Ex-Prisoners’ Re-Entry: An Emerging Frontier and a Social Work Challenge

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ABSTRACT. The statistics about incarceration in America during the past three decades indicate soaring numbers of people in prisons and jails. Upon release, ex-prisoners today have had longer incarceration periods, possess low levels of education or job skills, and often have significant physical and mental health problems and/or drug addiction. As a result, their re-entry into society is largely unsuccessful. In this policy analysis, we review the data on incarceration, its impact on those incarcerated, and the challenges of re-entry. We suggest methods for coping with this emerging social problem. Paramount will be the challenge to many social service systems to develop comprehensive sets of services such as independent housing and jobs alongside counseling and rehabilitation.

KEYWORDS. Ex-prisoners, prisoner re-entry, social policy, incarceration

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BACKGROUND

The statistics regarding incarceration in America during the past 20 years indicate soaring numbers of people in prisons and jails. At year’s end 2004, state prisons housed 1,244,311 individuals and federal prisons housed 170,535, more than 1.4 million people in total. In addition, at mid-year 2004, 713,990 inmates were held in the nation's local jails. Overall, 2,135,901 different individuals were held as prisoners in federal or state prisons or in local jails in 2004. Between 1995 and 2004, the incarcerated population grew by an average of 3.4 percent annually (U.S. Department of Justice, Bureau of Justice Statistics, 2006). From 1995 to 2004, the number of jail inmates per 100,000 U.S. residents rose from 193 to 243. These numbers combined suggest a very bleak picture: by 2004 nearly 7 million people (3.2% of U.S. adult residents), or 1 in every 31 adults, were on probation, in jail or prison, or on parole. Put differently, when one sits in a bus or train car, there is a strong likelihood that at least one passenger was previously incarcerated. In any drive to work one is likely to observe or drive next to an ex-prisoner who is still unadjusted to life in the community.

As a society we have moved toward a vindictive and more harshly punitive approach in dealing with lawbreakers (Austin, Bruce, Carroll, McCall, & Richards., 2001; Beckett, 2001; Garland, 2001; King & Mauer, 2002; Mauer, 2000; Tonry, 1999). In the past three decades, politicians, following or at times leading the sentiments of voters, took away the sentencing discretion of judges by legislating mandatory sentences. Terms such as “truth in sentencing” and “three strikes and you are out” captured and dominated public discourse, which led to new sentencing policies (Ditton & Wilson, 1999). For example, in 1988, George H. W. Bush used the case of Willie Horton to demolish the Michael Dukakis campaign and win the election. When Willie Horton was paroled in Massachusetts, his release papers carried the signature of the Commonwealth’s Governor, Michael Dukakis. Soon after his release, he was arrested and convicted for another case of rape and murder. George W. H. Bush’s message was “keep them longer in prison and we will be safer” (Vidich, 1990). Voters are assumed to agree overwhelmingly that criminals should be locked up thus setting the tone for stricter sentencing and even stricter parole possibilities (Roberts, 1992). Similarly, television programs and movies portrayed the judicial system as weak and overly sympathetic to criminals at the expense of innocent citizens. Maybe the iconic symbol of this era was the Dirty Harry series...
portraying Clint Eastwood as a police detective going after ruthless, if not psychotic, criminals that the criminal justice system let free.

The changes in sentencing resulting in longer prison terms and increased numbers of prisoners led to the need for more and larger correctional facilities. Some states turned to the private sector for assistance; today, several decades later, the “prison industry” continues to boom (Hooks, Mosher, Rotolo & Lobao, 2004; Riveland, 1999; Schlosser, 1998). Communities that lost their manufacturing base are reviving their economies through prison reconstruction and maintenance, leading to prisons in less populated or less desirable parts of the country. One of the consequences of this is that anyone sentenced to state or federal prisons stands a good chance of being transferred to a prison hours away from his or her original community which, in turn, breaks ties with relatives and friends.

There is an imbalance between the expenses of long-term punishment and the cost of rehabilitation (Davey, 1995). For example, the cost of holding one felon in prison is estimated at $22,300 a year (State of Maryland: Governor’s Interagency Council on Homelessness, 2005). This cost outweighs many available community alternatives (Garland, 2001). However, the American public until now, has appeared willing to pay a lot to get harsh punishments and keep felons tucked in prisons.

The cost of imprisonment has ballooned: according to Austin and colleagues (2001), in 1998, the annual amount of public money spent on prisons alone was $35 billion dollars; by 2001, the figure reached $44 billion dollars (up from $9 billion in 1982). Overall, the number of criminal justice system employees grew 86 percent between 1982 and 2003. The total per capita expenditure for each justice function increased between 1982 and 2003, with corrections having the largest per capita increase—423 percent (Hughes, 2006). Meanwhile, data from 1996 show that of the $22 billion spent that year on state prisons for adults, only 6 percent was used to prepare prisoners for life outside prison. These programs include vocational training, life-skills training, educational programs, social activities, psychological treatments, and recreation. Many programs under these names are atrophied shells of their past potential for effectiveness and often serve to control prisons. As a result, even for many prisoners the term “rehabilitation” has fallen into disrepute (LIFERS, 2004).

In addition, the stiff sentences of the past several decades have sent and kept many members of our society in prison for longer periods and have not prepared the 97 percent who will eventually return to the community.
The country now faces growing numbers of ex-prisoners returning to the community each year after significant time behind bars. Many ex-prisoners learned to survive in prison by “toughening up” and adopting a worldview that helps them cope, but this same worldview is inadequate and unproductive for community reintegration.

Our popular public view of prisoners is that they enjoy life in prison and have too much leisure; we want them to suffer and be miserable (Jacobs, 2004; Whitman, 2003). Contrary to the “country club” myth that suggests prisoners spend their time watching television and using fitness centers, life in prison is difficult and dangerous. Most people leave prison hoping never to return, determined to stay out of trouble and be model citizens. Some dream of restored lives as spouses or parents, or with their significant others (Visher & Travis, 2003).

Daily, about 1,600 prisoners are released from prison. Estimates indicate that this number represents an increase of nearly six times the number of prisoners released in 1980 (Harrison & Karberg, 2003). Each one needs help adjusting to life in the community. Rates of reincarceration suggest that successful re-entry is difficult at best. Preventing reincarceration will become one of American society’s greatest challenges for the twenty-first century.

In the next section, we try to provide a broad picture our nation’s prisoners. This is followed by a section regarding the impact of prison life on individuals. We also chronicle the hardships of re-entry and its impact on the community. We conclude with a section on how to facilitate re-entry and the role that social work can play in this important frontier.

**WHO IS IMPRISONED IN THE U.S.?**

Most prisoners are young people (median age 34) with an estimated 57 percent of inmates under the age of 35 in 2001 (U.S. Department of Justice, Bureau of Justice Statistics, 2006). Sixty-eight percent of state prison inmates do not have a high school diploma and have few vocational skills (Harlow, 2003). Many prisoners were unemployed or only partially employed prior to their arrest or held positions earning less than $1,000 a month.

Another cause for concern is not only the sheer number of incarcerations, but the proportion of minorities who are incarcerated. The chances of black and Latino persons being incarcerated are dramatically higher than those of
white persons (Blumstein & Beck, 1999; Marley & Ferguson, 2005). Ethnic minorities, notably black and Latino, comprise 64 percent of the state prison population and 59 percent of the federal prison population, but comprise only about 20 percent of the total U.S. population. Incarceration rates indicate that more than one-quarter of black men (28.5%) will spend time in prison at some point in their lives compared to a lifetime risk of 4.4 percent for white males (Bonzcar & Beck, 2003). In addition to minorities, poor people are arrested and convicted more often than people with greater resources. Thus, the combination of race and class can be a strong predictor of who is found in our prisons and jails, and this reality affects the re-entry process.

In our nation’s jails, women make up an increasing proportion of inmates, 12.7 percent of the population in 2005 (up from 10.2 percent in 1995). However in state and federal prisons women accounted for 7 percent of all prisoners, up from 6.1 percent at year’s end 1995 (U.S. Department of Justice, Bureau of Justice Statistics, 2006). Most women prisoners are also minority women. Although the involvement of women in crime is on the rise, men are still the overwhelming majority of prisoners.

Ditton (1999) reported that 16.2 percent of state prison inmates and 7.2 percent of federal prison inmates are estimated to have psychiatric treatment histories. Among those in local jails or probation, estimates indicate that 16 percent have psychiatric treatment histories. With the deinstitutionalization of mental health hospitals and the trend of harsh and determinate sentences, the proportion of violent prisoners decreased (Caplow & Simon, 1999). Lamb and Weinberger (1998) suggested that “it appears that a greater proportion of mentally ill persons are arrested compared with the general population” (p. 483). Draine, Salzer, Culhane, & Hadley (2002) suggested that the core problem is poverty. They found that the impact of mental illness on crime, unemployment, and homelessness appears to be much smaller than that implied by much of the psychiatric services literature. Poverty moderates the relationship between serious mental illness and social problems. Factors related to poverty include lack of education, problems with employment, substance abuse, and a low likelihood of prosocial attachments. (p. 565).

The proportion of people who test positive for substance abuse when arrested has also increased. Once incarcerated, estimates of all prisoners
who are using alcohol or drugs are as high as two-thirds to three-quarters (Primm, Osher, & Gomez, 2005). In most prisons, drugs are easily accessible and most attempts to eradicate drug use in prisons have failed. Thus, one of the consistent factors affecting both prison life and re-entry is the reality of substance abuse. Rates of relapse of drug use for ex-prisoners upon release are very high. Often, drugs are readily available to the ex-incarcerated while treatment options are limited (Mumola, 1999).

Due to harsher sentences, recent cohorts of ex-prisoners have a higher proportion who have served five or more years. Thus, in the larger picture of re-entry, current and near-future cohorts of newly released ex-prisoners are larger, include more people with histories of violence and/or drug abuse, and have served longer sentences. Such individuals are likely to face greater challenges to re-entry and to require appropriate reintegration services.

The emerging picture is that most people exiting prison have fewer resources in human and social capital as well as financial capital than most citizens have (Draine, Wolff, Jacoby, Hartwell & DuClor, 2005; Wolff & Draine, 2004). Over time, the number of people incarcerated has grown, especially among minorities and poor people. The time spent in prison has also increased and prison life has become harsher. As such, prison has a lasting impact on the ex-prisoners.

**LIFE IN PRISON AND ITS IMPACT ON PRISONERS**

Once arrested, the individual is taken to a local jail until sentencing occurs. After sentencing, depending on the verdict, some are released, whereas others who serve a short time remain in a local jail. Local jails are usually within the same city where the crime occurred. In this case, relatives are able to visit and maintain contact. Visits, however, are limited and closely supervised. Convicts who receive sentences of two or more years are incarcerated in state or federal prisons. In these cases, prisoners may be transferred first to a processing prison and later to a permanent prison. In most cases, state and federal prisons are located hundreds of miles away, often in areas that are sparsely populated and do not have public transportation. Some states build large prison facilities to house “out of state” prisoners, known as “interstate transfer” (Lawrence & Travis, 2004). Thus, many prisoners are transferred away from their home communities and their natural social networks. Therefore, visitation is time-consuming, difficult, and costly for relatives and
friends (Christian, 2005). Because the majority of prisoners come from poor families, the farther away the prison from the family residence, the lower the chances are for frequency of visitation.

Being imprisoned far from one’s home makes telephone calls a natural means of communication. Almost all prisons provide telephone opportunities for prisoners to call home or elsewhere according to a certain schedule. However, the cost of calls to and from prisons can be exorbitant. Many poor families may lack access to telephones and those with phones may not be able to afford the cost of collect calls from prisons. As a result, many families reluctantly or willingly block collect calls and thus further estrange prisoners (Hairston, 2001).

The U. S. Department of Justice (2000) reported that more than half of prisoners (54 percent for females and 57 percent for males) have not been visited by their children since entering prison. Bates, Archibald, and Wills (2001) provided a comprehensive review of the obstacles to prison visitation and communication between prisoners and their families of origin. Although 15 percent of couples stay together during the prison term, only 3–5 percent are still together one year after the spouse’s release. In other words, the spouse’s absence due to incarceration endangers marriage, but readjustment after release also takes its toll on the marriage.

Life inside prison forces people to develop emotional survival tactics. Within prison, there is a complex social hierarchy to be navigated. Unlike life in the community, life in prison is highly regimented and the individual has little control over daily choices. Waking up, eating, recreation, and showering are ordered by the prison’s administration with little flexibility for personal preferences (Haney, 2001). Thus, emotions must be carefully guarded and even more carefully expressed. Men and women become de-individuated, knowing their place in the system by their address, such as “D Ward,” or intake number. This culture is replicated and reinforced by jail and prison management policies to the point that even the act of being identified as having significant health issues, such as mental illness, can have multifaceted implications for power and control within the correctional setting. This significantly complicates the quality of diagnosis, treatment, and rehabilitation of behavioral health disorders in jails and prisons.

In response, the prison culture calls for inmates to be tough, showing only a restricted set of emotions. Inmates are expected to be strong, impenetrable, and capable of protecting themselves from abuse by other prisoners and prison authorities. Quickly enough, the new prisoner learns that life in the outside world has little relevance for survival and functioning inside
prison. Violence is virtually necessary to cope in an environment in which survival is often dependent on demonstrating to others who would rob, assault, or rape you that you are more dangerous than they are (Gilligan & Lee, 2004). One fear that most inmates face is aggressive sexual assault by other prisoners (Bosworth & Carrabine, 2003; Wooden & Parker, 1982). Consequently, most prisoners develop an emotional coping mechanism of apathy.

Unlike European countries where prisoners are allowed conjugal visits and home vacations, American prisoners are deprived of such opportunities for relaxation or intimacy. This may be related to the high rates of sexual assault within prisons. Beck and Hughes (2005) estimated that over the past 20 years, the total number of inmates who have been sexually assaulted likely exceeds one million. In 2003, President George W. Bush signed into law the Prison Rape Elimination Act (PREA), which requires correctional institutions to provide data on sexual assaults within their respective facilities, yet most victims prefer to conceal their victimization for fear of retaliation and further abuse.

In addition to emotional health, the physical health of many people in prison is also problematic when compared with the general population. Incarcerated populations are disproportionately affected by diseases such as tuberculosis (TB), hepatitis B and C, and HIV, which are commonly spread through sexual contact with other individuals, sharing needles, and eating with the same utensils (Hammett, Harmon, & Rhodes, 2002). According to the World Health Organization (2006), the rate of TB in incarcerated populations is reportedly up to 100 times greater than that of the general population. Salive, Vlahov, and Brewer (2003) found positive associations between HIV and TB in their sample of 698 male inmates in a Maryland correctional institution because TB spreads more rapidly to HIV-positive inmates. Not surprisingly, the prevalence of AIDS infection is approximately five times higher in state and federal prisons than among the general U.S. population (Dean, Lansky, & Fleming, 2002; Krebs & Simmons, 2002).

Life in American prisons debilitates and dehumanizes inmates (Bonta & Gendreau, 1990; Haney, 2001; Huey & McNulty, 2005). Rehabilitation efforts are limited and tough and aggressive stances toward inmates are seen as desirable (Cullen, Fisher, & Applegate, 2000). The general emerging picture indicates that the thousands of people who are released from prison daily in the United States are faced with the challenges of re-entry such as re-establishing contact and relationship with family, friends, and employers, finding stable housing, income, and possibly
fighting addictions or major health concerns. Given their stay in prison and any trauma that they experienced, and given the circumstances that preceded their incarceration, which most likely included being a racial minority, and having less education and fewer financial resources, their odds of successful reintegration into the community are daunting. Contact with relatives and friends may be tenuous, and many are sick, poor, and possibly drug dependent, not to mention the emotional scars they may be carrying with them.

**THE HARDSHIP OF RE-ENTRY AND ITS IMPACT ON COMMUNITY**

The massive burden of imprisonment and re-entry over the past two decades has significantly weakened the capacity of many communities, especially some of the most vulnerable, to carry out successful civic life. The key tasks of communities, such as providing a sense of security and pride, a healthy environment for families, jobs, and open exchanges and support, are hampered when large numbers of the population are recycling in and out of correctional facilities and carrying with them the lasting consequences of incarceration.

Given the expense of running prisons, as well as the high cost to human dignity and capability, it is in our national interest that ex-prisoners successfully reintegrate into the community and avoid recidivism. The transition from prison to the community can be tough and frustrating. One needs to unlearn the survival skills learned in prison, take responsibility for his or her criminal past, which often includes substance abuse, and make amends with close relatives who are hurt and distrustful. Comforts or escapes, through sex, alcohol, or drugs are available and tempting. Thus, the community offers disincentives for successful re-entry. Not surprisingly, about a third of incoming prisoners did nothing more than fail their parole conditions, given that half of all parolees fail to meet these conditions (Petersilia, 1999).

Nearly two-thirds (63%) of those released from state and federal prisons may be expected to be rearrested for a felony, a serious misdemeanor, or a technical parole violation within three years of their release. About half (47%) are reconvicted and about two-fifths (41%) return to prison. Unpacking these statistics shows that younger ex-prisoners with more extensive criminal careers are more likely to become recidivists (Travis & Visher, 2005). Consequently, unsuccessful re-entry must be
viewed not only as an issue for law enforcement—when the individual becomes involved in new criminal activity, new victimization, or missed parole visits—but unsuccessful re-entry should also be viewed as a major social and communal burden that requires the professional attention and skills of the social work profession. This is especially important given the geographic concentration of arrests and re-entries in a few city neighborhoods, which creates neighborhood-level effects for the extent of incarceration and has implications for re-entry (Clear, Rose, & Ryder, 2001).

Typical prisoners leave prison with less than $100, the clothes in which they were arrested, a small package of personal belongings, and a bus ticket to the original place of arrest. When they reach their destination, many must report to a parole officer, register with the sheriff, report to welfare agencies, register for work, and meet other similar requirements. Most have lost their social security cards and their driver’s licenses are no longer valid. Replacing documents and establishing residences involves bureaucratic red tape as well as payments and transportation that are often beyond the means of the ex-prisoners. Ex-prisoners are often unskilled in asking for help in public offices, and they are often denied assistance even when entitled to it.

When searching for housing and jobs, ex-prisoners are rarely welcomed (Pager, 2003). The stigma they carry is permanent and must be made public on applications. Many people and organizations shy away from individuals with a criminal history because it suggests that the person is untrustworthy or unreliable (Ramon & Travis, 2004; Solomon, Johnson, Travis, & McBride, 2004). A common viewpoint is that ex-prisoners cannot change and will revert to a life of crime, and for the individual ex-prisoner, these attitudes spell double jeopardy. Consequently, few community programs, employers, or landlords will assist them. In response, ex-prisoners may resort to the skills they developed in conning those around them to survive.

For a large percentage of prisoners, life before imprisonment involved drug use and a lifestyle of instant gratification: Approximately six out of ten prisoners report using drugs at least once in the month prior to arrest (Ditton, 1999). Upon release, drugs are easily accessible while detox and rehabilitation programs are not (Petersilia, 2003). Most ex-prisoners are ineligible for substance abuse programs. The people with whom the ex-prisoner uses drugs often support crime as a way of life because crime is often the quickest route to cash. Finding a social support system that is crime-resistant and enabling is a major challenge for most ex-prisoners.
Some ex-prisoners wish to enter drug-treatment programs but they must obtain Medicaid to be eligible, which means completing the application process and waiting for approval. Others leave prison with health problems and find that once released they are ineligible for health care or must wait a long time to be approved for Medicaid (Morrissey et al., 2006). Furthermore, even if Medicaid is approved, myriad cultural and organizational disconnects between correctional, behavioral health, and social service systems may serve to further isolate ex-prisoners with multiple problems (Wilson & Draine, 2006).

Prison provided an environment with a bed and food—necessities that ex-prisoners are very suddenly without. Many states bar ex-prisoners from applying for housing assistance, or impose several years’ waiting time before being eligible to apply. In many cases the alternative is life on the street or in a shelter, especially in cities where the housing market is tight and the cost of housing is high (Petersilia, 2003). Data from Los Angeles and San Francisco suggest that daily, 30 to 50 percent of all people under parole supervision are homeless (Travis, Solomon, & Waul, 2001). Metraux and Culhane (2004) found that at least 11 percent of people released from New York State prisons to New York City from 1995 to 1998 entered a homeless shelter within two years—more than half of these in the first month after release. Most landlords are prohibited from renting to ex-prisoners who were convicted on drug or violent charges. Many more employers and landlords personally elect not to deal with this population and reject ex-prisoners’ applications upon discovering a criminal history (Bushway, 2000).

Twelve states have implemented legal barriers to full citizenship for ex-prisoners. In Florida, Kentucky, and Virginia, ex-felons permanently lose their right to vote. Nine other states have such restrictions in place for two or more years. Most states temporarily prohibit prisoners and parolees from voting (Uggen, Manza, & Thompson, 2006). These prohibitions infringe on ex-prisoners’ civil rights and send the message that they are outside the realm of citizenry. Many states permanently prohibit ex-offenders from election to any public office.

Even more punitive, most states impose restrictions and prohibit the hiring of ex-prisoners in fields such as law, education, real estate, nursing, and medicine. Six states permanently bar ex-prisoners from holding any public employment. Studies show that time spent in prison lowers the individual’s earning capacity (Kling, 1999). Jobs that prisoners fulfilled during incarceration are mostly unsuitable for the market demand. Prisoners can only find low-paid, unskilled jobs if they can find any job at all.
As such, the chances of an ex-prisoner obtaining a job that will enable him or her to live with dignity are quite slim. These conditions tend to isolate ex-prisoners from vocation-based earnings and support the temptation for illegal cash-earning activities.

As suggested earlier, the level of separation from family and friends during incarceration poses a major barrier to ex-prisoners as they go back to the community. Often, by the time prisoners near release, they have become strangers in their own neighborhood. Indeed, many find they have been replaced by newer boyfriends or girlfriends. In many cases, families and children have formed strong relationships to new individuals who may function as de facto parents (Beatty, 1997). Children may be quite attached to the de facto parent and consider him or her to be their “real parent.” Those who wish to restore family ties find it disappointing that their children have grown and many decisions were made without their parental involvement.

Female prisoners are of special concern because 65 percent have a child under age 18. More than 1.3 million children in the United States have a mother who is incarcerated or under parole supervision. Men in prison and prior to incarceration often do not have close contact with their children; women generally keep in touch and desire to be a regular part of their children’s lives (Greenfield & Snell, 1999). In addition to the challenge of staying connected with children during imprisonment and reconnecting with them after prison, a huge difficulty is the care of children who do not have other caretakers when a mother is sentenced. Often children are declared eligible for adoption when a mother is sentenced, especially if the child is young, and no father or grandparent steps in to claim guardianship. Given the growing rate of incarceration for females with dependent children, this is a grave issue for the social work profession and society.

Ex-prisoners are not the only victims of unsuccessful re-entry: children suffer when their released parent cannot reintegrate into the family and community. From the perspective of a child, this adult has routinely broken laws and disappeared from his or her life (Gabel, 1992). Nearly one and a half million children under the age of 18 have a parent incarcerated in a state or federal prison (Gabel & Johnston, 1995). Many children experience a parent’s incarceration in a local jail for a short time. Children’s psychological well-being is jeopardized both when a parent is incarcerated and when the parent returns.

Young men of minority ethnic groups go in and out of prisons disproportionately. Their communities suffer as well. The communities in
which these young men and women live lose an important segment of their members to jail and prison (Mauer & Chesney-Lind, 2002). Consequently, marital and family lives are significantly interrupted. Young women may choose not to marry someone who is unlikely to be around or who cannot provide a living wage to the family. The safety that was supposed to be gained by sending active and potential criminals to prison is compromised in neighborhoods where disproportionate numbers of friends, relatives, husbands, brothers, and fathers are incarcerated or are ex-prisoners. Despite the known social and financial benefits of traditional marriage for children and spouses, the punitive effects of long sentences and incarceration make long-term consensual, legal, and binding relationships unattractive to potential female spouses. In contrast, being a single working parent and/or using subsidized care and benefits for children are financially more rewarding.

As noted, incarcerations and re-entry are not evenly distributed among communities. Certain states, such as California and Texas, absorb a high proportion of people exiting prison. Similarly, in cities, certain neighborhoods experience a far greater proportion of people who are arrested, imprisoned, and return. Often, such neighborhoods have similar compositions of ethnic minorities, who earn low incomes and lack political clout. Compounding the problem, these neighborhoods often lack the formal and economic infrastructure, employment opportunities, and political organization to facilitate services needed if returning ex-prisoners are to successfully reintegrate (Clear, Rose, & Ryder, 2001).

On the positive side, many individuals who are released under parole have help in their transition from prison to community under a designated parole officer. However, as the number of people released from prison increases, the budget for probation and parole officers has decreased. The ratio of parolees to parole officers has therefore increased dramatically. Today, parole officers carry high caseloads, diminishing their ability to attend to the needs of these individuals (Massachusetts Public Health Association, 2003).

People who complete their full sentence and are not paroled are released without any formal supervision. More than half of those released from maximum and medium security prisons are released directly to the community without any contact or supervision (Pihel, 2002). Without formal supervision, these individuals may seem to be “free” and unbounded, but are often ill-prepared to live in the community and are unaware of their eligibility for a variety of services.
HOW TO HELP IN RE-ENTRY:  
THE CHALLENGES AHEAD

Dealing with ex-prisoners and making the process of re-entry more successful is one of American society’s greatest challenges for the twenty-first century. It is in the best interest of our society to reduce crime in the community and to lower the rates of incarceration. However, how to achieve these goals is complex and costly. In this section, we limit the discussion to what social work can do to make this issue a national priority and what it can do to assist.

In the 1970s, at the leading edge of the current incarceration binge, the profession of social work abdicated its historical role as an agent for rehabilitation and reintegration of people leaving jails and prisons. Social workers have since allowed professional criminal justice workers to capture this role, and to refocus this work toward the safety and security of society and away from the traditional values of the social work profession in empowering individuals and building community capacity (Gumz, 2004). The first task is to reclaim work with prisoners—not just those re-entering the community, but all prisoners—as a focus of social work practice. If social work focuses on ex-prisoners and re-entry, social workers should ensure that they do not also normalize “re-entry” as a service model decontextualized from the policy issue of removal and mass incarceration (Clear, Rose & Ryder, 2001).

Ex-prisoners are most likely to have adjustment problems and commit new offenses in the first six months after release (Nelson, Deess, & Allen, 1999). New crimes committed by ex-prisoners place greater burdens on parole and police officers and can be devastating to family members and individuals in the community. In addition, the continued cost of housing new and returning prisoners is high and rising. Compared to these costs, the effort put into preventing recidivism, particularly during the critical first six months, is worthwhile for ethical and financial reasons. The new social frontier of reintegration will challenge American society to constrain public and private funds to deal with this epidemic (Petersilia, 2001). Social work needs to be ready with trained professionals and intervention programs to serve the ex-prisoners and the communities to which they return (Petersilia, 1999).

Although public sentiment indicates that prisons should focus on punishing rather than educating, treating, rehabilitating or transforming the people we call criminals, it will benefit society if prisoners are prepared for making the transition to the community. Reintegrating requires
a psychological shift as well as the acquisition of new skills. Most prisons offer few rehabilitation programs and the available programs are ineffective, oversubscribed and are not integrated with the outside world. However, pre-release interventions may facilitate more successful reintegration. A few studies have indicated a positive prognosis for ex-prisoners when they participated in pre-release programs. Wexler, DeLeon, Thomas, Kressel, & Peters (1999) highlighted the improved chances of remaining drug free with ex-prisoners who completed both in-prison and post-prison drug-rehabilitation programs.

Here we focus on two prevalent issues that ex-prisoners face in reintegration, namely, housing and adjustment. Not all types of housing are appropriate for all ex-prisoners in the stage immediately after release. The switch from a fully structured and drug-limited prison environment, to one with little or no structure, combined with the availability of drugs, and the stresses of becoming self-sufficient and getting reacquainted with family and friends is often too difficult for ex-prisoners to successfully navigate.

A living environment that promotes support in relationships, finding employment, and managing finances, along with gradual independence, helps a great many ex-prisoners adjust to society (Taxman, 2005). Many ex-prisoners have routinely experienced hurt, betrayal, and loss in their past. Until deep-seated emotions of betrayal and anger are addressed, many ex-prisoners cannot sustain healthy relationships with loved ones (Travis, Solomon, & Waul, 2001). No matter how toughened ex-prisoners are, in their most intimate self, they each need love, appreciation, and healthy companionship to heal the pain or betrayal that they have experienced.

These two examples suggest how, along with an appropriate counseling and drug-free environment, case management that is tailored to meet the needs of ex-prisoners can promote successful reintegration and self-sufficiency. Every ex-prisoner demands many hours of care and presents unique problems possibly including housing, drug rehabilitation, employment, reconnecting with children, parents and/or spouse, help in acquiring documents, on-going legal obligations, transportation, and medical services. Such intensive care is possible only when a caseworker deals with a small number of ex-prisoners.

As evidenced in drug rehabilitation, successful programs for female ex-prisoners look different from successful programs for male ex-prisoners (Hser, Huang, & Teruya, 2004). In interviews with re-entry providers who served males, they distrusted men who were released from prison to act appropriately around women and often banned contact with women in
the early stages of release and reintegration (Cnaan & Sinha, 2003). In some cases, even spouses and fiancées were included in this restriction until the men could demonstrate healthy emotional choices. Even programs that allowed contact between male ex-prisoners and women did not allow co-ed programs and viewed co-ed contact as a potential recipe for failure to successful reintegration. For women ex-prisoners, the ability to have contact or cohabitation with dependent children is a significant and immediate concern.

Another obstacle for successful re-entry is the lack of coordination regarding services for ex-prisoners. Despite the variety and availability of services, including drug rehabilitation, shelter, GED training, computer skills, and vocational skills programs, connecting with these services, or having them ill suited for the ex-prison population is problematic. Without well-advertised and relevant services, programs were either forced to provide their own services, spend a lot of time finding relevant services, or risk losing ex-prisoners to other lifestyles because they could not get the necessary supportive services. Social work professionals have a vast experience and expertise that can be harnessed to assist ex-prisoners, their families and their communities, to better coordinate the network of available services as well as assess any needed services to be developed.

**CONCLUSION**

As we have presented, ex-prisoners today have been incarcerated for longer periods, possess less education and fewer job skills, and are often plagued by physical and mental health problems, and/or drug addiction. They are often members of ethnic minorities and come from poor families that find it hard to support them or keep in touch with them. Longer prison terms also imply living under psychological duress and having to develop emotional coping mechanisms that affect their ability to sustain healthy relationships or employment when they are released.

Despite the clear long-term benefits of supporting reintegration, the public system that is expected to help ex-prisoners is overburdened, and society at large is suspicious of them and makes it known they are not welcome in jobs and communities. As in the past, the social work profession should defend, support, and facilitate the fuller participation of the most marginalized populations in society. In this era, the social work profession must embrace the growing population of ex-prisoners by advocating on their behalf, educating society of their unique needs and
challenges, and developing appropriately coordinated, relevant, and accessible programs to assist their successful reintegration into families, communities, sustainable living-wage employment, and civic duties.

REFERENCES


