

Racial Disproportionality in the Justice System: What We Can Do

President's Corner

Pamela F. Rodriguez
TASC President



Consider these facts:

- As of 2005, African Americans represented 12 percent of the total population of drug users, but 34 percent of those arrested for drug offenses, and 45 percent of those in state prison for a drug offense. (Sentencing Project)
- In 2005, African Americans in Illinois were 9.1 times more likely than whites to be jailed or imprisoned, ranking Illinois fourteenth worst in the nation in terms of racial disproportionality in incarceration. (Sentencing Project)
- From 1990 to 2000, the number of African Americans admitted to prison in Illinois for drug offenses grew six-fold, from 1,421 to 9,088. In contrast, the number of whites admitted to prison for drug offenses remained relatively stable. (Lurigio)

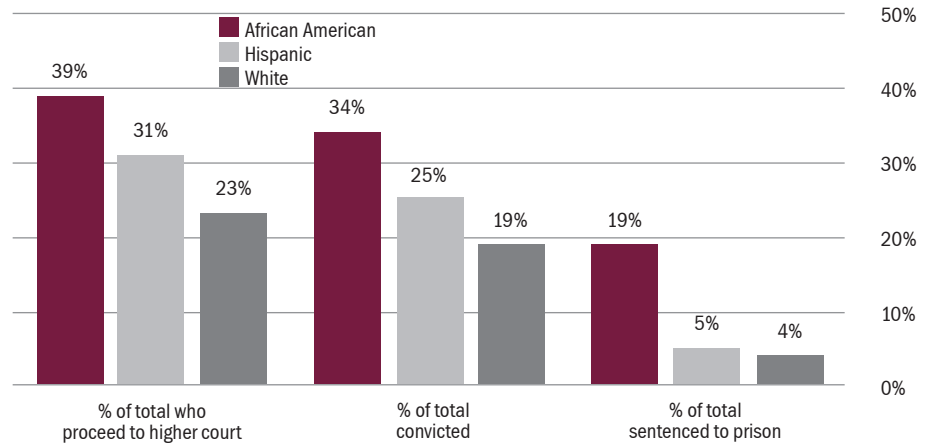
Statistics such as these are not new, but we cannot allow them to be numbing. They represent an uneven administration of justice, millions of tax dollars spent on incarceration when better alternatives exist, and too many children of incarcerated parents growing up without the hope that their own lives can be different.

We know that the percentages of minority groups who come into contact with the criminal and juvenile justice

systems at various points (e.g., arrest, jail, prosecution, sentencing, prison) are disproportionately greater than their representation in the general population. Contributing factors likely include, but are not limited, to: institutional and cultural bias, poverty, absence of or barriers to community resources, differential offending patterns, different decision-making criteria within both the criminal justice system and among service providers, legislation and policies, and accumulated disadvantage.

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Criminal Justice System Process Penetration Among Class 4 Drug Possession Defendants, Cook County Sample 2005, by Race



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TASC, Inc. (Treatment Alternatives for Safe Communities) is an independent, statewide, nonprofit agency that advocates for people in need of health and other rehabilitative services. We work in partnership with Illinois courts, prisons, child welfare programs, and community-based service providers to help adults and youth get the help they need to rebuild their lives. **Please visit us online at www.tasc.org.**

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With this array of complex factors, what can we do?

TASC approaches this question at three levels. First, we must explore and address the environmental and public policy factors that contribute to disproportionate minority contact with the justice system. Second, we need to examine decision-making criteria within organizations and systems that create patterns of disproportionality. Finally, we can work with people and communities most directly affected by disproportionality so that these statistics can be reversed.

TASC’s Racial Justice Initiative

For 35 years, TASC has worked to further social justice and equality by providing alternatives to incarceration and advocating for effective and equitable policies and practices within criminal justice and child welfare systems. This experience has culminated in the knowledge that real policy and systems change is possible.

TASC’s Racial Justice Initiative is a long-term effort to increase fairness for all racial and ethnic groups with regard to criminal justice processes, policies, and systems. This initiative uses research and evidence from a variety of disciplines as the basis for concrete policy and practice changes.



Under a grant from The Chicago Community Trust, TASC facilitates community engagement in racial justice. Speaker: George Williams, TASC Vice President of Community and Government Affairs.

Policy. At a public policy level, it is crucial to examine federal and state laws and funding mechanisms that shape broad-scale trends in disproportionality. The population of U.S. jails and prisons has soared 500 percent in the past 30 years, not because of proportionate increases in crime rates, but because laws and policies have been broadened to arrest and incarcerate more people – particularly those with nonviolent, drug-related charges. Skyrocketing incarceration rates have disproportionately affected people of color, with Illinois consistently ranked among the worst states with regard to these disparities.

In response to these trends, TASC’s Center for Health and Justice, with

“Racial disproportionality in the criminal justice system undermines the fundamental principles of a just society, including the ability of people to have a voice in government, to hold a decent job, to safely raise and support a family, and to participate fully in the citizenship of our country.”

Illinois Disproportionate Justice Impact Commission, Final Report, December 2010

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For more information on TASC services, locations, and program administrators across the state, please visit: www.tasc.org.

- A limited analysis suggested that whites are more likely than nonwhites to participate in court diversion or probation programs, such as mandatory drug treatment.

“We need to change certain policies and practices so that justice is administered fairly across racial and ethnic lines,” said State Senator Mattie Hunter (D-Chicago), co-chair of the commission. “We need to divert nonviolent drug offenders from expensive incarceration to rehabilitation programs, such as court-ordered drug treatment.”

To alleviate racial disproportionality in the justice system, the commission proposed several recommendations related to policy, research, and funding. Several bills stemming from these recommendations were advanced in Springfield during the spring 2011 legislative session, including:

- Use of drug forfeiture funds to address addiction.
- Standardized collection and analysis of data on the racial and ethnic identity of arrestees.

- In criminal histories collected for employment-related purposes, prohibition to include drug-related arrests that do not result in conviction.

For a full copy of the commission’s report and recommendations, please visit www.centerforhealthandjustice.org and click on the “Justice Resources” tab.



TASC’s Smart Start Program Helps Parents and Young Children in Peoria County

In an expansion of its care management services for under-represented populations, TASC has begun a health outreach program for pregnant mothers and young children in Peoria County.

Funded by the Illinois Department of Human Services, TASC’s Smart Start for Healthy Children & Families serves pregnant women, infants, and high-risk children up to age five who are living in poverty. Through active outreach and engagement, TASC meets with expectant mothers as well as parents and guardians of young children. A first step is to assess family needs such as prenatal and infant care education, housing, transportation, counseling, food programs, and medical care. Based on these needs, TASC makes referrals to appropriate social services, offers ongoing reassessment and referrals, and provides advocacy to assist families in accessing needed services.

“TASC began in 1976 as a case management agency for people in the justice system who had substance use problems, and we’ve steadily expanded the scope of our services since then,”

says TASC President Pam Rodriguez. “In the Smart Start program, our clients are not involved in the justice system, and most of them do not have substance use problems. But our core mission is the same: we’re offering life-changing opportunities for people who face big hurdles in achieving health and self-sufficiency. We advocate for our clients and ensure their access to care.”

Adds Christina Lykins, RN, supervisor of TASC’s Smart Start program, “Most of the women we see have not had access to prenatal services, which puts their children at a disadvantage before they’re even born. We reach out to expectant mothers to help them get services to ensure their babies’ health as well as their own. What’s important is that our services don’t stop there. We look holistically at the family to increase children’s and parents’ opportunities for health and success.”



TASC Earns Maximum CARF Accreditation

TASC recently was awarded a fourth consecutive three-year term of accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF).

CARF surveyors met with TASC clients, funders, referral sources, and clinical partners across Illinois. Their evaluation commended TASC for stakeholder satisfaction, collaboration, use of technology, and outreach in rural areas.

CARF International is an independent, nonprofit accreditor of health and human service organizations. To receive CARF accreditation, organizations voluntarily go through a rigorous peer review and survey process that measures fidelity to CARF’s accreditation standards and focuses on quality programs and services.

TASC has provided client advocacy and case management service in Illinois since 1976.

Health Care Reform: What Does It Mean for Justice Populations?

The nonprofit group Community Oriented Correctional Health Services (COCHS), which is supported by a grant from the Robert Wood Johnson Foundation, recently invited TASC to author a paper on the implications of health care reform for jail populations.

TASC's paper was presented at COCHS's national conference, "Health Care Reform and Criminal Justice: Rethinking the Connection between Jails and Community Health."

It discusses the opportunities and implications of health care reform for county jails, including the cost savings yielded when low-risk defendants with chronic health conditions are directed to services rather than incarceration.

Maureen McDonnell, TASC's director for health care strategy development and lead author of TASC's paper, says that ACA offers unprecedented opportunities for intervening earlier with arrestees who have substance use and mental health disorders. "Across the country each year, millions of people with chronic health problems cycle in and out of jails without having their conditions diagnosed or treated. With greater access to health care, we can interrupt these costly cycles much sooner. The result will be not only a reduction in repeat offenses, but enormous savings in incarceration costs."

The paper discusses the unique opportunities of health care reform for jail administrators, county boards, and service providers, and explains how each of these entities can prepare for reform now.

Realizing the Potential of National Health Care Reform to Reduce Criminal Justice Expenditures and Recidivism Among Jail Populations (Excerpt):

As the front door to the criminal justice system, jails represent one of the largest catchment areas for people with substance use and mental health conditions, infectious diseases, and other chronic health problems. Approximately 9 million adults churn through local jails each year. Compared to the general population, they have disproportionately high rates of chronic medical conditions, substance use disorders, serious mental illness, and co-occurring substance use and mental health disorders. These conditions, which contribute to recurring criminal behavior and affect millions of arrestees, usually are untreated or inadequately treated.

The vast majority of jail detainees have no private or public health insurance, especially in states that exclude childless adults from Medicaid eligibility. Under the Patient Protection and Affordable Care Act (ACA), most of these men and women will become newly eligible for health care coverage in 2014.

The ACA alone will not solve the health care problems of jail populations, but it serves as a launching pad for broad-scale system improvements. It has the potential to produce tremendous financial savings for local jurisdictions by reducing incarceration costs and redirecting eligible people from jail into supervised, community-based health care.

"Big changes are due to take effect in 2014," says McDonnell. "When we're talking about systems change, that's right around the corner. This isn't just an opportunity, it's a responsibility. Every jurisdiction that's been burdened with the effects of substance use and mental health problems among arrestees

now has a chance to do something about it. It's time to start planning."

To download the full paper, please visit TASC's research and policy site, www.centerforhealthandjustice.org. On the left side, please click on "Health Care Reform & Criminal Justice."

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-Maureen McDonnell, Director for Health Care Strategy Development, TASC

TASC receives significant funding from the Illinois Department of Human Services, Division of Alcoholism and Substance Abuse (DASA); the Illinois Department of Corrections (DOC); and the Illinois Department of Children and Family Services (DCFS).

TASC is licensed by DASA and DCFS, and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

Illinois Association for Criminal Justice Focuses on Services and Policy

Until recently, Illinois has not had a formal coalition of service providers and researchers whose focus was on improving services and policies related to criminal justice. That void was recently filled with the formation of the Illinois Association for Criminal Justice (IACJ).

Comprised so far of more than 30 organizations across Illinois plus numerous individual members, IACJ is dedicated to reducing recidivism by ensuring that quality services are available for people with criminal justice involvement. The association advocates for research-driven alternatives to incarceration and reentry programs that save state funds, improve public safety, and restore individuals to a place

of stability and productivity in their communities.

The association was initiated by a number of organizations and individuals with a shared commitment to improved criminal justice services and policies in Illinois. Founding board members include Allan Barsema, Northern Illinois University; Pam Rodriguez, TASC; Neli Vazquez-Rowland, A Safe Haven Foundation; Dr. Joseph Strickland, University of Illinois at Chicago; and Diane Williams, Safer Foundation.

For more information on current criminal justice policy issues in Illinois, or to become a member, please visit www.illinoiscriminaljustice.org.



Training and Philanthropy Leaders Join TASC

TASC recently welcomed two new members to its management team.

Jac Charlier, director of TASC’s Institute for Consulting and Training, served most recently as senior manager in the parole division of the Illinois Department of Corrections. Applying his direct experience in managing public safety-focused reentry initiatives, Jac manages TASC’s training and consulting services for local, national, and international entities. He is currently an

adjunct criminal justice faculty member and has taught at Loyola University, Governors State University, St. Xavier University, and Roosevelt University.

For information on TASC’s training and consulting services, please contact Jac at (312) 573-8302 or jcharlier@tasc-il.org.

Matthew Smith, TASC’s director of philanthropy, has more than a decade of experience in not-for-profit fundraising, most recently with Goodwill Industries

of Metropolitan Chicago. Matt is especially interested in the use of social media and technology to facilitate charitable giving. He served two terms on the board of directors of the Young Professionals of Chicago and is an active member of the Association of Fundraising Professionals.

If you would like to contribute to TASC’s fundraising efforts, please contact Matt at (312) 573-8327 or matthew.smith@tasc-il.org.

Remembering Noel Dennis, TASC Board Member

TASC Board Treasurer Noel Dennis, who had served on TASC’s board of directors since 1983, passed away on June 3. He was 68.

A U.S. Army veteran and graduate of the John Marshall Law School, he practiced law in Illinois for more than 35 years.

“Noel understood TASC from our roots,” says TASC President Pam Rodriguez. “Thanks to his keen knowledge of the law and his commitment to TASC’s work, Noel was instrumental in our agency’s growth and development over the past three decades.

“Noel was part of our TASC family for many years, and he was a personal friend,” she says. “We will miss him.”



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