In the academic world, attachment theory shows that the infant/caregiver bonds in a baby’s first year are crucial for developing the emotional connections that foretell the child’s social competencies in later life.

This widely accepted model underlies the Moms and Babies program at the Decatur Correctional Center. Here, incarcerated mothers of newborns receive counseling and parenting training while their infants remain in their care. A key aim of the program is to provide mothers with training and hands-on experience that will help them parent their children in healthy ways when they return to the community.

Moms and Babies is a partnership between the Illinois Department of Corrections (IDOC), TASC, and a team of community-based partners who work together to provide both in-prison and community-based services for mothers and their babies. The program features strength-based assessments, counseling, bonding groups for mothers and babies, family outreach, and intensive post-release case management.

The program began in 2007 and IDOC was awarded funding in 2011 from the federal Second Chance Act to enhance the services available to women and their children. It is one of only a handful of programs nationwide that keeps incarcerated women and their infants together. Prison nurseries prevent foster care placement while enabling the formation of critical infant/mother bonds.

TASC began providing services for the Moms and Babies program in January 2012, offering both pre-release services and post-release case management. In-prison services include the facilitation of support networks, parenting classes, training on communication and relationships, healing of trauma, and preparation for parenting outside the walls. As mothers are released from incarceration, TASC provides ongoing case management, home visits, and referrals to services and support in the community.

According to the Institute on Women & Criminal Justice at the Women’s Prison
Amidst Pain and Chaos, Hope and Solutions

As the national dialogue on gun violence has intensified, journalists, parents, educators, and everyday citizens have reached out to clinicians, lawmakers, and one another for answers.

In January, WGN news anchor Robert Jordan visited TASC to hear our perspectives on some of the broader, related issues affecting our communities. Our assembled team of advocates and caseworkers talked with Dr. Jordan about social norms, adverse childhood experiences, fear, mental health, family communication, and much more.

What resulted from this introductory meeting was a special news segment on WGN, which we invite you to watch at WGNTV.com. (Search for “Gun violence among young people plaguing Chicago.”)

Following the news segment, Dr. Jordan hosted a live, one-hour special on WGN’s partner station, CLTV, where he spoke with local experts about juvenile justice, violence, mental health, and community interventions.

What stands out most in my memory was the question Dr. Jordan asked me about hope: “Is there any hope for our kids and communities?” It’s a valid question, given the statistics, the frayed safety net, and frequent tragic stories which we all see daily on the news, and which personally affect many of us at TASC.

I assured him that there is indeed hope. There is evidence of the changes people make every day. There is evidence of the positive impact that TASC’s staff and services have on our clients’ lives, every day.

Last year, our alternatives to incarceration and diversion programs reached more than 18,000 adults and youth. In addition, we guided more than 6,000 people in their transitions from incarceration to the community. We also helped more than 2,500 parents and children access needed health and family services.

These daily stories of hope are manifested in programs highlighted in this newsletter, and in countless stories of our family members, friends, neighbors, and leaders.

To you, our readers and supporters, we value your optimism and knowledge that positive change is possible for individuals, families and communities. Thank you for helping us bring hope and recovery to the people and communities we serve.
Association in New York, women who participate in prison nursery programs show lower rates of recidivism, and their children show no adverse effects as a result of their participation.

Criteria are strict for participation in the Moms and Babies program (e.g., non-violent offenses only, no history with the Department of Children and Family Services, mental and physical fitness, etc.). Women must be within two years of release and they cannot participate if there are objections from the biological father or immediate family members.

The program has experienced phenomenal success. Since its inception, only one of 50 moms has returned to prison following participation in the program. “Our role is to help moms become good mothers to their children,” says Deana Elmore, TASC program administrator. “Many of the women have been abused and have never had healthy emotional relationships. We start by teaching them to value and take care of themselves.”

For mothers who have committed non-violent offenses, prison-based nursery programs are not the only way to keep moms and their infants together. Instead, the Women’s Prison Association calls for community-based alternatives. In their 2009 report, Mothers, Infants, and Imprisonment, they write that the profile of women in prison nurseries is nearly identical to that of participants in community-based prison alternatives:

- Women in both types of programs are serving relatively short sentences for non-violent offenses, and will continue primary caretaking responsibility for their child(ren) upon release.
- Most women in prison nursery programs present little risk to public safety. The issues that bring most women in contact with the criminal justice system—drug addiction, lack of education, poverty—are better addressed in a community setting than in prison.

Both approaches are valuable, says TASC President Pamela Rodriguez. “Whenever possible, the ideal is to provide alternatives to incarceration for non-violent offenders, including specialized interventions for mothers and infants.”

For moms who are already in prison, though, “The Moms and Babies program is life-changing. For the women who’ve gone through the program with community aftercare too, they’ve completely turned their lives around.”

Since the Moms and Babies program began, only 1 of 50 moms has returned to prison following participation in the program.

**Moms Behind Bars**

- Between 1977 and 2007, the number of women in prison in the U.S. increased by 832%.
- In 2004, 4% of women in state prisons and 3% of women in federal prisons were pregnant at the time of admittance.
- The overwhelming majority of children born to incarcerated mothers are separated from their mothers immediately after birth and placed with relatives or into foster care.

The number of deaths was startling. In his seven years as director over TASC’s court services across Illinois, Craig Cooper had reviewed thousands of client records and had never seen anything like this.

In the space of just 14 months, from April 2011 to June 2012, eight TASC clients in Madison County had died. Five men and three women. Causes of death: Heroin overdose. Acute heroin intoxication. Drowning due to acute intoxication of heroin.

Their average age was 32.

Madison County, just east of St. Louis, was in the midst of a heroin epidemic. Twenty-six people in the county died from a heroin overdose in 2011, a surge from five in 2008.

What was unusual and most disturbing to Cooper was that TASC clients were among those who were dying. They’re the ones who get help.

“These clients were doing really well,” says Cooper. “In every story, they had just been released from residential treatment or services in the county jail, and they were actively getting better. Then, within a two-week window of being released, they died.”

Cooper shared his findings with Judy Dallas, director of probation and court services in Madison County. They talked with other probation officers, jail personnel, and treatment providers. “We all agreed: this was intolerable. As a system, we knew we could do better.”

For instance, a study of people released from prison in Washington State found that drug overdose death rates were 12 times higher among newly released individuals than among comparable demographic groups in the general population. The lead author of that study, Ingrid Binswanger, explored the trend further in a study published in the March 15, 2012 issue of *Addiction Science & Clinical Practice*. She and her team found that there are high rates of overdose after release from prison, but “little is understood about the conditions that lead to relapse and overdose after release.”

An understanding of these conditions was exactly what Cooper and his Madison County colleagues were after. On July 23, 2012, the group initiated the Madison County Opiate Alert Project. Their aim was to prevent heroin overdose deaths among people who were being released from incarceration or residential treatment services.

Their actions were quick and simple. Jail personnel, probation officers, treatment providers, and TASC caseworkers began keeping lists of probationers with heroin addictions. They updated these lists regularly and notified one another when high-risk cases were pending release from incarceration or treatment. TASC caseworkers made immediate contact with clients upon their release, and

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**Illinois Primary Drug Abuse Treatment Episodes in 2010 by Type of Drug**

<table>
<thead>
<tr>
<th>Type of Drug</th>
<th>Number of Episodes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heroin</td>
<td>12,000</td>
</tr>
<tr>
<td>Marijuana</td>
<td>8,000</td>
</tr>
<tr>
<td>Cocaine</td>
<td>6,000</td>
</tr>
<tr>
<td>Other Opiates</td>
<td>4,000</td>
</tr>
<tr>
<td>Stimulants</td>
<td>2,000</td>
</tr>
<tr>
<td>Tranquilizers</td>
<td>1,000</td>
</tr>
<tr>
<td>PCP</td>
<td>500</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>400</td>
</tr>
<tr>
<td>Inhalants</td>
<td>100</td>
</tr>
<tr>
<td>Sedatives</td>
<td>100</td>
</tr>
<tr>
<td>Hallucinogens</td>
<td>100</td>
</tr>
</tbody>
</table>

Number of Primary Drug Abuse Treatment Episodes (not including alcohol)

A depiction of substance abuse primary treatment admissions in Illinois in 2010. The data show heroin is the most commonly cited drug among primary drug treatment admissions in the state.

SOURCES: Illinois Drug Control Update, Office of National Drug Control Policy (ONDCP); and Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration (SAMHSA). (cont’d on p. 5)
continued to follow up with them both in person and by phone.

In these conversations, caseworkers would coach clients through their most anxious moments and painful withdrawal symptoms. They helped clients understand that the same amounts of heroin that they’d ingested just weeks or months before could be fatal to them if they returned to use now, because their bodies had adjusted to the absence of the drug. Caseworkers helped clients stick with their treatment and recovery plans during these most vulnerable days.

The Opiate Alert Project is still in its pilot phase, with adjustments still happening and lessons still to learn. So far, it has been a tremendous success.

Not a single TASC client has died from an overdose since the program began last summer.

“We have not made it to the one-year mark of these new procedures,” cautions Cooper, “but we can see the difference already. It doesn’t cost a lot to do this, other than taking the time to coordinate and communicate.”

Though the opiate-addicted clients who’ve come through TASC have been saved, the scourge of opiate addiction continues in Madison County and elsewhere in Illinois, especially with the increasing abuse of prescription painkillers that contain opiates.

Often, when communities are struck by drug tragedies, there is a public outcry for harsher penalties. However, though stricter drug laws may keep people behind bars longer, they do little to interrupt the clinical addiction that fuels the demand for drugs.

The Madison County Opiate Alert Project curbs addiction while saving lives.

It’s a model approach for other communities facing similar crises. Cooper notes that above all, the will and commitment of the project members has spurred its success. “Everyone’s involvement has been so important in not dropping the ball. That personal engagement has been key.”

### Outside the Walls: Celebrating Family Reconciliation and Recovery

Family connections, which are sometimes broken by incarceration and addiction, can be rebuilt with even stronger foundations than before. That’s one of the ideas behind the Outside the Walls celebration, held annually in Chicago to celebrate families and communities that have been strengthened by recovery.

Hosted by the Winners’ Circle, which is a peer-led support group for people overcoming past addiction and past incarceration, the September 2012 event brought together families, friends, and allies of recovery to celebrate Recovery Month in Douglas Park. Outside the Walls: A Day of Family Unity and Community Reconciliation featured inspirational music, motivational speeches, health screenings, and family fun.

Individuals and families gather in Douglas Park to celebrate recovery, health, and community.
Cook County Presiding Judge Paul P. Biebel, Jr. and Christopher Kennedy Lawford accepted TASC’s 2012 leadership awards on December 12 for their persistence in advancing opportunities for health and recovery.

With more than 300 guests in attendance at the Westin Michigan Avenue in Chicago, Lawford, who lost two uncles to murder, talked about his experiences of trauma and addiction, and ultimately triumph and recovery.

“I was born in a family where addiction doesn’t just run – it gallops. We had fame, we had power, we had wealth. What we didn’t understand is that addiction ignores all that.”

Lawford accepted TASC’s Public Voice Leadership Award, presented annually to an organization or person who has advanced the dialogue around addiction recovery and related public health issues.

“Today, I speak out so people know that addiction is an equal opportunity disease,” said Lawford, “and I speak out to urge others to do the same, because the awareness that recovery is possible, along with the spreading knowledge that science has proven—that addiction is a brain illness—will help to dispel many of the myths, and much of the stigma surrounding diagnosis, treatment, and recovery.”

TASC presented the agency’s signature Justice Leadership Award to Cook County Presiding Judge Paul P. Biebel, Jr., who shared compelling criminal justice statistics as well as solutions.

“The three largest mental hospitals in America are in municipal jails,” said Judge Biebel. “The largest is Los Angeles County Jail, the second is here in Chicago—the Cook County Jail—and third is Rikers Island Jail in New York.

“What we’re trying to do is give persons who are willing to try to break free from the ravages of drugs or mental illness, for whatever reason, a chance to do that. And courts have a unique ability in this regard... These courts of coercion work. And literally save lives. And greatly reduce recidivism.”

TASC’s Leadership Awards Luncheon helps raise important funds for our programs and services throughout Illinois. To make a contribution, please visit us at www.tasc.org.


**Spirit of Philanthropy**

Along with supporting TASC’s services on a daily basis, 10 members of TASC’s front-line staff have organized a Client Projects Committee to help meet client needs beyond TASC’s traditional programs and services.

In 2012, through their grassroots leadership and initiative, the volunteer committee piloted a variety of micro-fundraising events. Donating food and gift cards themselves, they offered items to fellow staff in exchange for donations to client projects. By year’s end, their innovative efforts raised more than $1,000.

With these proceeds and additional in-kind donations by staff, they were able to purchase and fill 65 back-to-school book bags which were distributed through TASC’s regional offices to families across Illinois. The committee also brightened the holidays for two families, selecting and wrapping gifts for a young man raising his seven siblings, and a mom raising her four children.

The committee’s generosity embodies the spirit of philanthropy that TASC cultivates. In 2013, plans include expansion of the committee statewide so projects can further support clients and their families. For additional information, or to make a donation, please contact Teresa Duran at tduran@tasc.org or (312) 573-8238.

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**Special Thanks to Our 2012 Luncheon Sponsors**

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Additional thanks to Ashland Addison Florist, Boris Uk of Uk Studio, Inc., and North Shore Printers for contributing flowers, photography, and printing services to the event.
TASC & Rockford Celebrate Recovery Rally on the Rock

Each September, communities across the country commemorate National Recovery Month to promote the message that millions of people can and do recover from addiction and mental health problems.

Forty-two events took place last September across Illinois, with TASC participating in family days, recovery walks, conferences, and rallies across the state.

In Rockford, Illinois, the third annual Recovery Rally on the Rock featured music, inspirational speeches, and family-friendly fun.

TASC’s regional staff in northern Illinois, including Kate Craig, TASC recovery coach and one of the event’s co-founders, partnered with the recovery community in Rockford to help plan the event.

“This is what it’s all about,” said TASC Executive Vice President and Chief Operating Officer Peter Palanca, who attended the event along with TASC Board Chair Jim Durkan. “People helping people, sharing their stories, and giving hope to others. Recovery is becoming a part of everyday life now, and that’s something to celebrate.”

Bridget Kiely (center), administrator for TASC’s services in northern Illinois, talks with volunteers and supporters at Rockford’s recovery rally.

The national theme for Recovery Month 2013 will be Join the Voices for Recovery: Together on Pathways to Wellness. To plan your 2013 Recovery Month celebrations, please visit www.RecoveryMonth.gov.