

Chapter 8

Crime



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Overview

Unless we begin to care for offenders, and extend them a humanity (whether we believe that they deserve it or not) that is founded on nonviolence principles, we will continue to perpetuate the very violence and behavior that drives our current fears about offenders and victimization (Lutze, 2006, p. 395).

No one wants to be victimized by crime and those who are (or whose relatives or friends are) want the offender to be held accountable and to never re-offend. The challenge is to balance two needs. On the one hand, there is the need to hold offenders accountable and to promote public safety. On the other hand, there is the need to prevent and rehabilitate offenders so that they can become constructive members of society.

This is more than a corrections challenge; it is a reflection of our humanity, of our country's commitment to the values of social justice and safety. This challenge must be understood and viewed in an ecological framework. No one person acts without affecting and being affected by others. So, we must look not only at the functionality of (potential) offenders, but also at the functionality of their families, neighborhoods, communities, institutions, and culture. We must realize that most of those incarcerated eventually return to society. Should we allow them to return as better criminals, as people without the skills to integrate constructively into society or should we work toward rehabilitation and a positive, productive future? When people become offenders, we should do all that we can both to hold them accountable and to rehabilitate them so that they might return safely to society. Yes, there will

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always be a few who cannot be returned, but this fact does not justify a get tough philosophy that arguably perpetuates fear, violence, and inhumanity and overflows our prisons.

A Few Statistics

The Federal Bureau of Investigation's Uniform Crime Reporting Program (UCR), which captures 94% of the US population, found that in 2016 citizens experienced 5.7 million violent victimizations or 21.1 victimizations per 1000 persons. Likewise, there were approximately 15.9 million property victimizations or 119.4 victimizations per 1000 households (Bureau of Justice Statistics, 2016). However, it should be noted that fewer than half of all violent victimizations are reported to the police.

There are estimated to have been 10.6 million arrests in the USA in 2016. These include the 29 offenses tracked and exclude traffic violations (Federal Bureau of Investigation, 2016). For violent crimes, there were 515,151 arrests and for property crimes, there were 1,353,283 arrests in 2016 (Federal Bureau of Investigation, 2016). Other arrests included drug abuse violations, fraud, driving under the influence, etc.

Violent crime rates did not differ significantly by gender or race but they did differ by age. For instance, persons ages 12–34 had higher rates of violent victimization than persons ages 35 or older. Victimization rates also varied by income bracket (highest for persons in households earning less than \$25,000 each year) and marital status (highest for persons who were separated) (Bureau of Justice Statistics, 2016).

Looking at several kinds of crime committed in 2016, there were over 6000 incidents of hate crime and over 1000 incidents of Human Trafficking reported. However, both of these forms of crime are vastly underreported (Federal Bureau of Investigation, 2016).

There were 1,707,350 incidents of family and intimate partner violence, according to the BJS (2016). This includes current and former partners, making a rate of 6.3 per 1000. In 2016, there were 676,000 children victimized by abuse or neglect resulting in a national rate of 9.1 per 1000 (U.S. Department of Health and Human Services, 2018).

Substance abuse is implicated in this relative-as-perpetrator category of crime, as it is in many other kinds of crime. In a study conducted by the Arrestee Drug Abuse Monitoring Program, 60% of arrestees tested positive for one or more drugs at the time of arrest (Office of National Drug Control Policy, 2011). In 2002, perpetrators of violent crimes were believed by their victims to have been drinking in approximately one million instances. In the same year, approximately 75% of spousal victims of crime said that the perpetrator was under the influence of alcohol (Bureau of Justice Statistics, 2007a).

The costs of crime include those which are tangible and hence calculable monetarily, such costs being related to property loss, medical expenses, public safety programs, private security strategies. Much more difficult to calculate are the

intangible costs, such as the pain and suffering caused by the criminal events, as well as the subsequent diminishment of the quality of life for victims and their families (Shapiro, 1999).

Looking at tangible costs, these are considerable. Crime costs as much as \$15 billion in economic losses for victims and \$179 billion in assorted government expenditures in 2007 (from McCollister). In 2003, nearly half of the billions that victims received went to medical expenses while 12% went to mental health counseling (National Center for Victims of Crime, 2004). Considering the costs of domestic or intimate partner violence alone, the Centers for Disease Control and Prevention [CDCP] determined that the 2003 health-related costs stemming from physical assault, rape, homicide, and stalking were at least \$5.8 billion annually (Centers for Disease Control and Prevention, 2003). The UCR also found that in 2010, the tangible costs of property crimes other than arson were approximately \$16.21 billion (Federal Bureau of Investigation, 2011). A single serious violent crime could cost up to \$17 million (DeLisi et al., 2010).

There are many other costs as well, such as the costs to keep the U S corrections system going. In 2001, this was estimated to be in excess of \$38 billion (National Center for Victims of Crime, 2004). In 2000, the national budget for reduction of drug use alone was 9,936.6 million, with an anticipated request for fiscal year 2007 being 12,655.8 million (Bureau of Justice Statistics, 2007b). This is just part of the annual cost of alcohol abuse, at about \$150 million, and drug abuse, at about \$96 million (McDonald & Finn, 2000).

Juveniles

Juveniles have contributed significantly and tragically to criminal and especially violent, conduct in our country. Significantly, “violent crime is for the most part a young man’s activity,” referring to those 25 years old and younger (McDonald & Finn, 2000, p. 38). Looking at 2009 juvenile arrests, for example, youth (those under 18 years of age) accounted for nearly one in ten of those arrested for murder. One out of ten arrested for abuse of drugs was a juvenile. Nearly one out of five arrested for weapon related crime, theft of a motor vehicle, robbery, burglary, and larceny-theft was a juvenile (Puzzanchera, Adams, & Kang, 2012).

Yet we must not overestimate the part juveniles do play in criminal activity. Krisberg and Wolf assert that juvenile crime is one of the social issues most vulnerable to mischaracterization by the media. “More children are killed by their parents or guardians than by other youth. Virtually no one guesses that teenagers are more often the victims of crime than any other age group” (Krisberg & Wolf, 2005, p. 67).

Still, there is serious juvenile crime. The changing character of juvenile crime, the increasing push to try juveniles in adult court, and the struggle to understand the factors that contribute to juvenile crime will be discussed at length below. For the moment, it is simply critical to point out the need to understand the etiology of juvenile crime since most adult criminals committed their first crime as a minor

(Moffitt, 1993). The good news is that there is promising research on and demonstrations of effective societal responses that balance punishment with rehabilitation, which will also be examined later.

Minorities

Minority groups, especially African-Americans, have been increasingly over-represented as perpetrators and victims of crime and violence. In the 1970s, 1980s, and 1990s, federal and state criminal codes were revamped with mandatory sentences, sentence enhancements, and other initiatives designed in part to reduce racial disparity in incarceration (Schlesinger, 2011). Instead, the opposite has happened. Racial and ethnic minorities now account for 60% of people in prison (Bureau of Justice Statistics, 2011), much of which can be accounted for a rise in Hispanics prosecuted from immigration offenses (U.S. Sentencing Commission, 2004). By 2010, black non-Hispanic males had an imprisonment rate seven times greater than white non-Hispanic males (Bureau of Justice Statistics, 2011). This rate stands out because blacks and Hispanics make up only 28.9% of our country's adult population (U.S. Census Bureau, 2012).

African-Americans are sentenced not only more frequently, but also more severely. Today's laws call for stiffer penalties for traits and behaviors black are more likely to have like living in public housing or owning a firearm (Schlesinger, 2011). The gap has only widened since the federal Sentencing Reform Act became effective in 1988. Previously, average sentence length for blacks and whites was nearly identical. By 2001, the average sentence for whites was nearly 40 months but nearly 70 for blacks (U.S. Sentencing Commission, 2004). This disparity in the minority composition of America's imprisoned extends to juvenile offenders, with 40% of the juveniles arrested annually being African-American (Redding & Mrozowski, 2005).

African-Americans are also disproportionately represented as victims of violence. For this group of Americans, 27 people per 1000 are victimized by violent crime, whereas for Whites, the rate is 20 per 1000. According to the FBI's UCR statistics, African-Americans constituted about half of all murder victims in 2010, despite that fact the group's minority status (Federal Bureau of Investigation, 2011).

These statistics may give the impression that African-Americans are to blame for crime and violence. However, studies have indicated that there is nothing inherent about the African-American culture that provokes violent crime like homicide (Loeber & Farrington, 2011). Instead, community characteristics, which include unemployment, family disruption, poor educational systems, and economic deprivation, are the factors that increase crime and violence (Pearson, 1994; Roscoe & Morton, 1994) and minority groups are disproportionately represented in these types of communities.

Women

In absolute numbers, there are far fewer women than men arrested and incarcerated. Approximately 1 out of 4 people arrested are women (Federal Bureau of Investigation, 2012). Yet, between 1977 and 2007, the number of incarcerated women increased 832%, which is twice the rate increase for men (Goodwin, 2015). The USA currently incarcerates one-third of the World's female inmates (Goodwin, 2015).

This drastic rise is connected with the war on drugs. Women's drug use has not increased in the last 30 years, only their incarceration rates. Many women who become criminals share common risk factors: (1) living in poverty and having insufficient social support, (2) having been victimized, frequently as children, by physical and sexual abuse, (3) suffering from serious mental and physical health issues, including substance abuse, and (4) being mothers, typically single (Greene & Pranis, 2004; Holtfreter, Reisig, & Morash, 2004; Hyman, Garcia, & Sinha, 2006). The children of incarcerated women are arguably the most devastated, their lives even more destabilized and unpredictable than they were when their mothers were caring for them. As Greene and Pranis conclude, "Incarcerating women does not solve the problems that underlie their involvement in the criminal system. Their imprisonment creates enormous turmoil and suffering for their children" (Greene & Pranis, 2004, Conclusion, para 3).

Minority Women

Minority women are especially vulnerable to incarceration as a result of the war on drugs, even though their offenses are minor compared with the drug related offenses of the men. Once arrested, these women do not have the information more serious drug offenders to use to plea bargain down their sentences. Also, the Federal sentencing guidelines curtail judges' discretion in sentencing these women. According to Goodwin (2015), one in 113 Caucasian women will be imprisoned, compared to 1 in 45 Latinas and 1 in 18 African-American women.

Trends in Crime

From the 1930s until the 1960s, there was a downward trend in crime in the USA. However, in the 1960s, according to a report prepared by McDonald and Finn in 2000 for the National Institute of Justice [NIJ], there was a significant turnaround. There was an increase in crimes reported to the police, police arrests, prosecutions, convictions, incarcerations, and supervision (probation and parole). Concomitantly, there were increasingly severe laws passed and more financial resources expended

at local, state, and federal levels of government. One dynamic stands out—the rise in the use of illegal drugs and of crimes committed, especially as a part of the burgeoning cocaine trade, and made more violent by the ready access to firearms. The NIJ report also notes that alcohol abuse was a large contributory factor in the commission of violent crimes (McDonald & Finn, 2000).

Statistics for homicide, as a “bellwether crime,” are revealing. In the early 1930s, the homicide rates peaked at 9.7 per 100,000 people and then declined until the middle of the 1960s. At this time, the rate rose strikingly for two decades until it reached 10.2 per 100,000 in 1980. Notably, however, the rate began to decrease, reaching 6.8 per 100,000 in 1997. Due to victim failure and/or reluctance to report crimes to the police, trends for other crimes were not available until 1973, with the establishment of the National Crime Victimization Survey. This survey shows that since 1973, the violent crime rates have for the most part also decreased (McDonald & Finn, 2000).

According to the NIJ report, however, within this general trend there are buried troubling observations. After 1970, the probability of a 15–24-year-old person killing or being killed rose significantly. This connects with the rising drug trade, along with the availability of guns. The perpetrators and victims were mostly male. Furthermore, they were more likely to be African-Americans, who were 7 times more likely to be killed than were Whites and 8 times more likely to kill than were Whites. This trend did begin to change in 1994, although it is still high among young people. The same tendency occurred for other types of violent crime, with the rates for the 15–24 year olds having risen faster than for older (or younger) perpetrators (McDonald & Finn, 2000).

Despite a slight uptick in homicides in the early 2000s (Centers for Disease Control and Prevention, 2005), violent crime has continued to trend downward (Federal Bureau of Investigation, 2011). In 2010, violent crime was down 6% from 2009, 13.2% from 2012, and 13.4% from 2001.

Fear of Crime

Post 9–11 United States seems to be a more fearful place than it was prior to the devastating terrorist attack on what many Americans take to be this country’s values of freedom, democracy, and respect for the individual. Yet, Americans are also very fearful of homegrown criminal violence and infractions. In order to address fear of any kind, one must know the facts about the sources of the fear—the crimes, their context, their victims, and especially their perpetrators. Pulling the facts together may sound easy. Yet, with a social problem as complex as crime in this multifaceted society, such gathering of fact is exceedingly difficult. Add to this, shocking media images and political rhetoric and one gets a distorted picture of this deep, burdensome and costly social issue (Gilliam & Iyengar, 2000).

Part of the picture is graphically real and vividly true. For example, citizens are presented terrible pictures of the Columbine children running from the deadly shots

fired by sniper-classmates and the horror of the shootings at Virginia Tech has been immortalized in posed pictures of the perpetrator himself. Yet, Cornell (2005) points out, “[p]ublic perception of school violence can be skewed by a few highly publicized, extreme cases, leading authorities to adopt dubious zero tolerance policies or to pursue questionably practices such as profiling” (Cornell, 2005, p. 62). In other words, public perception and attitudes about crime are more a reflection of general concerns about crime or society than direct experiences with crime itself (Lereventz, 2012).

To take another familiar example, the beautiful faces of children tragically abducted by child molesters lurking in the neighborhood or by the school playground are urgently scattered across the visual media. This example will be discussed in greater detail to highlight the danger of not getting the facts about crime right—a false sense of security that the societal response is targeted appropriately and being carried out effectively. One of the distortions here comes from how the media, aided by political pronouncements, has inordinately narrowed public attention to one kind of child molestation danger, the so-called stranger danger. That is, the fear of the unknown assailant who could be anywhere, ready to groom, and then attack innocent, unsuspecting children. However, as Levenson and D’Amora point out, such dangerous strangers constitute approximately 7% of those victimizing children. On the other hand, family members are the perpetrators in 39% of the cases and non-family members known to the victim make up another 59%. Unfortunately, in response to public fear, politicians have responded quickly, but arguably without the sufficient but necessary measured, objective attention to such evidence.

The media has also fanned the flames of fear by its choice of which instances of sexual abuse to cover and of how to shape the coverage. Since Jacob Wetterling was abducted and disappeared in 1989, there have been a number of young children whose abduction and murder have been followed closely and passionately in the media. Because of this, “extraordinary media attention, the publicity of such events creates a sense of alarm and urgency among citizens.” However, the media has created in the citizenry the impression that such instances of child abduction, abuse, and murder are common and increasing in frequency. In fact, there are studies showing that this kind of sexual abuse of children is declining rather than rising (Levenson & D’Amora, 2006). More significantly, this kind of incident is exceedingly rare. Levenson points out that according to the National Center for Missing and Exploited Children, there are 100 such cases annually in the USA. She then compares this statistic with the National Highway Traffic Safety’s Administration’s 2004 report that 500 children less than 15 year of age were killed by drunk drivers in a year’s time, as well as the Child Welfare League of American’s finding that in 2002, 1121 children died due to physical neglect or abuse suffered at the hands of their parents or caregivers. This is to say, five times as many children are killed by drunken drivers and 11 times as many are abused or neglected by those caring for them.

This is not to diminish the utter tragedy of the abduction/murder cases, but rather to point out that the public’s emotional response to these relative few cases may prompt legislation to be written for a very narrow sets of circumstances,

leaving children in danger in many other kinds of situations. Ironically and tragically, most of the people from whom children need protection are in their families and among their acquaintances, who have either not yet offended or not yet been caught. This dimension of threat becomes invisible, as it were, through the distorted lenses of media and, subsequently, behind much of the current sexual predator legislation. How one understands the threat of crime must be based in sound evidence if Americans are to meet effectively the very real threat of child sexual abuse. If the entire target is not in sight, then the “remedies” will at best fall short.

So, if one may generalize from this example, it is imperative that when one attempts to examine the array of criminal activity against which society must mount effective responses consonant with the values of freedom, democracy, and the value of the individual, one must get the facts straight to the best of one’s ability.

That said, unfortunately fear can be impervious to fact. Insofar as fear drives legislation and decreases public willingness to invest seriously stretched public funds in innovation interventions, fear can defeat effective, positive societal responses to crime. The NIJ report cites a set of surveys conducted in 12 cities indicating that despite the recent decline in the number of those victimized by crime, people are no less fearful (McDonald & Finn, 2000). In 1992, crime was the top problem identified, as had never previously occurred in public opinion polls. In October of 2006, the attitude was a bit better than it was in the early 1990s. Yet, after the spell of optimism at the turn of the century, public opinion is again “fairly pessimistic,” and this despite the fact that again federal crime statistics are at “modern lows” (Saad, 2006, p. 1).

One of the most divisive issues in the public discourse breaks around access to firearms and (any) controlling regulations. This is another place where it is essential to have the pertinent facts on the relationship between guns and violence as well as the (in)effectiveness of various policies governing their use, manufacture, and sale (National Research Council of the Nation Academies, 2005).

In 1998, guns were used in a variety of violent crimes. First, 65% of reported murders were committed with a gun (McDonald & Finn, 2000). This is consistent with 2005 numbers, where 55% of the murders were committed with a handgun, while 16% used another type of gun (Bureau of Justice Statistics, 2007a). Other crimes wherein guns were utilized include 38% of the robberies and 19% of the aggravated assaults. It is very likely that the prevalence of private gun ownership plays a significant role in these statistics. For instance, in 1994 firearms were owned by 44 million people in this country (McDonald & Finn, 2000).

Certain highly publicized crimes, albeit rare events, have heightened public fear. Examples include school and college shootings and specific high-impact terrorists attacks (McDonald & Finn, 2000). Many individuals have an increased concern for their own safety, which may be reflected in increased ownership of guns and in the strong beliefs in the right of individuals to own and bear arms.

Philosophical Trends in Societal Response to Crime

From early in the 1900s until the 1970s, judges had significant discretion in sentencing, including the use of indeterminate sentencing. The theory informing this policy was that the goal of probation, incarceration, and parole was rehabilitation of the offender (McDonald & Finn, 2000). This was especially true for juvenile offenders, who have their own juvenile court system. Here, the state has seen itself, according to the doctrine of *parens patriae*, as the beneficent parent who was correcting the path of the wayward youth. The young person was seen as only partly responsible for his (or, much less often, her) crime due to parental neglect and poverty. Furthermore, it was believed that these young persons were capable of being reshaped into a law abiding person (Redding, Sevin Goldstein, & Heilbrun, 2005). Sentencing discretion, then, allowed judges to tailor the punishment to the particularities of the offense and the perpetrator, a “quasi-clinical task” (McDonald & Finn, 2000, p. 33). This view of punishment could also be called, “enlightened instrumentalism,” in that the punishment was aimed at addressing “pathological conditions lurking behind their criminal behavior” (Reidy, 2007, p. 159).

However, this policy gave way in the 1980s and 1990s to a get tough approach once rehabilitation was believed not to work for either adults or juveniles. This belief was significantly bolstered by Martinson’s well-known and extensively cited 1974 examination of evaluations of criminal and juvenile programs (Martinson, 1974). These new policies, mandated in law, have been guided by four strategies: (1) mandatory incarceration for certain kinds of offenses (such as the sale of drugs or use of guns), (2) the reduction of judges’ discretion for certain kinds of offenders (repeat offenders), (3) the ending of indeterminate sentencing, and (4) the inception of “intermediate sanctions,” as a balance to the increased use of incarceration (McDonald & Finn, 2000, p. 33). These changes embodied the shift in attitude from helpful (wanting to rehabilitate the offender) to a harsher attitude. One indicator of this change is the public attitude about the death penalty, going from 38% approval in 1965 to 75% approval in 1997 (McDonald & Finn, 2000). This illustrates the shift to the retributivist belief that punishment is innately good from the belief that it is an instrumental good (Reidy, 2007).

The consequences of get tough policies are numerous, not all of which have benefited society. Take, for example, the Three Strikes law as it played out in California. As the Justice Policy Institute [JPI] explained, the fear of crime hit a high point in 1994 when California responded by enacting the Three Strikes law. Whereas most of the 23 states that also enacted this kind of law did not use it much, having fewer than 400 Three Strikes prisoners each, California had 4322 such prisoners. Yet, there were unintended and unforeseen consequences as this policy put people in prison from 25 years to life for nonviolent crimes such as shoplifting a \$2 item or forging a check under \$100. It is noteworthy that states without Three Strikes laws subsequently saw a greater decrease in violent crime, including murders, than did Three Strikes states. With respect to incarceration rates between 1993 and 2002, California had a 17.7% increase, whereas the non-Three Strikes state of New York

had a 5.7% decrease. The Three Strikes law has cost states millions of dollars that could be better spent on education and other ways to handle nonviolent criminals (Russell, 2004).

Corrections Today

Incarceration rates have declined for the past 9 years by approximately 18% (Bureau of Justice Statistics, 2016). Correctional supervision still stands at a little over 6.6 million adults (Bureau of Justice Statistics, 2016) or 1 in 38 adults. Almost 2.2 million of these offenders were in prison or jail, with just under five million on probation or parole (Bureau of Justice Statistics, 2016). Human Rights Watch cites these numbers as evidence of this country's "appalling addiction to incarceration" (Fellner, 2006, para 1). Human Rights Watch asks why, with the general decline in the rate of crime in this country, has the prison population rate kept climbing? This is a staggering number of adults who could be working, paying taxes, and taking care of their families.

The treatment of juvenile offenders continues to be cause for debate, as many approaches have failed. Although the Juvenile court began as a means to rehabilitate juveniles and their families, retributive justice, replaced this philosophy during the 1990s, when juvenile offending was increasing. Beginning in 1992, the practice was built into the laws of 45 states (Austin, Johnson, & Gregoriou, 2000, p. iii). In 1997, the number of juveniles placed in crowded adult prisons was estimated to have been 13,876 young people (no estimate available for those in the jails) (Austin et al., 2000, p. x).

Perhaps we need to step outside this narrowly framed debate. It may be persuasively argued, instead, that juveniles are neither merely young people in need of therapy and beneficence to set them straight nor simply criminals in need of a get-tough approach to punishment (Redding et al., 2005; Scott, 2000). This characterization of the problem is a false dilemma and far too simplistic. A third option is a balanced approach, which would be better in that it would hold the young person accountable along with recognizing the value of multifaceted rehabilitation efforts.

It is also necessary to see that what Byrne calls the surveillance versus treatment debate forms around the assumption that the proper focus of societal concern with crime is the individual offender. Yet this is misguided. We need to take an ecological approach, realizing that offending happens in the context of family, peers, neighborhood, community, and country (Byrne & Taxman, 2006). For example, when juvenile gun violence was escalating, it might well have been because of the increased availability of handguns rather than the development of some kind of "superpredator" (Redding et al., 2005, p. 5). Then too, it makes no sense to punish an offender and then release him or her back into a toxic social environment, expecting him or her to simply go straight without help from society. All contextual elements need societal attention.

Summary

Our current correctional system is overburdened and overwhelmed. As Greene and Pranis of Justice Strategies observe,

“Over the final quarter of the 20th century, U.S. criminal justice policies underwent a period of politicization and harsh transformation. Draconian sentencing laws and get-tough correction led to an unprecedented increase in jail and prison populations, driving the United States’ rate of incarceration head and shoulders above that of other developed nations” (Greene & Pranis, 2004, Introduction, para 4).

This was the result of the general belief by politicians and the public that nothing was working with regard to reforming criminals. Rehabilitation was forgotten and both juveniles and adults were placed at risk for abuse within the correctional system and for recidivism after their release from the prison or jail. However, the conclusion that “nothing works” was a simplistic conclusion to what we now know is a complex dynamic. Punishment by itself is largely ineffective. Moreover, traditional criminal measures are short sighted since most of those incarcerated are released back into society, with no life or work skills. Without evidence-based, widespread rehabilitative efforts, those released will pose a renewed threat to public safety. Furthermore, as imprisonment can teach prisoners how to be better criminals if no rehabilitative measures are consistently and effectively provided, those released may pose a greater threat than they posed prior to incarceration. Finally, the cost of incarceration is simply too expensive, taking much needed financial resources away from, for example, investing in education and prevention. University of Oregon’s president, Dave Frohnmayer, has starkly observed that in the past two decades, its state’s prison-related spending has skyrocketed. As a result, for K-12 students in 2005, \$6492 was spent per child and \$4497 per university student in 2006. This contrasts with \$24,648 spent per person incarcerated in 2005 (Caylor, 2007). We can do much better.

Assessments of Risk Factors, Placement, and Needs

Most adult criminals began their offending patterns as children, frequently at an early age. Approximately 8% of juvenile offenders whose offending is serious, violent, and chronic tend to be multiple-problem youth who exhibit behavioral and other problems in early childhood, with an early onset of criminality perhaps the most robust predictor (Office of Juvenile Justice and Delinquency Prevention, 2001).

In fact, it is a relatively small number of juvenile offenders, 8–10%, who commit from 60 to 80% of the serious and violent crimes and who do not mature out of their criminal behaviors (Krisberg & Wolf, 2005; Redding et al., 2005). Fortunately, many so-called life-course persistent offenders can be picked out from those who cease criminal behavior as they leave adolescence (Moffitt, 1993, p. 674; Redding et al., 2005). Those who become career offenders tend to (1) begin at a young age,

(2) frequently engage in criminal behavior during adolescence, (3) specialize in a particular type of crime, (4) commit serious offenses, and (5) and demonstrate “offense escalation” (Redding et al., 2005, p. 14; Moffitt, 1993). This distinction between kinds of juvenile offender allows society to shape its response most effectively through carefully and evidence-based policies and laws. “Media sensationalism and public sentiment as measured by opinion polls must not be the driving force behind reform” (Redding et al., 2005, p. 14). Despite this evidence, support among policy makers for a punitive approach to juvenile offenders remains (Endrass, 2012).

It is critical to identify this subgroup of serious offenders so that corrections efforts are focused more intensely on these high-risk offenders. It is actually counterproductive to mix high and low risk offenders together. The low risk offenders learn the antisocial behaviors of the high-risk offenders who have become their peers. Also, such association with high-risk offenders interrupts the prosocial peer relationships that are helping the low risk offenders stay low risk. Furthermore, more intense supervision often results in more violations, which pushes the low risk offender toward a higher risk category (Lowenkamp, Latessa, & Holsinger, 2006; Lurigio, 2005).

It is essential to note that many male juveniles exhibit some delinquent behavior, usually nonviolent. However, most of these young people grow out of their antisocial behavior without formal intervention. In fact, in many cases, punishment backfires, slowing down maturation out of delinquent behavior and even increasing the likelihood of career criminality (Krisberg & Wolf, 2005; Redding et al., 2005; Scott, 2000).

Risk and Protective Factors

In order to intervene effectively to reduce crime and violence among juveniles and adults, comprehensive assessments should be completed which identify both the risk factors associated with criminal behavior and the protective factors that mitigate criminal behavior. Here risk is defined as “external or internal influences or conditions that are associate with or predicative of a negative outcome (such as delinquency or antisocial behavior)” (DeMatteo & Marczyk, 2005, pp. 20–21). Similarly, a protective factor is defined as “external or internal influences or conditions that decrease the likelihood of a negative outcome or enhance the likelihood of a positive outcome” (DeMatteo & Marczyk, 2005, p. 21).

In assessing risk factors, it is also useful to distinguish between static and dynamic factors. Static risk factors are those that cannot be changed, such as the gender or age of the offender and the age of the commission of the first crime. These factors are useful for prediction purposes. Dynamic risk factors, by contrast, are those which can be modified, such as substance abuse, certain mental illnesses, access to guns, and participation in gangs. Interventions should be aimed at eliminating or mitigating dynamic risk factors.

Risk and protective factors can be categorized according to an ecological approach, which recognizes that “an individual functions within a complex and interrelated network of contexts that exert an independent influence on risk level” (DeMatteo & Marczyk, 2005, pp. 22), an approach which does not pathologize the individual.

The following is a brief outline of risk and protective factors in the categories of individual, the family, the school-related, peer-related, and the environment (neighborhood, community).

Individual Risk Factors It should be noted that how a behavior is evaluated depends on the developmental level of the actor; some acts common and appropriate to very young people may not be appropriate for a more mature adolescent. Also, risk factors at this level typically operate in connection with factors at the other levels (categories) to be described.

1. Early disruptive, antisocial, aggressive behaviors (Farrington, Loeber, & Berg, 2012; Hawkins et al., 2000; Hawkins, Lishner, Jenson, & Catalano, 1987; Krisberg & Wolf, 2005; Rapp & Wodarski, 1997).
2. Impulsivity, risk-taking, low IQ, restlessness, concentration difficulties (DeMatteo & Marczyk, 2005; Hawkins et al., 1987; Krisberg & Wolf, 2005; Loeber, Farrington, Stouthamer-Loeber, Moffitt, & Caspi, 1998).
3. Association with negative peers (Elliott, Huizinga, & Ageton, 1985).
4. Alcohol and drug use, considered by many to be the strongest dynamic risk (Bushman & Cooper, 1990; DeMatteo & Marczyk, 2005; Elliott et al., 1985).
5. Drug dealing (DeMatteo & Marczyk, 2005; Farrington et al., 2012).
6. Mental health problems (Sevin Goldstein, Olubadewo, Redding, & Lexcen, 2005; Tate & Redding, 2005).

Individual Protective Factors

1. Intelligence and education (DeMatteo & Marczyk, 2005; Kandel et al., 1998).
2. Attitude that antisocial behavior is totally unacceptable (DeMatteo & Marczyk, 2005; Department of Health and Human Services, 2001).

Family Risk Factors

1. Family management problems, including inadequate or insufficient parenting and supervision (DeMatteo & Marczyk, 2005; Hawkins et al., 2000; Krisberg & Wolf, 2005; Kumpfer & Alvarado, 2003; Rapp & Wodarski, 1997; Yoshikawa, 1994).
2. Family conflict, hostility, and aggression; child abuse, child neglect (DeMatteo & Marczyk, 2005; Farrington, 1991; Hawkins, Catalano, & Miller, 1992; Krisberg & Wolf, 2005).
3. Parental attitudes favorable to crime and violence, parental criminality (DeMatteo & Marczyk, 2005; Hawkins et al., 1987; Rapp & Wodarski, 1997).
4. Family use of secrecy and deception (Krisberg & Wolf, 2005).
5. Family poverty (Krisberg & Wolf, 2005).

Family Protective Factors

1. Positive family influence (DeMatteo & Marczyk, 2005; Kumpfer & Alvarado, 2003).
2. Warmth and strength of familial relationships (DeMatteo & Marczyk, 2005; Melton, Petril, Poythress, & Slobogin, 1997).
3. Good parental supervision; clear rules and values (DeMatteo & Marczyk, 2005).
4. One or more strong relationships with an adult (DeMatteo & Marczyk, 2005; Hawkins et al., 2000).

School Risk Factors

1. Poor academic performance, dropping out of school, and low level of commitment to school (DeMatteo & Marczyk, 2005; Hawkins et al., 2000; Krisberg & Wolf, 2005; Rapp & Wodarski, 1997; Yoshikawa, 1994).
2. Early antisocial behavior in school (Farrington, 1991; Hawkins et al., 2000).

School Protective Factors

1. Educational commitment and success (DeMatteo & Marczyk, 2005; Department of Health and Human Services, 2001).
2. Involvement in extracurricular activities (DeMatteo & Marczyk, 2005).

Peer-Related Risk Factors

1. Negative peer relationships, frequently considered the most significant risk factor (DeMatteo & Marczyk, 2005; Krisberg & Wolf, 2005).
2. Gang membership (DeMatteo & Marczyk, 2005; Department of Health and Human Services, 2001; Krisberg & Wolf, 2005).

Peer-Related Protective Factors

1. Association with Prosocial Peers, although this Is Debated (DeMatteo & Marczyk, 2005)

Environment/Neighborhood/Community Risk Factors

1. Economically deprived areas with high levels of unemployment (DeMatteo & Marczyk, 2005; Hawkins et al., 2000; Krisberg & Wolf, 2005).
2. Getting public assistance (Loeber et al., 1998).
3. Disorganized neighborhoods with high levels of crime and violence and low levels of supervision (DeMatteo & Marczyk, 2005; Yoshikawa, 1994).
4. Availability of firearms (Rapp & Wodarski, 1997; Reiss & Roth, 1993).
5. Media portrayals of violence (DeMatteo & Marczyk, 2005; Donnerstein, Slaby, & Eron, 1994).

Environment/Neighborhood/Community Protective Factors

1. Availability of structured activities, well-managed classrooms/schools (DeMatteo & Marczyk, 2005).
2. Good community structure and sense of belonging (DeMatteo & Marczyk, 2005).

Not all individuals who engage in crime and violence will have the same risk factors. Certain risk factors will be stronger for some individuals than for others. Risk factors having varying potency depend upon the developmental age and stage. Nevertheless, risk factors have been found to increase the possibility of crime and delinquency, as well as of other problem behaviors. Consequently, risk factors should be assessed carefully for each individual. Clearly, the more risk factors an individual has, the more likely he or she will be of evincing criminal and violent behaviors. As well, protective factors will vary from individual to individual, requiring careful, individualized assessments. Enhancing protective factors should be an integral part of individual and societal prevention and early intervention efforts.

Assessments and Classification

Risk assessment and classification refer to the process of evaluating offenders' current needs regarding treatment and their likelihood of re-offending. This amounts to assessing the offenders' risks to themselves and to the public. The ascertained level of risk is then translated into the appropriate and recommended level of supervision or intervention for the offender. These assessments use to be informal, highly discretionary, and inconsistent (Wiebush, Baird, Krisberg, & Onek, 1995). Often, these procedures were criticized as inequitable, erroneous, and unreliable.

We are currently in the fourth wave of reform for the Juvenile Justice system (Grisso, 2017). This reform is based on our knowledge of the timeline for brain development (National Research Council of the Nation Academies, 2005) and prior studies which found incarceration causes harmful effects and escalates offending (Petrosino, Turpin-Petrosino, & Guckenburg, 2010). A main tenet of the reform has been to accurately identify youths who pose, low, moderate, or high risk and match them to the appropriate level of care (Andrews & Bonta, 2017). Structured risk and need assessment tools have been developed and tested for implementation (Monahan & Skeem, 2014).

In order for the correctional system to utilize the following alternative interventions, a clear, standardized assessment system must be in place. Interventions must match needs of and risks posed by the offenders. Offenders who are provided inappropriate interventions, no matter how innovative, will likely fail.

Interventions

As discussed in the first section of this chapter, society's response to the problem of serious crime and violence has been inconsistent. Mass incarceration is extraordinarily expensive and counter-productive. So efforts have turned to developing and utilizing a continuum of care (Vincent & Perrault, 2018). This continuum of care moves beyond traditional choices and would be able to match offenders with the

level of treatment that would best meet their needs. The following is a brief introduction to some of these alternative approaches.

It is best to avoid harm, thus the best approach to crime is prevention. Preventive programs include community policing and after school programs. For those who have already committed offenses, there are alternative approaches to traditional incarceration such as “intermediate sanctions.” These sanctions “enhance surveillance or provide more effective interventions for offenders who would not have gone to prison in their absence” (McDonald & Finn, 2000, p. 33). Such intermediate sanctions include day reporting centers and “therapeutic diversions,” which combine sanctions and therapy like drug courts and mental health courts (Goetz & Mitchell, 2006).

For those incarcerated, an alternative to punishment alone is rehabilitative programs that both reduce the tendency of those incarcerated simply to learn how to become a better, more dangerous criminal and reduce the recidivism rate, once prisoners are released. We could also conceptualize such rehabilitation programs as preventive interventions for re-offending. Rehabilitation programs include General Equivalency Diploma (GED) programs, life skills, sex offender treatment, and drug treatment. For these programs to be maximally effective, it is critical that we have transitional programs for those about to re-enter society. Such transitional programs include therapeutic communities (for drug offenders) and prison-to-work programs.

Prevention Programs

The creation and implementation of innovative ideas have been encouraged in an attempt to reduce crime and violence. Prevention programs have been placed at the forefront in an effort to deter juveniles and young adults from becoming involved with crime.

Community Policing

In the 1980s, law enforcement administrators and academics used police research to generate the concept of community policing in order to improve their efficacy (McDonald & Finn, 2000). This policing approach does not address specific problems faced by law enforcement; rather, it calls for an all-encompassing change in the way police perform their duties. Community policing strategies vary depending on the needs and responses of the communities involved, although there are certain basic principles common to all community policing efforts. Essentially, community policing involves collaboration between the police and the community to identify and solve community problems. In addition, it encourages police–citizen interaction and a focus on prevention and problem solving (Police Foundation, 2015).

The traditional, centralized, large police stations have isolated police officers from the communities they serve. In addition, the use of patrol cars versus foot

patrol has also added to this perceived distance of police from the citizens they serve. This isolation has tended to hamper crime-fighting efforts. It is often the citizens who have the most information about the crimes occurring in their communities. Without strong ties to the community, police do not have access to this important information and citizen assistance. Community policing offers a way for the police and the community to work together to resolve the serious problems that are ongoing within the community (Police Foundation, 2015).

The two core components of community policing are community partnership and problem solving. These components address specific citizen concerns and provide more attentive police service. Plans to reduce crime or problems in the area are devised by citizens and police officers and are implemented by both.

Research has indicated that community policing has been effective in reducing crime (Police Foundation, 2015). Officers who patrol by horse, bicycle, segue, or foot, etc. are able to connect with citizens, attend to minor problems before they escalate, and/or identify potential problems and remedy the issue.

Community policing is a prevention idea that can be tailored to meet each community's specific problems and needs. Community policing is not the answer to all problems and it may not be amenable to all communities. However, the concept provides a logical, comprehensive, preventive approach to police service delivery that relies on empirically based studies (Carter, 1995).

In and After-School Programs

Tremendous progress has been made regarding our development and implementation of prevention programs for youth. The vast majority of these evidence-based programs are delivered in and after school. Blueprints for Healthy Youth Development (<https://cspv.colorado.edu/blueprints/>) provide a clearinghouse and rating system for prevention programs aimed at reducing offending, violence, and enhancing positive healthy development of youth and families.

Effective programs can be found for all age levels and offending levels and can be implemented in schools or communities by using the extensive guidelines and manuals provided by the developers. The rating system provides clear information on the level of effectiveness of the program for the designated problems and youth.

The programs differ in their prevention goals, for instance, some focus on life skills, social skills, academic skills, drug resistance skills, etc. Some are intended for all youth within an age range, while others target only at-risk youth. Many can be administered by parents, school personnel, or trained volunteers, and all have been evaluated and proven to be effective. Additionally, some programs encourage parents to receive interventions and some work with teachers and school administrators to modify school policies, procedures, and learning environments.

The clearinghouse and rating system has provided an extremely beneficial service to policy makers, counselors, schools, and anyone interested in investing time and money toward prevention of crime and violence.

Therapeutic Diversion

Drug Courts

The first drug court appeared in Miami in 1989 as an alternative response to incarceration for substance abusers who had been arrested. It was at this time that crack cocaine was a serious problem and courts were quickly overwhelmed with felony drug cases and prisons were overfilled. Incarceration itself did nothing to address the underlying problem of addiction; many offenders were in and out of the criminal justice system multiple times, severely taxing the system (Bureau of Justice Assistance, 2003). The drug court tries to rectify this by combining the supervisory and sanctioning roles of the courts with the therapeutic role of treatment. The goal of this kind of court is to help substance abusers both move into and maintain recovery and stop their criminal behavior, which reduces the strain on the courts and prisons.

A number of innovative drug courts have reported success in reducing the levels of drug abuse, incarceration, and criminal recidivism among drug offenders. Drug courts also reduce costs for the Criminal Justice system and assist individuals in receiving the treatment they need (National Institute of Justice, 2018). The courts hear the cases of nonviolent drug offenders and are run by a group including judges, social workers, treatment providers, prosecutors, defense attorneys, and citizens. They work directly with the offender and together they decide on the type of rehabilitation program required. Offenders who are mandated to treatment are usually expected to begin that day. This process takes extensive coordination and team effort with community treatment programs (National Institute of Justice, 2018).

A key component of the drug court program is coordinated comprehensive supervision. Most offenders who volunteer to attend the drug court do so to beat incarceration. However, these programs are tightly supervised and maintained. Drug testing, immediate notice of any treatment failures, and routine progress reports are utilized to keep track of offenders. For those offenders who require more intensive services, transfers to residential treatment centers are available. Drug courts usually follow offenders over a longer period of time, and aftercare is considered a must. Drug court rehabilitations usually also include educational opportunities, employment training and placement, and housing and health assistance (Tauber, 1994).

Thus, the substance abusing offender is motivated, on the one hand, by the threat of jail or prison and, on the other hand, by the promise that if he or she successfully completes the program, he or she may have one or a combination of the following considerations: charges dismissed, reduced, or set aside; given a lesser penalty (Office of National Drug Court Policy, n.d.; Fox & Huddleston, 2003; National Institute of Justice, 2006a).

Overall, the benefits of the drug court program include a reduction of the cost per defendant, added capacity to incarcerate the most serious offenders, a reduction in

police overtime and other witness costs, a reduction in grand jury and indictment costs, a lower percentage of those relying on public assistance, and a reduction of medical and social service costs (Office of Justice Programs, 1996).

In an effort to increase the benefits of this kind of court, researchers are examining in detail how drug courts are working, paying attention to dynamics such as “how target populations and participant attributes affect program outcomes, the judge’s role in the success of drug court participants, treatment issues, drug court interventions for juveniles, and cost-benefit analyses of drug courts” (National Institute of Justice, 2006b). As of 2015, there are over 3000 operating drug courts in the USA (National Institute of Justice, 2018).

Mental Health Court and Mental Health Services

As a result of factors such as inadequate social safety nets, inadequate access to mental health treatment, and stigmas associated with mental illness, people suffering from mental illness are all too often unfairly and inhumanely arrested and incarcerated. The probability of a mentally ill person being arrested is nearly twice that of a non-mentally ill person. The mentally ill person is less likely to get bail and more likely to receive a harsher sentence than a non-mentally ill person. It is estimated that 64% of jails, 56% of prisons, and 45% of federal prisons contain individuals who suffer from mental illness (James & Glaze, 2006). The typical offense is nonviolent. Unfortunately, few receive their medications, much less treatment. What is more, once such persons have a criminal record, they are even less likely to obtain needed mental health treatment and have increased difficulty finding employment and housing (Judge David L. Bazelon Center for Mental Health Law, 2004).

Mental Health Courts are a relatively new alternative response to incarceration for people with criminal charges (usually nonviolent) who also suffer from mental illness alone or mental illness along with substance abuse (Bureau of Justice Assistance, 2012). They were based on the drug court formats. Whereas there were 25–30 such courts in 2004, the number exceeded 150 by 2006, and is now more than 240 (Bureau of Justice Assistance, 2012). The goals are (1) to decrease the likelihood of incarceration or recidivism that contribute to the escalation of mental illness and criminal behavior by (2) stepping into the legal process to get the arrested person appropriate mental health treatment, as well as connecting them with other needed resources, (3) monitor progress, (4) ensure voluntary, and informed consent is used. This kind of therapeutic court has two justifying beliefs: (1) the public is better protected by helping the mentally ill, hence reducing recidivism, and (2) criminal punishment is both ineffective and immoral (Judge David L. Bazelon Center for Mental Health Law, 2004). Initial studies have found support for these courts as effective in improving the functioning and reducing substance use (Bureau of Justice Assistance, 2012).

Intermediate-Level Sanctions

Intermediate-level sanctions were designed to offer less punishment and more services for those who do not need intensive supervision or punishment. The philosophy is to offer the least restrictive environment to every offender. Not only does this reduce cost, but it has also been empirically supported in generating the most efficacious outcome such as reduction in recidivism and increase in employment (Cochran, Mears, & Bales, 2014).

Day Reporting Centers

An intermediate-level sanction created in the 1970s in Great Britain and utilized from the 1990s and currently is the Day Reporting Center (DRC) (Pennsylvania Department of Corrections, 2003), which can be described as a highly structured program utilizing supervision, sanctions, and services (Diggs & Pieper, 1994) for offenders. This program is intended to help reduce prison and jail overcrowding and to assist in community reintegration. Thus, DRCs are community-based corrections programs serving those who are probationers or parolees (Pennsylvania Department of Corrections, 2003). Offenders required to attend a DRC live at home and report daily and in person to the center. They are expected to keep detailed itinerary notes on their daily travels, destinations, cohorts, and purposes. Offenders also call into their respective DRC several times a day. In addition, DRC staff contact offenders to verify their whereabouts and to monitor them. Drug testing and counseling are mandatory components of the program (Diggs & Pieper, 1994; Pennsylvania Department of Corrections, 2003). Offenders are also able to continue with their employment and educational goals.

Day reporting centers can be adapted to diverse populations, although violent offenders are not usually included. DRCs have been used as halfway-in and halfway-out steps. For instance, offenders who are in violation of their parole or probation may be placed in day reporting programs, or offenders who are released early from jail or prison may be placed in these programs prior to parole. The centers have also been used to monitor arrested individuals prior to trial.

Unfortunately, there have been mixed results for DRCs in that some studies have indicated reduced re-arrest rates, while other studies indicated an increase in new arrests for participants. A main obstacle for these sanctions has been completion rates, as offenders have not successfully complied with their sanctions or completed all of their mandatory services (Boyle, Ragusa-Salerno, Lanterman, & Marcus, 2013).

One suggestion is to utilize more advanced dynamic and static risk assessment instruments to correctly assess which offenders would most likely be successful in a DRC program (Cohen, Lowenkamp, & VanBenschoten, 2016). These community-based programs are worth further evaluation as they may offer potential supports in a less restrictive, costly environment than traditional incarceration to particular offenders.

Substance Abuse Treatment during Community Supervision

Community supervision of offenders often involves monitoring offenders through meetings and telephone contact and by assisting with employment or education. One critical component that has often been left out of this supervision has been substance abuse treatment. Research has indicated that treatment for substance-abusing offenders can be effective in reducing and eliminating drug use and in reducing recidivism (Sung, Mahoney, & Mellow, 2011). Yet, only in the last few decades has mandatory substance abuse counseling emerged as a part of community supervision and unfortunately is often the first program to be cut to reduce budgets. For example, in Florida, drug offender probation was intensive, utilizing individually tailored treatments plans in combination with surveillance strategies, such as drug testing (Florida Department of Corrections, 1999). Substance abuse treatment was a critical component of supervision for offenders, however in May, 2018, these programs were eliminated to manage the State's budget deficit and offenders were no longer offered substance abuse treatment. Ironically, this short-sighted strategy will actually increase the cost of corrections as many of those offenders will be re-arrested (Farrington, 2018).

Researchers have suggested that to be effective, offenders' needs must be accurately assessed and matched to the correct type of drug abuse program. This program should also be considered a mandatory part of the offenders' community supervision. In other words, consequences should be included if the offender does not attend and participate appropriately in treatment (Sung et al., 2011). Research has also indicated that these programs need to focus on long-term recovery with a high level of support for offenders.

Some offenders may require more intensive treatment, especially those with co-occurring disorders, such as mental health and substance abuse problems. These individuals require more complex and comprehensive treatment and support like integrated dual disorders treatment (IDDT) or cognitive-behavioral treatment (CBT) (Peters, Young, Rojas, & Gorey, 2017). These specialized forms of evidence-based programs combined with intermediate sanctions have been shown to be effective in reducing substance use and recidivism (Peters et al., 2017).

If we intend to utilize community supervision or intermediate sanctions as methods for reducing prison populations, costs, and recidivism, then we need to deliver comprehensive programs to offenders to meet their differing needs.

Programs During Incarceration

Due to overcrowding and understaffing and the soaring costs of prisons and jails, as well as punitive attitudes toward prisoners, many institutions have not provided treatment and services for the rehabilitation of inmates. New initiatives have been started with a focus on rehabilitating and preparing inmates for community living. These programs provide expanded services for inmates as they prepare to return to the community.

Education, Life Skills, and Parenting Programs

In a 1993 US Department of Education survey of prisoners, it was found that 70% of inmates were not functionally literate. Programs addressing this deficit were first federally funded in 1992 (U.S. Department of Education, 1994) and many prisons provide GED classes for offenders. However, these classes are now being expanded to better meet the needs of inmates, especially once they are released. Life skills programs were first funded in 1993 to enhance the chances of offenders released back into society to succeed rather than re-offend. Skills taught include communication skills, financial management, interpersonal skills, as well as stress and anger management. Also, employability and job search skills are taught, including resume writing and interview skills. Computer skills are also being taught to increase inmates' employability. Some inmate programs further include specific vocational training and actual part-time employment in the community (Brewster, 2015). Maryland's Prison to Work program is one such program which believes that such employment development efforts will increase the job options and success rates of released prisoners, thus reducing recidivism (Bailey, n.d.).

Other non-conventional programs have also been added in recent years to further these outcomes. For instance, many prisons also have Community College courses and arts programs. These programs assist offenders in learning additional skills which can be beneficial upon release. Many have utilized their newly acquired art skills to find employment (Brewster, 2015).

Hoffmann, Byrd, and Kightlinger (2010) estimate that there are just under two million children whose parent or parents are incarcerated. Data suggests that incarcerated parents often struggle with accurate knowledge of child development, parenting skills, and discipline practices for their children, they also lose connection and communication with their children while incarcerated. This poses a serious problem for their release and the expectation that they will just assume these responsibilities upon return to their families. Consequently, programs have been initiated to educate and support offenders' parenting skills. Many programs work first with the inmate and then slowly integrate children into the programming to increase bonding, improve communication, and assist inmates in practicing their parenting skills in "real-time" with their children. Studies have found an increase in empathy and bonding between parent and child, an increased knowledge of appropriate disciplinary tactics, and enhanced knowledge of child development. Likewise, children have shown reduction in sadness and improvements in academic achievement and behaviors (Hoffmann et al., 2010). These programs often face many barriers such as transportation of children, movement of inmates, and funding, however they offer future potential worth investigating.

Drug Treatment during Incarceration

One of the few appreciated facts about crime is that offenders are disproportionately substance abusers, ranging from 60 to 85%, in contrast with approximately 40% of this country's population having used drugs (National Institute of Justice, 1996; Office of National Drug Control Policy, 2001). Research studies have indicated that

correctional drug treatment programs can have a substantial effect on the behavior of chronic drug-abusing offenders (National Institute of Justice, 1996).

Similar to services in the community, drug abuse treatment should match the needs of the inmate. Group versus individual treatment should also be chosen based on individual inmate needs. Studies have shown that improvements can still be made even when the inmate is mandated to treatment inside the institution. Consequently, some institutions are beginning to mandate treatment to reduce drug abuse and criminal acts after release (National Institute of Justice, 1996).

Aftercare or Re-Entry

Aftercare or re-entry programs are designed to assist newly released offenders with their transition back into the community. These community-based programs are similar to the already described intermediate sanctions; however, they focus on transitioning into and adjusting to society. This can be an especially difficult process when offenders have been imprisoned for many years and for young people who went into prison before developing the necessary life and employability skills (Barak & Stebbins, 2017). Most correctional systems have placed little emphasis on this part of correctional supervision, often believing their job is over when the inmate walks out the door. But after years of neglect, aftercare or re-entry programming is starting to become strongly emphasized.

The goals of aftercare include interventions that directly target the offender's needs. These usually include community-based treatment, continuity of care, employment, housing, and case management (Barak & Stebbins, 2017). Aftercare and re-entry programs attempt to help offenders adapt to and thrive in their communities, however they have often been criticized as strategies which are too little and too late. Although these programs tend to be fairly intensive and lengthier than regular parole, with over 500,000 inmates released each year, caseloads and programs are overtaxed. James (2015) noted that there were over five million ex-offenders in Aftercare programs in 2015.

Therapeutic Communities

A therapeutic community (TC) is a form of aftercare which embodies a continuity of care model to help inmates with a history of substance abuse transition back into the community to maximize their chances of successful reintegration and productivity (Jason, Olson, & Harvey, 2015). TCs vary by treatment philosophy, length of stays, staff qualifications, and services. However, there has been consistent evidence indicating that these residences and programs reduce recidivism and substance use (Inciardi, Martin, & Butzin, 2003).

Oxford Houses (OH) are another variation on a TC. These recovery homes are self-run, abstinence-only residences which do not include professional staff. Residents live

together in a single-family home with democratic governing. They support one another in sobriety and lawfulness and network together as a family. Empirical evidence shows these recovery homes to be more effective than others and they can now be located on SAMHSA's National Registry of Evidence Based Programs and Practices (SAMHSA, 2013) In addition, Jason, Olson, & Harvey (2015) found residents in these homes had a higher continuous sobriety rate and more days of paid employment than residents in TCs. In addition, there was a dose effect, in that all residents showed greater improvement with longer stays in both types of programs.

Conclusion

We began and we will end with the acknowledgement that no one wants to be victimized by crime. Victims, along with their relatives and friends, understandably want offenders to be held accountable. Yet, if we let personal and media driven fear distort the clarity and depth of our understanding of the incidence, nature, and complex etiology of crime and thus prompt ineffective policy, we will all lose. We will simply see many prisoners released into society, angry, with better criminal skills, and ready to re-offend. This will make our society more dangerous and exacerbate fear.

To avoid this unnecessary outcome, we must increase research and programming to reduce societal, institutional, community, family, and personal stressors in individual lives rather than being content to myopically pathologize and punish offenders. In this way, we will be more likely to achieve a balance between offender accountability and public safety, on the one hand, and the extension of humanity and treatment to offenders, on the other. We must begin with prevention, such as community learning centers. This is a much more efficient use of stressed public monies and facilities than building more prisons. We must expand research so as to determine the best interventions to use as alternatives to prison. We must also devise effective treatment and educational programs for those within prison, so that once they are ready for release, they will already have some good rehabilitation under their belts. Finally, and critically, we must provide continuity of care programs post-release. Without this, few such people will be able to meet the severe reintegration challenges. At every point along the way, we must engage in risk assessment and match the response to the individual's needs. In this way, we will all move forward.

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