

Community-based sanctions

"... community-based sanctions used as alternatives to incarceration are a good investment in public safety. Compared with incarceration, they do not result in higher rates of criminal behavior and, thus, public harm; in fact, they were clearly associated with lower recidivism rates for matched groups of offenders." – The Effectiveness of Community Based Sanctions in Reducing Recidivism, the Oregon Department of Corrections, 2002

In Michigan, as elsewhere, most of the money allocated for "corrections", goes to operate prisons. Few resources are left for community-based programs. Yet, for the right offender, community-based sanctions are more cost-effective than long incarceration.

Community-based sanctions have a number of advantages:

- They are flexible. Programs can be combined with each other and with jail terms to produce a mixture that is appropriately targeted at the behavior of particular offenders.
- They punish in a way that requires more responsibility and decision-making than a prison sentence. An offender is required to complete relevant programs; get and hold a job; pay court costs, restitution and fines; attend counseling; and deal with the choices presented by the real world instead of an artificial environment in which others make all the decisions.
- They are less expensive than incarceration and they leave offenders in a position to help pay their own way.
- They free up scarce prison cells for the truly dangerous offender.

A wide range of community-based sanctions is being used throughout the United States and many have been found successful in reducing recidivism. At the very least, they do not increase the risk of recidivism any more than incarceration.

Some of the most common community-based sanctions are briefly described below. Costs vary by location and specific program content.

Probation residential centers

These centers provide a structured setting in which offenders can learn job skills, deal with substance abuse, get counseling, find a job and learn money management before living on their own. Along the continuum of sanctions, they fall just under prison and jail and just above intensive supervision. They provide a wide range of services and linkages to other community resources, including substance abuse treatment, mental health counseling, and employment and training programs.

In 2000, Michigan had 29 residential treatment center programs statewide, ranging in capacity from 3 to 217. Collectively, they had an average daily population of 945 - less than an average sized prison. Funding for that year was \$14,797,487. Subsequent cuts reduced that amount, but the Governor's proposed budget would restore funding for centers to \$15 million. Michigan reimburses approved programs at a rate of \$43 a day. The

average length of stay is 90 days and the limit is 150 (down from the previous limit of 180 days).

Day reporting

Offenders report daily to a center that provides mental health counseling, job training and substance abuse treatment. Regimens vary from the simplest supervision to complex programming, depending on local funding.

The cost usually includes an intake assessment of about \$35. The daily costs depend on the amount of in-kind services provided by community agencies such as community mental health. At a minimum, day reporting costs about \$4 a day for basic services.

A Utah day reporting program evaluated by researchers at the University of Utah found that subjects displayed a statistically significant reduction in alcohol and drug use, property crime offenses, and overall criminal charges during the first year subsequent to receiving services. The services were equally effective with clients regardless of their probation or parole status, prior incarceration, or source of referral to the program.

Substance abuse treatment

As the public increasingly perceives addiction as a medical problem, treatment has gained acceptance as the solution for those who abuse alcohol and drugs. Legislative testimony by the Association for Licensed Substance Abuse Organizations at appropriations hearings for the Michigan Department of Corrections in February 2003, described numerous research projects that demonstrate that treatment works to reduce substance abuse and lower recidivism. For instance:

- An Ohio study reports that treatment for criminal offenders provided cost offsets of three to seven times the cost of treatment, and criminal justice involvement dropped from 60 percent the year before treatment to 19 percent the year after treatment.
- A Delaware study shows that 71 percent of drug-involved offenders who participated in a continuum of treatment, both in prison and in the community, were arrest-free 18 months later compared to 30 percent of a comparison group that received no treatment. An Oregon study concluded that every dollar spent on treatment saved \$5.60 for prisons, welfare and other expenses.
- The 1997 Drug Treatment Outcomes Study found a 69% reduction in weekly heroin use and the probability of being in prison dropped from 69% the year before treatment to 25% in the year after treatment.
- A five-year study of low risk chronically addicted felony offenders in New York found that the participants, who averaged 17 months of treatment, were 67% less likely to return

to prison than their untreated counterparts. These results were achieved at half the cost of incarceration.

Drug courts

The drug court model has proven so successful as a means of addressing substance abusing offenders that it has been widely adopted throughout the country. In Michigan, the Governor's proposed budget for FY 2004 doubles the appropriation for drug courts from \$3 million to \$6 million.

Drug courts (and sobriety courts for alcohol abusers) are special purpose dockets within a county's judicial system. These courts handle the cases of addicted offenders who have committed less serious crimes. Drug court judges and court staff are trained to provide an effective mixture of supervision and treatment. These programs include frequent drug testing, regular reporting to the court as well as probation officers, drug treatment, educational opportunities and the use of sanctions and incentives. Participants who relapse may face short stints in jail. Those who fail altogether may face prison. Those who succeed receive substantial positive reinforcement, including formal graduation ceremonies.

National studies show that drug use and criminal behavior are substantially reduced while clients are participating in a drug court program. Criminal behavior is lower after program participation, especially for graduates. They generate cost savings, at least in the short term, from reduced jail/prison use, reduced criminality and lower criminal justice system costs of \$10 for every \$1 spent on drug court. (See the National Drug Court Institute website for more information.)

A study of the pioneering Kalamazoo Drug Court shows that of the women who successfully completed the program, 87 percent had no subsequent convictions within three years of successful program completion. Of the men who successfully completed the program, 89% had no subsequent convictions within three years. In Michigan the cost for drug courts can be about \$1,750 for men, \$1,900 for women and \$2,800 for juveniles annually. The average length of stay in the program is 20 months.

Because of its success, attempts are being made to adapt the drug court model to other uses. Pilot programs are being conducted to test the feasibility of mental health courts for mentally ill offenders, and re-entry courts for parolees.

Community service

Convicted offenders are placed in unpaid positions with nonprofit or tax supported agencies to serve a specified number of hours doing work or service within a given time frame as a sentencing option or condition of probation. The cost to taxpayers is minimal.

There are many advantages to community service:

- Value of probationer's service to the community agency
- Therapeutic effects on a probationer such as atonement for misdeed
- Exposure to the work environment
- Symbolic compensation to the community
- Reduction in probation supervision caseload

A recent Oregon Department of Corrections study showed that this sanction is the most underused in the United States even though it is inexpensive to administer, produces public value and can be scaled to the seriousness of the crime. In national studies, recidivism following a community service sanction is no higher than recidivism following incarceration, which is much more expensive. See: http://www.co.multnomah.or.us/dcj/Effectiveness_of_Sanctions_version2.pdf

Community-based mental health services

A 1999 U.S. Department of Justice study estimated that more than 16 percent of those held in state and local jails across the country were mentally ill.

In Michigan, about 3,500 state prisoners are considered seriously mentally ill and are under the care of professionals from the Department of Community Health (7 percent of the 50,000 prisoners in 2004). Most are in treatment programs inside Michigan prisons. An untold number of mentally ill men and women are housed in county jails.

More community-based mental health treatment programs could help prevent the tragedy of incarcerating mentally ill persons, and more programs designed to help mentally ill parolees could be effective in reducing the state's prison population.

One approach that has been found to be successful is called Assertive Community Treatment (ACT) designed to provide comprehensive community-based services to people with serious mental illness (SMI).

Experts report that ACT is a good approach for people with SMI who have recently left institutions, typically do not schedule or keep appointments, or do not do well without a lot of support. ACT programs (one of which operates in Michigan) use a variety of treatment and rehabilitation practices, including medications; behaviorally oriented skill teaching; crisis intervention; support, education, and skill teaching for family members; supportive therapy; cognitive-behavioral therapy; group treatment; and supported employment.

Studies have found that ACT may be associated with reduced hospital admissions, shorter hospital stays, better social functioning, greater housing stability, fewer days homeless, and fewer symptoms of thought disorder and unusual activity. Studies have also found that ACT services cost less than other services, especially inpatient and emergency room care.

The National Mental Health Association reports that funding for community-based mental health services in real dollars has actually declined in recent years. This widening deficit

exists even though research demonstrates that mental health treatment is effective and yields benefits for individuals, families and society as a whole.

Cognitive restructuring

Many rehabilitation programs include cognitive restructuring therapy which works on the premise that criminal and other types of destructive behavior spring from faulty thinking. The therapy helps participants recognize and change their thinking patterns.

Costs vary from location to location and from program to program, but can be about \$20 per offender for a 65-day program. (2003 Oakland County Comprehensive Plan.)

Much national research shows the approach to be successful in reducing crime.

Electronic monitoring

A system involving the transmission of electronic signals from a device worn by the offender through a telephone to a centralized computer that keeps track of the offender's movements. Offenders can be placed under virtual house arrest, permitted limited mobility to attend work or school, placed on curfews, or prohibited from being in certain locations.

In Michigan, because offenders pay \$8.50 per day to participate, electronic monitoring is essentially cost-free to the public. Of those who have participated in the past, less than 2 percent have been arrested for a new felony and less than 8 percent have absconded or escaped.

Other General Research Results on Community Sanctions

- The National Center on Institutions and Alternatives (NCIA), a private, nonprofit agency providing training, technical assistance, research and direct services to criminal justice, social services, and mental health organizations and clients across the country, has gathered information that documents success for a number of programs. See *What Every American Should Know About the Criminal Justice System* by the NCIA and go to the NCIA site to view other documents: <http://www.ncianet.org>
- The Oregon Department of Corrections Study, completed in 2002, showed that even in the absence of treatment services, alternative sanctions result in no worse recidivism than jail for many offenders. The selection and assignment of appropriate offenders to appropriate sanctions is the key to the effective use of jail and alternative sanctions. http://www.co.multnomah.or.us/dcj/Effectiveness_of_Sanctions_version2.pdf
- A study entitled *The Comparative Costs and Benefits of Programs to Reduce Crime*, prepared in 2001 by the Washington State Institute for Public Policy showed that several community-based programs, particularly those dealing with delinquents, prevent a

significant amount of crime, saving taxpayers and victims the cost of crime. One program entitled Multi-Systemic Therapy, an intensive home-based program for chronic, violent or substance-abusing juvenile offenders saves taxpayers \$31,661 for each participant after the costs of the programming is subtracted. Another is a cognitive-behavioral intervention that attempts to reduce antisocial behavior at a cost of about \$738 per participant. The reduction in recidivism generates about \$33,143 per juvenile for taxpayers after the cost of the program is deducted.

Funding community-based sanctions

If we paroled 100 eligible Level 2 prisoners at a savings of \$2,503,800 annually (assumes \$25,308 per prisoner), we could provide:

- 50 new parole officers so parolees can receive more support services when reentering the community (\$50,450 for each agent includes office overhead).
- Probation residential treatment for 388 more probationers so they can learn to function in the community instead of going to prison (\$43 a day for five months).
- Drug Court programming for 1,446 men in which they can receive frequent drug testing, supervision, counseling, treatment and educational opportunities (\$1,750 per man for 20 months.)

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