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EXECUTIVE SUMMARY

MAY 1995

Evaluation of the Illinois Department of Corrections PreStart Program

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ACQUISITIONS

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With PreStart, Illinois introduced a bifurcated system into its mandatory supervised release program for people recently released from prison. A departure from traditional parole, PreStart de-emphasized the surveillance and supervision functions of parole for most offenders and instead emphasized referrals to social services that might help releasees integrate into society and avoid recidivism. The traditional surveillance and supervision functions of parole are now reserved for prison releasees thought to pose special threats to public safety.

PreStart contains two distinct phases, pre-release education and post-release assistance, and essentially works in the following manner: After having gone through 30 hours of mandatory, specialized classwork inside prison to prepare them for release (termed Phase I programming), most releasees are able to voluntarily use community resources brokered through a system of newly-created community service centers operated by the Department of Corrections. The centers are intended to help releasees get jobs, housing and treatment assistance.

For specific groups of releasees, IDOC planned the following inmate services: (a) four community drug intervention programs, which were to provide services and drug testing for releasees clearly exhibiting substance abuse problems; (b) contracted services for selected sex offenders; and (c) development of a Special Intensive Supervision Unit for certain releasees thought to be especially dangerous, as well as those released from shock incarceration facilities (boot camps).

These program components were to serve as models to be expanded if proven successful. The total

INTRODUCTION

The Center for the Study of Crime, Delinquency and Corrections at Southern Illinois University at Carbondale recently completed an examination of the implementation and impact of Illinois' PreStart program. PreStart represents a major transformation in the philosophy, structure and practice by which inmates in Illinois are allowed to conditionally re-enter the community after their terms of imprisonment have been served.

PreStart is a fundamental reshaping of the parole system in Illinois that aims to prepare inmates for life after prison and then help them adjust to the community after release. Funded by the Illinois Criminal Justice Information Authority, PreStart was introduced on a wide scale throughout the state prison system by the Illinois Department of Corrections (IDOC) in summer 1991.



package of services and programs available for releasees in the community is termed Phase II programming.

METHODOLOGY

The findings of this study are based on the following sources of information:

- PreStart written documentation, such as the IDOC's internal reports and memorandums on the program;
- In-person interviews with administrators of the IDOC, facility administrators, program coordinators and instructors, external service providers, Phase II community service officers, community drug unit agents and Special Intensive Supervision Unit staff;
- Questionnaires sent to all PreStart staff in 1992;
- Questionnaires administered to selected inmates who had completed, or were about to complete, Phase I, in 1992 and 1993;
- Follow-up interviews with released offenders between May and September 1993, conducted by telephone (or, if necessary, by mail);
- Site observations by evaluation staff in 1992 of 14 correctional facilities, with a second round of visits in summer 1993;
- Site observations of seven community service centers during 1993;
- Recidivism data provided by the Illinois State Police and IDOC on a representative sample of inmates released from 14 correctional facilities in 1992 and a sample of inmates released from those same facilities in 1990, before PreStart was implemented.

MAJOR FINDINGS

This evaluation indicates that the Department of Corrections has done a very commendable job in developing an innovative inmate reintegration program under difficult circumstances. The IDOC had to work with inadequately allocated resources and an organizational structure and culture not previously oriented toward improving behavior among inmates. Although PreStart has not quite lived up to its potential, especially in terms of delivering assistance and services to prison releasees who need and seek such help, IDOC has put together a package of correctional services that moves towards fulfilling the promises embodied in the original PreStart philosophy.

Many specific findings of this evaluation are positive, including:

- Despite the troubled environment surrounding PreStart's beginning and its development, IDOC's leadership tended to be very supportive of PreStart. This resulted in many bona fide Phase I programs being observed during evaluation team visits to correctional institutions in both 1992 and 1993. These programs were providing inmates with valuable infor-

mation and skills that should ease their transition into the community;

- Inmates in PreStart programs generally reported positive feelings toward PreStart's pre-release programs and said they had helped them. Most felt PreStart was more useful than previous forms of pre-release instruction, and the great majority rated PreStart's quality between "adequate" and "outstanding." With few exceptions, inmates said they believed PreStart would give them skills and knowledge to help prepare them for life on the outside;
- Most institutional IDOC staff also expressed positive feelings about PreStart, although they acknowledged the many implementation problems in getting Phase I programming off the ground. Institutional staff displayed more positive attitudes after PreStart's introduction than community correctional (post-release) agents. Most IDOC staff in both settings showed a commitment to the reform despite scarce resources and other obstacles;
- By 1993, some prisons and community correctional centers were beginning to tailor Phase I towards the special inmate populations that were being served and were trying to develop stronger linkages between Phase I and Phase II programming;
- Most releasees expressed their support for community service centers and PreStart agents, indicating that they found the centers to be helpful after their release. They generally said their experience with the centers was good and that they had received service referrals from PreStart agents;
- PreStart drug programs for releasees, such as the Springfield Community Drug Intervention Program, were generally seen as helpful by clients. Clients said they used controlled substances less frequently since being admitted to the program. Notably, the CDIP in Springfield was able to forge close ties with local drug treatment providers;
- After a year in society, releasees who had undergone PreStart programming in prison and afterwards showed much lower return-to-prison rates than earlier groups of prisoners who had not been involved with PreStart. This appears to be most clearly true in the case of offenders who did not have high rates of arrest before their last incarceration (that is, five or more prior arrests). Not only was reincarceration markedly lower for alumni of PreStart, but inmates who did not go through PreStart returned to prison more quickly than those who had gone through PreStart;
- PreStart releasees returned to prison at a rate of about 11.7 percent during the first year in the community, compared to 32.3 percent for inmates released in 1990, before PreStart began. (Recidivism was especially low among inmates who had been placed under special post-prison care or supervision such as electronic detention or intensive supervision as part of the

community based drug intervention program — as low as 5 percent);

- Rearrest rates within one year of release were somewhat lower for inmates released under the PreStart program (40 percent) than for inmates released prior to the implementation of PreStart (47.8 percent). Inmates released under PreStart and under some form of community supervision exhibited the lowest rearrest rates of all groups examined (for example, those on special intensive supervision had a 31.8 percent rearrest rate); and

- Statistical attempts to model the impact of PreStart on IDOC prison populations, while not conclusive, suggest that the lower reincarceration rates for PreStart offenders — apparently the result of lower rates of technical violations resulting in re-imprisonment — have resulted in lowering the prison population growth rate.

In these and several other respects, we found PreStart to be accomplishing its mission well. In some ways, however, PreStart appears not to have achieved its potential:

- PreStart's success was hindered initially because during its early implementation period, many of the factors that usually help innovative programs succeed — such as a supportive political and social environment, adequate program resources, and a sense of staff "ownership" of the program — were lacking. For example, PreStart may have been encumbered in the field by strong negative feelings among some parole agents who experienced great professional and personal dislocations in the process of becoming Phase II PreStart agents;

- Phase I success varied from institution to institution, depending mainly on administrative leadership, staff commitment and the level of communication within particular facilities. Staff surveys showed a majority of PreStart staff felt burdened by the extra duty of delivering Phase I programming, and this sometimes resulted in poor levels of staff commitment towards PreStart. In some situations, where weak staff commitment was not offset by strong administrative leadership and well-developed communication patterns, Phase I programming was quite weak;

- Though staff respondents expressed many positive attitudes regarding their jobs, most said that they felt little control over PreStart's implementation. As described above, community IDOC staff (former parole agents) in particular experienced a marked decrease in job satisfaction, apparently because of significant personal and professional changes imposed on them by budget cuts and the introduction of PreStart;

- The IDOC's central office did not adequately exchange information on PreStart with its facilities, especially during the second year of PreStart's implementation. It also did not sufficiently use mechanisms

already in place to measure and enhance those programs' effectiveness — although at this writing performance by the central office had shown improvement in this regard;

- Because Phase II programming was rooted more in pragmatism than in a clear correctional philosophy, Phase II programming has become inconsistent in practice.

For instance, PreStart was based on a new assistance model, yet shortly after its implementation it was accompanied by the mandate that releasees report in regularly, whether they wanted assistance or not (like the old-style parole). This overburdened staff, added to their pressures and has made it quite difficult for PreStart agents to serve as referral agents to community-based services. In some community service centers, agents have adhered to an assistance model while in others they perform functions in a manner akin to what they were doing before PreStart started;

- While the implementation of PreStart may have been associated with reduced recidivism rates for most offenders, this was not true for high rate offenders. High rate offenders (those with five or more prior arrests) released under the PreStart structure witnessed a higher rearrest rate after one year in the community than similar offenders released from prison before PreStart was implemented.

This troubling finding may be associated with how the Special Intensive Supervision Unit is operating and the types of individuals placed in this program. While designed for the special and intensive community supervision of "dangerous offenders," many offenders placed in this program are not chronic or repetitive offenders, and the supervision most offenders receive while in this program is neither special nor intensive.

In the following pages a more detailed summary of evaluative findings is provided. In addition, some conclusions and recommendations are presented at the end of this executive summary.

THE ORIGINS OF PRESTART

PreStart was a response to the upward spiraling of costs associated with traditional parole supervision in Illinois and the unwillingness of the state to fund those costs. As the number of releasees subject to mandatory supervised release rose dramatically in the 1980s, the number of parole agents declined. Caseloads in the early 1990s remained extremely heavy, and it was becoming apparent that the provision of traditional parole supervision and services could not be accomplished with current funding levels.

This trend was accompanied by a growing sentiment in the correctional community nationwide that traditional models of parole may not be effective in reducing offender recidivism rates. PreStart was seen as a way of adapting to the state's monetary problems by streamlining the parole system, redirecting its energy

toward assisting inmates rather than merely maintaining surveillance on them, and using available federal dollars in an innovative yet pragmatic manner. In short, PreStart was a means of addressing various problems at once — reducing the number of lay offs of parole agents, preventing negative public reaction to a restructuring of parole, and providing services for releasees, with supervision for some, within the community.

The timing of the restructuring of parole in terms of planning, staff morale and available resources was unfortunate and necessitated an abrupt and abbreviated planning process for PreStart. The entire planning and initial implementation process lasted only a few months. Coinciding with the beginning of a new fiscal year and parole layoffs, parole staff morale worsened during the transition to PreStart. Money was the underlying problem. Even with federal funding available to subsidize Phase II (post-release) programming, having to stay within the IDOC's budgetary constraints limited the amount of staff and equipment available and prevented the establishment of a desired link between Phase I and Phase II programming. Programs that had not been clearly defined were to be implemented by untrained and skeptical staff.

PROGRAM IMPLEMENTATION ENVIRONMENT

In one respect, PreStart's early environment helped it to develop. Little public or media attention was paid to the new program, so it did not suffer from outside criticism or pressure. But in other respects, PreStart lacked the ideal environment in which a newborn program could grow strong. These ideal circumstances would have included ample resources, enthusiasm among staff, strong interagency communication, and an organization suited for rapid change.

The only new funds for this promising program came from federal money that would not even balance the loss of state revenue dollars previously appropriated for parole functions. Because of budget cuts there were significantly fewer parole agents after PreStart's implementation than before. Funding was insufficient both for the establishment of Phase I programming within correctional institutions and for delivery of Phase II services to parolees — although both phases were put in place nonetheless. In addition, the key source of program success — the staff who would implement PreStart — exhibited fairly ambivalent feelings about the program. While most staff in our 1992 survey expressed positive attitudes regarding their current work situations, job efficacy and job satisfaction, most respondents — particularly those not in administration — said that they felt little ownership of PreStart's implementation. Those most likely to express negative attitudes were former parole agents (now PreStart agents), some of whom experienced a tremendous decrease in job satisfaction once PreStart was implemented. Moreover, most staff said that they had not been trained to perform their PreStart duties.

Despite the many barriers to success, high-level IDOC administrators worked diligently in the spirit of reform and adapted their strategies so that they could at least implement the essential elements of the program.

PHASE I PROGRAMMING

Despite the troubled environment surrounding PreStart's beginning and its development, many bona fide Phase I programs were observed in visits to institutions in 1992. There was, however, considerable variation in the degree to which Phase I programs were successfully implemented across facilities. At the time of our initial visits, three key factors influenced the success of Phase I implementation: (1) administrative leadership; (2) staff commitment; and (3) strength of internal communication patterns.

Between the 1992 and 1993 site visits, programs at some institutions improved considerably, while at other institutions, programs stayed the same or declined. Phase I programs were still evolving. Programs were either being improved through innovative problem-solving techniques, or merely surviving amid resource limitations and poor staff morale at particular institutions. Others fell into decline with little attention paid to the diagnosis and resolution of problems. An encouraging sign generally was that institutional staff tended to be less resistant than when the program was being implemented originally. Facilities were also adapting Phase I (at least to some degree) toward special populations. Moreover, while a general lack of knowledge about Phase II programming still existed, facilities were trying to develop stronger understandings of and relationships with Phase II program efforts.

At the same time, however, central administration appeared to be putting less priority on PreStart at many institutions, creating a perception among institutional staff members that the central office was losing interest in PreStart. Between the two sets of visits, central office involvement in the monitoring and guidance of Phase I programming at facilities had decreased, statewide PreStart coordinator meetings had ended and curriculum revisions had slowed. Although central office staff should be credited with actively communicating the continued priority of Phase I PreStart programming to higher-level IDOC staff, it was not always communicated to lower-level line staff, and this resulted in some morale problems.

The IDOC central office came to have minimal involvement with the institutions, turning more of its attention to Phase II (post-release) programs and leaving individual correctional facilities to face the demands of operating their Phase I programs. There has been a partial turnabout in this, however: More recently, the central office has been guiding and nurturing Phase I programs more attentively than when our preliminary evaluation was released in summer 1994.

INMATE REACTION TO PHASE I PROGRAMMING

The vast majority of PreStart inmates held positive attitudes toward Phase I programming. General attitudes and perceptions between 1992 and 1993 were stable. (A few exceptions at the facility level were noticeable, however, indicating that some programs may have improved while some programs may have regressed.) The inmate survey data also indicated that most inmates gave similar reactions to PreStart, whether older or younger, white or black, male or female. What appeared to affect attitudes most dramatically was the particular institution in which inmates were surveyed, with inmates at some sites much more positive toward the programs than at others. Differences in inmate attitudes towards PreStart across facilities tended to reflect the quality of Phase I programming at those facilities. But speaking generally, most inmates said that PreStart was offering them something that would be helpful for their release.

PHASE II

Phase II was made possible because external federal funds were available and grew out of a pragmatic belief that something must be done with inmates recently released from prison. While appearing consistent with an assistance or advocacy model of parole supervision, and reflecting a marked departure from prior policies and practices in Illinois, it grew more out of a desire to spend the available money effectively rather than out of a marked change in parole philosophy among IDOC officials.

In other words, this phase was based on a voluntary model of assistance not because it was perceived as the preferred model or because it was viewed as the most desirable way to cure the weaknesses of the existing parole structure. Instead, it was endorsed because it could be practically achieved with available resources. Thus, programs were driven by resources, and unfortunately, this lack of a coherent and clear philosophical basis for Phase II programming has had significant implications for PreStart Phase II programming to the current day.

Several related issues also prevented the program from reaching its potential. Funding was chief among these. It is questionable whether a meaningful service delivery program could be expected with the existing allocation of resources; in fiscal year 1994, for instance, an average of 38 cents per released inmate per day was spent on PreStart. Importantly, the original basis of Phase II programming — voluntary use of community service centers by releasees in an assistance model of parole — was undermined by the introduction of a reporting requirement that required releasees to check in with PreStart agents by telephone or mail once a month in the first six months after release. A reporting requirement appeared to serve no useful purpose for releasees but did much to lower staff morale because it caused parole agents to be overworked and overwhelmed.

Lack of staff training, minimal supervision of agents, and a lack of clearly defined and articulated policy and standards aggravated the situation. Further, differing workload constraints across service centers and varying new roles for parole agents in the wake of PreStart's implementation resulted in releasees having different experiences with Phase II programs across the state and even within the same service center.

Releasees had their own pressures, even with Phase I educational preparation and the assistance of Phase II programming. Inmate survey data showed many did not make easy transitions to society. Inmates recently released from prison appeared, as a group, to have difficulties adjusting. A large percentage of releasees were unemployed or were working at very low-paying jobs. Of course, this is most likely true for most recent releasees — with or without PreStart training and assistance.

Almost one-third of releasees reported both being rearrested and having used illegal drugs since their release from prison. (On average, survey respondents had been on the streets for 10.6 months.) Still, it appeared as though the existence of PreStart Phase II programs offered assistance, such as referrals to social service agencies and job counseling, that were valued by releasees. A clear majority of releasees surveyed responded favorably to community service centers and PreStart agents, indicating that they found community service centers to be helpful.

SPECIAL INTENSIVE SUPERVISION UNIT AND OTHER SPECIAL PROGRAMS

Under the original PreStart design, the Special Intensive Supervision Unit (SISU) was to serve releasees predicted to be of high risk to public safety. A weakness of PreStart Phase II has been the process by which high-risk offenders are identified and assigned to SISU. IDOC does not use an objective classification system to identify such releasees. The vast majority of individuals are assigned based on legal criteria and not behaviorally-based risk factors, and relatively few releasees who are actually at high risk to recidivate find themselves on SISU. Further, once placed on SISU, most releasees are not closely supervised (defined as a minimum of one agent contact per month).

Additionally, PreStart's sex offender treatment programs were developed slowly and unevenly. The plan to develop the programs was dated August 1992, but the first contract with a treatment provider (in Madison County) did not begin until January 1993. Sex offender programs remained limited at this writing; these programs were coming on line in accordance with program models that had been developed much earlier.

Also requiring more time than anticipated was the launch of four planned community drug intervention

programs (CDIPs), which were to offer treatment and drug testing for releasees with clear drug dependence. Four drug units were in existence at this writing, all with contracted treatment providers to serve program clients, but the process of establishing these services took longer than first thought. The reasons for the slowness included a lack of an IDOC administrator to focus full attention on contracts with vendors, a scarcity of proposals submitted by vendors, and difficult contract negotiations once proposals were received.

The first CDIP to operate as part of PreStart, which already had been in existence as a federal pilot program, was located in Springfield and has been well-received by its PreStart clients. With strong connections to local treatment providers, it provides high levels of supervision and treatment, and most clients said they felt it had helped them. Clients reported using controlled substances less frequently and that their drug problems had become less serious since their involvement in the program.

Yet even at this location many clients did not view themselves as needing substance abuse treatment, and many were unsure as to why they were in the program. Additionally, many were unsure about what was required to successfully complete the program and how long it might take. Many of the CDIP's clientele did not adapt well to the program components; in fact, about two-thirds of the clients failed to successfully complete the program (29 percent returned to prison, while 31 percent were discharged from the drug program unsuccessfully). According to program records, many of these attended relatively few group sessions at the CDIP and apparently took drugs and drank alcohol more often than successful graduates.

The average length of time spent in CDIP for the October 1992 PreStart population was 11.5 months (while the longest time spent in the program was nearly 26.5 months). Many clients withdrew from the program's services after they had been in it for about six months.

On the other hand, a number of clients who were not participating fully in the program continued to occupy program spots long after they needed to, tying up scarce resources.

ALLIED AGENCIES AND PRESTART

The success of PreStart depends not only on how the IDOC staff, inmates and releasees respond to the program but also on how outside stakeholders and allied agencies view this innovative approach to offender reintegration.

For PreStart to succeed, its Phase II agents need to be closely associated with community services available locally, and they must maintain good relations with local law enforcement and court personnel. Moreover, representatives of these agencies must be supportive of PreStart programming.

In 1992 and 1994 surveys (a mailed version in 1992 and a telephone survey in 1994) of key representatives from law enforcement, prosecutorial, judicial, and social service agencies, it was shown that most allied agency staff were largely uninformed about PreStart. The lack of knowledge and low level of communication between these agency representatives and the IDOC community services staff raises serious concern about the functioning of Phase II programming.

In short, some social service agencies came to suspect that Phase II programs were failing to provide releasees the required services, and some criminal justice agencies developed suspicions that PreStart was not providing releasees the supervision and accountability necessary to maintain public safety.

Nonetheless, many social service agencies strongly seemed to want more information from parole staff about what PreStart entailed and expressed a willingness to receive referrals from PreStart community service centers. Both the social service agencies and criminal justice agencies emphasized a need for ongoing communication and often offered suggestions on how Phase II could be made a more extensive network joining releasees to services.

PRESTART'S IMPACT ON PRISON POPULATIONS

PreStart formally abandoned the supervision function of parole for the vast bulk of releasees. Though some supervision of these releasees continues to take place informally, it was expected that PreStart would lead to a dramatic decline in the issuance and execution of warrants for parole rules violations (as opposed for the commission of new crimes). Time series analyses did indicate that the issuance and execution of warrants decreased dramatically after PreStart's implementation, and has remained low since. Analyses of the IDOC admissions data also indicate a marked decrease in the prison admission of community supervision violators when PreStart was implemented.

While statistical analyses did not show PreStart was a clear cause of reduced prison admissions based on technical violations, after July 1991 violation-based prison admissions plummeted and have remained low. Changes in admission rates for new felony convictions did not appear to be associated with the PreStart reforms. This decrease in prison admissions based on technical violations was overshadowed, however, by the general increase in admissions that has been taking place since well before PreStart's implementation and which continues to the current day. Because of this, statistical tests could not show conclusively whether and to what extent PreStart has slowed the rate of prison population growth.

THE IMPACT OF PRESTART ON RECIDIVISM

Perhaps the ultimate test of PreStart is the impact of the program on offender recidivism. In this regard, analyses of recidivism rates of inmates who experi-

enced both Phase I and Phase II of PreStart compared to recidivism rates of inmates who had not experienced Phase I and who had been supervised under Illinois' earlier mandatory supervised release structure revealed that PreStart did not undermine public safety.

Our findings in this regard must be viewed tentatively because a number of problems were encountered during the recidivism data coding and analyses stages of this project. They were primarily due to problems inherent in the criminal justice record-keeping practices in the state, such as missing and contradictory information contained in police and IDOC data files. These problems, coupled with weaknesses inherent in a nonexperimental study, have made it difficult to make unambiguous conclusions about PreStart's effect on offender recidivism.

With that caveat in mind, some findings with regard to rearrest rates were nonetheless evident. A random sample of inmates released in 1990, before PreStart was implemented, from the same 14 institutions that served as sites for this evaluation, had a slightly higher rearrest rate (47.8 percent) than those inmates released from these same facilities while PreStart was in effect (40 percent). Inmates released in 1990 also exhibited a much faster pace of recidivism than releasees who had undergone PreStart programming, tending to fail more often shortly after their release from prison. One-year reincarceration figures revealed that members of the before-PreStart sample were also much more likely to be reincarcerated within a year of release than members of any sample released while PreStart was in operation.

Moreover, the differences in reincarceration rates were dramatic, with almost one-third (32.3 percent) of the inmates released in 1990 being reincarcerated within a year. In contrast, other samples, all of which represent releasees under some Phase II component of PreStart, exhibit one-year reincarceration rates that varied from 5 percent (boot camp sample) to 13 percent (CDIP sample). The PreStart sample that had no supervision requirements witnessed reincarceration rates within a year of release that were only about a third (11.7 percent) of that for the before-PreStart sample. Reincarceration rates within 1.5 years of release indicate that the PreStart releasees continued to show a much lower reincarceration rate than the before-PreStart sample (18.7 percent for PreStart releases versus 38.8 percent for before-PreStart releasees).

Two special subgroups of PreStart clients displayed especially low recidivism. All were contemporary releasees placed into a special program of aftercare services or supervision — that is, boot campers on electronic detention and releasees placed on special intensive supervision. Those in regular PreStart programming had a slightly higher one-year reincarceration rate than those releasees supervised more intensively in special programs (SISU, 6 percent; boot

campers, 5 percent). The CDIP sample had a reincarceration rate (13 percent) quite comparable to members of their comparison group of drug users in Macon County.

One should question the efficacy of PreStart, however, for high-rate offender groups (those releasees with five or more prior arrests). PreStart may have been associated with reduced rearrest and reincarceration rates for most offenders, but it is doubtful based on our analysis that high rate offenders benefited in the same way. That is, high rate offenders released under PreStart actually exhibited slightly higher rearrest rates than high rate offenders released before PreStart was implemented.

Moreover, because the 1990 inmate sample contained a disproportionate number of high rate offenders compared to the PreStart sample, the discovered differences in rearrest rates across the samples may not be due to PreStart but to the types of individuals released in 1990 compared to those released in 1992 (for example, the PreStart sample contained a larger percentage of low-risk offenders).

Clearly, more recidivism analyses of the PreStart program are warranted, especially analyses with longer follow-up periods, more complete recidivism data, and samples of offenders that are representative of the entire releasee population.

CONCLUSIONS

The evaluation team found much to value in the PreStart program, which replaced a parole system that offered virtually no aid to inmates and releasees before or after leaving prison. Though far from perfect, PreStart set Illinois on a course away from an era when inmates were often released without any support whatsoever, and when the most that could be expected at parole was a little cash and a bus or train ticket home. PreStart, however, should not be viewed as a program that has fully lived up to its promises. Rather, it should be viewed as a significant step in a new and promising direction.

Members of the PreStart evaluation team had the opportunity to review an inmate-produced video designed to be an orientation to PreStart. The product was impressive and served not only to illustrate what can happen when the creative talents of inmates are channeled toward productive ends, but also to highlight the promise of PreStart.

With the theme of "picking up the pieces," the inmates presented a portrait of PreStart as a well-developed and integrated program that provides inmates some basic tools, knowledge and assistance to make a successful transition to the community.

While these first steps were achieved, much remains to be done. This summary of our PreStart evaluation discussed the achievements accomplished

and those that were not. In addition, it attempted to explain the reasons for the uneven success that the evaluation team observed and the issues associated with the varying levels of PreStart's accomplishments. We urge the IDOC to move forward to pick up the pieces of PreStart that have not yet been put in place and to improve the delivery of services to those who need them. The following suggestions may serve as a guide and are explored in depth in our complete final report.

RECOMMENDATIONS

- The IDOC should continue to strengthen phases I and II of PreStart and continue to build program links between the two phases.

- The IDOC central office should continue to improve its coordination and supervision of Phase I programs within facilities, aiding individual institutions wherever needed.

- The IDOC should continue to develop effective drug treatment programming for releasees, following the example of the Springfield CDIP.

- The IDOC should develop strong information-sharing practices between its facilities and monitor them, using mechanisms such as the Curriculum Committee, to improve weak programs.

- The department should amass data on inmate reactions to PreStart Phase I programs by collecting such information on a routine, consistent basis; for example, by using a brief questionnaire administered at graduation. The data could be used to evaluate existing programs and design new ones.

- The IDOC should continuously train staff to improve Phase II programs.

- For Phase II programs, all community service centers should keep consistent, reliable records. The IDOC also should track which contacts and referrals result in service provider contacts. PreStart agents should be given greater training on and access to computer terminals.

- High-risk offenders should be placed with the Special Intensive Supervision Unit based on objective risk prediction, not legal criteria. Once placed with this unit, they should be supervised closely.

- Continued central office attention should be focused on developing sex offender treatment programming and community drug intervention programs.

- The community drug intervention programs should review their referral, intake, outflow and selection processes, and their client determination criteria and decision-making processes, so that spaces are apportioned more efficiently to clients who need them.

- The IDOC needs to pay immediate attention to the problem of poor communication between PreStart staff and allied service and criminal justice agencies. This problem inhibits agents' ability to refer clients to Phase II services effectively.

- If the state of Illinois is serious about introducing a true assistance or advocacy model of post-release community supervision, more resources must be expended for this purpose. If not, it should consider rescinding the mandatory reporting requirement that was imposed after PreStart was initiated so that PreStart agents can devote more of their time to providing releasees with the assistance and referrals from which they can benefit.

- Because it appears that PreStart may be associated with reduced recidivism for non-chronic, low rate offenders but not for more chronic, high rate offenders, this possibility should be investigated through more impact analyses with longer follow-up periods, more complete recidivism data and larger samples of offenders that are representative of all releasees. ♦

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