime. Simply being around criminal activity has a tendency to lead to participation in it. Those ex-offenders who truly want to avoid criminal activity and a return to incarceration are more likely to do so if they remove themselves from the community where they lived prior to their incarceration. Leaving one's former community tends to be an effective reentry decision because many ex-offenders have found that remaining in a particular neighborhood allows their former colleagues in crime to constantly harass them and encourage their return to criminal activities (Scott 2004:132). Understanding the intended residential locations of reentering ex-offenders can provide policymakers and communities with insight into the likelihood of recidivism.

In contrast to the risks of criminal activity and recidivism caused by economically impoverished communities, neighborhoods that enjoy greater financial security are much more likely to provide reentry and rehabilitation programs. These communities also often feature greater social stability than economically disadvantaged areas. Social stability decreases the prevalence of criminal activity (Grattet 2009). High levels of economic output support industry and increase job opportunities which also affect recidivism rates among ex-offenders. Community economic status has a tendency to highly influence both crime and recidivism rates.

Challenges immediately follow an ex-offender's release from prison or jail. These challenges have a strong influence on their likelihood to recidivate. The released ex-offender must establish living arrangements. It is in the interest of the criminal justice system and communities to help facilitate these arrangements because of the correlation between homelessness, drug use, and recidivism. Fleisher believes that the most challenging task for the criminal justice system and the ex-offender is finding a place of residence once they are released (Fleisher 1995:173).

Without a location and a network of supportive people, ex-offenders are extremely likely to re-offend (Fleisher 1995). Establishing a network of programs or individuals that can assist a recently released ex-offender with employment opportunities and permanent housing can have an enormous positive effect on reentry (Wolff, Draine 2004). In order for social connections to have a positive influence on an ex-offenders reentry, they need to have material resources that can assist the ex-offender. These resources can be financial or connections to employment or housing opportunities (Wolff, Draine 2004). For those recently released ex-offenders that lack a preexisting network of support, rehabilitation and reintegration programs can aid with successful reentry.

As previously stated, an immediate concern for the recently released ex-offender is finding housing. However, the percentage of homeless recently released ex-offenders is not a figure made readily available by the Bureau of Justice. In a late 1980's study, an estimated 25% of the 230,000 homeless individuals in the United States had served a prison sentence. It is likely that that figure has increased since then (Petersilia 2001). Without proper housing, recently released ex-offenders are likely to be unable to find gainful employment and are at risk to begin substance abuse (Belenko 2006).

## *Family*

Familial relationships, both positive and negative, affect an individual's propensity toward criminal activity and the likelihood of their return to criminal activity after incarceration. Substance abuse in a family tends to transcend generations creating a cycle of addiction, health issues, and social problems (Gance-Cleveland, Mays 2008; Wilens, Biederman 2006) which can lead to criminal activity (Savolainen, Hurtig, Ebeling, Moilanen, Taanila 2010; Sampson, Laub, Gluek 1992). Breaking this cycle is in the interest of families and communities in order to reduce crime, incarceration rates, and recidivism cases.

Events that take place during an ex-offender's incarceration have a tendency to influence their reentry. The duration of their incarceration, visits from family and friends, and prerelease preparation are factors that can have an effect once the individual is released (Visher, Travis 2003). When an individual faces incarceration, it is likely that they will experience deterioration in their social relationships. It is possible that this strain on relationships will continue once the offender is released. Infrequent visit from family and friends as well as personality changes brought on by the strain of incarceration often contribute to a decrease in strong social relationships. This is only significant if the ex-offender enjoyed positive family relationships before their incarceration. Furthermore, frequent visitation from family members during incarceration tends to reduce the chances of recidivism (Bales, Mears 2008). Some scholars suggest that once an incarcerated individual suffers from a lack of social connections to the outside world, they then begin to identify more strongly with the culture of the prison (Wolff, Draine 2004).



Ex-offenders come from a variety of different family backgrounds. Some are from functioning and supportive families that act as a positive force in their rehabilitation. Many are from families in which substance abuse and crime are the norm. These families hinder the ex-offender's ability to successfully rehabilitate. Ex-offenders whose families are comprised of mostly socially deviant people have a risky reentry. Returning to a family that encourages or is ambivalent towards drug use and other criminal activities can negatively influence the reentry process. In addition to allowing for a return to crime, families can negatively influence reentry because familial conflict is often the catalyst of an ex-offender's violation of parole (Wolff, Draine 2004). Families can also financially burden ex-offenders through the expectation that they contribute to childcare, child support payments, and assistance for loved ones. This puts further emphasis on the necessity of acquiring sufficient employment

For ex-offenders whose families do not consist of mostly criminal personalities, reuniting with them may contribute to a successful reentry. Personal relationships with friends and family members can have a strong influence on the reentry of ex-offenders. Reestablishing a role in a family gives an ex-offender responsibility that can deter them from criminal activities (Visher, Travis 2003).

### *Employment and Financial Concerns*

With mounting financial burdens resulting from incarceration debt accumulation, a criminal history, and the likelihood of returning to an economically impoverished community, recently released ex-offenders face the substantial challenge of generating income. The money distributed to ex-offenders following their release from prison can

only support them for a few days at the most (Orsagh, Witte 1981). Recently released ex-offenders must determine where they will find food and shelter and “wrestle with issues of transportation and personal identification,” but these objectives all require money (Scott 2004:121). With so many forces working against the ex-offender’s chances of gaining employment, high unemployment rates are to be expected.

Among the risk factors influencing the reentry of ex-offenders, employment may be the most critical aspect. Employment can influence the other elements of reentry as well as an ex-offender’s likelihood of recidivating. Ex-offenders who had experienced legitimate means of employment prior to incarceration are more likely to reenter society successfully than those who have no such connection (Visher, Travis 2003). Furthermore, ex-offenders who had employment connections through friends and family prior to incarceration are much more likely to have a successful reentry (Sampson, Laub 1992). In contrast, those who have known only drug dealing and the criminal lifestyle prior to incarceration are very likely to return to such activities once released.

Job prospects for the recently released ex-offender are often very dim. These individuals often reside in economically impoverished communities as previously stated. The difficulty of finding a job may lead to a return to illegitimate means of earning money. Gang activity and parole violations are likely to follow (Scott 2004). Programs that offer ex-offenders with a network of employment opportunities can combat an ex-offenders return to criminal activities. Earning an income is often the most essential concern of a recently released ex-offender. Their immediate decision is either to pursue a legitimate career or engage in some criminal enterprise. When an ex-offender increases

his or her legitimate income, they are significantly less likely to re-offend (Orsagh, Witte 1981).

Despite the necessity of the ex-offender finding gainful employment to pay for basic living expenses, convicted felons are often barred from working in certain industries such as most government jobs, most medical and education positions, and anything involving the use of a firearm (Harris, Keller 2005). Being unable to work in these restricted areas further limits the ex-offender's employment opportunities.

Financial concerns are often at the root of criminal activity and they continue to affect the ex-offender once released from incarceration. In addition to limited job opportunities in their communities, many ex-offenders often experience diminished employment prospects due to low levels of education and high amounts of illiteracy. Life skills, previous job experience, and general job opportunities influence an ex-offender's reentry.

Besides the fact that most incarcerated persons come from the poorest economic backgrounds with limited educations, prisoners have a tendency to accumulate further debt during their incarceration. Child support payments, fines, and victim restitutions remain in place while an individual is incarcerated. In some cases, these payments accumulate interest during the period of incarceration. While in prison, an individual is unable to participate in the workforce in any effective way which makes payments towards what he or she owes very difficult. In addition to the above economic burdens, the justice systems of several states adhere to the belief that the individual offender

should be held economically responsible for the costs accrued from their arrest and trial (Levingston, Turetsky 2007).

Once released, ex-offenders are expected to begin making payments toward their financial obligations. To do so, they must find suitable employment, which is extremely difficult for individuals with criminal records. As stated above, for those who enjoyed positive family relationships prior to incarceration, reestablishing those relationships will increase the likelihood of an ex-offender successfully reentering society. However, strict parole stipulations and the accumulation of debt during incarceration make acquiring these positive elements very difficult. The result is typically more debt and likely re-incarceration (Levingston, Turetsky 2007). Addressing financial difficulties along with the other challenges associated with reentry can further prepare ex-offenders with their reintegration back into society.

One California study found that 60% of released ex-offenders remained unemployed through the first year following their release (Petersilia 2001). Recidivism is better avoided by ex-offenders who are employed because they spend less time on the street associating with people engaged in criminal activity and experience the regimented conformity of the workplace (Uggen 2000). However, difficult economic times affect unemployment rates and significantly decrease employment opportunities for ex-offenders. Furthermore, statewide and national economic declines result in a decrease in reentry assistance services for ex-offenders which makes finding employment even more difficult (Petersilia 1999). Without a steady paycheck an ex-offender may fall behind on financial obligations such as child support payments. Failure to meet these obligations may be a violation of the ex-offender's parole and ultimately lead to re-arrest.

Employment is an important aspect of ex-offender reentry. Although job prospects are often limited to the ex-offender, there are some opportunities for them to be employed following incarceration. It is important to focus on whatever skills they may already have in order to find a suitable position once they are released. Many have had experience in a variety of trades such as carpentry and plumbing. These types of employment are realistic for ex-offenders and can assist them in their transition into mainstream society. It is important that ex-offenders are optimistic and realistic in their employment aspirations once they are released from incarceration.

### *Substance Abuse*

A critical aspect of reentry and crime in general is substance abuse. Chemical dependency is often at the root of criminal activity. With a substantial amount of drug-related crimes and widespread public discontent, many believe substance abuse is one of the most significant public health issues in the U.S. (Corsino 1996). A study done by the Bureau of Justice Statistics found that 68% of individuals incarcerated in jail during 2002 suffered from a drug and/or alcohol dependency. Furthermore, 16% of jail inmates responded that they committed the offense that led to their incarceration in order “to get money for drugs” (Bureau of Justice Statistics 2005). It is important to note that the study that produced this figure reflects only part of the issue of drug use and criminal activity. The 16% figure is a result of ex-offenders who self-reported committing their crime to get money for drugs. These people may have a number of real or perceived reasons not to admit the entire truth of the causes of their crimes.

The percentage of state incarcerated individuals who report using drugs during the month of their arrest remains high at 56%. Moreover, 32% of those individuals reported that they were under the influence of drugs during the time of their offense (Mumola, Karberg 2006:1). With such a significant amount of individuals reporting drug abuse during and preceding the time of their arrest, communities are dealing with the reentry of many ex-offenders suffering from lingering substance abuse problems. Although many jails and prisons offer drug and alcohol treatment programs, there is a question of their effectiveness. Many individuals suffering from substance abuse prior to incarceration often experience the challenges of reentry in addition to untreated chemical dependencies. Released ex-offenders with substance abuse problems are much more likely than those without chemical dependencies to recidivate (Anglin, Maugh 1992).

Addressing the substance abuse and mental health problems of ex-offenders during and after their incarceration increases the likelihood of a successful transition back into society. To that end, the criminal justice system is beginning to implement special drug courts which aim to reduce prison populations while still ensuring punitive responses to crime. Research has shown that offenders who have successfully completed a drug treatment program as stipulated through their sentence are far less likely to recidivate than those who have not completed such a program (Wiseman 2005). Successful drug treatment programs may result in a reduction of prison populations as well as fewer substance abusing offenders.

As previously stated, substance abuse problems further complicate the reentry process and make successful reintegration difficult (Sung, Mahoney, Mellow 2011). The central issues associated with community reentry and reintegration are a lack of

incarceration treatment programs and post-release treatment programs for offenders suffering from substance abuse problems. A 2001 study reported that only 13% of inmates suffering from substance abuse issues received any treatment during their incarceration (Petersilia 2001). When ex-offenders return to their communities with untreated substance abuse issues they are unable to effectively address the challenges that they inevitably face (Belenko 2006). These challenges include but are not limited to housing, employment, and medical care (Wolff, Draine 2004).

As a result of suffering from an untreated substance abuse problem, a recently released ex-offender is likely to seek the comfort of the people that he was associated with prior to his incarceration. If recently released ex-offenders were able to establish a new network of substance free individuals they would be much more likely to ascribe to that lifestyle. Furthermore, there are many ex-offenders who described themselves as regular drug users who become homeless once released. Without reliable housing accommodations ex-offenders with substance abuse issues are likely to begin using these substances again (Belenko 2006). Therefore, initiatives to facilitate housing for these individuals may help decrease recidivism rates.

Recidivism is likely when released ex-offenders return to their communities with untreated substance abuse issues in addition to a lack of housing. Meager employment opportunities resulting from poor economic conditions, little to no job experience and a criminal record tends to aggravate this situation. These people are likely to fall back into their old habits by associating with former friends and family members also suffering

from substance abuse issues. Without a place of residence ex-offenders may resort to living on the streets or residing with known substance abusers.

The substance abuse factor of ex-offenders is also associated with mental illness. Substance abuse is a common issue for individuals suffering from mental health problems (Castillo, Alarid 2011). A 2005 study found that over half of the inmates housed in prisons and jails across the country were suffering from a mental health problem. Of those inmates, 74% in prisons and 76% in jails also suffered from a substance dependency (James, Glaze 2006). Due to the close association between mental health problems and substance abuse, the criminal justice system and communities need to address these issues among ex-offenders. If these issues are addressed following the release of an ex-offender with substance abuse issues then communities may begin to enjoy safer conditions and an alleviated economic burden caused by a high number of incarcerated people.

Drug use does not result in crimes and incarceration in every case. There are many drug users who never experience incarceration. However, in many impoverished communities where few comforts and pleasures are available, substance abuse is understandably rampant. When it becomes engrained in the social structure and an essential factor in the economics of a community, negative outcomes will occur. When illegal drug use is the norm and drug sales are widespread, there will be a large amount of people feeling a sense of hopelessness. High rates of incarceration are likely to result when this hopelessness takes over a community.



### *Parole after Incarceration*

At the close of 2009 there were 819,308 people on parole and 4,203,967 on probation (Bureau of Justice Statistics 2010). While probation is a court sentence of supervision often in lieu of a prison sentence, parole is a period of supervised release following a prison sentence. Both consist of supervision by the criminal justice system and both have an influence on reentry and recidivism. Many of these people have a history of substance abuse and are particularly vulnerable to recidivate (Hiller, Knight, Simpson 2006). As prison populations grow along with recidivism rates, the criminal justice system has continually directed funding toward the construction of prisons and jails as well as the hiring of corrections and parole officers. Instead of addressing parole violations at their source and implementing extensive reentry and rehabilitation programs, justice systems across the United States simply increase their monitoring and supervision while not providing any significant support services (Petersilia 1999).

Petersilia argues that the justice system's focus on intervention into released ex-offenders' lives by the justice system was initially intended to better facilitate the transition from incarceration to community. Addressing the critical factors that affect the reentry of ex-offenders was initially the primary focus of parole efforts. The focus has shifted in recent years to emphasize control and surveillance. The relationship between the community and corrections is a central element of criminal justice. The focus often shifts between reform and reintegration of ex-offenders to custody and control depending on a number of circumstances. Most importantly, public opinion and policy initiatives have focused on the divergence of funds from rehabilitative services and job skills training to stricter parole stipulations and monitoring techniques (Petersilia 1999).

According to a Colorado Criminal Justice Reform Coalition report only 27% of recidivism cases resulted from new crimes being committed and 73% were caused by parole violations (Peeples 2009). While parole stipulations increase, parole officers are forced to focus their efforts on ensuring that no parolees violate any conditions of their parole. An increase of time and effort on that aspect of the parole officer's job results in a decrease of the time and effort spent on rehabilitation and reentry assistance.

The issue of parole conditions is similar to the focus of incarceration. Both parole and incarceration control and restrict individuals rather than assist them with their transition into positive members of families and communities. Parole now creates a situation in which ex-offenders are set up for failure. The stipulations of parole are vast and strict with close supervision and monitoring. While many people believe that such restrictions are a suitable response to criminal activity, they have a tendency to perpetuate the cycle of incarceration, release, and re-incarceration. As previously stated, some parole stipulations include gaining steady employment and keeping up with child support payments. These efforts are particularly difficult when ex-offenders lack necessary job skills and because most ex-offenders leave jail or prison with substantial financial difficulties as well as substance abuse problems (Petersilia 1999; Bureau of Justice Statistics 2005).

While ex-offenders are vulnerable to the harmful effects caused by incarceration, it is plausible that a significant number of people experience positive transformations following jail and prison terms. Circumstances prior to, during, and following incarceration are different for different people and assisting them with these transitions is no easy task. However, understanding these individual circumstances can allow for the

criminal justice system and communities can better facilitate the transition from incarceration to community.

### *Understanding Individual Reentry Cases*

Reentry and recidivism issues are not only humanitarian in nature but economic as well. While incarceration populations increase taxpayers are becoming more and more concerned with its economic consequences. It costs taxpayers in the state of Pennsylvania \$31,900 for every incarcerated person each year. (National Institute of Corrections 2008). These statistics cause a growing public concern and a call for reform. One way to decrease the burden placed on taxpayers caused by high incarceration rates is to focus on a decrease in recidivism rates. As previously stated, a better understanding of the incarceration and reentry process can provide insight into how to assist ex-offenders and reduce their likelihood of recidivating.

Understanding individual cases of ex-offenders can inform policymakers, families, and communities regarding the burdens of reentry and address the issue of recidivism. Ex-offender background and demographic information can tell who is reentering society and where these individuals are coming from. Examining the incarceration period in terms of programs participated in, visitation from family, and preparation for release may also have implications in terms of an individual's reentry process (Visher, Travis 2003).

There are several critical elements that characterize an ex-offender's status upon their release from incarceration. As previously stated, parole is a central aspect of the reentry process (Petersilia 1999). In addition to ex-offender's exposure to the risk factors

of reentry, individuals may opt to or be mandated to participate in a post-incarceration treatment facility. These programs aim to assist individuals with their reentry by providing residential assistance, job training opportunities, and substance abuse treatment as well as other forms of assistance. An increase in ex-offender participation in such programs has come about with the criminal justice system's utilization of special drug courts (Lutze, van Wormer 2007; Nored, Carlan 2008; Gilbertson 2008; National Institute of Justice 2010).

### *Drug Courts*

There were 2,361 drug courts in the United States in the United States in 2009 and the number is steadily increasing (Franco 2010). Drug courts serve as an alternative approach to treat substance abusing offenders while not increasing incarcerated populations. This approach has enjoyed significant success and the use of drug courts is likely to continue to grow. Drug court rulings often stipulate that an offender enters a treatment program in lieu of serving time in prison or jail. The successful completion of such a program may result in becoming a substance free constructive member of society without contributing to the incarcerated population (Lutze, van Wormer 2007).

In addition to sentences passed down from drug courts, some ex-offenders may be required to enter into a treatment program as a stipulation of their parole. Furthermore, the amount of time between release from incarceration and entry into such a program can also influence an ex-offender's successful reentry. Additionally, it is important to be aware of the lifestyle of the ex-offender prior to entry into a reentry assistance program. When considering the reentry process, it is useful to determine if an ex-offender was

involved with criminal activity or suffered from a drug and/or alcohol dependency prior to their entry into a program (Fishman 1977). These factors can have a profound impact on success in a post-incarceration treatment program. Furthermore, in some cases, ex-offenders may choose to voluntarily enter into a treatment program.

### *The Therapeutic Community*

An increasingly more popular treatment program model is the therapeutic community approach (Zhang, Robert, McCollister 2009). Therapeutic communities for substance abusing ex-offenders are prevalent in the current criminal justice system (Zhang et al 2009). Studies have shown that therapeutic communities serving offenders during their incarceration have had large scale success in treating individuals and reducing recidivism rates (Inciardi, et al 2004; Smiley-McDonald, Leukefeld 2005; Welsh 2007). Therapeutic communities differ from residential treatment programs in that they are holistic and “guided by an emphasis on drug use disorder, the person, recovery, and right living.” Furthermore, “the social environment and primary treatment provider is the community itself, which is composed of a hierarchy of peers and staff who serve as guides and role models” (Smiley-McDonald, Leukefeld 2005:574). The therapeutic community goes beyond the substance abuse focus by encouraging positive social behaviors and healthy ways of living. This approach does not simply aim to treat the offender’s addiction but instead to reform their entire lifestyle (Zhang et al 2009).

Studies have shown that the in-prison therapeutic community is highly effective in treating offender substance abuse problems and reducing recidivism (Griffith, Hiller, Knight, Simpson 2004; Inciardi, Martin, Butzin 2004; Zhang, Roberts, McCollister

2009). This is especially true when compared to other forms of treatment such as the boot camp and drug-focused counseling models (Pearson, Lipton 1999). Ex-offenders with substance abuse issues remain likely to use substances and reoffend despite these positive research findings. When in-prison substance abuse rehabilitation programs are not enough, community-based post-incarceration programs can be implemented (Hiller 2006). Some suggest that post-prison community treatment programs in addition to in-prison substance abuse rehabilitation is the most effective approach (Wexler et al 1990).

There are several reasons why post-prison rehabilitation programs may be more effective in successfully rehabilitating ex-offenders with substance abuse issues. One reason is that many inmates are simply not ready to address the problem during their incarceration. Inmates who are not compelled by officials and lack the personal motivation are likely to drop out of in-prison treatment programs (Knight, Hiller, Broome, Simpson 2000). Another aspect is the fact that drug busts are occurring within jails and prisons presenting the possibility that these substances can be obtained during incarceration (Warner 2011; Buttler 2011). Furthermore, limited funding of in-prison rehabilitation programs cause waiting lists that may result in an inmate's release prior to his entering or completion of a program. Additionally, jails and prisons have a tendency to focus their efforts on the short term necessity of maintaining security (Taxman et al 2002). And finally, the atmosphere of jails and prisons may allow for negative social stigmas against program participants. Nonetheless, the in-prison substance abuse treatment program remains an integral aspect of the rehabilitation process.

Several reentry and rehabilitation programs have been extensively studied by researchers in order to examine the ways in which such programs can better serve ex-offenders with substance abuse problems. These studies may serve as guides to understanding the strengths and weakness of other treatment programs serving ex-offenders with substance abuse issues. The approaches and structures of these programs can be used as comparisons to other treatment programs for substance abusing ex-offenders.

### COMPARATIVE PROGRAMS

#### *Project Greenlight of New York*

A 2006 study of a New York State transitional program entitled “Project Greenlight” by James A. Wilson and Robert C. Davis provides a contrasting assessment and cause for concern for reentry programs. This program began by addressing the issue of reentry as soon as an individual enters the prison system. Interviews and group sessions determined the particular goals and concerns of individual offenders. These goals and concerns were used by the transitional program staff to determine what issues should be addressed in order to enhance their chances of a successful reentry. Program staff also informed newly incarcerated individuals about prison life and the importance of maintaining familial relationships (Wilson, Davis 2006).

Immediately prior to release, program participants were told about several services that could assist them in their transition from prison back to their community. In addition to job and life skills training, substance abuse prevention, and housing assistance, the program employed a family counselor that worked with the ex-offender

and his family. In the end, the authors discovered that participants in the program did gain some key knowledge associated with successful reentry over non-participants but this did not mean better recidivism rates. The most important conclusion drawn from this study is that Project Greenlight focused on the incarceration and immediate post-incarceration periods but failed to incorporate long-term post-incarceration needs and community-based intervention (Wilson, Davis 2006). The study's results illustrate the necessity of the evaluation of reentry and transition programs. Limited funding often results in short durations of reentry programs and treatment follow-ups. Gaining a significant understanding of the long-term success rates of reentry assistance programs can show their strengths and weakness. The results of this study may also suggest the possibility that cooperation between state agencies and community programs may be a better way to assist with the reentry process.

#### *The Preventing Parolee Crime Program of California*

A California community-based reentry program has attempted to address the critical elements that face ex-offenders and their communities upon their release. This particular program entitled the "Preventing Parolee Crime Program" incorporated job skills and training, drug and alcohol addiction support, rudimentary education, and residential assistance to recently released ex-offenders. Evaluation of this program was conducted by comparing parolees who participated against those who did not participate in order to determine if participation reduced the likelihood of recidivism. The study concluded that broadly speaking, participating in the program did reduce the likelihood of recidivism of an ex-offender. Program participants were 8% less likely to recidivate than non-participants.



Additionally, those who successfully completed the program were less likely to be re-incarcerated in the year following their release than those who withdrew from the program prior to its completion. It is not clear whether these outcomes were a result of personal circumstances or due to the strength of the program. The authors also suggest that correctional departments provide incentives for those who successfully complete such programs and sanctions for those who withdraw (Zhang et al 2006:552-570).

*The Accelerated Community Entry Program of Michigan*

Reentry and rehabilitation programs are often limited in terms of funding. Such a limitation can inhibit a program's ability to reach its full potential of successfully serving a large number of participants. Upon studying one such program, the Accelerated Community Entry Program of Michigan, Laura Knollenberg and Valerie A. Martin (2008) discovered that one potential limitation for reentry and rehabilitation programs is duration. The authors suggest that greater attention should be given to individual circumstances and issues during the evaluation period in order to construct significant yet realistic goals (Knollenber, Martin 2008). When a program is structured with substantial goals for the participants but is limited in terms of its duration, the result can be detrimental. By not allowing for individual participants to address their issues and achieve their goals at the rate that is most comfortable for them, some programs may fail to assist in successful reentry and create even greater hardship and disenfranchisement for the participant.

### *The Kyle New Vision Program of Texas*

The Kyle New Vision program was a result of Texas state legislation which created several in-prison rehabilitation programs for substance abusing offenders. Following treatment in a therapeutic community during the final nine months of their sentence, participants were then required to undergo post-prison rehabilitation treatment. A study by Griffith, Hiller, Knight, and Simpson (1999) found that this particular in-prison therapeutic community did not yield demonstrably favorable results in terms of recidivism and return to drug use over the comparison non-participating group. When compared to overall prison population however, program participants were less likely to return to prison (Griffith et al 1999).

The researchers of the Kyle New Vision program emphasize the importance of cost-benefit analysis in the evaluation of criminal justice rehabilitation programs. The study also recommends that in-prison therapeutic communities be followed by community-based post-prison rehabilitation programs in order to ensure success. The researchers of the Kyle New Vision study concluded that in-prison therapeutic communities when combined with post-release aftercare offer a cost-effective means for treating substance abusing offenders and reducing recidivism rates (Griffith et al 1999).

### *The Amity Program of California*

Researchers who have been evaluating the Amity prison-based therapeutic community for several years have published some interesting findings regarding success rates of program participants. The Amity program is funded by the California Department

of Corrections and is housed in the R.J. Donovan Correctional Facility. The Amity program is similar to the Kyle New Vision program of Texas in that it serves inmates with substance abuse problems during the final months of their incarceration. Amity is a holistic therapeutic treatment model that isolates participants from the general prison population and often utilizes staff and mentors with former substance abuse issues. Program participants typically reside in the Amity therapeutic community during the final 9-12 months of their incarceration (Prendergast, Hall, Wexler, Melnick, Cao 2004).

At the one and two year marks, the Amity researchers found that participants in the program were re-incarcerated at a significantly lower rate than the comparison non-treatment group. However, when results were considered at the five-year point, program participation did not yield significantly lower re-incarceration results than non-participants. The results of this study show that the program's ability to help participants stay substance abuse and crime free decreased over time. The researchers found that participation in a community-based post-incarceration treatment program had a significant influence on overall success (Prendergast et al 2004).

#### *The Key CREST Program of Delaware*

The results of a study of a Delaware in-prison therapeutic community differed in several ways from the conclusions of the Kyle New Vision and Amity studies. The study emphasizes the importance of duration in the treatment process. At the five year mark, program participants were found to be significantly more likely to be substance and arrest free than inmates who did not participate in the program. The authors recommend a multi-staged treatment regiment for the substance abusing offender. This regiment should

begin during the final stages of incarceration lasting 12 months, continue in the form of community-based therapy following release, and remain a continuous aspect of reintegration through frequent workshops and counseling sessions (Inciardi, Martin, Butzin 2004).

### *The Delancey Street Project*

The Delancey Street Project is grounded in the belief that “ex-offenders and substance abusers can become the solutions to their own problems” (Morgan 2006:1). The program aims to have ex-offenders address substance abuse issues, develop job skills, and learn life skills. At the same time, the more experienced program participants serve as models and mentors for the newly enrolled. The average stay is four years in the program but participants are required to be enrolled for at least two years (delanceystreetfoundation.org 2007).

### *Comparative Programs Conclusion*

In-prison treatment programs can aid in ex-offenders’ transition from incarceration to community. Their effectiveness depends on program implementation, staff characteristics, and a number of other factors. Treatment programs should address the critical factors influencing ex-offender reentry. While housing is an important aspect of the reentry process, in-prison treatment programs do not focus on this issue. Prisons and jails follow specific guidelines for the release of ex-offenders and an established residence is often a stipulation. It is not however, within the scope of in-prison treatment programs to assist ex-offenders with finding housing.

Ex-offenders can be positively as well as negatively affected by their families during their reentry. Substance and crime free family members can be supportive during the reentry process. The emphasis of a program should then be to facilitate re-establishing relationships that may have been severed during periods of substance abuse and/or incarceration.

Employment has a strong influence on successful reentry. Treatment programs that develop job and trade skills can allow for ex-offenders to be better equipped with the skills necessary to become employed once they are released. Programs can also facilitate educational pursuits by putting ex-offenders in contact with schools and programs once they are released. When ex-offenders are involved with these types of activities they are less likely to engage in substance abuse and crime.

Treating substance abuse is possibly the greatest challenge facing ex-offenders and the criminal justice system. In-prison therapeutic communities can help address individual substance abuse problems. However, these programs typically have short durations and ex-offenders are likely to begin abusing substances when long-term treatment is unavailable.

Relying on a single short-term, in-prison program may not be enough for ex-offenders to successfully reenter society. Several studies (Griffith et al 1999; Prendergast et al 2004) suggest that combining in-prison treatment with post-prison community-based treatment may be a more successful way of rehabilitating ex-offenders. This study is an evaluation of a particular community-based treatment program known as First Step Recovery Homes.

## METHODS

I have conducted a case study focused on the reentry process of ex-offenders with the cooperation of the therapeutic community First Step Recovery Homes in McKeesport, Pennsylvania. This study was done in connection with a documentary film project about the First Step program. I have worked with four other students and two professors on this project. We conducted interviews with program participants as well as staff members in order to understand how this particular program attempts to rehabilitate ex-offenders, prepare for their reintegration, and attempt to reduce recidivism rates. These interviews and discussions that were treated as interviews were transcribed and analyzed. A great portion of the transcriptions were done by me while the others were completed by my fellow students and my professors. The data were collected collectively and made available to me for my thesis research. Given that this thesis was completed between October and April of the second year of my graduate career, this was an efficient and appropriate method of data collection.

I asked the program's director to inform the individuals enrolled in the program of the purpose of this study. I then was notified of those willing to participate. The sample size was between 10 and 15 individuals. Informed consent forms were then distributed and discussed by myself. Once informed consent was granted, the interview process began. Although the sample size is small due to the specificity of this study, participants are undergoing the same challenges faced by many released ex-offenders across the country. Additionally, an in-depth understanding of a specific program from the participants' perspectives may influence other programs and impact policy initiatives by showing its strengths and weaknesses.

The individual circumstances of program participants were analyzed in order to gain an understanding of common themes. Interview questions attempted to gain information regarding participant circumstances prior to incarceration, during incarceration, and following their release. A critical aspect of the post-incarceration period for individuals involved with this study is their entry into and experience at First Step Recovery Homes. Interview questions were directed towards understanding participants' individual circumstances and the ways that the First Step program has assisted them.

Because this is a case study of a single reentry program, conclusions cannot be made regarding the effectiveness of reentry programs on recidivism rates in general or the necessity of such programs in the criminal justice process. However, a more individualized and focused understanding of the critical factors of ex-offender reentry can allow for rehabilitation and reintegration programs to better serve participants and for communities to better prepare and assist this vulnerable population. By better facilitating the successful reintegration of ex-offenders, rehabilitation programs and communities can reduce recidivism rates. A reduction of recidivism rates would result in a decrease in incarceration populations, an increase in community economic output, and a decline in community drug use and criminal activity.

### *Evaluation Techniques*

The methods used to evaluate the First Step program were adapted from Linda G. Smith and Roberto Hugh Potter's critical evaluation assessment areas (Smith, Potter 2006).

- \* The degree to which the program is based on a well-defined theory or model;
- \* The degree to which the intended target population was actually served;
- \* The degree to which the intended target population received sufficient intervention;
- \* The quality and appropriateness of data collection and data analysis procedures; and  
(Smith; Potter 2006).

Further criteria were based on Welsh and Zajac's (2004) systematic qualitative approach of assessing and evaluating a specific therapeutic community. Welsh and Zajac examined several in-prison therapeutic communities in the Pennsylvania criminal justice system. The researchers utilized structured interviews and on-site observations to examine "(a) program implementation, (b) client preservice assessment, (c) characteristics of the program, (d) characteristics and practices of staff, (e) evaluation, and (f) miscellaneous (e.g., ethical guidelines, funding, and community support). (Welsh, Zajac 2004:113).

## RESEARCH FINDINGS

### *First Step Recovery Homes: A Reentry and Rehabilitation Program*

First Step Recovery Homes is a reentry and rehabilitation program located in McKeesport, Pennsylvania. The facility is run by First Step's Director and a small staff who aim to provide housing, job opportunities, family counseling, and substance abuse treatment for ex-offenders. First Step's Director is a recovering addict who has been substance free for 22 years. He believes that the proper combination of recovery therapy



and lifestyle changes can rehabilitate an ex-offender and allow for their successful reintegration into society. Studies show that ex-offenders that are unemployed are at a greater risk of recidivating than those with legitimate means of employment (Burrell 2007; Bahr et al 2009). Tripodi, Kim, and Bender (2010) additionally found that employment increased the amount of time between an ex-offender's release and their reincarceration (Tripodi et al 2010).

First Step Recovery Homes has worked along with several other transition programs to address the many challenges faced by ex-offenders with substance abuse issues. The First Step approach is similar to several other initiatives (i.e. Reentry Partnership Initiatives) across the country that aim to establish a relationship between criminal justice services, community programs, and non-profit organizations to address the many issues associated with ex-offender reentry (Byrne, Taxman, Young 2002).

#### *First Step compared to other programs*

Substance abuse treatment programs for ex-offenders vary extensively “in terms of program content, structure, and approach” (Welsh, Zajac 2004:109). An in-depth evaluation of a particular program can highlight its strengths and weaknesses in serving participants, facilitating recovery, and ultimately reducing recidivism. First Step is similar to several other post-incarceration therapeutic communities that combine substance abuse recovery, reintegration assistance, and parole supervision. However, First Step is unlike some programs funded by the criminal justice system which combine parole staff members with rehabilitation specialists (Hiller 2006). Instead, First Step staff members address issues of rehabilitation and reentry while communicating with law

enforcement officials. The result is a focus on the personal transformation as opposed to law enforcement.

This approach is significant because it utilizes a less dictatorial relationship between participants and staff members than some other programs. A 1998 study of one particular in-prison residential treatment program found that poor communication between participants and staff members hindered the recovery process. Participants often felt that staff members were insensitive of their needs (Smiley-McDonald, Leukefeld 2005). It is this phenomenon that illustrates a positive element of a program structured like First Step.

First Step has made an effort to include former substance abusers and program graduates as staff members which is a central element of the therapeutic community model. This allows participants to enjoy hands-on guidance from individuals who have experienced similar issues. As previously stated, First Step's Director is a former addict and he believes that his recovery experience provides current participants with the insight and tools to recover from their addiction. First Step's emphasis is on personal transformation which can only result from an individual's desire to change their life. The program follows the therapeutic community model in that it focuses treatment on the whole person and not simply their drug addiction (Pearson, Lipton 1999). Staff and participants generally agree that guidance from individuals with personal experience is an asset of the program.

The length of stay for program participants is a factor that influences rehabilitation success rates. As previously stated, the limited funding of substance abuse

reentry programs causes short durations which risk program ineffectiveness (Knollenber, Martin 2008). Therefore, extensive rehabilitation programs may have greater success in treating ex-offenders with substance abuse problems. First Step has an 18 month average length of stay. Studies of substance abuse treatment programs show that shorter time periods of treatment increase the likelihood of failure (i.e. return to substance abuse, recidivism) (Knollenber, Martin 2008).

The director of First Step referred to the 18 month length of stay as:

an absolutely necessary thing. There used to be a number of different programs around that housed you for three months or six months and it's just not enough time for you to do a really thorough examination of one's self. Three months is just not enough time, you have to be strong enough that once you leave here, [you have the ability to] go back to your community and not be influenced by them same people that you dealt with in the past.

### *The Acceptance Process*

Faced with limited funding and housing capacity, First Step's staff is charged with determining the ex-offenders who would benefit most from the program. The process often begins in the jail or prison. First Step staff members interview ex-offenders who are to be released shortly. Interview questions are geared towards gaining an understanding of the ex-offender's intentions. It is imperative that these individuals display a genuine need for assistance with their substance abuse problems, their lack of housing and employment opportunities. After speaking with the potential participant, First Step staff members will discuss the person's criminal history, mental health, and other background information with their parole officer. First Step staff members continue to consult with participants' parole officers throughout their stay. In one particular case,

staff members assisted a newly enrolled participant in consolidating his various parole officers into a single individual. The screening process then continues on-site at First Step Recovery Homes.

Recently released ex-offenders who are potential participants in the First Step Program must be evaluated by staff members and current participants. This interview is a further assessment of the ex-offender's credibility and desire to rehabilitate. Questions from current participants attempt to judge if the candidate is serious about transitioning into a substance-free productive member of society. Current participants and staff members are also concerned with ensuring that candidates not simply want to utilize First Step as an established residence contingent on their release. Entry into First Step may be court mandated, a probation or parole stipulation, or voluntary. Many participants enter the First Step program following enrollment in another treatment facility. I observed several of the entry interviews. They begin with a potential participant telling their story about what led them to First Step. Current participants then ask questions pertaining to the seriousness of the potential participant.

Ex-offenders who are sincerely trying to rehabilitate are generally accepted into the program when funding and space are available. However, arsonists and sex offenders are usually barred from entrance into the First Step program due to the risks posed by their criminal histories. These types of offenders differ from others because First Step staff members view theft, armed robbery, and other such crimes as often resulting from substance abuse. Arsonists and pedophiles pose a danger to the community that the First Step program cannot accept responsibility for.

### *First Step Structure*

The First Step Recovery Homes program formerly collaborated with several other community non-profit organizations under the authority and funding of the Department of Human Services of Allegheny County. As First Step's Director describes, "we wanted to provide different services for each individual." Although the collaborative approach was effective in serving ex-offenders with the right tools to rehabilitate (i.e. job training, housing, guidance and supervision) the funding ran out after five years. First Step was forced to pursue a different approach and First Step's Director chose the Delancey Street Project of San Francisco as a model.

While First Step participants stay 18 months on average, First Step's Director has modeled many other aspects of the program off that of the Delancey Street Project. One way in which the First Step program has built off of ideas of the Delancey Street Project is through work experience activities that provide real services for people and generate income. Participants are required to provide First Step with 30% of their generated income during their stay in the program. Work in these areas allows for participants to gain valuable work experience. It is important for them to do so as many individuals have not ever had a legitimate means of employment. Employment opportunities are limited for participants while enrolled in the program. Those who do work usually do so only a few times a week.

### *Rules and Privileges*

The First Step Program has several milestones that mark a participant's recovery progress. Certain privileges are allowed after completing these milestones. These

privileges highlight the fact that First Step is a reentry assistance program because they are associated with an increase in individual freedom. This approach prepares the participants for their reintegration back into society where they will have complete control over what they do, how they act, and the choices that they make.

Participants are required to remain within the buildings of First Step during their first 30 days. They are asked to focus on their recovery and prepare themselves for the difficult journey ahead. Once 60 days have been completed, participants are allowed to go into the city without an escort for a short period. At the 90 day mark, participants receive a weekend pass to visit family members. One important aspect of the program is to reunite individuals with their families because of the effect that positive familial relationships have on successful reentry.

#### *Termination from the Program*

In order to “maintain an atmosphere of recovery” First Step’s Director and his staff are charged with assessing incidents and deciding if a participant may have to be removed from the program. Parole violations including curfew restrictions and associating with known criminals may result in removal. Furthermore, frequent drug and alcohol tests in addition to those required as a condition of parole ensure that participants are completely substance free. Substance abuse while enrolled in the First Step Program may result in termination or jail time. In one such case, a participant violated both his sentence from drug court and the rules of the program by leaving a recovery function to drink alcohol. The participant was sentenced to five days in jail which he viewed as a final warning. When asked about it, he responded, “it took that to wake me up.”

In rare circumstances, First Step's Director has been forced to remove everyone participating in the First Step program at one time. In this case, it had become apparent that a participant if not several participants were using an illegal substance. "Street talk" or the "street code" as First Step's Director describes it, prevented program participants from identifying who was violating the rules. Without the identity of the instigator, First Step's Director was forced to have all participants removed.

### *Residence and Housing Issues*

The issues of housing, impoverished communities, and widespread drug use and crime are associated with one another. Poor neighborhoods with little to no employment opportunities are likely to include a large amount of depressed individuals. These people are particularly vulnerable to drug abuse and organized drug distribution systems are likely to result from these vulnerable individuals. Drug sales and crime ultimately lead to incarceration. These people are then released from jails and prisons only to return to their communities and perpetuate the problem. This cycle was described by many of the First Step program participants.

Most First Step program participants discussed being raised in an impoverished community in which criminal and substance abusing lifestyles were condoned. Elijah told me that as a child, he learned how to drink because his "grandmother ran an afterhours joint."

First Step's Director describes the depressed community and the depressed individual saying:

Living in a community with broken houses, trash on streets, empty lots, men and women in the community not with full time jobs and education, can't go back to school. If you are in that area can you just imagine the depression that a person goes through? Gun shots are common place. It becomes common for someone to get shot and killed in your community. Once you go through a depression you have to use any mood or mind altering chemical to break out of that depression.

As he explained, it is likely that a large amount of these depressed individuals will turn to substance abuse as a way of dealing with life's problems. These communities can indoctrinate young people into believing that habitual drug use and sales is the norm. One participant named James said, "I didn't realize that I had a drug problem. It was accepted where I decided to hang out so I thought it was no problem. I thought this was just how I was supposed to live."

In many of these communities, the acceptance of widespread drug use inevitably leads to the prevalence of drug sales. As Matt, a young participant said:

You see a lot, people hustling, trying to get money. That's what all I'd see. Go to the park see people smoking weed, and selling weed. There was no way I could get away from that. I got addicted to the lifestyle. I got addicted to the lifestyle even before I started using. I just started living on the streets just living in other addicts houses paying them drugs.

In his case, the exposure to drug use and sales led to the feeling that that role was the only one available to him. Furthermore, that lifestyle led to his residing in the houses of drug addicts and his use of drugs as currency. The drug use and sales lifestyle present in many communities is directly associated with gang activity. One other participant called Lionel said "I grew up in the 90's during the gang thing. I got caught up in the gangs. I got locked up, when I was 17." The forces of widespread deviance within the



community led this participant on a progression that ultimately led to his incarceration at a young age.

Incarceration complicates the housing issue as ex-offenders are faced with the challenge of establishing a place of residence once released. Carl described his situation shortly after being released from prison saying “I ain’t gonna get a job. I can’t get no place because of me having a criminal background.” Another individual told me “I had nowhere to go. My mom has always been supportive, [but] she won’t let me live with her. And I knew coming out of jail that I needed to go somewhere, and that’s why I asked to come here.” Addressing the residence issue is the first task of the First Step program.

*The First Step Approach: Residence and Housing Issues*

The Director of the First Step’s program describes the housing problem of released ex-offenders saying:

We get at least 15 letters a week from people who are in different prisons who have heard about us and they want to come because they can’t get a home plan. Now their time might be up in jail they might, say they had 5 years, and their five years is up but they can’t get released unless they have a home plan. But there are all kinds that are being released that are still in jail because they can’t find a place to stay.

As previously stated, without a place of residents, ex-offenders are likely to turn to drug and alcohol use and be unable to find employment (Belenko 2006). Despite the prevalence of this problem within the criminal justice system, First Step is able to address the needs of only a fraction of the individuals being released from jail or prison in the area. Those fortunate enough to enter into the First Step program enjoy remaining away from their original communities that had facilitated their progression to substance abuse

and crime. Matt favorably described his absence from his original neighborhood by saying “I’ve lived there all my life and I’m not missing nothing there but seeing people die, people go to jail. And I don’t want to be one of those people. The greatest thing is that I haven’t heard a gunshot yet.”

The vast majority of program participants found that without being exposed to the social pressures of their neighborhoods, they are much more likely to remain substance and crime free. Carl referred to the neighborhood in which First Step is situated as a “recovery town.” There is no doubt that the stresses of their former neighborhoods had an effect on their criminal activity. Without those stresses, these individuals are able to focus on an entirely new lifestyle. However, program participants are unable to reside within the comforts of the program forever. They must eventually be discharged and pursue a residence of their own.

Returning to one’s own impoverished community with widespread drug use and criminal activity decreases the participant’s chances of being successfully rehabilitated and reintegrated. Lionel does not want to return to his original community. He said, “I have a fear of going to my old neighborhood because I fear that I’m not strong enough.” Several participants described their desire to go to a new community once they leave the program. In this was they are starting their lives over again. One participant simply said “I want to start a new lifestyle.”

The First Step program provides participants with information on seeking out low-income housing opportunities and cash assistance programs that will allow them to establish a place of residence once they have completed the program. The staff members

prepare participants for their meetings with housing officials in order to increase their likelihood of being granted their requests for housing. As we have seen, several participants want to reside in new neighborhoods so that they can remain away from the people that they participated with in their substance abuse and crime. However, establishing residence in a place that is not a participant's original neighborhood is by no means a condition of their completion of the program. Staff members merely suggest that participants live alone and stay away from the people associated with their substance abuse and criminal activities. In most cases, program participants planned on returning to their original neighborhoods once they have completed the program.

### *Family Relationships*

In many ways, family dynamics can be at the root of substance abuse and criminal activity. At the same time, the positive support of family members may contribute to an ex-offender's transformation. The cycle of substance abuse and crime from fathers to sons and beyond is a negative facet of many communities. Family problems, intergenerational substance abuse, family financial concerns, and the disconnection caused by incarceration are all related. These issues and how they relate to one another were often described by First Step participants and staff members.

The stresses of family relationships may often lead to substance abuse. As James had said, "when I found out my son died, I didn't look at it like, this hurts me, I just understood that he died. I cried. To ease my pain, if I was crying, I just got high so I didn't have to think about it." Another participant known as Andy said "I got married and I think I jumped into that too soon because it was no more than a month or two after that

that I started to get high again. It was putting a burden between our marriage. I wasn't able to be around my family, my mother and sisters. I was running around in the streets." One participant explained his progression saying "I was doing good until I got served with divorce papers. At that time I said, I don't care anymore."

Marriage can contribute to substance abuse problems especially when one's spouse is a substance abuser. A staff member described a former resident, "he was so in love with his wife, he wanted to go back home with his wife. His wife uses. So we were like, "you can't go back there, you're not ready." And we knew once he left, he was gonna wind up picking up. He picked up the same day he left. And there's no telling what he's doing now." When violence and substance abuse result from the stresses caused by family relationships, a cycle of these problems is likely to recur.

The cycle of substance abuse and crime often begins at a young age. A program participant known as Elijah described his experience growing up, "She (his mother) was so young and all she did was party that when me and my brother was young we would always see my mother go and party and I thought that was a way of life. Me and my brother would experiment and take little shots of liquor at the age of 8 and 9 and we started to like that feeling so by the time we got to the 6<sup>th</sup> grade we would be drinking quarts of wine." Most program participants described themselves as perpetuating this cycle with their own children.

James described how his own son had fallen victim to the lifestyle of substance abuse and crime and how that cycle appears to be continuing. He said, "I lost my son. I have a grandson who's following in his footsteps, in my footsteps. He wants to hustle." In

addition to the cycle of substance abuse within families, the cycle of domestic violence is a significant force associated with crime and incarceration. “I went to jail for child abuse of my oldest son.” James went on to explain. “He was crying about it and stuff about putting the gloves on him and punching my hands and he wasn't into it. I got upset, I chastised him and know that I went too far but I did what happened to me. My mom hit me with an ironing cord, so I hit him with it and got a couple welts on him and was taken to the hospital. This case ended with James losing custody of his son and being sent to prison. In many cases, the family is at the root of a participant’s crime.

Unlike the story described above, another participant named Clyde explained how his financial concerns for his family led to his criminal activities. His crimes were committed “to support my family. I knew I had to hustle to make money.” Unfortunately for him and many other drug dealers, his actions led to his arrest and incarceration.

Once these individuals are incarcerated they may suffer from a deterioration of family relationships. Furthermore, they are often unable to directly address the issues that have caused strains in their relationships. In many cases, significant strains in family relationships have occurred because of substance abuse problems. Reunifying ex-offenders with their families, addressing the problems caused by family relationships, and attempting to end the cycles of substance abuse and crime are all concerns of the First Step program and factors that influence their reentry and rehabilitation. In other cases, participants’ families are a negative force in their rehabilitation. It is in the interest of participants with substance abusing families to stay away from them.

### *The First Step Approach: Family Relationships*

A First Step staff member described the focus of the First Step approach saying, “Reunify with family-that’s the main goal. We do a father’s initiative. (We) are about to restart a session on genealogy, on family dynamics. Learning about how the generational curse started generations ago. What you can do to change your family.” Another staff member elaborated on this point saying, “part of the healing process is the education and the understanding about addiction, the impact that it has on families and the fact that there is a recovery process. It may not happen overnight, but evidence shows that it is working in a lot of people’s lives.” Many participants have found the First Step approach as an effective means of reconnecting with their family members.

One participant described his transition, “I’m back with my family. I’m able to be there for my grandkids. My wife doesn’t have to worry. My mother doesn’t have to worry about me being in the streets. My life is really changing and I’m feeling good about it.” Russ said, “I need to have therapy, reintegration stuff today with my daughter’s mom, so I can be the father to my daughter that I know I can be. And that’s from being here.”

Another way in which the First Step program addresses family issues is by using the therapeutic community model and having the group itself function as a family. Lionel described the way in which the group acts as a family by talking about the concept of trust. He said to his fellow participants, “ya’ll are growing on me. I’m learning to trust ya’ll. I’m from the streets, I don’t trust people. I’ve gotten to get to know you. I trust some of you guys, so ya’ll are my support too.” A staff member remarked on the family

atmosphere of the program saying “it’s like a big family. That’s the really good part. They just take them up under their wing. And it’s really like a family.” Acting in the role of a family member while in the program allows participants to prepare themselves for the family roles that they will be in once they leave the program. An essential aspect of fulfilling these roles is addressing the cycles of substance abuse and crime within families.

Clyde, who is a newly enrolled participant said, “Since I’ve been here this last week I found out that my 17 year old is an addict. That crushed me. I can’t even speak to him. I can’t preach to him, I can’t even tell him he’s doing wrong because I feel like I don’t deserve to tell him he’s wrong.” Clyde went on to explain that his goal is to completely rehabilitate himself in order to serve as a role model for his son instead of perpetuating the cycle of substance abuse and crime. James remarked on his concern for how he would be remembered by his family. He said, “If my grandkids were to be asked what was your granddad about, I don’t want it to be about ‘shot dope, drank wine, smoked crack’. I want them to have something positive to say about me. I want to do what I missed out with their parents, with them.” Setting a positive example is often at the root of participants’ desires to rehabilitate.

As we have seen, the cycles of substance abuse and crime within families act as social diseases that affect many communities. The First Step program does not simply aim to address the rehabilitation concerns of single individuals, but instead, change the lifestyles and beliefs of participants so they can go on to serve as positive role models in the lives of their children and grandchildren. The other aspect of the family-oriented approach of the First Step program is to allow for the family to act as a support system

for the individual instead of a catalyst for their deviant behavior. The ex-offender that once cited family stresses as a cause of his substance abuse may now discuss the role his family plays in his desire to rehabilitate. As Carl said about his children, “they’re very supportive; they’ve been wanting this for a long time.”

### *Education, Employment, and Financial Concerns*

A critical aspect of the financial concerns of the ex-offender is the concept from Visser and Travis (2003) that those who had experienced legitimate means of employment prior to incarceration are much more likely to be reintegrated successfully. Furthermore, gang activity and crime are likely to follow if an ex-offender remains unemployed (Scott 2004). And finally, the employment issue of ex-offenders is further complicated by the fact that convicted felons are barred from a number of industries (Harris, Keller 2005). These issues were described in a variety of ways by the participants in the First Step program. Financial concerns were often cited as both the cause of their criminal activity and their greatest hardship for once they complete the program.

For many participants, the progression began early on during school. As James put it, “I wasn't doing well in school, I was playing hooky. If I applied myself I could be a good student but with peer pressure I wanted to be with the fellas. We would sit in front of the school that I went to drinking and getting high, right in front of the school.” James’ experience was common for the program participants. Skipping school and using drugs often lead to selling drugs. He went on, “There was a crew of guys, we were swinging heroin and using. Being a drug dealer my hat flew off the hinges and immediately got hooked. From that point on its been a roller coaster for me.” It is nearly impossible for



individuals in these situations to separate their desire to make money from the use of their own product.

Lionel described his early experiences saying, “I was basically just trying to make a couple dollars and I was getting high. Use, try and get some money, that’s all I wanted to do. I just didn’t care.” Russ described his experience selling drugs by saying, “I was just doing it to get money to supply my habit but I didn’t really know I was an addict at the time.” For Carl, the need for money was so dire that he said, “If you asked me to take the trash out, I would ask for money.” Thefts, robberies, drug sales, were all committed in order to maintain the substance abuse habit. At the same time, many of these individuals were so deeply involved in criminal activity and addiction that they were unable to identify the fact that they had a problem.

In many cases, selling drugs was only done to maintain one’s own personal substance dependency. However, other participants described their inability to find legitimate employment as a result of residing in an impoverished community and from receiving an inadequate education. Clyde said, “Last time I got tested I was at a fourth grade reading level. Financially-wise I can’t get a job that I would like to get.” Poor education exacerbates the employment problems of people residing in impoverished communities.

Some program participants then turned to drug sales to support their families and increase the wellbeing of their children. Most program participants became fathers at a young age. Clyde described this problem saying, “I started out young so I never went to school. My wife, the first son that I had, well girlfriend at the time, I was 15 and I lived

in the streets. I didn't wanna let my son grow up like I did, so I hustled." The root of Clyde's criminal progression was financial concerns for his family. Other participants described their own substance abuse problems as the catalyst of their criminal progression.

As we have seen, substance abuse can readily lead to drug dealing. Criminal activity has a tendency to sprawl out from drug dealing to a variety of other crimes. In nearly every case described, each crime was committed to obtain money. Elijah described the way in which his crimes progressed saying, "There was a lot of stuff I used to do, mess with street women and get money that way. Anything to keep that habit going, I did." Many participants were hesitant towards describing specifics, but several explained that drug use, drug sales, other crimes, arrests, and incarceration were all associated with the need to obtain money.

As Levingston and Turetsky (2007) found, incarceration tends to create further financial burdens on individuals. Restitution and court costs can cost ex-offenders a significant amount of money making an already precarious financial status worse. Patrick, a First Step staff member explained, "You won't get any benefits until the fines are paid. You get a letter of compliance." Recently released ex-offenders must pay the money they owe from debt accrued as a result of their conviction in order to earn any form of assistance.

Another issue described by participants is the disparity between the money earned through legitimate employment and that made through drug dealing. Lionel, after being arrested, was forced to maintain legitimate employment as a condition of his probation.

He said, “I was at Wendy’s, I worked there two weeks and I was getting paid weekly. Getting \$150 that was nothing. So she (his Probation Officer) let me off probation, she let me go. After that I quit that job. I quit that Wendy’s job and I just started hustling.”

Lionel’s experience epitomizes the way in which the different financial aspects of most ex-offender’s situations relate to one another. Poor education and truancy resulted in substance abuse at an early age. Substance abuse led to drug sales and other crimes in order to maintain the habit and earn money. Illegitimate employment is associated with a lack of legitimate employment experience. When that is combined with poor education and low paying legitimate employment opportunities, the cycle is likely to continue. In addition to the above factors, a felony conviction resulting from drug sales and other crimes bars ex-offenders from a variety of industries. These conditions further restrict already dim employment prospects. First Step attempts to end participant’s cycle of illegitimate employment and prepare them for legitimate careers.

#### *The First Step Approach: Education, Employment, and Financial Concerns*

The Director of First Step described how his own experience helped him develop First Step’s approach of addressing the financial concerns of ex-offenders. He explained, “I wasn’t working I didn’t have a job, didn’t know anything about employment I had large gaps and all because all I did was sell drugs and hustle on the streets so I never had a job so that was one of the most scariest things for me when I became clean.” Therefore, the First Step approach for alleviating some of the financial concerns of the ex-offender is preparing them for legitimate employment.

First Step staff members have developed a variety of different jobs for

participants to undertake while enrolled in the program. As the director explained, “We’re providing jobs for individuals being released from the criminal justice system, jobs that don’t take much skill. We have a moving business, lawn care, landscaping business. We have a car wash and detailing business. We’re in the process of doing that now. We have six people hired, right now from the community that come down and wash cars and detail. We have about seven contracts to do landscaping lawn care and our moving business is ongoing. So were just trying to do whatever we can just to keep these men and women employed.” These jobs not only allow participants to experience the structure of the working lifestyle but also to provide them with a documented and legitimate job history.

Another aspect of preparing participants for reintegration is facilitating educational pursuits. GED courses and preparation for other exams is an important aspect of the First Step approach to reentry and rehabilitation. Past participants have pursued careers in carpentry, plumbing, and a variety of other trades. Matt, a current participant, is in training to become a medical assistant. Legitimate employment was continually described as a goal for most First Step Participants. At the same time, First Step staff members encourage education and help participants by putting them in contact with schools, tutors, and job training facilities.

As Carl described and studies have shown, it is difficult for the ex-felon to find employment. He said, “I’m having trouble with my work history right now.” Carl is fortunate enough to be participating in sporadic employment opportunities made available to him through the First Step program. He went on to say, “I’m grateful for that.”

First Step also attempts to address the employment issue by providing participants with information on the companies and industries that do hire ex-felons. One staff member said, “We have a listing of about 50 Fortune 500 companies that hire ex-offenders and so that’s really key in helping them get their foot in the door as well.”

Many participants however want to follow the example of First Step’s director and become employed in the field of rehabilitation, drug counseling, and reintegration. This desire is a product of the therapeutic community model which allows for a hierarchy of peers to assist and facilitate the recovery and rehabilitation process. As one staff member described, “a lot of the guys from what I’ve noticed have graduated from First Step and are now in the field of addiction or they are counselors or working with youth. Their career is giving back and helping people whether it is the suffering addict or a homeless person, in some way they have all gravitated towards that kind of career choice.” To that end, many current participants described their desire to pursue employment in a field where they could somehow give back to their communities.

James said, “I got a lot of hopes and dreams like giving back to the community. I’m trying to go to school for drug counseling. I took the tests. I’m trying to get employed.” Matt also had a similar wish for finding employment. He said, “This is the first time I want to do something. I always wanted to be a youth counselor. That why I’m trying to get myself together.” Many of these individuals want to share their experience in the recovery process with others. This is a viable approach to finding employment after First Step.

First Step's utilization of the therapeutic community model carries over for many program participants once they have completed the program. The emphasis of using individuals who have personally experienced addiction in counseling and mentoring roles seems to be an effective approach for rehabilitation programs. First Step participants experience that approach during their time in the program and are interested in further continuing that approach. The idea is to expand the recovery community. As the director said about the future of the recovery community, "Treatment will be something that happens in the group networks of recovery people that exist within the broader community."

Part of the reason why many participants want to pursue that type of employment is because they have no other significant job training. The other, more important reason is their willingness to expand what some refer to as "the recovery community." The idea behind the recovery community is to expand the substance free lifestyle to as many people as possible. As the director described, "You can't just get clean and be clean, you have to want to help, try to change someone else's life. You wanna try and break the cycle in your family. I've seen five, six generations of addicts. The cycle just has to be broken somewhere." These people can act as a support system for one another in not only remaining substance free but also promoting the importance of the family and a positive work ethic.

The end goal for the First Step approach to financial concerns is to prepare participants to be employed, taxpaying citizens. The Director explained this goal saying, "We want these men to become taxpaying citizens because most of them robbed, stole, cheated, and lied all their lives and never held down a steady job. They never paid taxes.

All they did was take from society. Now we want these guys to learn how to give back to society, and holding down a job is the best way. To be responsible, you have to be able to keep a steady job.” This goal is grounded in the economic rationale of addressing the reentry and rehabilitation issues of ex-offenders. More incarcerated people means higher taxes for everyone else. At the same time, when more ex-offenders are employed, they then contribute to the tax collection.

### *Substance Abuse and Mental Health Issues*

Substance abuse and mental health problems are related issues in the criminal justice system and rehabilitation field. Individuals with untreated mental disorders often try to alleviate their symptoms with harmful chemicals. As previously stated, over half of incarcerated people suffer from mental health issues. Of those individuals, 74% in prisons and 76% in jails also suffer from a substance abuse problem (James, Glaze 2006).

Substance abuse, mental health problems, and crime are issues that are associated with one another and often work to reinforce each other. Most participants in the First Step program found that substance abuse was at the root of their criminal activity and that mental health problems were a result of years of addiction.

The vast majority of participants cited early substance abuse as the catalyst of their progression towards crime and incarceration. In most cases, the participants were very young when they began habitually using drugs or alcohol. Drug use was often associated with their surroundings as Lionel said, “I started smoking weed, at first, I always wanted to smoke weed, I just wanted to be like them guys, doing whatever they wanted to do when I was like six or seven.” James’ story was similar to Lionel’s in that

he too abusing substances as early as elementary schools. He explained, “Sixth grade graduation we all pitched in and bought alcohol. That progressed into the weekends and parties and stuff, we would get alcohol. So alcohol was basically my first drug. From there we would go and smoke marijuana while still drinking alcohol. As it progressed we began to drink wine every day. I then started taking pills; downers.”

Furthermore, as we have seen, substance abuse is often connected to personal problems within the family. Additionally, frequent substance abuse nearly always results in drug sales. Matt explained, “I first started using when my grandmother died. And all my friends were smoking weed and they said it would calm me down, I wouldn’t be crying as much. So I went from smoking weed just for grief to just smoking weed every day and hustling.” Russ said, “Your mind goes over and over how you can get it. That’s all you think about it. You don’t care who you got to hurt to get it. I started to skip school, started selling drugs.” Andy also talked about his early addiction saying “There were times I would have to pop Ecstasy just to stay up so I wouldn’t fall asleep or nothing on someone’s porch. The first time I did that I was 15, 16 and I got addicted real quick.”

Unfortunately, many participants found that drug sales were a result of their addiction and were also often the first stage in a deviant lifestyle. Most found that drug dealing led them to branch out into many other forms of criminal activity. James explained that drug use and drug sales, “led to stealing cars. As a juvenile I had three arrests.” Lionel, in more ambiguous terms, explained a similar experience that drug use and sales led him to other criminal activities. He said, “It was bad because I’d be like getting money or something, then I’d run across some Xanties [Xanax] and then I would



forget, I would black out for a few days and get into trouble, getting smart with people, doing certain things, robbing them. And I just wouldn't remember." Unfortunately for Lionel and virtually all the other participants, these activities lead to his incarceration.

It is a common misconception that drug abuse stops once an individual is incarcerated. As James remarked, "Contrary to what everyone believe, some penitentiaries you can get just as much drugs as you could on the street." Carl was eager to inform that, "You can get drugs anywhere sir. And that's the way life goes on the negative side." The ability to acquire drugs and alcohol in jails and prisons furthers these individuals' addictions and complicates the reentry process. As previously stated, untreated substance abuse problems increase the ex-offenders likelihood of recidivating (Anglin, Maugh 1992). Many participants spoke about that issue on a number of occasions.

Carl discussed his release from prison and his return to severe substance abuse saying, "I considered it a celebration, oh I'm out. There you go." James told a similar story about his release from jail. He said, "I did what I always did. Instead of talking about my problems, I just got high again." Lionel also discussed this issue saying, "I never wanted to stop using for real. I was just like alright I'll just do this, and when I get out of here then I'll just use again. And nothing really changed. Nearly all participants cited a return to substance abuse and crime following their release from at least one incarceration experience.

Because of the risk that untreated substance abuse problems cause during the reentry process, the criminal justice system has begun to focus efforts on properly

addressing the issue of addiction. For that reason, community-based programs such as First Step are becoming more common. The First Step program's main focus is to help ex-offenders recover from their substance abuse problems and end the cycle of addiction within families and communities. First Step staff members believe that addiction is at the root of criminal behavior. Therefore, addressing the issue of addiction will reduce incarceration populations and recidivism rates as well as improve the conditions of many communities.

*The First Step Approach: Substance Abuse and Mental Health Issues*

As with the other issues that the First Step program tries to address, the program director's own experiences served to help formulate the program's approach. His story is similar to many of the current participants. He said, "I was doing a lot of things that I am not proud of what I did. I robbed, I stole, I cheated, I lied. I did whatever it took you know to get the drug up in me because of my addiction. And that's one of the things I really want to focus on if I can today because public safety is truly at risk. I know firsthand what it took for me to get my drugs every day." For the director, addiction is at the root of crime.

First Step utilizes the Narcotics Anonymous and Alcoholics Anonymous models as a basis for treatment. To that end, the first thing a participant must do is acknowledge that they have a problem. From that point on, staff members and participants discuss the progression of addiction and the need to end the cycle of drug use, drug sales, other crimes, and incarceration. To illustrate that point, a staff member once asked the participants, "How many would say your criminal behavior is directly attached to your

addiction?” All the participants raised their hands. Carl responded, “The getting, the using, the selling.” The conversation then turned to the way that the criminal justice system is failing to address these issues within prisons and jails. The staff member then remarked that the system is improving on that issue.

On another occasion, the connection between addiction and crime was relayed by a staff member saying, “I’ve been going down to the jail for awhile now. Numbers and stats- 80 percent at times have issues with addiction. How can we get programs in the jail to reduce recidivism? How can we assist with reintegration back into society? How did we get in this situation?” The numbers may not be reported as quite as high. However, one must also understand that these are self-reported addicts. Regardless, the connection between substance abuse and crime is apparent and First Step staff members utilize that connection as the focus of their efforts.

A critical element of the First Step approach to addressing participants’ substance abuse issues is making them aware that it was their addiction that led them to commit crimes. If they can remain substance free then they will be able to stay out of prison. Group therapy sessions focused on the link between substance abuse and crime on a number of occasions. One staff member commented, “But if they’ve had burglary or theft or robbery we know that that was because of their addiction. They robbed someone to try and get money for drugs.” It is this belief that is at the root of the First Step approach to treating substance abuse. Program participants are not simply bad people who have chosen a life of crime as a result of their evil nature. Criminal activities were a symptom of addiction.

Another central aspect of the First Step approach to treating substance abuse problems is gaining an understanding of the progression of drug use. One staff member explained this progression in a group session. He said:

First stage- experimental stage. Time when you first start engaging. Often times we are adolescents and we don't know the consequences. Peer pressure. Someone might offer you something to drink. Point is: there are several types of alcohol or drugs that you just experiment with. Next stage: social stage- basically how we equate our substance using with a social event. That's when people say let's get blow and go to the game. Drink a couple beer, joints. Going to a concert. We are always equating the using with a social event. Using this as a way of socializing. Even sometimes that people have a problem wish they could go back when it was just socializing. Next stage- substance abuse.

Staff members are interested in having the participants acknowledge where the progression leads to once they have reached the substance abuse stage. As we have seen, these men were solely concerned with obtaining the drug. Therefore, they would do anything and everything they could in order to continue using that drug. In the majority of cases, this fact led to drug sales. In a number of cases, other crimes were committed in order to obtain money to purchase drugs. These crimes ultimately led to their arrest and incarceration in many cases. Understanding this progression and the fact that it is rooted in addiction is a focus of the First Step program.

Another aspect of the First Step approach to treating substance abuse is the mental health issues associated with addiction. In many cases, untreated mental health problems resulted in participants using substances to deal with their problems. The other side of that is the fact that years of addiction leaves individuals often with severe mental health issues. Depression, anxiety, and other disorders were often cited as issues for participants.

In order to properly address mental health problems, First Step staff members require that participants undergo an extensive evaluation of their mental health. They then introduce participants to psychiatrists, therapists, and counselors in order to ensure that all their mental health needs are being met. The staff understands the importance of having participants take all of their prescribed medications. The majority of participants had never sought out treatment for mental health issues and their inability to do so likely led to severe substance abuse. If they had been prescribed medication prior to their entry into the program, many opted to use drugs and alcohol in the place of taking their medicine. Staff members ensure that participants regularly take their prescribed medications.

The First Step program is grounded in the belief that substance abuse is at the root of the other factors influencing the reentry and rehabilitation of ex-offenders. As one staff member said, “It is a progression, time spent, money spent. Everything is progressively affected; housing, or lack of housing. You know family members who are affected by the power of addiction.” Because substance abuse is believed to be the cause of the deterioration of the other aspects of life, once it is properly addressed, participants can begin to address the other areas of their lives.

At the same time, understanding the roots of their addictions is considered to be an essential part of the healing process. One staff member described addiction and its effects saying, “There might be a lot of variables that led up to us using. Those might be situations that were hard for us to deal with.” He later mentioned the effects of the community and surroundings associated with widespread addiction. In other words, addiction may be a result of surroundings and personal problems, but it goes on to

negatively affect all other aspects of life. The program is based on the belief that recovery from substance abuse will allow participants to find adequate housing, begin working or pursuing educational opportunities, avoid crime and criminals, and ultimately become taxpaying citizens.

### *Evaluating Success*

First Step staff members are concerned with measuring success rates. The amount of participants that remain substance and arrest free following program completion versus those who do not is an integral aspect of program success. Staff members attempt to do so in a variety of ways. As the director told me, “We have a record of successful discharges from First Step and unlike other places we know of, we have a success rate of 35% of the guys that we graduate remain drug and alcohol free for the first five years. You might see any former resident at any time because they’re allowed to come back to participate in groups, participate in interviews. And just to come in and take guys to meetings. We have a lot of former residents coming to pick the guys up and go to AA and NA meetings. And they’ll sit in on a number of meetings. That’s one of the ways that we have the opportunity to track these guys. The major way is once they leave here, we usually just follow up with phone calls.” The program relies on phone contact and return visits of former participants in order to measure success rates.

### DISCUSSION

Residential location, financial concerns, family relationships, and substance abuse problems are critical elements influencing the successful reentry and rehabilitation of ex-offenders. These factors are also areas that have a strong influence on all criminal

activity. When not properly addressed, they have a tendency to negatively influence and exacerbate one another leading ex-offenders on an increasingly more likely return to a criminal lifestyle. Vulnerable situations resulting from residing in an impoverished community with little occupational and educational opportunities as well as experiencing negative family relationships often lead to individuals resorting to substance abuse and other criminal activities and ultimately resulting in their incarceration. The First Step program seeks to assist participants in addressing the elements of their lives that led them to substance abuse and crime and facilitate their transition to substance and crime free taxpaying citizens.

Based on Smith and Potter's (2006) criteria for evaluating ex-offender programs, the following conclusions were made regarding the First Step program.

\* The degree to which the program is based on a well-defined theory or model.

The First Step program uses the therapeutic community model and features staff members with substance abuse histories of their own to serve as guides for participants. The program is also based on the NA/AA models and the 12 Steps of rehabilitation process. These models are well defined and have been extensively researched. For those reasons, the First Step program is based on a well defined model.

\* The degree to which the intended target population was actually served.

The needs of First Step participants are addressed by staff members immediately following their entry into the program. An intake assessment is conducted in order to determine the short-term immediate needs of the participant. This often includes arranging

appointments with mental health professionals in order for them to prescribe the proper medication, seeking out the appropriate means of financial assistance available to the participant, and addressing any legal issues such as the payment of restitution fines and meetings with probation officers. From that point, the First Step staff works with the participant to determine their long-term goals and the most effective ways for them to achieve those goals. This “action plan” serves as the participants own personal guide throughout their time in the program. Addressing the short-term and long-term needs of participants as well as helping them set goals and ways to achieve those goals displays the fact that the First Step staff serves participants in a thorough and significant manner.

\* The degree to which the intended target population received sufficient intervention.

The First Step program utilizes group sessions at least once but often two times a week to ensure group unity and address the many personal issues associated with the reentry and rehabilitation process. In addition to the initial intake assessments, staff members meet with individual participants at least once a month to document their progress, ensure that their needs are being met, and maintain confidence that they will be successfully rehabilitated and reintegrated once they have completed the program. Staff members noted that they had previously conducted bi-weekly individual interventions but funding cut backs have led them to only be available monthly. In that sense, the participants are receiving very sufficient intervention in their reentry and rehabilitation process but an increase in funding would clearly serve to enhance the level of personal intervention.

\* The quality and appropriateness of data collection and data analysis procedures.



With all of the successes associated with the First Step approach to reentry and rehabilitation, the program unfortunately lacks in any substantial means of data collection and analysis. As previously stated, First Step staff members rely on phone calls and return visits to determine successfully reintegrated and rehabilitated past participants. This form of calculating success is insufficient in several ways. First, past participants who have returned to substance abuse and/or criminal activity are likely difficult to contact and unwilling to voluntarily return to the program. Secondly, the follow up calls are not systematic in any way so there exists no hard, documented statistics associated with success rates. Success rates of the First Step program are merely estimates determined by phone follow-up interviews, return visits, and community events.

#### POLICY RECOMMENDATION

The First Step program has many strong features that display the fact that staff members are active in the needs, goals, and rehabilitative processes of program participants. Participants tended to have a genuine respect and appreciation for the staff members. Furthermore, staff members had a significant understanding of the personal circumstances of each participant and a real desire to help them in any way possible in order for them to be successfully reintegrated and rehabilitated. The duration of the program, its therapeutic community model, and its NA/AA approach to reentry and rehabilitation assistance are all positive features of the program. In general, the First Step program seems to have more success stories than failures. Further studies that use statistically significant means of data collection and analysis can corroborate these stories.

Additionally, cut backs in funding have led to decreases in personal interventions as described by staff members. Personal interviews of participants serve to guide them on their reentry and rehabilitation process and ensure that they are on a path to finding their own places of residence, reuniting with their families, finding employment and/or pursuing educational opportunities, and remaining substance free. Without frequent personal intervention it will be difficult for the First Step staff to determine that participants will be successfully reintegrated and rehabilitated.

Therefore, several small changes to the First Step approach to reentry and rehabilitation assistance may serve to benefit the program and its participants. Because success rates are estimated and not determined in any statistically significant manner, the program may benefit from a systematic approach to data collection and analysis. A condition of entry into the program could be for participants to agree to return interviews conducted at the six month, one year, and five year marks of their completion of the program. This approach would allow staff members to have well documented statistics on whether past participants have a place of residence, are reunited with their families, are employed and/or attending school, and are substance free. Well documented success rates could demonstrate to potential funders that the First Step approach to reentry and rehabilitation works and that awarding the program grant money would serve to facilitate reentry, reduce incarcerated populations, and reduce recidivism rates.

Furthermore, as other studies have recommended, (Griffith et al 1999; Prendergast et al 2004) combining in-prison treatment with post-prison community based treatment may yield greater success rates. If incarceration treatment programs were to be

expanded and the First Step program established a formal relationship with them, the system could ensure that long-term assistance be provided for substance abusing ex-offenders. Participation in a therapeutic community during the final months of incarceration could be followed by the immediate entrance into the First Step program. This would allow for an extended period of treatment and an easing of the transition from incarceration to community.

## REFLECTIONS

Is the First Step program successful in rehabilitating ex-offenders? The issue is complicated. The staff at First Step does track, however, imperfectly, the lives of past participants and claims, in good faith, a significant percentage of successfully reintegrated, substance abuse and crime free people. We will never know, however, how much the participants are willing and able to truly change their lives or if that willingness will continue when they reenter their communities. The repeated use of certain language and stories during group sessions led me to a degree of skepticism about the concepts of recovery and rehabilitation. It may be part of the process of recovery to rely on certain stories and rehabilitation lingo. At the same time, those enrolled in the program as a condition of their parole have an incentive to complete it. The issue is larger than the program itself and may even lead people to question the institution of parole and punishment in general.

The First Step program is a positive influence against the several negative forces that affect many communities. The sheer number of people wanting to enroll in the program suggests that the word is spreading about a program that helps change people's

lives. The Director discussed this at one point. He said that even if a participant is unsuccessful in their reentry, they still return to their community with positive stories about the program. These stories can reach a significant number of people and change the dynamic of whole communities. Incarcerated people have often heard of the program and know that it may help in their transition back into society.

It is not an exaggeration that the First Step program is changing the composition of this area. Regardless of whether the program is more often successful than unsuccessful in its efforts to rehabilitate is not that important in the end. The truth is that the program is affecting lives by spreading the message that people and communities can change. The First Step program and the recovery philosophy are revitalizing an area ravaged by the effects of de-industrialization and crime.

This issue is neighborhood based at its root. The program's approach emphasizes personal responsibility and transformation. However, there is a broader social context for a program like First Step. The fundamental principles of the recovery community have the ability to transform entire neighborhoods that have been devastated by substance abuse, crime, and the revolving door of incarceration.

## References

- "Overview of Pennsylvania's Correctional System." 2008. *National Institute of Corrections*. Accessed May 2, 2011. (<http://nicic.gov/StateStats/?State=PA>).
- "Correctional Populations". 2011. *Bureau of Justice Statistics*. Accessed May 2, 2011. (<http://bjs.ojp.usdoj.gov/content/glance/tables/corr2tab.cfm>).
- Anglin, M. D. and Thomas H. M. II. 1992. "Ensuring Success in Interventions with Drug-Using Offenders." *Annals of the American Academy of Political and Social Science* 521(, Drug Abuse: Linking Policy and Research):pp. 66-90 (<http://www.jstor.org/stable/1046543>).
- Bahr, Steven J., Lish Harris, James K. Fisher and Anita H. Armstrong. 2010. "Successful Reentry: What Differentiates Successful and Unsuccessful Parolees?." *International Journal of Offender Therapy and Comparative Criminology* 54(5):666.
- Bales, William D. and Daniel P. Mears. 2008. "Inmate Social Ties and the Transition to Society : Does Visitation Reduce Recidivism." *Journal of Research in Crime and Delinquency* 45(3):287.
- Belenko, S. 2006. "Assessing released inmates for substance-abuse-related service needs." *Crime & Delinquency* 52(1):94.
- Berk, R. A., K. J. Lenihan and P. H. Rossi. 1980. "Crime and poverty: Some experimental evidence from ex-offenders." *American Sociological Review* 45(5):766-786.
- Buttler, Mark. 2011. "Top Security Jails Awash with Drugs." *Herald Sun*, .
- Byrne, J. M., F. S. Taxman, D. W. Young and University of Maryland, College Park. Bureau of Governmental Research. 2002. *Emerging Roles and Responsibilities in the Reentry Partnership Initiative: New Ways of Doing Business*. Bureau of Governmental Research, University of Maryland, College Park.
- Castillo, Eladio D. and Leanne F. Alarid. 2011. "Factors Associated With Recidivism Among Offenders With Mental Illness." *International Journal of Offender Therapy and Comparative Criminology*, 55(1):98.
- Corsino, B. V., D. H. Morrow and C. J. Wallace. 1996. "Quality improvement and substance abuse: rethinking impaired provider policies." *American Journal of Medical Quality* 11(2):94.
- Fishman, R. 1977. "Evaluation of Criminal Recidivism in Project Providing Rehabilitation and Diversion Services in New York City, An." *J.Crim.L. & Criminology* 68:283.

- Fleisher, M. S. 1995. *Beggars and Thieves: Lives of Urban Street Criminals*. Univ of Wisconsin Pr.
- Franco, C. 2010. "Drug Courts: Background, Effectiveness, and Policy Issues for Congress." Congressional Research Service.
- Freudenberg, N. 2006. "Coming home from jail: A review of health and social problems facing US jail populations and of opportunities for reentry interventions." *Washington, DC: Urban Institute*.
- Gance-Cleveland, B. and M. Z. Mays. 2008. "School-based support groups for adolescents with a substance-abusing parent." *Journal of the American Psychiatric Nurses Association* 14(4):297.
- Gilbertson, T. A. 2008. "Systems Modeling for Drug Courts." *Criminal Justice Policy Review* 19(2):239.
- Grattet, R., J. Petersilia and J. Lin. 2008. "Parole violations and revocations in California." *Final Grant Report. Washington, DC: National Institute of Justice, US Department of Justice (Award# 2005-IJ-CX-0026)*.
- Griffith, J. D., M. L. Hiller, K. Knight and D. D. Simpson. 1999. "A cost-effectiveness analysis of in-prison therapeutic community treatment and risk classification." *The Prison Journal* 79(3):352.
- Harris, P. M. and K. S. Keller. 2005. "Ex-offenders need not apply." *Journal of Contemporary Criminal Justice* 21(1):6.
- Hiller, M. L., K. Knight and D. D. Simpson. 2006. "Recidivism following mandated residential substance abuse treatment for felony probationers." *The Prison Journal* 86(2):230.
- Home, W. P. C. 2003. "Parole and Prisoner Reentry."
- Hughes, Timothy and Doris J. Wilson. 2004. *Reentry Trends in the United States*.
- Inciardi, J. A., S. S. Martin and C. A. Butzin. 2004. "Five-year outcomes of therapeutic community treatment of drug-involved offenders after release from prison." *Crime & Delinquency* 50(1):88.
- James, D. J., L. E. Glaze and United States. Bureau of Justice Statistics. 2006. *Mental Health Problems of Prison and Jail Inmates*. US Dept. of Justice, Office of Justice Programs, Bureau of Justice Statistics.

- Knight, K., M. L. Hiller, K. M. Broome and D. D. Simpson. 2000. "Legal pressure, treatment readiness, and engagement in long-term residential programs." *Journal of Offender Rehabilitation* 31(1):101-115.
- Knollenberg, L. and V. A. Martin. 2008. "Community reentry following prison: A process evaluation of the Accelerated Community Entry Program." *Fed.Probation* 72:54.
- Levingston, K. D. and V. Turetsky. 2007. "Debtors' Prison-Prisoners' Accumulation of Debt as a Barrier to Reentry." *Clearinghouse Review* 41(3/4):187.
- Lutze, F. E. and J. G. van Wormer. 2007. "The nexus between drug and alcohol treatment program integrity and drug court effectiveness." *Criminal Justice Policy Review* 18(3):226.
- Mallik-Kane, K. 2008. "Health and prisoner reentry: How physical, mental, and substance abuse conditions shape the process of reintegration."
- McCollister, K. E., M. T. French, M. L. Prendergast, E. Hall and S. Sacks. 2004. "Long-term cost effectiveness of addiction treatment for criminal offenders." *Justice Quarterly* 21(3):659-679.
- Morgan, Ken. "Ex-offenders Go to Delancey Street." *The Baltimore Times*, .
- Mumola, CJ and JC Karberg. 2006. "Drug use and dependence, state and federal prisoners, 2004 (NCJ 213530)." *Washington, DC: Bureau of Justice Statistics*.
- Nored, Lisa S. and Philip E. Carlan. 2008. "Success of Drug Court Programs: Examination of the Perceptions of Drug Court Personnel." *Criminal Justice Review* 33(3):329.
- Orsagh, T. and A. D. Witte. 1981. "Economic status and crime: Implications for offender rehabilitation." *The Journal of Criminal Law and Criminology (1973-)* 72(3):1055-1071.
- Pearson, F. S. and D. S. Lipton. 1999. "A meta-analytic review of the effectiveness of corrections-based treatments for drug abuse." *The Prison Journal* 79(4):384.
- Peeples, Carol. 2009. "Homelessness and Parole: A Survey of Denver's Shelters." *Colorado Criminal Justice Reform Coalition*.
- Petersilia, J. 2009. *When Prisoners Come Home: Parole and Prisoner Reentry*. Oxford Univ Pr.
- , 1999. "Parole and prisoner reentry in the United States." *Crime and Justice* 26:479-529.

- Petersilia, Joan. 2001. "Prisoner Reentry: Public Safety and Reintegration Strategies." *The Prison Journal* 81(3).
- Prendergast, M. L., E. A. Hall, H. K. Wexler, G. Melnick and Y. Cao. 2004. "Amity prison-based therapeutic community: 5-year outcomes." *The Prison Journal* 84(1):36.
- Sampson, R. J., J. H. Laub, K. Davis and S. Glueck. 1993. "Criminal Careers and Crime Control: a Matched-sample longitudinal Research Design, Phase II."
- Savolainen, J., T. M. Hurtig, H. E. Ebeling, I. K. Moilanen, L. A. Hughes and A. M. Taanila. 2010. "Attention deficit hyperactivity disorder (ADHD) and criminal behaviour: the role of adolescent marginalization." *European Journal of Criminology* 7(6):442.
- Scott, G. 2004. "It's a sucker's outfit." *Ethnography* 5(1):107.
- Smiley-McDonald, H. M. and C. G. Leukefeld. 2005. "Incarcerated clients' perceptions of therapeutic change in substance abuse treatment: A 4-year case study." *International Journal of Offender Therapy and Comparative Criminology* 49(5):574.
- Smith, L. and R. Potter. 2006. "Communicating Evaluation Findings from Offender Programs." *Corrections Today* 68(7):98-101.
- Sung, H. E., A. M. Mahoney and J. Mellow. 2011. "Substance Abuse Treatment Gap Among Adult Parolees: Prevalence, Correlates, and Barriers." *Criminal Justice Review* 36(1):40.
- Taxman, F. S., D. Young, J. M. Byrne, A. Holsinger and D. Anspach. 2002. "From prison safety to public safety: Innovations in offender reentry." *College Park, MD: University of Maryland, College Park*.
- Tripodi, Stephen J., Johnny S. Kim and Kimberly Bender. 2010. "Is Employment Associated With Reduced Recidivism?: The Complex Relationship Between Employment and Crime." *International Journal of Offender Therapy and Comparative Criminology* 54(5):706.
- Uggen, C. 2000. "Work as a turning point in the life course of criminals: A duration model of age, employment, and recidivism." *American Sociological Review* 65(4):529-546.
- , 2000. "Work as a turning point in the life course of criminals: A duration model of age, employment, and recidivism." *American Sociological Review* 65(4):529-546.
- Visher, C. A. and J. Travis. 2003. "Transitions from Prison to Community: Understanding Individual Pathways." *Annual review of sociology* 29:89-114.



- Warner, Dave. 2011. "Coloring Book Used in Jail Drug Smuggling Scheme." *U.S. News on MSNBC*.
- Welsh, W. N. 2007. "A multisite evaluation of prison-based therapeutic community drug treatment." *Criminal Justice and Behavior* 34(11):1481.
- Welsh, W. N. and G. Zajac. 2004. "A census of prison-based drug treatment programs: Implications for programming, policy, and evaluation." *Crime & Delinquency* 50(1):108.
- Wexler, H. K., G. P. Falkin and D. S. Lipton. 1990. "Outcome evaluation of a prison therapeutic community for substance abuse treatment." *Criminal Justice and Behavior* 17(1):71.
- Wilens, T. E. and J. Biederman. 2006. "Alcohol, drugs, and attention-deficit/hyperactivity disorder: a model for the study of addictions in youth." *Journal of Psychopharmacology* 20(4):580.
- Wilson, J. A. and R. C. Davis. 2006. "Good Intentions Meet Hard Realities: An Evaluation of the Project Greenlight Reentry Program." *Criminology & Public Policy* 5(2):303-338.
- Wiseman, C. M. 2005. "Drug courts: Framing policy to ensure success." *International Journal of Offender Therapy and Comparative Criminology* 49(3):235.
- Wolff, N. and J. Draine. 2004. "Dynamics of social capital of prisoners and community reentry: Ties that bind?" *Journal of Correctional Health Care* 10(3):457.
- Zhang, S. X., R. E. L. Roberts and V. J. Callanan. 2006. "Preventing parolees from returning to prison through community-based reintegration." *Crime & Delinquency* 52(4):551.
- Zhang, Sheldon. X., Roberts, Robert E. and McCollister, Kathryn E. 2011. "Therapeutic Community in a California Prison: Treatment Outcomes After 5 Years." *Crime & Delinquency* 57(1):82.